Before Starting the CoC Application

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

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

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

1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

 Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.
 Answering Multi-Part Narrative Questions
 Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

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

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: IN-502 - Indiana Balance of State CoC

1A-2. Collaborative Applicant Name: Indiana Housing and Community Developoment Authority

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Indiana Housing and Community Development Authorit

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	

	In the chart below for the period from May 1, 2022 to April 30, 2023:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted–including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

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

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

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

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

(limit 2,500 characters)

1)The Indiana Balance of State CoC (IN-BoS) implemented an intentional and transparent membership invitation process this year as a part of the new strategic plan that was approved in 2022. IN-BoS Board communicated the new strategic plan and committee structure to The Indiana Balance of State CoC (IN-BoS) members at Development Day events, Regional Planning Councils (RPCs), and newsletter and website updates. The Board directed the Collaborative Applicant (CA) staff to utilize the monthly IN-BoS newsletter to invite new committee members to join the new IN-BoS committees in summer 2023. As gaps in representation on committees and Board are identified, IN-BoS works to address them quickly through recruitment efforts at all levels of the IN-BoS. 2)The IN-BoS utilizes the CA's website to expand accessibility tools, including the ability to browse aloud or convert website to text-only services, access translation to more than 100 languages, and provide PDF documents. 3)In the roll-out of the new strategic plan, IN-BoS Board and CA staff have collaborated to invite organizations and key representatives for specific communities to Board and committee roles. An ongoing focus of these efforts has been ensuring representation of those with lived experience and those most likely to experience homelessness or experience housing disparities. Currently IN-BoS Board Executive Committee is meeting with diversity, equity and inclusion (DEI) experts from across the state to advise them on the implementation of a DEI committee and the refinement of strategies from the strategic plan. The CA continues to value engagement with DEI issues and resources through their membership in the IN Commission on Hispanic and Latino Affairs and the Race and Cultural Relations Leadership Network. CA staff regularly analyze and present homelessness equity data to IN-BoS and other stakeholders to build awareness and create buy-in on developing strategies to address disparities.

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

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

(limit 2,500 characters)

1)1)IN-BoS engages and solicits opinions from stakeholders in a variety of ways, including newsletters, CoC meetings, committees, training events, and educational series. Two "Development Day" events, hosted by the IN-BoS, are held annually with one designated as a membership meeting. Development Day is a combined training and meeting event that is leveraged to encourage best practice, develop strategies in homeless services, connect new partners to the IN-BoS, and reconnect service provider networks across the state. The IN-BoS has focused on engaging individuals with lived experience throughout the system at training events and in committees. As a part of implementing the strategic plan, IN-BoS board members intentionally recruited new board and CoC committee members with the support of the Collaborative Application (CA). 2) The CA releases a monthly newsletter, updates website information, and provides social media content to encourage joining IN-BoS committees and Regional Planning Councils (RPCs). Working in coordination with RPCs the CA, connects new partners to local strategies and efforts to address homelessness. CA staff, RPC members, and IN-BoS board collaboration extends the capacity of the IN-BoS to engage new partners and communities. 3) The CA's website expands accessibility through tools like the ability to browse aloud or convert website to text-only services, access translation to more than 100 languages, and provide PDF documents. Webinar recordings are posted with transcription in addition to slides being made available as PDFs. 4) Engaging with new and valuable stakeholders has been particularly important during the roll out of the strategic plan and the implementation or our Coordinated Entry (CE) evaluation process and development of a new CE assessment. Using a variety of engagement tools including listening sessions, informational webinars, and evaluation tools, we have gained significant insight into opportunities for improvement across the Engaging with new and valuable stakeholders has been particularly important during CE evaluation process and development of our new CE assessment. IN-BoS Board is using this feedback to prioritize strategies, and the CE Lead is building the changes we want to see in our CE system based on the feedback received through those methods.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section V.B.1.a.(4)	

	Describe in the field below how your CoC notified the public:
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
2.	about how project applicants must submit their project applications–the process;
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and
4.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.

(limit 2,500 characters)

1)IN-BoS markets the CoC funding opportunity through web postings, newsletters, special e-announcements, and maintains a list of interested new organizations and invites them to personally apply. This year, the solicitation process resulted in 11 new project applicants interested in applying and 9 of them completing the application process. Two of the new applicants were new to applying for CoC funding this year. The CA hosted a new project webinar for potential applicants and provided 1x1 technical assistance (TA) throughout the process. 2)IHCDA launched the new project application process on July 17th by releasing a new project RFA and invited applicants to submit a letter of interest by July 31st. Applicants were reviewed for eligibility and invited to submit a full application by August 14th. The CA website was updated with all relevant dates and timelines informational webinar was hosted by the CA on July 26th. Session materials were posted with transcription and recordings. IN-BoS board approved the ranking on August 31st. New and renewal projects selected for funding were notified of their inclusion in the ranking on September 1st and were required to complete their ESNAPS application by September 11th. This process resulted in 2 new applicants to the CoC program. 3)The new project application was reviewed prior to release to align with NOFO requirements. All new and renewal projects completed a competitively scored applications. New and renewal scoring tools met the minimum standard that 20% of questions were on performance and 40% of questions on objective criteria. The project applications were scored by non-conflicted reviewers including IN-BoS board and Youth Advisor Board (YAB) members. Reviewers also received additional written guidance on scoring and a recorded training session on how to review applications that included transcription. 4)To ensure effective communication with individuals with disabilities, the CA provided information in various formats including PDF documents, webinar slide decks, recorded sessions and transcriptions of recordings. The CA website allows for "browse aloud" capabilities, text only conversion, and translation in to more than 100 languages.

1C. Coordination and Engagement

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

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

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

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

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

18.		

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

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

(limit 2,500 characters)

1)State or local ESG recipients are invited to participate in the consolidated action plan development with the CA. The CA is the ESG recipient for the IN-BoS. ESG allocations are presented to the CoC board annually to support alignment with CoC strategy. Coordination between of ESG and CoC occurs regularly between CA staff, the Service Provision Committee (SPC), and CoC Performance and Outcomes Committee (P&OC). CA staff report on CoC and ESG committees and Board meetings. In preparation for Con Plan updates, the CA/ESG recipient is reviewing the CoC strategic plan to support alignment. 2)This integrated strategy also applied in the establishment and evaluation of standards and outcome measures for CoC and ESG. As a result, the CoC provides TA to CoC and ESG projects to improve performance. The HMIS team, which is also a part of the CA, consulted ESG and CoC staff on the updates to the HMIS Data Quality Plan. Staff provide 1 on 1 TA for ESG and ESG-CV. In their coordinated role as the HMIS Lead, the CA supports data quality and performance through monthly data quality check-ins for all projects in the IN-BoS. The CA includes the monitoring staff for ESG. Annual risk assessments for each ESG and ESG-CV project evaluate performance and data quality. The relationship between ESG and CoC is exemplified in the creation of policies and procedures for projects and coordinated entry. RRH standards were developed by a CoC committee that included ESG/CoC partners, and the Coordinated Entry (CE) assessment and evaluation work includes representatives from ESG and CoC funding, reports to the CoC board, and all RRH and CE policies apply ESG and CoC projects. 3)All Con Plan jurisdictions access the PIT and HIC data via the HMIS data portal on IHCDA public website. Raw or analyzed data can be accessed on that site anytime. The HMIS team, provides reporting capacity and data to all recipients, and particularly advises entitlement cities on data to drive decision-making. 4)IHCDA staff collaborates by communicating data and outcomes. Because the CA staffs the HMIS, CoC and ESG teams there is greater opportunity to ensure local homelessness information is communicated and bi-weekly team meetings are utilized for synergy and coordination. The managers of these two teams meet weekly to also support ongoing coordination. The HMIS team continues to hold a monthly call with Entitlement Cities to discuss data issues related to the ESG-CV funds.

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	Yes

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

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

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	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 V.B.1.d.	

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

(limit 2,500 characters)

The CoC has a statewide partnership between the CA (IHCDA) and the Indiana Dept of Education (IDOE) through and MOU expiring May 2024, and we are working to extend it. IHCDA and IDOE formalized a partnership using ARP-HCY funding, implemented through our Youth Team (YT). The YT is comprised of eight regional Navigators, managed by a team lead, who is also responsible for the coordination of the Youth Advisory Board (YAB). Navigators identify youth and young adults (YYA) with housing insecurity through collaboration with partners including local service providers, McKinney Vento liaisons (MVL), DCS, juvenile justice, law enforcement, higher education, LGBTQ+ organizations, foster care, and others. As a part of their scope of work, the YT is mapping resources and gaps, working to connect YYA to address gaps, informing CoC RPCs and regional CE (RCE) Leads of issues in local communities. Other deliverables include staff expertise on how best to address gaps through engaging YYA and the YAB, to directly support and training to MVLs, engagement with RPCs and RCE leads, and inform the CoC BoS on youth homeless strategies. The YT manager oversees the regional staff and is part of the CA central team (includes HMIS, CoC, ESG, HOPWA), participating in staff-level planning and coordination. This partnership will contribute to an overall CoC strategy around YYA homelessness. The YT lead innovations this year marketing CoC policies about services and eligibility for families and YYA experiencing housing instability. These materials coordinate the existing CoC/ESG program manual policies about accessing educational services, and compliment IDOE resources. Through their statewide efforts to outreach with YYA and partners to evaluate needs of YYA and families in local communities, the YT increased the resources for YYA and families experiencing housing instability, and the MVLs. Since the pandemic, capacity of MVLs has significantly reduced due to staffing constraints and turnover. The YT has reduced barrier for families and YYA by addressing this gap and ensuring there is access to educational services regardless of where a YYA or family present in their experience. As they celebrate their one-year anniversary of implementing the team's efforts, the MVLs reported that the YT made a significant impact, and their expertise and data collected on families and YYA and families will be utilized to inform policy and strategy development with the CoC Board.

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

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

(limit 2,500 characters)

The CoC/ESG program manual policies for the Education for Children and Youth are clear about the eligibility and access for YYA and families to obtain education services and supports. Our policy states that programs must have a representative that serves households in programs to help connect them with educational services. Projects in ESG and CoC are evaluated on their adherence to this practice in their annual application and through program monitoring. As gaps in this system are found via our Youth Team, the CoC will have the opportunity to update their policies and procedures to better inform households across the state and enhance training for funding recipients on how to comply with the policy and pursue best practices. CE also plays a role in supporting families and YYA to inform them of their rights and services. CE policies also include a requirement that households served in programs must have a representative in the agency to help connect them with educational services. This includes that households will receive information about educational access in the CE assessment process. The CA is also now TANF RRH funding, and will use the same education policies in the implementation of that program as well. The YT have helped us expand the reach of education on these policies in procedures with our IDOE and MVL partners.

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

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

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

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

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

	Organizations	
1.	state domestic violence coalitions	Yes
2.	state sexual assault coalitions	Yes
3.	other organizations that help this population	

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

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

		Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:
	1.	update CoC-wide policies; and
	2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

1)The CoC and CA work closely with housing and services providers for survivors of DV (VSPs), etc. through several avenues. VSPs serve on committees such as the CE assessment tool committee to provide insight and guidance while updating CoC-wide policies. VSPs played a critical role on this ad hoc committee to determine how the VISPDAT will be replaced and how the CES will be updated and improved. VSPs also provided valuable feedback through listening sessions hosted by the Funding & Resources Committee (FRC) regarding the renewal application tool, and CoC application policies. This year the CoC launched a new DV CE grant effort to establish demonstration projects for DV CE funding. These projects required the involvement of the RCE lead and a local DV partner. We have found the requirement has resulted in increased collaboration and 5 new demonstration projects launched in April will provide valuable feedback and policy information about future DV CE funding.
2) The CA operates an agreement with the Indiana Coalition Against Domestic Violence (ICADV) to provide training and technical assistance to the CoC network, specifically to those CoC subrecipients receiving DV Bonus Funds. This outreach includes monthly office hours and bimonthly topic-specific training. ICADV will also provides training at Development Day to the CoC membership on how to serve the needs of survivors and survivors rights under VAWA. Likewise, the CA has reached out to the Indiana Coalition to End Sexual Assault and Human Trafficking (ICESAHT) to learn nuances around working with individuals who are victims of human trafficking, which will lead to additional training on trauma-informed care and healing-centered approaches. ICESAHT's Executive Director was elected to the CoC Board in 2022 and currently chairs the FRC. In November 2022, the CoC partnered with ICADV to host statewide trauma informed care session and ICESAHT for a session on identifying and serving survivors of human trafficking. The recordings/transcripts were made available to all partners online.

1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

	Describe in the field below how your CoC coordinates to provide training for:	
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

(limit 2,500 characters)

1)The IN BOS CoC partners with ICADV to provide training on serving survivors to homeless response staff, including RCE leads' staff. The CoC has worked with ICADV to provide VAWA training and direction on the emergency transfer plan. For the past two years, ICADV oversaw these trainings and improvements through the DV CE program. ICADV conducts trauma informed care and safety plan training to VSPs and housing programs annually. From 7/22-7/23 the CoC partnered with ICADV to provide 7 statewide trainings on issues related to serving survivors of DV. Specific topics included: housing rights of survivors, reducing barriers and executing housing first with VSPs, identifying survivors of human trafficking, and how to leverage resources to find flexible dollars to serve survivors. CA and other IHCDA staff also attended their own VAWA training hosted by IHCDA in March 2023, to help support the efforts of the network and identify opportunities to update and clarify policies. The CoC will continue to contract training services to provide a structured curriculum that includes these topics for VSPs and all homeless response services staff. 2)The CoC ad hoc committee that is updating the CE assessment includes ICADV and VSPs, and they have advocated for a CE system and polices that best serve DV and human trafficking survivors. The new CE assessment process will launch in 2023, and changes will include reducing the trauma of the CE assessment process, and increasing transparency for participants so they better understand their rights and options. Safety planning and Emergency Transfer Planning (ETP) are already expectations in our current policies, but this year we implemented RCE Lead MOUs to reinforce CE requirements and DV best practices. CoC provides training to RCE Leads, CE assessors, and housing providers on issues related to developing stronger partnerships with VSPs to identify gaps in services and outreach, identifying and serving survivors of human trafficking, and trauma informed care. Trainings are available via webinar, online recordings and/or in-person presented by IHCDA staff or technical assistance providers.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

	Describe in the field below how your CoC's coordinated entry includes:	
1.	safety planning protocols; and	

2.	confidentiality protocols.	

(limit 2,500 characters)

1)CE policies and procedures address safety planning in a number of ways. First, CE policies specifically state that is required to provide safety and security protections for persons feeling or attempting to feel DV situations. Safety planning protections include confidential access to CE and DV services, and all data collection adhere to VAWA. Safety planning cards are available at every CE assessment site, and include a brief safety plan on the front and region-specific resources on the back. The specific CE policies related to DV describes a process that is safety focused, trauma informed and person-centered. Individuals are assessed on whether they are in a DV situation, and if a client discloses DV they are immediately evaluated on their lethality, and the lethality assessment is used in coordination with their CE assessment to identify their immediate safety along with their permanent housing needs. Client safety as assessed through lethality is used alongside assessment results to prioritize survivors for housing. CE policies clearly state the required questions and their score to help all CE assessors understand the assessment tool. All CE assessors and RCE Leads receive initial and ongoing training on DV CE policies. 2)Confidentiality is one of the highest priorities for CE when serving survivors. CE policies and procedures require confidentiality, and the concept and the steps taken to meet that standard are described in policies. RCE Leads and CE assessors receive training on confidentiality. Compliance with VAWA requirements, along with best practices in serving survivors direct the efforts of partners when serving clients in CE. Confidentiality is especially important when multiple partners across the IN-BoS are serving a survivor, or when a household needs to activate an Emergency Transfer Plan. IHCDA, the CE Lead agency, supports the local efforts of RCE Leads to address confidentiality in their local policies and practices with training and oversight on compliance with these policies.

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

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

(limit 2,500 characters)

1)The CoC works with the HMIS Lead to implement a comparable database for VSPs in which it collects de-identified aggregate data on this vulnerable population and is continually assessing the system to improve data. This data is reviewed with partners through monthly data quality webinars called "Coffee Talks" and funded partners under ESG and CoC are asked to evaluate their data at least bi-annually. De-identified CE data is also analyzed monthly. 2)The CoC HMIS Lead staff work with providers collectively and individually to ensure that data is accurate and complete. At monthly CE Info Sessions, the CE Lead Staff shares data on number of HHs on the Prioritization List with a lethality score to ensure outreach and collaboration is happening between Regional CE Lead Agencies and DV providers. The number has steadily increased to almost 25% of HH with a lethality score for BOS. Regional reports are sent to each CE Lead every quarter. A monthly info session was also dedicated to best practices on confidentiality for survivors' PII during case conferencing sessions. The data is used to help determine the need for housing and services for survivors of violence. The CoC uses data collected in comparable databases and reported in the internal renewal program application from APRs to inform the technical assistance plan that ICADV will execute with the entire CoC. This will include a focus on reducing barriers to programs for survivors, supporting safe exits to permanent housing, and access resources to increase income. The CoC recognizes the importance of expanding the use of the comparable data system, and to that end the HMIS Lead continues to reach out to non-system VSPs to encourage them to use the system to improve the amount and accuracy of information on survivors. De-identified data including length of time and service needs data were also used to determine what additional funds would be applied for under the DV THRRH DV Bonus application in FY23 and what services will be added to the DV CE renewal project in the new VAWA emergency transfer plan lines. The CoC hopes this will decrease barriers to survivors during transfers.

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

	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
1.	whether your CoC has policies and procedures that include an emergency transfer plan;	
2.	the process for individuals and families to request an emergency transfer; and	
3.	the process your CoC uses to respond to individuals' and families' emergency transfer requests.	

(limit 2,500 characters)

1)The BoS CoC's policies and procedures require all CE access points and funded partners comply with Emergency Transfer Plan (ETP) policies. These requirements are specified in programmatic manuals and CE policies, and partners receive training annually. As a part of the CE evaluation, the CoC is determining the additional training requirements and resources that should be developed to support ETPs. ICADV, the DV CE technical assistance provider works alongside the CoC to advise and train partners on safety planning and executing ETPs. 2)Individuals and families are notified of their rights under VAWA when they move-in to permanent housing, and all households are evaluated for the DV needs in the CE assessment. Any individual or family that is experiencing a DV situation can notify the housing or services program they are working with to receive ETP designation. Partners work together, but may also notify CE and CA staff of the critical situation, protecting PII throughout the process, and staff support referrals between partners as needed. 3)In the IN-BoS, the most common situation in an ETP is a client requesting to move not only from one program to another, or unit, but often includes moving to a safer location in the BoS. Funded partners access a copy of a template ETP that is modeled after the HUD example document. When partners identify an ETP is necessary, they utilize the ETP in partnership with the client, to identify the appropriate next steps and the best and safest option for the household. The ETP form is used in case conferencing with the identified appropriate RCE Lead and the regional partners. As the CoC launches the new CE assessment process, the ETP process will also be revamped to align with CE policy changes.

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

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

(limit 2,500 characters)

1)In partnership with ICADV, which operates the DV hotline in the IN-BoS, referrals for housing and services are made to the RCE Lead, who will route it to the CE access point if CE in the region is decentralized. CE access points must provide directly or plan through other means to ensure universal access to emergency services/crisis response services for Clients seeking 24/7 emergency assistance. The BoS CoC requires each Region document its planned after-hours emergency services approach. Access to after-hours crisis response may include telephone crisis hotline access, 211, coordination with law enforcement, and/or emergency medical care. The CA works closely with 211 to provide intakes/assessments and referrals for Clients seeking assistance during hours an intake/assessment site may be closed. Each Region is required to provide necessary safety and security protections for persons fleeing or attempting to flee domestic violence, stalking, and dating violence. These protections ensure people fleeing domestic violence have safe and confidential access to CE and domestic violence services, and any data collection adheres to VAWA. 2)In partnership with ICADV/ICESAHT, the CoC assesses the system barriers and gaps reported to partners by survivors. This resulted in the launch of a DV CE demonstration project effort in 2023, which resulted in 5 new projects to address systemic barriers for survivors to access housing and services. These projects primarily focused on transportation and addressing the unique challenges survivors face in locating a safe and appropriate housing unit. As a part of the CE assessment re-vamp, and the evaluation of CE conducted by C-4, VSPs have advised the CoC on how to reduce barriers in CE and improve the assessment process and experience for survivors, especially in their experiences of trauma and in increasing their access to housing and services.

	1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
		NOFO Section V.B.1.e.	

		Describe in the field below how your CoC:
	1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and
	2.	accounted for the unique and complex needs of survivors.

(limit 2,500 characters)

1)IN-BoS committees include individuals with a range of lived experience and DV. Members were recruited by personal invitation from staff and board members, to ensure the voices of survivors was represented in key decision-making committees. Several RPC chairs have DV experience and work at a VSPs, which has helped promote collaboration and strategies to reach survivors in the BoS. The CoC began a CE assessment re-vamp and the CE assessment this year, and DV survivors and VSPs were involved in both working groups as ongoing committee members and as participants in listening sessions. These individuals and partners advocated for policy and process updates to support survivors. The CA staff team that helped establish CE policies also have DV lived experience and helped lead the adoption of policies that reduced barriers and trauma experiences for survivors. 2)The influence of survivors and VSPs in these work-groups resulted in a number of policies: the inclusion of an updated lethality assessment in the CE process to ensure that survivors at significant safety risk were prioritized for housing as quickly as possible, to include DV-specific questions in the new replacement assessment, updated scripts with trauma-informed language for CE assessments, and review each part of the new CE process and evaluate the experience from the perspective of a survivor. Feedback gathered from survivors and VSPs also resulted in the launch of DV CE demonstration projects to test how funding specific barrier-busting projects could meet key gaps in service delivery for survivors. Projects began in April 2023, and focused on issues related to housing search and navigation services and transportation gaps in rural communities.

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

	1.	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	No
	2.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
	3.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

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

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

(limit 2,500 characters)

1)IN-BoS CoC collaborates with organizations representing LGBTQ+ organizations and other agencies representing individuals who are disparately impacted by homelessness. As a part of the CoC's strategic plan, launched in 2023, issues of diversity, equity and inclusion (DEI) were prioritized for the Board. The CoC Board is engaging DEI experts from across the state to refine strategies. The Board has noted that first priority will be a review of all CoC policies and materials should be assessed with a DEI lens and updates should be made to address DEI concerns. 2)CA staff regularly advise partners on how to improve their policies and give technical assistance on specific concerns. DEI issues were central to the November 2022 Development Day event, which included several session on equity and discrimination and a key-note address on the topic from Donald Whitehead for the National Coalition for the Homeless. IN-BoS CoC conducted Equal Access Rule and family separation trainings in April 2023. The session included a robust discussion of policy changes that agencies needed to immediately address, and lead to follow-up conversations with staff and within CoC RPCs on how to address practices within their local communities. 3)This year the CA requested renewal projects provide a description of their DEI policies along with their Housing First policy. Projects were evaluated on anti-discrimination and equal opportunity policy, but if they had training for staff, leadership and board members on DEI. Projects are evaluated on how their agency staff and board reflect their local population of individuals experiencing housing instability and homelessness. The CoC will recognize agencies that are taking proactive steps to address equity and disparities at the September 2023 Development Day. ESG staff were required to participate in Equal Access rule and other DEI related training events and were evaluated in their ESG application on DEI issues. 4)Monitoring staff partnered with the CA team on the Equal Access training and use the training recording with partners when concerns are noted related to discriminatory practices or policies. Additional trainings are hosted by monitoring staff as needed, and if additional follow-up is required the CA CoC grant staff take-over for more 1x1 TA. As the CoC Board implements the DEI initiatives from the strategic plan, additional evaluation criteria or practices in reviewing data alongside programmatic policies will be addressed.

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

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.
Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with–if there is only one PHA in your CoC's geographic area, provide information on the one:

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

Indiana Housing and Community Development Authority	35%	Yes-Both	Yes
Fort Wayne Housing Authority	60%	Yes-HCV	No

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

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

(limit 2,500 characters)

1)IHCDA (the CA) is also the PHA for IN-BoS. Staff that oversee the PHA are members of the real-estate team, and they work closely on a weekly basis with the CoC Network Liaison and CoC, ESG, and HOPWA (grants) staff. IHCDA has had a limited homeless preference and a move-on policy for several years, and this year the grants staff identified an opportunity to work with real-estate to increase referrals from programs to move-on vouchers. The PHA had move-on resources, but after meeting with funded partners, it was noted that many partners did not understand the forms or know when a referral would be appropriate. The CoC staff worked alongside partners to create additional support materials to assist in improving the frequency and quality of referrals to move-on vouchers. Three training sessions were hosted in 2023 with a focus on supportive housing referrals, but also provided opportunities through the process to refer RRH households that need an ongoing subsidy. In addition to the IHCDA PHA staff, the CA also coordinates with the Fort Wayne Housing Authority (FWHA). FWHA has worked closely with IHCDA for many years, and their team is engaged with the local regional planning council and fully participated in Ft Wayne's local plan to end homelessness efforts. FWHA has a general homelessness preference and are committed to partnering with homeless services to house individuals and families experiencing homelessness. This year FWHA leadership met with IHCDA grants staff to discuss collaboration with local recipients, and on plans for the new stability vouchers. Grants staff worked with PHAs to apply for stability vouchers for the rural set-aside projects, and also are currently working with them to establish a stability voucher MOU, which will be executed in 2023 with all PHAs that received stability vouchers. 2)IN-BoS has worked with PHAs in our area to adopt a homeless admission preference. This question is not applicable to our CoC.

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

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

1.	Multifamily assisted housing owners	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

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

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

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

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

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	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.	Stability Vouchers

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

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

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

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
	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.	

PHA
Indiana Housing C...
Bloomington Housi...
Gary Housing Auth...
Evansville Housin...
Lafayette Housing...
Terre Haute Housi...

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

Name of PHA: Indiana Housing Community Development
Authority

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

Name of PHA: Bloomington Housing Authority

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

Name of PHA: Gary Housing Authority

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

Name of PHA: Evansville Housing Authority

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

Name of PHA: Lafayette Housing Authority

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

Name of PHA: Terre Haute Housing Authority

1D. Coordination and Engagement Cont'd

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

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

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	56
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	56
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

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

(limit 2,500 characters)

1)The Housing First Approach is a threshold requirement for receiving CoC funding. All renewing and new projects must indicate they will adhere to these principles. During the renewal process, all participating organizations are scored up to 15 points by responding to a questionnaire, and all projects were scored 5 points for submitting their policies. New organizations must also indicate in their application that they will follow these principles. Staff are developing an evaluation tool in coordination with the monitoring team to provide feedback on the written Housing First policies. 2) Each renewal and new project applicant is asked a series of questions that include whether the project screen out individuals or households, whether they engage with individuals to receive substantive feedback, or whether they terminate for specific reasons. Such categories include but are not limited to: a)failure to pass a background check; b)having a criminal record; c)active or history of substance abuse; d)being from specific demographics such as LGBTQ+, family status, marital status, etc. e)having little to no income; f)a history of victimization; g)failure to participate in supportive services; or h)failure to make progress on a service plan. 3)Once they are a part of the CoC funding organizations, the BoS CoC Collaborative Applicant regularly evaluates its subrecipients to ensure they are following a Housing First approach through annual monitoring and written feedback on policies. The CA follows up on any claims that a particular subrecipient is not complying by scheduling a one-on-one meeting to determine the validity and to instruct the agency on the appropriate implementation of Housing First. If an organization does not comply, it will receive a finding on its monitoring report. This information is also shared with the FRC and P&OC. Last year, the CA identified issues particularly with Housing First in VSP projects based on an evaluation of their practices, and in partnership with the CoC Board intentional technical assistance and training was provided to those programs. The CA staff conducts annual training session on Housing First principles for all CoC and ESG subrecipients. Staff are implementing a survey tool to test for knowledge after these sessions to support compliance.

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

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

(limit 2,500 characters)

1)All 16 regions in the IN-BoS geographic area provide street outreach. The CoC provides regular training on outreach related topics to support these efforts, including a session on street outreach best practices, which will be hosted in September 2023. All regions participate in the annual PIT count, which provides insight on target areas. Coverage is evaluated annually statewide, and at least bi-monthly in each RPC, and strategies are developed to increase outreach in targeted areas. HMIS and CA team work with RPCs to identify underserved areas and support recruitment of local outreach providers to expand coverage. The CoC leverages ESG and other programs to implement street outreach and engage unsheltered individuals and families. Their common objective is to find and engage unsheltered persons who have not yet obtained housing assistance and support their rapid exit to housing. Outreach personnel build trusting relationships with individuals and families, meet immediate needs, and link to programs and resources to become stably housed. 2)By collectively leveraging partnerships, the CoC covers 100% of the geographic regions within its jurisdiction, understanding that only 97% of our service area is accessible according to our PIT Count calculation. 3)Daily street outreach occurs throughout all 16 regions. The CoC partners regularly perform outreach, often in coordination with faith-based organizations, PATH, VA, and ESG partners helping expand outreach. Outreach efforts often coordinate through local RPCs, and report to HMIS, CA staff, and IN-BoS Board on local needs. 4)Outreach is targeted to engage at a local level and address the community-specific areas where unsheltered homelessness occurs. Outreach teams go to bridges, parks, woods, abandoned buildings, etc to reach those least likely to request assistance. Law enforcement personnel provide an extension to outreach workers, assisting the CoC in locating and helping those most in need. The YAB provides insight on locating YYA experiencing homelessness and formulating strategies for targeted outreach. IHCDA (the CA) also implements a Homeless Health Infectious Disease (HHID) team that has met with local health departments, shelters, and federally qualified health canters (FQHCs) and provided information to counties and partners directly about their unsheltered population to help increase local awareness and buy-in.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section V.B.1.k.	

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

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	Yes
2.	Engaged/educated law enforcement	Yes	Yes
3.	Engaged/educated local business leaders	Yes	Yes
4.	Implemented community wide plans	Yes	Yes
5.	Other:(limit 500 characters)		

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

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	640	906

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

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

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF–Temporary Assistance for Needy Families	No
5.	Substance Use Disorder Programs	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	

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

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

(limit 2,500 characters)

1)The CA communicates about mainstream resources in newsletters, program-specific office hours, and monthly calls with Service Provision Committee (SPC), which is comprised of RPC chairs and RCE Leads. During calls, the CA highlights resources through presentations by partner agencies, such as SOAR training. Annual mainstream benefits training is hosted at Development Day in May 2023, including employment services, TANF, WIC, SNAP. We also offered additional SOAR training sessions in April 2023. CoC provides information on healthcare, mental health treatment, SUD services, childcare, case management, counseling, education and/or job training, and other resources for providers. CA staff enhanced partnership this year with local Community Action Agencies (CAAs) and the statewide CAA coalition INCAA. CAAs play a critical role, especially in rural communities, offering energy assistance, Head Start, and access to other benefits. CAAs played a critical role in our rural partnerships training series and in Development Day panels on rural homelessness. 2)A significant portion of CoC partners, identify as mental health, community mental health, and SUD programs. CA staff meet monthly with the Indiana Dept of Health (IDOH) network that oversees FQHCs and will be training FQHC leadership on the CoC and homeless response. Collaborations with SUD treatment providers were enhanced because of the 2022 CoC competition and Supplemental NOFO competition. CoC and CA released e-newsletters and training on enrolling in Medicaid and other health insurance, especially as COVID-19 waivers for enrollment expired. Through the HHID program implemented by the CA, HHID analysts connect with local health departments, shelters and outreach partners, and healthcare providers to educate them on homelessness, connect to RPCs, and identify gaps in resources to prevent future disease outbreaks that negatively impact those experiencing homelessness. 3)SOAR training and access is a major effort by the CoC. Projects are evaluated on how they promote SOAR access and whether they train staff in their project applications for CoC and ESG. At this year's annual SOAR training event, the new state SOAR coordinator was introduced to CoC and ESG staff, and she presented on SOAR basics as well as cohort opportunities. The recorded/transcribed training was posted on the IHCDA website for partners to share with new staff.

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

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

(limit 2,500 characters)

The CoC prioritized capacity for non-congregate sheltering (NCS), especially for unsheltered individuals, through several strategies. First, the CoC applied for rural and unsheltered supplemental NOFO funding and was awarded funds that include opportunities to use hotel/motel resources. This funding is vital in rural communities without safe shelter. Second, ESG-CV funding reallocations since December 2022prioritized funding to shelters to support safe shelter practices, including NCS. ESG-CV supported more than $700,000 in shelter funding in the last nine months of ESG-CV funding. This included joint shelter-outreach awards to support outreach efforts to move folks out of unsafe conditions and into temporary hotel sheltering. Several CoC partners modified their operations moving permanent to an NCS environment. DV partners in rural communities felt the strain of longer shelter and TH stays since the beginning of the pandemic because of limited affordable housing. Expanding NCS by leasing homes and apartments to meet safety and health needs of clients that are unable to move-in to PH. ESG-CV and DV THRRH funds have been a primary source of funding for this effort, and IHCDA is applying for additional funding in DVTHRRH to address the gap. Across the BoS, there is work to make all shelters, especially congregate shelters, safer for clients and staff. The CA's Homeless Health Infectious Disease (HHID) team leads efforts across the IN-BoS to engage shelters, including those that do not actively participate in CoC, and address the health and safety needs of clients. HHID team developed official COVID-19 health and safety guidance materials, approved by IDOH in July 2023. The guidance was developed after visits with shelters and health departments across the IN-BoS during the first two quarters of 2023, and these visits continue. HHID is educating shelters on how to mitigate disease spread, especially for those most likely to die. In response to local health departments and shelters requests, the team will also be facilitating regional calls between shelter and outreach partners and health departments to continue to share information and best practices. For shelters that continue to operate a congregate environment, new pest control and respiratory protection resources and recommendations are being developed and will be released before the end of 2023.

ID-8.	Partnerships with Public Health Agencies--Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	

	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and
2.	prevent infectious disease outbreaks among people experiencing homelessness.

(limit 2,500 characters)

1)The CA began implementing the Homeless Health Infectious Disease (HHID) program in coordination with IDOH in 2023. The MOU deliverables were completed in August 2023, and IHCDA is now exploring additional initiatives that HHID can take on to increase collaboration and alignment between public health and the homeless response system. Since March 2023, HHID completed 1x1 site visits: 94/95 local health dept (LHD) visits (99% of LHD in the state), 41 of shelter visits, 121 total meetings with healthcare and shelter providers since the program began. HHID team created COVID-19 guidance for shelters and street outreach that was approved by IDOH in July 2023, and are using the guidance as a template for future infectious disease and healthcare efforts such as respiratory, enteric bloodborne, and pests (lice, bed bugs, etc.). In particular, TB guidance is being created now in response to recent outbreaks and concerns expressed by shelters about the issue. HHID team is developing SOPs for how infectious disease prevention supplies can be ordered or requested by local partners. As a part of our statewide efforts to reduce barriers between healthcare and homelessness response, HHID has resources that enable them to assist shelter and outreach partners, LHDs, and FQHCs. Bridging the "terminology gap" was one of the first barriers to coordination that the HHID team identified, and they worked quickly to build resources to respond. 2)HHID is facilitating connections between shelters and health depts. In rural parts of the state, the local health dept may only have a few staff, and in other cases they may be the only healthcare presence in a community other than a local physician. Raising awareness of homelessness among health dept will help long-term planning for future infectious disease outbreaks, especially to ensure individuals experiencing homelessness are served. HHID team is assisting LHD in connecting their mobile vaccine clinic efforts with local homeless response system to support access for sheltered and unsheltered individuals. After meeting with shelters, HHID team determined their next areas of focus would be supporting local partners by providing education and supplies to prevent the spread of respiratory infections and support pest control, especially for bed bugs, in shelters and encampments.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.		
	NOFO Section V.B.1.o.		

	Describe in the field below how your CoC:	
1.	shared information related to public health measures and homelessness, and	
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

1)HHID met with 57 health departments and un-funded shelters were provided PIT and HIC handouts , and all meetings have included discussion of PIT/HIC. The HHID team is facilitating connections between shelters and health depts by providing contact lists and direct emails between partners on a monthly basis. Coordination calls have included X# health depts each month. Many of these calls have focused on building stronger relationships in the more urban parts of the BoS because there has been more prevalence of infectious diseases in larger communities. The housing and homeless services scripts developed by the HHID program are being used by shelters to assist with connecting to LHDs and healthcare partners who have previously been unengaged in homeless response efforts. HHID has also been working with IDOH to meet the health and disease prevention supply needs of shelters and outreach teams. 2)HHID staff meet with shelters and outreach teams and provide a list of supplies that can be acquired, including COVID-19 test, PPE, wound care, and other needs. The needs of shelter and outreach partners are identified during 1x1 meetings, and in addition to ordering supplies HHID team notes gaps in health and infectious disease resource gaps are noted and reported to CA staff and IDOH. HHID team members also provide advice on how agency-level policies can be improved to respond effectively to infectious disease outbreaks.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section V.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)

1)CE covers 100 percent of the CoC geographic area through its 16 regions. Each region identifies a Lead organization to serve as the point of contact (RCE Lead). RPCs and RCE Leads work together to determine the best way to reach people least likely to apply for homeless assistance. 2)The CoC is revamping our assessment and will launch new tools by the end of 2023. The new process will replace the VISPDAT includes a multi-phase assessment, and households will be matched with the most effective resources to address their housing crisis from diversion to supportive housing. The current standardized assessment tool includes intake, VISPDAT, client and household make-up and barriers, and lethality assessment. Each region uses the same assessment and has a unique but similar CE system with local policies and procedures. The region's prioritization process may mirror its available permanent housing resources/stock which allows RPCs to focus on a particular subpopulation based on needs. If a person is prioritized for PSH and no PSH is available, RRH is considered as a bridge to PSH. All regions use HMIS to collect and report data. The IN BoS CoC has determined an effective CE process ensures people with the greatest needs receive priority for any type of homeless assistance and housing interventions in a Region. 3)This year the CoC hired C-4 to evaluate CE on housing outcomes, DV engagement, diversity and equity concerns, and engaged individuals and clients with experiences of CE to improve the system. The report will be presented to the CoC board in Sept 2023, and recommendations will be incorporated into the new CE Policies and Procedures alongside the new assessment tool. In the evaluation process, C4 engaged individuals with lived experience in listening sessions, which informed a number of planned changes including a)identifying the best strategies to support ongoing CE access across IN-BoS b)increasing the transparency of CE through more robust training and script development for assessors to inform clients of their options c)improving the assessment process with a focus on reducing trauma and preventing bias d)identifying ongoing metrics for the CoC board and RCE Leads to evaluate progress and create continuous improvement.

| | 1D-9a. | Program Participant-Centered Approach to Centralized or Coordinated Entry. | |
| | | NOFO Section V.B.1.p. | |

		Describe in the field below how your CoC's coordinated entry system:
	1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
	2.	prioritizes people most in need of assistance;
	3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and
	4.	takes steps to reduce burdens on people using coordinated entry.

(limit 2,500 characters)

1)CE strategy to reach people in need combines local work in RPCs and RCE Leads, with oversight and support from the CoC Network Liaison (CNL) team. Data is reported monthly to regions to create local responses in alignment with CE goals, including outreach and assistance to those least likely to apply or access CE. This year, the CoC executed MOUs with the RCE Leads and included requirements to serve underserved areas and sets accountability measures. In preparation for the new assessment process, CNL team is working on marketing materials for RCE Leads. This year's CE evaluation will provide further insight into best practices to connect with rural or underserved communities. 2)The CES Prioritization Policy and tools will be updated later this year, and it will accurate assess housing and services needs and reduce disparities. Current tools use these factors: a)VI-SPDAT Score b)greatest needs c)longest history of homelessness/chronicity, d)RPC case conferencing, d)local priorities—Veterans, Youth, Families, Single Adults, DV survivors. 3)One data point regularly evaluated with each RCE Lead are 90-day reassessments. CNL team closely monitors movement of individuals in each region's prioritization lists. The process of referrals and evaluate on timeliness on connecting with households that had requested assistance. As a result, RCE Leads are responsive and accountable. The CoC coordinates with local PHAs to offer options beyond PSH and RRH: EHVs, HCVs, HUD-VASH, FUP, FYI, and stability vouchers. CE policies allow for transfers between regions by request and to address DV safety. 4)Reducing trauma, barriers, and the burden of completing assessments or applications for housing is a core tenant of IN-BoS CE. Priorities are informed by PLE and our CE task forces, and we use a continuous improvement method to expand services and decrease barriers. This year, the CoC launched DVCE demonstration projects focused on reducing barriers for DV households in CE. As a result, new transportation partnerships, case management strategies, and client supports were offered, and we plan to expand services to more regions in 2023-24. Within the CE evaluation and in the new assessment process, we are refining our process with a specific focus on reducing trauma. For example, reducing the times individuals are asked to "tell their story" and asking specific questions to assess without being invasive, and reducing complexity of the assessment process.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry–Reporting Violations.		
	NOFO Section V.B.1.p.		

	Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;	
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and	
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.	

(limit 2,500 characters)

1)The IN BoS CoC affirmatively markets housing and services to all persons experiencing homelessness in our geography. Marketing strategies include direct street outreach and other service sites, informational flyers left at service sites and public locations, announcements during CoC or committee meetings, and educating mainstream service providers. The CA offers training led by the Fair Housing Center of Central Indiana annually on how organizations should support clients experiencing housing discrimination. In Sept 2023, the CA launched a housing dashboard with data and metrics impacting housing supply and affordability. The CoC will use this tool to inform service providers of affordable housing for clients. 2)Written policies and procedures establish protocols for fair and equal access to housing and services at the project and in CE. CoC policies require and enforce compliance with these items. The RCE Lead ensures that each client has fair and equal access and is aware of their rights and remedies available under require all partners have and follow federal, state, and local fair housing and civil rights laws. Physical CE sites must be accessible to people with disabilities and by public transportation or offer remote intake options. Each Region must ensure fair and equal access to programs and services regardless of actual or perceived race, color, religion, national origin, age, gender identity, pregnancy, citizenship, familial status, household composition, disability, Veteran status, sexual orientation, or DV status. To ensure fair access by individuals with disabilities, physical and communication accessibility barriers are addressed by appropriate accommodation within each Region. 3)The intake/assessment staff member or supervisor are trained to address client complaints immediately if they are able. Clients are also notified of their right to submit a formal complaint to the Indiana Civil Rights Commission or HUD's Fair Housing Office if the situation involves fair housing choice for current or prospective program participants. If the complaint involves intake staff, they can be referred to the RPC Chair (RC) for resolution. If the RPC is unable to reach a decision and plan for resolution, the RC forwards the grievance to the CA Director, who discusses the situation with the agency executive director and/or presents it to the Performance and Outcomes Committee for review. The Committee will then recommend resolution by the IN BoS CoC Board.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	09/22/2023

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

Describe in the field below:

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

(limit 2,500 characters)

1)Analyzing the 2023 PIT Count, the HMIS Lead included data points related to the presence of racial disparities, which shows an over representation of people identifying as black, African American, or African in this year's count compared to the 2020 Indiana and United States Census data. As a part of the CE evaluation, the contracted scope of work includes a racial equity analysis of CE. This evaluation will be received in September 2023. The IN BoS CoC Board is preparing to execute a new disparities analysis in 2023-24, to create a comprehensive racial equity analysis in partnership with the HMIS Lead. The analysis of the data will help the Board and RPCs understand the impacts of historic and current inequities experienced by Black, Indigenous and other People of Color in the IN-502 homeless services system. To prepare for this assessment the HMIS Lead staff and CA Director participated in a HUD Community Workshop entitled Mobilizing Data to Address Inequities from 2022-23 and are incorporating the targeting universalisms model in the assessment. 2)HMIS data shows Black and African American individuals are overrepresented in the homeless system. We also observe that these individuals are more likely to experience longer episodes of homelessness. Anecdotally we hear individuals who identify with the LGBTQ+ community are also overrepresented in the system and also have difficulty accessing housing. We will use the update to the HUD data standards to evaluate housing outcomes for LGTBQ+ individuals more accurately.

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

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes

11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

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

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

(limit 2,500 characters)

The most important change the CoC is undertaking to address disparities in outcomes and assistance is to discontinue using the VISPDAT tool. The new tool's development was driven by concerns about bias and inequal outcomes, and the tool and the process are being revamped with a focus on reducing those disparities. The CoC recognizes disparities are an issue and provided several trainings and plenary speakers in Nov 2022, May 2023, and Sept 2023 on issues of implicit bias, history of racial inequity in housing, engaging folks with lived experience in decision-making, and how to develop inclusive policies and practices within agencies. The focus of these sessions was also informed by the strategic planning process, where it was identified that the understanding of racial equity was not the same across the BoS. The CoC Board strategic plan specifically identified equity as an issue, and the Executive Committee has been meeting regularly with experts in DEI work across Indiana to take the roadmap of concerns and identify the highest priority strategies for implementation this year. The CoC has worked particularly hard to elevate minoritized and attracted more diverse board members, and increased representation in committees from 2022-23. CA staff members sit on community committees such as the Indiana Commission on Hispanic and Latino Affairs and the Race and Cultural Relations Leadership Network Steering Committee. They also have a background in data analysis and cultural awareness training that will also help determine appropriate outcomes to improve racial equity. Three members of CA staff attended the recent HUD Community Workshop series on developing a CoC coalition, which included extensive discussion and training on cultural awareness and inclusivity. This training will help the CoC create welcoming and inclusive spaces in the CoC and its committees so that critical voices continue to engage and inform us on how we can best approach addressing disparity. Finally, the new and renewal project application tools required respondents to describe their board and agency make-up in relation to the client population served, requested information about DEI training for board and staff, and evaluated projects on their internal policies and procedures to address equity in their operations and service delivery.

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

	Describe in the field below:	
1.	the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and	

2.	the tools your CoC uses.

(limit 2,500 characters)

1)All CoC new and renewal projects were evaluated on assessing and tracking issues related to disparities in their applications this year. HMIS Lead staff and CA Director participated in a HUD Community Workshop entitled Mobilizing Data to Address Inequities in 2022-23, which impacted how the HMIS Lead analyzed and presented data to the CoC and stakeholders. This year's PIT and HIC outcomes sessions included specific breakdown and analysis of data with a racial equity lens. HMIS staff have also shared information with CA staff and the CoC Board about racial equity issues, including discussing the increased length of time homeless for black/brown individuals. As we evaluated CE in 2023 and made changes to CE assessment tool and process, the issue of length of time homeless and access for individuals experiencing housing disparities was discussed, and policy and procedure changes will be implemented. Ongoing evaluation of this issue will continue throughout implementation. As the CoC prepares to update the racial equity assessment the P&OC will be closely involved and work collaboratively with the CA and HMIS Lead. 2)The CoC focuses on collecting and reporting data from HMIS, including the comparable DV data system, and works hard with partners across the state to reduce barriers to utilizing HMIS for the collection of data. Past racial equity assessments have relied on PIT data for their evaluation, but the new assessment will use a broader universe of data from HMIS. The targeting universalism model, HUD racial equity evaluation tools, and other best practices for DEI will be implemented in the comprehensive racial equity assessment conducted in 2023-24.

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

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

(limit 2,500 characters)

The CoC relaunched the YAB in spring 2023, ensured diverse representation in the CE assessment revamp committee, included lived experience in the development of funding applications, and provided opportunities for diverse voices in multiple listening sessions related to CE evaluation and the development of the CoC project application tools. This renewed focus on people with lived experience (PLE) was implemented by recruiting individuals across the BoS through e-newsletters, RPC outreach, local service provider recommendations, and targeted recruitment from CoC Board and CA staff. RPC Chairs also reported that they recruited PLE through peer support specialists, 1x1 meetings, and building trust so folks know their experience is valued and their expertise will be taken seriously by the group. RPCs play the largest role in local planning and policy development, including outreach strategies, local CE prioritization, and local housing needs assessments. PLE supported the development of application materials and reviewing project applications for the rural and unsheltered funding in 2022. PLE serving on the CE revamp committee and engaging in listening sessions were recruited through emails, e-newsletters, and personal invitations. The CoC launched a new partnership with the National Coalition for the Homelessness Lived Experience Training Academy (LETA) and supported a cohort of 7 PLE with scholarships for LETA. This cohort is being used as a pilot before launching a broader effort, so PLE were recruited with personal invitations from CA staff. The CA offers scholarships to PLE for other training events, and those are promoted via e-newsletters, personal invitations, e-reminders to agencies and partners, and through other partner newsletters including ICADV. YAB members were recruited through an intentional process that included: personal recommendations from CA and services provider staff, emails to youth serving organizations, flyers for organizations to post online and on-site, and an intentional effort was made to recruit individuals from around the BoS with different races, genders, and sexual orientations.

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

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.
Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	0	3
2.	Participate on CoC committees, subcommittees, or workgroups.	2	16
3.	Included in the development or revision of your CoC's local competition rating factors.	0	1
4.	Included in the development or revision of your CoC's coordinated entry process.	1	1

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

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

(limit 2,500 characters)

PLE engagement, professional development, and compensation is important to the IN-BoS CoC. The CoC has provided leadership and decision-making authority in the CoC Board, within agencies boards, and as a part of board committees and in funding applications. IHCDA (the CA) is contracting with Transform Consulting to implement the YAB, including providing training and supports to YAB members. This contract allows our state agency to compensate all YAB members without the documentation requirements of traditional state employment. This has reduced barriers to engaging the YAB while offering the ideal level of compensation. The CA is exploring options to expand compensation and leadership training options for all PLE with additional planning grant funding. All CoC renewal and new project applicants are evaluated on how PLE are engaged within their organization. Projects receive points for engagement at direct service, leadership, and in board participation and receive additional points for PLE in the last 7 years. The CA strongly values PLE and has multiple staff with lived experience. The new LETA cohort began in summer 2023. Our first cohort includes 2 YAB members, 1 CoC board member and 4 CA staff members—all individuals with lived experience. We plan to expand this pilot project in 2023-24 after an evaluation of the process. The CA offered scholarships for PLE to attend Development Day, which was hosted in partnership with the Indiana Housing Conference (IHC) in September 2023. Development Day and IHC offer PLE numerous professional development experiences through training, networking, panel participation, and leadership development. This is our first collaboration with IHC, and we see it as an opportunity for PLE to engage, network, and represent PLE in sessions, panels, luncheons, and events that also include housing developers, state and local government staff, elected officials, service providers, and other housing leaders in the state. YAB members were also included in scholarships and LETA, and the CA has contracted with Transform Consulting to provide dedicated support the YAB in its first year of relaunch. YAB members represent the BoS and are different races, genders, and sexual orientations. Two YAB members received training to, and served as, reviewers on the CoC new project application process.

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

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

(limit 2,500 characters)

1)In 2022-23, the CoC began implementing the new strategic plan with a focus on engaging people with lived experience (PLE). The strategic plan called out our need to elevate the voices of minoritized people, and the CoC has worked to address this concern. PLE serve on our CoC board, in local RPCs, in RCE Lead organizations, in CoC committees, listening sessions, on advisory groups and task forces. 2)PLE served on an advisory group for the rural and unsheltered NOFO in 2022. They supported the development of application materials and reviewed project applications for the rural and unsheltered funding in 2022. PLE are closely involved in the CE assessment revamp, serving on the committee, and participating in listening sessions. PLE had their own listening sessions for both the CE assessment and CE evaluation process conducted in 2023. The LETA cohort began in summer 2023. Our first cohort is a pilot project in 2023-24, and individual participations will evaluate the process before we expand it to the IN-BoS. The CA offered scholarships for PLE to attend Development Day, which was hosted in partnership with the Indiana Housing Conference (IHC) in September 2023. This is our first collaboration with IHC, and we see it as an opportunity for PLE to engage, network, and represent PLE in sessions, panels, luncheons, and events that also include housing developers, state and local government staff, elected officials, service providers, and other housing leaders in the state. YAB members were also included in scholarships and LETA, and the CA has contracted with Transform Consulting to provide dedicated support the YAB in its first year of relaunch. YAB members represent the BoS and are different races, genders, and sexual orientations. Two TAB members served as reviewers on the new project application process. 3)Our greatest impact in the last year from engaging PLE has been on the development of the plan created during the rural NOFO, including how that plan integrates with our CoC strategic plan. PLE on the CoC Board also served on the advisory group and provided tremendous leadership as the new plan was adopted, and advocated for continued engagement with PLE and increasing opportunities for further feedback. Additionally, PLE engaged with the CE assessment have been vocal in their concerns about the current CE process and have helped develop a brand new assessment and CE process that is more transparent and trauma informed.

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

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

(limit 2,500 characters)

1)The IN BoS CoC strategic plan includes advocacy for resources to support the homeless system. IHCDA (CA) is preparing an RFP on the Board's behalf to identify a contractor to educate and guide it on critical issues and monitor proposed legislation and municipal ordinances. The Board also created a new Community Engagement Committee and Landlord Engagement Taskforce to review policies and housing development opportunities. Likewise, COC service providers advocate for zoning and land use policy reform at the local levels. In Sep 2023, the CA released the IN Housing Dashboard 2.0, which includes a statewide inventory of housing as a tool to identify the greatest housing needs, barriers, and opportunities for economic development and investment. Version 3.0 discussion has been initiated, which would incorporate HMIS and other critical data to inform stakeholders on such issues as zoning and land use policies. 2)In Sep 2023, the BoS CoC partnered with the Indiana Affordable Housing Council (IAHC) to co-host the annual IN Housing Conference. IAHC promotes the preservation and expansion of affordable housing. With this partnership, the CoC will strengthen stakeholders' understanding of critical needs of people experiencing homelessness. The CoC engages with local PHAs on several MOUs, including EHV and the new stability vouchers to ease the referral process to affordable housing vouchers. The CA works to remove regulatory barriers to affordable housing development by engaging with federal partners to identify those barriers in federal affordable housing programs. It provides feedback when HUD has requested information on identifying regulatory barriers and participates in a HUD Region V-led Midwest Affordable Housing Preservation Task Force to identify ways to increase housing preservation and reduce barriers. It is an NCSHA member, serving on working groups and providing critical data and feedback that is used to inform federal agencies and legislators of regulatory issues. The CA continues to support an annual Supportive Housing Institute bringing developers, property managers, and supportive service providers together to create supportive housing projects through partnerships and collaborations.

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

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

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

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

1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their project applications to your CoC–meaning the date your CoC published the deadline.	07/18/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC's local competition–meaning the date your CoC published the deadline.	06/05/2023

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

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.
Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

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

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

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

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.
Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	108
2.	How many renewal projects did your CoC submit?	60
3.	What renewal project type did most applicants use?	PH-PSH

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

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

(limit 2,500 characters)

1)The IN-BoS review and ranking process analyzes data for each project to successful housing of program participants. The internal competition (IC) evaluates project's rate at obtaining and maintaining permanent housing, and the percent of exits to homelessness. PSH projects must have 95% and RRH projects or TH/RRH projects must have 90% of households maintain or exit to PH to receive full points, and no project can receive points if fewer than 85% of individuals meet this measure. All projects cannot exceed 5% of their households exiting to homelessness. 2) The CoC reviews how long it takes to house people in permanent housing at several stages: data quality reviews, close-outs processes, and during the internal competition. The CE evaluation will provide insight on how to evaluate partners on this measure, and we will implement a length of time assessment in 2024. 3)This year we implemented 2 new measures to support projects with clients with severe service needs and DV. Projects received points if households had 3+ mental or physical conditions and if 25% or more of households reported a history of DV. The CoC also collected housing first policies from all partners assess projects efforts to reduce barriers and support households with highest needs to obtain and retain housing. 4)As described previously, this year our CoC gave additional points to projects that serve households with multiple mental or physical health conditions and those that serve DV survivors. This change was an intentional effort to support projects that are engaging the hardest to serve populations. As a BoS CoC, removing funding from a project is especially difficult because a project may be the only housing program in a county or in an entire region. For this reason, the CoC generally prioritizes renewals and invests time and resources into providing technical assistance to projects instead of removing funds. Projects that do not score 65% of the highest scoring project are evaluated for performance improvement. FRC will be evaluating the renewal projects that scored lowest this year and identify recommendations for action by the P&OC beginning in October. These two committees will work alongside the CA and HMIS team to identify actionable steps to support projects, including coordinating with the local field office to support budget modifications and explore expansion or consolidation projects.

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

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

(limit 2,500 characters)

1)According to the most recent LSA report, the largest racial minority group is Black or African American or African (27%, including those selecting a single race or those choosing multiple races). This group also represents a group that systemically experiences the longest periods of homelessness (110 days). To address this disparity, the IN BoS CoC board has recruited diverse board members, which resulted in an increase from 6% to 17%. This increase in leadership participation is also reflective in the composition (20%) of the Funding and Resource Committee (FRC), which oversees the annual competition. The FRC and the CA work together to develop the scoring and ranking tools for new and renewal projects. The committee is comprised of non-conflicted individuals. Using data from the HMIS Lead, the FRC and CA staff researched questions about racial equity and PLE engagement, and sought technical support from CSH on question development. Finally, the FRC and CA hosted a listening session from funded partners to review questions on the scoring criteria to help improve their understanding of questions and fine-tune the application materials. 2)The CA, FRC and YAB collaborated to evaluate the project applications. In accordance with CoC policy, all projects were ranked by performance. The board was presented several options for reallocation, which impacted the location of several projects in the ranking of Tier I or Tier II. Non-conflicted IN-BoS CoC board members met for discussion and vote, which included PLE and people of color. 3)Projects were evaluated on how well they engage individuals in their agency staff, leadership and board with lived experience and how well the agency and their board are representative of the population served. Several projects reported continued difficulties in recruiting staff in their communities because of economic issues, and others reported that they had taken steps in the last 24 months to enhance and expand their agency policies to become more inclusive and representative as an agency. The CA will use data from these responses to identify peer learning, training and capacity building opportunities in the next year to support smaller and rural partners to expand their capacity and knowledge in the DEI space

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

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

(limit 2,500 characters)

1)The CoC prioritizes providing technical assistance and resources to projects that are poor performing and only reallocate projects that are poor performing in extreme circumstances. As a BoS CoC, removing a project from funding can result in removing the only housing program from a region, so there is rarely a situation where projects are not needed. Reallocation that is performed regularly by the CoC is based on funding utilization. The ranking and reallocation policy allows for the CoC Board to involuntarily reallocate projects that do not spend 75% of their award. This reallocation may be 10%, and for projects that do not expend 50% of their funding, they may be reallocated by 25%. IN-BoS began reviewing project spending data in February 2023, and began meeting with all funded agencies to review the CoC competition philosophy and policies in spring 2023. Partners that were below the spending threshold were notified, and had the opportunity to provide a spending rationale to the Board as a part of their renewal application process. Additionally, several budget modifications happened in response to underspending by several projects to help support their future funding utilization. 2)The CoC did reallocate funding this year for underutilized projects. We identified twelve projects with underutilized funding. As a part of the evaluation of reallocation, CA staff did a four year look-back on spending, which included pre-pandemic utilization, and provided a detailed memo for the CoC Board to review. The memo included contextual information from the spending rationale's and summary information about historical spending on awards. 3)The CoC board ultimately decided to reallocate funding from 9 of the 12 awards, determining that 3 awards had undergone enough transition since the pandemic that one more year of data should be gathered before a determination is made. The total reallocation from projects is more than $325,000. 4)The CoC did reallocate funding from projects this year.

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

| | Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023? | No |

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

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/01/2023

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/01/2023

1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank–if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes

1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or partner's website–which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/13/2023

1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/13/2023

2A. Homeless Management Information System (HMIS) Implementation

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

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

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

	Enter the name of the HMIS Vendor your CoC is currently using.	Eccovia ClientTrack

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

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

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

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/27/2023

2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

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

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

(limit 2,500 characters)

1)The IN BoS CoC hosts the closed comparable Victim Service Provider production system for Domestic Violence agencies in the IN-502. The VSP HMIS production system consists of 33 agencies, 120 housing projects, and 328 end users in the IN BoS. This system conforms to the 2022 HUD HMIS Data Standards that became effective on 10/1/21, and will be equipped with the 2024 Data Standards on 10/1/23. The HMIS Lead continues to work with Regional Chairs, CE Leads, and other DV advocates to bring agencies that serve 100% homeless survivors into the closed system. The IN- 502 HMIS lead provides customizations to each agency to meet survivors' specific needs and reporting requirements under VAWA, VOCA, etc. The HMIS lead also hosts a DV Help Desk for issues ranging from password resets all the way to complex reporting and data quality issues. The HMIS team hosts data quality improvement webinars for these providers, DV specific trainings, in addition to hosting monthly open office hours, live new trainings, and how to guides to empower these service providers in our shared fight to end DV in the IN BoS. 2) Yes, The IN BoS CoC has a comparable database that collects the same data elements required in the HUD-published 2022 HMIS Data Standards. 3) Yes, The IN BoS CoC HMIS is compliant with HUD-published 2022 HMIS Data Standards.

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

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

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	3,618	749	3,046	106.17%
2. Safe Haven (SH) beds	25	0	25	100.00%
3. Transitional Housing (TH) beds	1,126	325	809	101.00%
4. Rapid Re-Housing (RRH) beds	906	162	809	108.74%
5. Permanent Supportive Housing (PSH) beds	2,960	26	2,842	96.86%
6. Other Permanent Housing (OPH) beds	15	0	15	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 V.B.3.c.

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

1)The IN-502 HMIS lead has taken numerous steps to enhance HMIS participation for the project types below 85% in the reporting period. We have increased ES coverage from 75% to 84% in the past year. We also engaged in the VA HOMES data integration, and have increased the PSH utilization rate from 72% to 97% in the reporting period. The HMIS expansion funding beginning on 10/1/23 will directly address HMIS utilization and network training around using data to end homelessness. In the next 12 months, the IN- 502 HMIS lead will continue to work with regional chairs and other local stakeholders to identify organizations from the 2023 Housing Inventory Count submission that do not use the system, and through progressive engagement, work to bring them on the system. 2) The HMIS Lead continues to identify organizations and publicize our services for a more complete picture of housing stock in the IN-502. IHCDA continues to struggle with faith-based organizations' refusal to utilize the IN BoS HMIS system in ES/TH project types, our only types below 85%. IN-502 has no user fees associated with access to the system. For PSH projects, the HMIS Lead continues to work with the IHCDA real estate division and the PSH Institute to bring more projects on to the system. The HMIS Lead continues to support the Coordinated Entry workgroup and prioritization lists, and works with providers in this capacity, who do not access the HMIS workgroup of the system. Finally, our Homeless Health Infectious Disease team, among other youth and DV focused IHCDA staff, are deploying to local shelters, taking PIT count/HIC count to local shelters/health departments to inform and encourage engagement in PIT/HIC and participation in the system.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	No

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

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

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

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

	Enter the date your CoC conducted its 2023 PIT count.	01/25/2023

2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/27/2023

2B-3.	PIT Count–Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

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

(limit 2,500 characters)

1)CA held our Point-in-Time Coordinators meeting in Oct 2022 to encourage involvement with youth count planning and outreach. Along with ESG-CV outreach, YAB coordination with PIT planning, and educating and engaging on why counting youth is important to local stakeholders, the counts saw an increase in all urban centers and unsheltered for youth. IHCDA utilized You Team navigators to market the PIT count to youth services organizations to have the most robust youth count ever. We also brought on a new RHY organization, as well as working with existing partners for effectively counting youth. We shared the PIT information with the youth navigators, and they participated and shared that information within the regions they navigate to capture youth who are experiencing homelessness   . To engage unaccompanied youth and youth serving organizations in our 2023 PIT count planning process, the IN-BoS 502 conducted a meeting with all 16 Point-in-Time Coordinators. This meeting addressed the importance of engaging youth serving organizations through ESG-CV outreach and YAB coordination through youth navigators by providing youth navigators with PIT information, so they can engage youth in their community and inform the McKinney Ventos of how they can participate in the count. 2) CA also worked with unaccompanied youth, youth advisory board, and youth serving organizations, to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and having better outreach led to more counties participating in a wide geographic region of 91 counties and 16 regions, we were able to contact 52 more youth during the night of the count compared to 2022.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	

	In the field below:
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and
3.	describe how the changes affected your CoC's PIT count results; or
4.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2023.

(limit 2,500 characters)

1)Point-in-Time Coordinators and designees entered their PIT count data in HMIS, ran PIT reports to confirm their numbers, and sent us those reports via our helpdesk. This ensured we had better data quality and a much more accurate count. This also helped with having less back and forth and a more streamlined way of verifying the numbers and answering specific questions or concerns if any arose. This prevent any over or under counting and local verification before HUD submission. CA was stricter with pit report submissions reviewed by the agencies, and by the due date. Doing this helped with reducing data quality errors. CA created a how to guide for running and reviewing the PIT report that was implemented for the first time in 2023, this helped with reducing and correcting sheltered data in the system.CA also held 2 office hours sessions, as well as a training, around entering this data correctly and accurately. 2) CA had 17 more counties provide unsheltered data in 2023. This is due to better outreach and partnerships with counties that did not participate in the past. A change in our methodology was implemented through an online version of the survey, which helped collect over 123 responses, across 3 regions and 15 counties, as well as reduced waste of paper surveys for unsheltered and non HMIS participating projects. 3) BoS count increased by 19%, and our unsheltered count increased by 35%. CA had 17 more counties provide unsheltered count data compared to 2022. CA also increased the utilization rate from 78% to 81%. 4)NA

2C. System Performance

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

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

2C-1.	Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	

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

(limit 2,500 characters)

1)IN-BoS uses data from the CE assessment to identify emergent needs for individuals and families experiencing homelessness for the first time. The assessment conducted this year will be released in September 2023, and we plan to include evaluation of the diversion component in CE to be a part of future CE assessments. 2)Addressing 1st time homelessness in the BoS includes creating capacity for housing problem-solving conversations within homeless responses system, and to increase resources to address housing barriers and exits from other systems. We prioritized building diversion strategies in 2022-23. First, the HMIS Lead has worked to address data quality across the homeless response system, and as the CoC has a more accurate picture on 1st time homelessness, a collaboration between funded partners and RCE Leads will inform ongoing strategy development. The CoC encourages local RCE Leads and RPCs to incorporate diversion into their local planning efforts and strategies, but this year the CA brought additional training on diversion to the network including sessions at fall Development Day and a three-part webinar series in spring 2023. Providing training to support capacity is part of this strategy, and the second component is supporting the case management staffing in homeless prevention programs. IHCDA, the CA, is also the ESG-CV sub-recipient and prioritized RRH and HP funding in the of ESG-CV in 2022. As individuals and families continued to struggle with the economic impacts of COVID-19, the ESG-CV funds invested in HP over the last three years total more than $15 million and served more than 5,123 people. IHCDA also operates HOME ARP, TBRA and other programs that can serve those at risk of homelessness, and these programs have are currently increasing their investment in housing programs that can serve individuals exiting to homelessness from other systems, especially incarceration. The CoC has also revamped their CE assessment tool this year. The new tool, which will launch in 2023-24 incorporates diversion into the process, and all CE Assessors will be trained in the tool and the housing problem solving approach. 3)The Performance & Outcomes Committee (P&OC), which is co-chaired by 2 CoC Board members and supported by CA staff, will be responsible for overseeing the strategies to address 1st time homelessness.

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

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

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

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

	In the field below:	
1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	

	3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

1) The CE committee, CE assessment work group, RPC/RCE Leads reviewed length of time (LoT) data regularly to identify systemic issues that may impact referrals to housing, and the CE assessment will also provide insights. HMIS Lead reviewed project-level data and lead data quality sessions to support providers in correcting their data to reflect LoT more accurately. The P&OC prioritized addressing this problem accurate data could be used for deeper evaluation. Training was hosted for multiple project types to ensure accurate housing move-in dates. P&OC worked with HMIS lead to close inactive projects. The IN-BoS HMIS serves many non-HUD funded programs, which were the sources of these data errors. The improvements in data quality were key in the reduction from 114 days in 2021 to 110 days in 2022. The CoC also assessed LoT in the CE process. The CoC Network Liaison reports weekly to CA leadership and monthly to RCE Leads and RPCs about the LoT individuals spend from assessment to referral. This year, the team focused on closely coordinating with RCE Leads on assessments in the last 90 days and the results of those assessments. Two issues were identified: capacity to perform follow-ups on households that had not been connected to housing, and lack of housing resources in many regions. RCE Leads share that a lack of housing programs or affordable housing resources make it difficult to move folks through CE. As a part of the CE assessment, clients that did not receive a referral to housing were included in listening and feedback sessions to help learn more about why referrals did not occur or why referrals were not successful. 2)The CoC's evaluation of LoT data in CE identified that 3)The complexity of addressing LoT and the multiple factors at play, indicate that a multi-pronged approach with several strategies will be important for the CoC next year. The CoC Board and its committees will be responsible strategies to reduce LoT. Priority for 2023-24 is maintaining and increasing inventory and addressing CE process barriers that may cause households to have an increased LoT. CE assessment will provide strategies in their report released September 2023. The new landlord engagement group will build relationships and capacity to identify additional units. F&RC will work with the YAB to identify new housing resources and evaluate project applicants. Finally, P&OC will continue to evaluate data on length of time and advise the CoC board on strategies additional.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing–CoC's Strategy	
	NOFO Section V.B.5.d.	

		In the field below:
	1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
	2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
	3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

(limit 2,500 characters)

1)The CoC strategies to increase the rate of PH across ES, SH, TH and RRH programs are: improving CE access, increasing resources for PH, landlord engagement, and improving services to support long-term housing stability. P&OC also identified that data quality was an issue in our housing rate, and deployed the HMIS team to engage in training and technical assistance to address missing move-in date and exit destination information. This was especially important in ES and TH projects where exit destination data was not accurate. This resulted in an increase of 1,500 households exit data reported, but we were pleased that the increase only resulted in a 9% increase in exits to homelessness. As a part of the CE assessment revamp, RCE Leads is working alongside the statewide CE Lead to implement more decentralized CE, which will be especially important in rural communities. The CoC is launching two new work groups, both starting September 2023, to develop and implement strategies to improve PH exits: Landlord Engagement Task Force (LETF) and Support Services Committee (SPC). LETF was called out in the CoC's strategic plan to build capacity of the CoC and partners to recruit landlord partners. The group includes housing providers, developers, and PLE. SPC was developed because of the strategic plan to help create more parity between programs across the BoS, improve project quality, and engage in meaningful policy development for all housing program types. 2)The CoC ramped up efforts to engage moving-on vouchers as the primary strategy to support PH outcomes and exits to PH for households that need an ongoing subsidy. The CA grants team collaborated with the statewide PHA to revamp moving-on referral materials and processes. The BoS has had access to moving-on vouchers since 2019, but due to staff transitions at partners and the burden of the pandemic, the process was not effectively rolled out to providers. This year we hosted 3 training session webinars (February, March and May 2023) which were also recorded/transcribed and posted online, and also expanded moving-on voucher access to households that receive RRH-only assistance. This is important to the CoC because IN BoS has no PSH for DV survivors, and we wanted to ensure that survivors had access to moving-on. 3)HMIS Lead will continue to evaluate and ensure data quality from exit for all programs is high. SPC of the IN-BoS will be responsible for overseeing the CoC strategies on retention and exit to PH.

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

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

(limit 2,500 characters)

1)P&OC reviews return to homelessness (RtH) data in Stella P to understand which indiviudals and families are most likely to RtH. They identified that there are racial disparities in our RtH outcomes. The HMIS Lead also noted that overall exits to PH decreased, but our overall percent RtH nearly stayed the same. RtH data indicates that agency capacity, quality of services, and racial disparity are causing issues in our outcomes. 2)The CoC continues to prioritize increasing exits to PH as a part of the larger systemic issues, but also understands that addressing RtF cannot be delayed. In recognition agency capacity and quality of services with F&RC to evaluate with all CoC funded projects on their RtH outcomes in the annual CoC competition. Projects that do not meet 65% of the maximum points scored are referred to P&OC to help those agencies develop and execute a performance improvement plan. Outside of CoC funding, the SPC will be working to identify specific action steps to address capacity and quality of services. The committee will propose training sessions, policy changes, and advise the Board on potential funding and resources gaps that are impacting services. This year the CoC hosted multiple trainings to help support partners identify local partners and community supports that can assist households after the exit housing programs. Community Action Agencies (CAA), Area Agencies on Aging, employment services, and mainstream benefit programs participated in several training in November 2022 and May 2023 Development Day events and these sessions were posted as recorded/transcribed webinars. The Board is developing DEI strategies currently and will be evaluating policies and practices for potential disparity for black/brown households and working alongside SPC to make additional changes to CoC policies. DEI work will also inform the CoC advocacy strategy this year. Eviction data in Indiana indicates that black single mothers are most likely to experience eviction, and the Board's DEI committee alongside the P&OC examination of Stella P data will continue evaluating RtH. We anticipate that RtH will be a key outcome that the CoC examines in the upcoming racial equity analysis we are planning for 2023-24. 3)The CoC Board and its SPC and P&OC will lead the oversight of RtH strategies, with support from the DEI committee.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section V.B.5.f.	

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

(limit 2,500 characters)

1)IN-BoS engages employment services partners statewide, and utilizes training and partnership between programs to implement strategies. Strategies include: building collaboration between housing and employment to decrease barriers to access, advocating for access to employment programs, educating partners on employment services. IHCDA, the CA, works with several state agencies that understand and partner with us on the intersection of employment issues and housing instability, including IN Dept of Workforce Development (DWD) and IN Commission on Higher Education (CHE). DWD provide HSE and post-employment training through JAG, Next Level Jobs programs, and Work One centers positioned across the IN-BoS. The CA has co-located staff at Work One centers in our healthcare and education navigators, and staff are connected to local resources and coordination opportunities. The Next Level jobs program offers 50 certificate training programs free of charge and are an excellent resource for partners to access through their online portal and in-person resource centers at Ivy Tech Community College locations. Additionally, the program directly connects participants with job openings in their local community through the online portal. CHE's 21st Century Scholars program provides free college tuition to low-income households, and foster youth are automatically enrolled in these benefits. CHE has considered the difficult issues that arise when a young person is experiencing homelessness and waived enrollment steps for youth and young adults who are experiencing homelessness or housing instability. In addition to partnerships, the CoC provides support to address employment income for individuals experiencing homelessness. The CoC evaluates projects on increasing income in the annual competition. It hosted an income panel discussion at the May 2023 Development Day and posted the recorded/transcribed session online. CoC partners are engaged in funding veteran's employment service programs & employment first programs through the State's mental health centers and access to job placement services for individuals on Indiana Medicaid through the MCO. The HMIS Lead and CA evaluate data regularly and offer office hours on data quality to help partners understand the role of intake/annual assessments in reporting income information. 3)The SPC and CA grants team are responsible for overseeing the strategy to increase employment income.

2C-5a.	Increasing Non-employment Cash Income–CoC's Strategy	
	NOFO Section V.B.5.f.	

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

(limit 2,500 characters)

1)In 2022-23 the CoC prioritized providing training in this area as the main strategy to address benefit income because of the significant staff turnover experienced in partner agencies since the pandemic. Training opportunities were presented at Development Day in November 2022 and May 2023 which included presentations and panels from TANF, WIC, SNAP, and SOAR. We also provided a SOAR specific session in April 2023, and all these presentations were recorded/transcribed and posted online. The CA continues to strengthen relations with state FSSA, and IHCDA will be implementing a TANF housing program in late 2023. Part of this collaboration will be discussions of how to increase childcare voucher access for households with housing instability, which has previously been a barrier because households need a continuous mailing address to apply and recertify their eligibility. The SOAR statewide lead provided an overview of SOAR, how to identify whether clients would be a good fit and offered cohort sessions to certify staff at partners in SOAR. The CoC also engaged in several marketing pushes through our newsletter service to educate and remind partners about the need to re-enroll in programs since pandemic era policies have ended. CoC and ESG projects are evaluated in their project applications on their partnerships with benefit income providers, and how well the increase income for clients. The CoC will continue to assess programmatic efforts to access and gain non-employment income or mainstream benefits and reports data quarterly within P&OC. Based on this data, P&OC will advise SPC on opportunities to target support and build strategies to increase income 2) The SPC will be responsible for the new strategies to address non-employment income.

3A. Coordination with Housing and Healthcare

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

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes

3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes

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

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

Project Name	Project Type	Rank Number	Leverage Type
Permanent Support...	PH-PSH	62	Healthcare
Family Promise of...	PH-PSH	61	Healthcare
Sheltering Wings PSH	PH-PSH	64	Both
LTHC Renewed Hope...	PH-PSH	66	Healthcare

3A-3. List of Projects.

1. What is the name of the new project?   Permanent Support Housing Expansion SESW

2. Enter the Unique Entity Identifier (UEI):   NN8CLFUP21H7

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 62

5. Select the type of leverage: Healthcare

3A-3. List of Projects.

1. What is the name of the new project?   Family Promise of Hendricks County Permanent Supportive Housing

2. Enter the Unique Entity Identifier (UEI):   CR1CGFPLLNM5

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 61

5. Select the type of leverage: Healthcare

3A-3. List of Projects.

1. What is the name of the new project?   Sheltering Wings PSH

2. Enter the Unique Entity Identifier (UEI): K3KGU2EXG616

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 64

5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? LTHC Renewed Hope PSH Apartments

2. Enter the Unique Entity Identifier (UEI): QMGEBLVXN517

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 66

5. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

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

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

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

(limit 2,500 characters)

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

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

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

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

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

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

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

(limit 2,500 characters)

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

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

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

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

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

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

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

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

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

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

1.	Enter the number of survivors that need housing or services:	1,114
2.	Enter the number of survivors your CoC is currently serving:	261
3.	Unmet Need:	853

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(c)	

	Describe in the field below:	
1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and	
2.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or	
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.	

(limit 2,500 characters)

1)The CoC examined how many individuals reported being DV survivors in the IN-BoS reached out for housing assistance across the state and compared it to the number of DV survivor households that received housing and services through TH-RRH and RRH. The total need data was particularly examined because the survivors reported a need for housing assistance. 2)The data source used for total housing needs for survivors is from the Indiana Coalition for Domestic Violence (ICADV), and is from their dedicated DV hotline. The data on the number of survivors currently served is from our HMIS DV Client Track system, and includes DV survivors served by TH-RRH and RRH in the CoC. The time-frame evaluated is 10/1/22-8/31/2023. 3)In a review of the data, we identified that DV survivors had longer waits for PH referral, primarily due to lack of resources and access to supportive services for survivors. This is especially true in our rural communities. In discussing the housing needs with VSPs, we noted that lack of safety, legal barriers, and the need for empowerment services to help survivors overcome trauma related to economic, mental, and physical abuse, were key problems that needed to be addressed. The proposed TH-RHH project offers safe crisis housing while connecting survivors to housing and to offering needed services in the IN-BoS.

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

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

Applicant Name
Indiana Housing a...

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

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

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

1.	Applicant Name	Indiana Housing and Community Development Authority
2.	Project Name	IHCDA
3.	Project Rank on the Priority Listing	69
4.	Unique Entity Identifier (UEI)	PW8WAKF1KWG9
5.	Amount Requested	$785,565
6.	Rate of Housing Placement of DV Survivors–Percentage	45%
7.	Rate of Housing Retention of DV Survivors–Percentage	66%

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

	For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:	
1.	how the project applicant calculated both rates;	
2.	whether the rates accounts for exits to safe housing destinations; and	
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).	

(limit 1,500 characters)

1)The HMIS data examined by the CoC compared how many DV survivors' households were seeking housing and services through CE assessments to the number of DV survivor households received housing and services in TH-RRH and RRH programs. The period evaluated was August 1, 2022-August 1, 2023. The number of households seeking assistance according to CE data is 576. The number of households served by TH-RRH and RRH projects was 261 survivors. The housing placement rate is 45%. In reviewing the 261 households served by TH-RRH and RRH projects, 171 of them exited to a positive destination (66%). 2)The CoC evaluated all positive exist destinations and did not include exits to any other location in our definition of the calculation of "safe housing". In discussions of housing outcomes with VSPs, this was identified as the most appropriate and best exit outcome for survivors. 3)Both sources of data were from our CoC's HMIS. The CE data was calculated from CE enrollments with assessments for housing. The DV housing data is from our DV Client Track system, which is an HMIS that is operated by the HMIS Lead Agency. The CoC examined CE data and APR data for currently funded RRH and TH-RRH projects in the IN-BoS that serve survivors of domestic violence. This data was identified as best aligning with the funding request in the DV Bonus application.

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

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

(limit 2,500 characters)

1)DV Survivors experiencing homelessness in the IN-BoS are immediately connected to advocacy services through the ICADV hotline and 211. Advocates are connected to CE either as a CE assessor, or by direct referral to an assessor in their region. Advocates support survivors and make the warm hand-off to the local DV housing provider (DVHP), unless their agency is also the local DVHP, and ensure safety needs are met. Addressing immediate safety and then connecting to PH are the goals. 2)Across the BoS, DVHPs coordinate with Regional CE Leads (RCE Lead) to complete assessments ASAP. CE prioritizes survivors in the assessment, through the lethality assessment, and gives support to Emergency Transfer Plans (ETPs) before/after PH referral. In accordance with CoC and CE policies, all survivors are informed of their rights under VAWA and the opportunity to activate an ETP, if necessary. When it is activated, survivors work alongside their DVHP to connect to the appropriate RCE Lead, whether they need to move to another project or across the state. 3)DV housing providers (DVHP) create the housing plan (HP) with each client. They are directed by the survivor so that they define their housing needs and services. DVHPs use a family development matrix to assess needs for the HPs. All HPs include a safety plan, even if the client does not choose to engage shelter or housing services, and these tools are available to the survivor to help them make safe choices for their household. 4)Survivors are connected to services across the IN-BoS through DVHP advocates. These staff are tremendous resources for accessing mainstream benefits, healthcare, insurance, employment, law enforcement, etc. Partners also work with local housing agencies and the statewide PHA to refer households to voucher programs when ongoing assistance is needed. 5)Accessing PH units that are safe, affordable, and align with the survivors' needs is always a part of the HP. Locating the affordable units in rural communities has been especially difficult, which is why transitional housing has been an important strategy. Building landlord relationships, addressing legal and economic barriers to stability, and empower survivors by allowing them to define their vision for PH and how to get there are successful strategies employed across the BoS. DVHPs also provide connections to community and support/empower survivors build new communities that will provide future safety and support after assistance ends.

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

	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;
2.	making determinations and placements into safe housing;
3.	keeping information and locations confidential;
4.	training staff on safety and confidentially policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

1)DV Survivors experiencing homelessness in the IN-BoS are immediately connected to advocacy services through the ICADV hotline and 211. Advocates are connected to CE either as a CE assessor, or by direct referral to an assessor in their region. Advocates support survivors and make the warm hand-off to the local DV housing provider (DVHP), unless their agency is also the local DVHP, and ensure safety needs are met. Addressing immediate safety and then connecting to PH are the goals. 2)Across the BoS, DVHPs coordinate with Regional CE Leads (RCE Lead) to complete assessments ASAP. CE prioritizes survivors in the assessment, through the lethality assessment, and gives support to Emergency Transfer Plans (ETPs) before/after PH referral. In accordance with CoC and CE policies, all survivors are informed of their rights under VAWA and the opportunity to activate an ETP, if necessary. When it is activated, survivors work alongside their DVHP to connect to the appropriate RCE Lead, whether they need to move to another project or across the state. 3)DV housing providers (DVHP) create the housing plan (HP) with each client. They are directed by the survivor so that they define their housing needs and services. DVHPs use a family development matrix to assess needs for the HPs. All HPs include a safety plan, even if the client does not choose to engage shelter or housing services, and these tools are available to the survivor to help them make safe choices for their household. 4)Survivors are connected to services across the IN-BoS through DVHP advocates. These staff are tremendous resources for accessing mainstream benefits, healthcare, insurance, employment, law enforcement, etc. Partners also work with local housing agencies and the statewide PHA to refer households to voucher programs when ongoing assistance is needed. 5)Accessing PH units that are safe, affordable, and align with the survivors' needs is always a part of the HP. Locating the affordable units in rural communities has been especially difficult, which is why transitional housing has been an important strategy. Building landlord relationships, addressing legal and economic barriers to stability, and empower survivors by allowing them to define their vision for PH and how to get there are successful strategies employed across the BoS. DVHPs also provide connections to community and support/empower survivors build new communities that will provide future safety and support after assistance ends.

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

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

(limit 2,500 characters)

IN-BoS DVHPs define safety with each survivors in their safety plans and at the direction of the survivors own experience. Our partners report that they use client surveys, client interviews, case management assessments to identify how well they are addressing the safety needs of each survivor. Data for surveys is aggregated and reviewed by each agency to help identify trends or report barriers and issues to external partners like their local RCE Lead or Regional Planning Council (RPC). Within their region and in the broader CoC, the issues that have been reported related to safety were included in the new CE and lethality assessment tool that will launch in Sept 2023. Partners also created new programmatic processes, including the maintenance liaison policy mentioned previously and have reached out for funding to help cover increasing security at some agencies. Current DV THRRH projects requested an increase in operations funds through a permanent budget modification and the new DV THRRH project proposed by IHCDA includes VAWA costs to address safety too. DVHP report using data from local law enforcement based upon calls or touches from law enforcement with clients. In rural communities, the strong partnership between law enforcement and DVHPs allow them to evaluate whether there are specific needs being identified in those calls and touches that need to be addressed in the safety plan or in policies at an agency level.

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

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

(limit 5,000 characters)

1)DVHPs believe in empowering survivors to direct their vision, goals, and measures of success. PH is included in this as a part of their housing and safety plans. Clients are offered PH and supported to plan for safety in PH, but survivors can also choose short- or medium-term housing through TH. This is typically the preference when the survivor feels safest in the TH environment or if there is not sufficient safe shelter in a community. 2)Agencies establish and maintain environments of mutual respect by empowering survivors, training staff on trauma regularly, and fostering organizational cultures based on eliminating power dynamics between staff and clients. Recognizing that survivors experiences in engaging in services may include past trauma, the CoC contracted with ICADV to provide training on the topic. Agencies received training from ICADV in 5/2023 on how to encourage voluntary services without penalties and all partners reported an increased understanding on the topic. 3)DVHPs implement practices that inform survivors on the broad issues of trauma, and provide education on specific trauma-informed care topics. Partners support clients in mapping their experiences to understand their trauma and encourage and empower them to see how their power and control has changed since they entered the program. 4)DVHPs use strengths-based approaches to assess client needs through the family development matrix and self-sufficiency matrix. Partners report the value in using these tools not just for assessment but in ongoing case management practices so that clients can see their growth over time, including when they faced set-backs on their goals. DVHPs report that showing a survivor their successes and challenges supports the empowerment of the survivor. 5)DVHPs are responsive to the culturally specific needs of survivors in their programs and offer appropriate services such as translation and language access, adopting and implementing non-discrimination and anti-racist policies, and provide training on cultural competence. The CoC provided a number of trainings that included DVHPs on the issues of racism in housing, racial disparities, and trauma informed care at our CoC Development Day events in November 2022 and May 2023. The CoC also hosted Equal Access training in spring 2023, and required all CoC funded partners including DVHPs to attend. The training was recorded and transcribed, and made available on the CAs website for new staff at agencies to review. 6)DVHPs connect participants to one another through a variety of opportunities. Building community and mentoring is common across partners, and they describe the valuable relationships survivors create with one another as important to their safety and stability. Survivors may lose their previous support networks when they flee and these new relationships become significant sources of support for individuals. Agencies report success in groups that they facilitate for peer engagement, as well as the success of groups that survivors establish and facilitate for themselves in addition to offered peer programming. Staff are made available to these groups to provide support, as needed. 7)Supporting survivors in addressing how their trauma may impact their daily life is a large component of services offered by DVHPs. Partners shared that understanding how abuse impacted all aspects of life from: employment, education, domestic life, parenting, credit, relationships and that providing supportive environments to address these topics is key. Training and peer groups on these topics are held by DVHPs in the IN-BoS Access to legal services has also been reported as necessary for many survivors who have criminal history, and expungement services in particular reduce barriers to housing and employment.

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

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

(limit 5,000 characters)

DVHPs provided supportive services to assist survivors as they move quickly into PH. Services were provided directly, through in-kind contributions from partners, via contracted services, and via peer supports. The funding requested in the DV ThRRH program reflects the services funding needs based on feedback from DVHPs in the IN-BoS. The types of services each survivor engages in are directed by them and their needs including safety considerations. Partners use on-site co-located services to address safety concerns, especially for survivors in TH programs. Another strategy used to offer their own community-based services is in co-located office spaces with mainstream benefits programs (TANF/WIC/SNAP), employment services or even libraries. DVHPs reported that they often provide their crisis DV support in generically marked office space in these facilities so that survivors can safely access project services in a place that they identify as safe for them. This is especially true in rural communities where DVHPs may be serving multiple counties and not have an office location, or when the survivor can't safely travel out of county because they lack transportation. The CoC heard this concern from providers and offered mini-grants for DVCE services, especially transportation, so that clients that may not have access to transportation services from a specific housing program can access services easier and safer. Housing search and counseling is an expanding service offered to survivors in the BoS. Partners offering RRH and THRRH report that since they began their programs in 2018, they have coordinated with local homeless service providers to learn landlord engagement skills from non-DV organizations and have started modeling local best-practices and staffing around housing search and counseling. Long-term housing stability and safety is a core component of services offered to survivors by DVHPs. All HPs include safety plans and are developed using a strengths-based approach that is designed to empower survivors and support their own power and control over their goals and outcomes. Partners use progressive engagement to evaluate level of housing and supportive services in partnership with the survivor so that they can safely obtain, maintain and stabilize in permanent housing. Agency staff engage in regular budgeting and financial stability conversations along with educational programming on budgeting and financial trauma that survivors experienced to help them identify strategies to move forward. Legal supportive services were reported by DVHPs to be critical to serving survivors. Limited access to pro-bono resources for legal aid, and the time-sensitive nature of many DV related issues (ex: child custody, protective orders, divorce, financial concerns, criminal history often related to DV experience), make paid legal support necessary to overcome barriers to housing and employment. Partners report providing educational supports, employment coaching, and job-training resources, especially in communities where licenses and trade-skills that can be gained from local community college or job training programs can result in immediate gainful employment. This included advocates supporting access to some educational and training programs by negotiating alternative program requirements when mandatory attendance policies were preventing survivors from completing programs. This advocacy work meant that clients have gained access to HSE or completing training that, upon completion, guaranteed full-time employment at $18 an hour in local manufacturing plants. Across the BoS, DVHPs have relationships with their local mental health provider and substance use disorder treatment facility. MOUs that allow a survivor to access services for mental health and addictions are common across the state. Finally, DVHPs utilize peer supports, peer groups, and mentorship programs to implement their strengths-based programming. Providers note that peer groups related to unique experiences of survivors, including special interest groups, build

resiliency and confidence among clients. Groups described by providers include parenting supports, mental health, addictions recovery, DV trauma recovery, women/people of color support groups, etc. DVHPs shared that these groups may be facilitated by staff, program alumni, or current participants, and they are survivor-directed in what particular topics are covered through educational sessions or peer to peer discussions.

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

	Describe in the field below examples of how the new project(s) will:
1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths–for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1)IHCDA is applying for DV THRRH funding on behalf of DVHPs in IN-BoS. DVHPs engaged in listening sessions and through responses and performance data, we understand the funding needs of potential funded partners. IHCDA will select projects through RFP that (a) empower survivors and allow them to direct their HPs, safety plans, vision and goals; (b) are committed to housing first and rapidly housing survivors based upon their preferences, including safety (c) protect confidentiality and privacy and provide regular training on and implement policies that are trauma informed, Housing First, culturally inclusive, and align with best practices in DV housing and services. Prioritizing placement for clients in the housing option of their choice will be completed in coordination with current referral practices, and in accordance with the new CE policies and procedures that the IN-BoS CoC will implement beginning fall 2023. These new CE policies and assessment tool were created with involvement from DVHPs, and individuals with lived experience. We will continue to evaluate CE data on DV survivors in IN-BoS to assess how well partners are connecting survivors to housing, and the project sub-recipients will be evaluated on their PH outcomes annually. 2)DVHPs reported practices designed to reduce or eliminate power dynamics, and all attend annual training offered by ICADV to help them evaluate their policies and procedures that may negatively impact the relationship with survivors. Creating an atmosphere of mutual respect was reported by these partners to be a part of not only their policies, but their organizational culture. As potential recipients of funding, projects housing first practices will be/are currently assessed annually. This year the CA (IHCDA) collected all housing first policies from CoC program applicants to help us assess their alignment with the housing first philosophy. We will continue to assess housing first for DV THRRH partners in the future. 3)As a part of receiving DV Bonus funding, IHCDA requires DVHPs to participate in all ICADV trainings, and all sessions are recorded/transcribed and available to partners for staff to attend. Our training calendar with ICADV is directed based on an annual review of DV training needs based on the renewal project application, DVHPs preferences, board and committee priorities, and trends in findings/concerns noted by IHCDA monitoring. Trainings of trauma informed care, providing low-barrier services, VAWA rights and protections, and best practices in DV housing programs will continue to be required annually, including any newly funded partners for this THRRH project. As partners continue to grow their knowledge on how to address trauma through various BoS training sessions, we will support and incentivize educating survivors on trauma and related topics. 4) DVHPs use a strengths-based approach, and we will evaluate new sub-recipients to ensure this continues. Partners report that survivors defining the vision and goals is a core component of offering services, and we will promote this practice with sub-recipients in the selection and implementation of new THRRH projects. This is particularly demonstrated in the funding requested in the new project application for sufficient case management supports to households served in the project. 5)This year the CA offered Equal Access Rule training to the CoC in spring 2023, required all CoC funded partners to attend, and provided CoC-wide trainings on racial disparities and trauma informed care at CoC Development Day events in 11/22 and 5/23. Partners were assessed in the 2023 competition funding applications for their efforts to address racial equity issues, reflect the diversity of the community they served, and on the policies the agency implements related to non-discrimination, DEI, and anti-racism. In 2023-24 and beyond, in accordance with the CoC strategic plan, we will be expanding the trainings and best practices recommendations for all CoC partners, including DVHPs, in the areas of cultural competency and addressing DEI issues. 6)DVHPs funded for RRH and THRRH report the value-add from

peer supports, mentoring, and peer group sessions. Partners selected for funding will be required to describe how they plan to engage individual with lived experience, empower survivors in their programs, services, and 1x1 housing and safety planning. DVHPs will expand their efforts to provide peer supported housing and stabilization services at the direction of the survivors in their programs. 7)The multi-faceted trauma experienced by DV is recognized by DVHPs, and addressing the economic, life-skills, parenting, legal, employment, education, etc. trauma is a part of the services offered currently. These services will continue and expand under the DV THRRH funding. The project application for DVRRH submitted this year requests funding to address the services costs that DVHPs reported as under-resourced in their communities.

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

		Describe in the field below how the new project will involve survivors:
	1.	with a range of lived expertise; and
	2.	in policy and program development throughout the project's operation.

(limit 2,500 characters)

1)The DVHPs that will apply/be selected for DV THRRH funding engage survivors in their programming and in the development of their project policies. This can first occur through surveying 1x1 case management, or peer group listening sessions where staff are not present. Next, agencies recruit alumni or clients in stable and safe situations to serve on board committee or staff positions. Finally, project alumni or survivors referred from other partners are recruited to serve on the agency board. DVHPs report that the engage survivors with a variety of experiences in backgrounds including race, gender identity, sexual orientation, SMI, and SUD serve on staff and boards. 2)Findings from surveys, case management and peer groups sources result in policy changes, training for staff, new resources or partnerships, and new peer support offerings in projects. Engagement from staff and board leadership have strongly influenced new partnerships, strengthening the peer-support programming, identifying policy and procedure gaps, and recognizing new resources for the agency to pursue to address gaps. The CoC provides , and will continue to provide training, in this area for all partners and in coordination with ICADV for DVHPs in the IN-BoS.

4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/25/2023
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	09/25/2023
1D-11a. Letter Signed by Working Group	Yes	Letter Signed by ...	09/26/2023
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	09/26/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Web Posting of Lo...	09/26/2023
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/23/2023
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	09/26/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/23/2023
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/23/2023
1E-5b. Local Competition Selection Results	Yes	Local Competition...	09/26/2023
1E-5c. Web Posting–CoC-Approved Consolidated Application	Yes		

1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HUD's Homeless Da...	09/25/2023
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	09/26/2023
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/26/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web Posting of Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: HUD's Homeless Data Exchange (HDX) Competition Report

Attachment Details

Document Description: Housing Leveraging Commitments

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/15/2023
1B. Inclusive Structure	09/25/2023
1C. Coordination and Engagement	09/25/2023
1D. Coordination and Engagement Cont'd	09/26/2023
1E. Project Review/Ranking	09/26/2023
2A. HMIS Implementation	09/26/2023
2B. Point-in-Time (PIT) Count	09/26/2023
2C. System Performance	09/25/2023
3A. Coordination with Housing and Healthcare	09/26/2023
3B. Rehabilitation/New Construction Costs	09/26/2023
3C. Serving Homeless Under Other Federal Statutes	09/22/2023

4A. DV Bonus Project Applicants	09/26/2023
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

IN-502 Indiana Balance of State
PHA Homeless Preference
Largest PHA in BoS- IHCDA
(see highlighted section)

			is not readily apparent it must be verified through a letter from a knowledgeable professional or through an award letter for SSA Disability benefits. Disability is verified at time of selection from waitlist.
Family Member with a disability	An individual who meets the HUD definition of a person with a disability.	50	If disability is not readily apparent it must be verified through a letter from a knowledgeable professional or through an award letter for SSA Disability benefits. Disability is verified at time of selection from waitlist.
Youth Exiting Foster Care	Youth that Indiana Department of Child Services has certified to be at least 18 years and not more than 24 years of age who have left foster care or will leave foster care within 90 days and is homeless or is At Risk of Becoming Homeless.	50	At time of selection from the waitlist the applicant must provide a letter from Indiana DCS which certifies the applicant meets the preference requirements
Child Welfare Involved Families	A family that Indiana Department of Child Services has certified as a family for whom the lack of adequate housing is a primary factor in the placement of the family's child, or children, in out- of-home care, or in the delay of discharge of a child, or children, to the family from out-of-home care.	50	At time of selection from the waitlist the applicant must provide a letter from Indiana DCS which certifies the applicant meets the preference requirements

Each year IHCDA will preference no more than 100 applicant households referred by a homeless service provider through the Indiana Balance of State Continuum of Care (BoS CoC) Coordinated Entry (CE) system. This preference will be limited to applicants who are the first eligible family on their local Coordinated Entry by name list. Once IHCDA has issued vouchers to 100 households receiving the homeless preference referrals will stop being accepted until the next calendar year.

Moving On

Each year IHCDA will have a limited preference for households moving out of CoC supportive housing and participants in the IHCDA Housing First program. Household must have a letter of commitment and referral from a service provider to provide services to support the household in their transition. For CoC participants the service provider may not provide a referral until the tenant has resided in CoC supportive housing for at least one year. For Housing First participants the service provider may not provide a referral until the household is reaching the end of their eligibility for the Housing First program and the referral must include a letter from the Housing First program manager stating the participant is eligible for the Moving On limited preference. Services must include housing search assistance and assistance in understanding HCV program rules. This preference will be limited to the first 50 referrals in a calendar year.

Disability Definition in Section 223 of the Social Security Act (42 U.S.C 423)

The term "disability" means:

- inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months; or
- in the case of an individual who has attained the age of 55 and is blind (within the meaning of "blindness" as defined in section 416(i)(1) of this title), inability by reason of such blindness to engage in substantial gainful activity requiring skills or abilities comparable to those of any gainful activity in which he has previously engaged with some regularity and over a substantial period of time.

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 75 percent of the families admitted to the HCV program during IHCDA's fiscal year. ELI families are those with annual incomes at or below the federal poverty level or 30 percent of the area median income, whichever number is higher. To ensure this requirement is met, IHCDA may skip non-ELI families on the waiting list in order to select an ELI family.

Low-income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

Order of Selection

Families will be selected from the waiting list based on the targeted funding or selection preference(s) for which they qualify, and in accordance with IHCDA's

IN-502 Indiana Balance of State
PHA Moving On Preference
Largest PHA in Balance of State- IHCDA
(see highlighted section)

			is not readily apparent it must be verified through a letter from a knowledgeable professional or through an award letter for SSA Disability benefits. Disability is verified at time of selection from waitlist.
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Homeless Preference for Admission

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IN-502 Indiana Balance of State
Letter Signed by Working Group
(Please note, members returned signature pages back with hard signatures on separate documents. We are a Balance of State CoC and couldn't collect in-person signatures for the letter)

INDIANA BALANCE OF STATE
continuum of care

Committed to Housing Every Hoosier

Board of Directors

Pam Isaac, *Chair*
Howard County Government

Jennifer Layton, *Vice Chair*
Lafayette Transitional Housing
Center

WaTasha Barnes Griffin
YWCA of Central Indiana

Joshua Case
Hope of Evansville

Angie Ciski
Family Service Assn of Howard
County, Inc.

Joseph DeVito
IN Dept of Veterans Affairs

Leon Gordon
Bloomington Housing Authority

Lori Phillips-Steele
Corporation for Supportive
Housing

Emily Pike
New Hope for Families

Stephen Ralph
Evansville Christian Life Center

Melanie Reusze
RealAmerica Companies

Jordan Stanfill
Housing Opportunities

Lani Vivirito
Center for the Homeless

Beth White
Indiana Coalition to End Sexual
Assault and Human Trafficking

Myra Wilkey
MHA of West Central Indiana,
Inc.

Jarod Wilson
Foster Success

September 22, 2023

To whom it may concern:

The root causes of homelessness are complex and have been exacerbated not only by the pandemic but also by the continued crisis in housing affordability, rent inflation, and median home prices rising nearly 40% over the past two years. These factors have compounded the issues of poverty, health, and other household circumstances that affect individuals and families experiencing housing insecurity.

We, the undersigned, are active participants in the Indiana Balance of State Continuum of Care's (IN BoS CoC) ongoing efforts to engage people with lived experience (PLEs) of homelessness. We represent its commitment to a comprehensive strategy for addressing issues of homelessness through first-hand, real world insight and input from those who have lived these challenges. In the past year, the IN BoS CoC has demonstrated its pledge to engaging with PLEs by:

- Supporting leadership training for PLEs serving in a IN BoS CoC governance capacity,
- Increasing opportunities for input into designing a more effective coordinated entry system,
- Offering scholarships for PLEs to attend important training and development events,
- Restructuring its Board committees to increase participation of PLEs at all levels of its work,
- Integrating the Youth Advisory Board more fully to elevate their visibility and contributions,
- Publicly recognizing the leadership, contributions, and participation of PLEs.

We support the IN BoS CoC's priorities to serve individuals and families experiencing homelessness with severe service needs throughout the state. Building relationships with these individuals and families is essential to this process and allows for trust - and progress - to occur. It is critical that all areas of the homeless response system – including decision-making committees and work groups- be guided by the voices of people with lived expertise of homelessness. These strategies include lifting their voices and soliciting feedback from PLEs that inform the IN BoS CoC program design and implementation.

c/o Indiana Housing and Community Authority
30 South Meridian Street | Indianapolis, IN 46204
cocnetwork@ihcda.in.gov

We applaud the efforts that have already been made and outlined in this letter and throughout the Collaborative Application. We endorse the ongoing strategies and comprehensive approach that will ensure that the IN BoS CoC achieves its goal of ensuring every Hoosier is housed and obtains the permanent housing and supportive services they need to thrive.

The undersigned has been authorized to represent the interests of the IN BoS CoC Lived Experience Advisory Group.

Sincerely,

Stephen Ralph
Member, IN BoS CoC Board of Directors
Region 12

Kenny McIntyre
Member, Youth Advisory Board
Region 1/1a

Erik Jensen
Member, CE Assessment Taskforce
Region 8

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IN-502 Indiana Balance of State
Housing First Evaluation
(See highlighted sections)

Project Scoring Tools for Renewal and New Projects

Renewal Project Scoring Tool	
Eligibility- General Questions- 3 points	**Scoring Criteria**
1. CoC Engagement: (3 points total, 1 per question) • Did your agency participate in a Regional Planning Council between 7/1/22-6/30/23? • Did your agency send a representative to a Development Day event between 7/1/22-6/30/2023? • Did your agency attend an HMIS Coffee Talks, CoC training, office hours, or IRPA training between 7/1/22-6/30/23?	Yes = 1 point No = 0 points

Project Detail and Funding- 15 points	**Scoring Criteria**
1. Coordinated Entry: (5 points) • Did 100% of new clients enrolled in the project from 1/1/2022-12/31/2022 come from a coordinated entry referral?	Yes = 5 points No = 0 points
2. Funding Draw down (4 points total, for either option) • For direct-HUD funded projects: Did you make a draw at least quarterly in ELOCCS in your last closed-out project year? (FY2020) OR • For IHCDA sub-recipients: Did you make a monthly draw by the 20th of each month in your last closed out project year? (FY2020) i. For projects that started late due to contracting delays, you can indicate "yes" for this question.	Yes = 4 points No = 0 points
3. Report and Grant Agreement Submission (3 points total, 1 per question) • Submit signed agreements in a timely manner? • Submit required documentation (match letter, homeless representation, board resolutions) in a timely manner? • Submit required close-out reports by the deadline?	Yes= 1 point No= 0 points

Housing First-Low Barrier Access- 11 points Refer to the Housing First Checklist from USICH for more information and references. https://www.usich.gov/resources/uploads/asset_library/Housing_First_Checklist_FINAL.pdf.	**Scoring Criteria**
Attach a copy of your organizations Housing First policies. Please provide a copy of your organization's Housing First policies, or policies and procedures for your program.	Policies Attached= 5 points
a. Will/Does the project require clients to pass a background screening prior to project entry (excluding sexual offender/predator check)?	Yes = 0 points No = 1 points

b. Will/Does the project require all persons with specified criminal convictions on a blanket basis to be excluded from admission (excluding registered sexual offender/predator, and background screening imposed by other funders)?	Yes = 0 points No = 1 points
c. Will/Does the project require participants to be clean and sober for a specified period prior to project entry as a condition for admission?	Yes = 0 points No = 1 points
d. Will/Does the project serve individuals and families regardless of sexual orientation, family composition, or marital status and are transgendered persons served according to the gender with which they identify?	Yes = 1 points No = 0 points
e. Will/Does the project expedite the admission process including assisting in assembling necessary documents to support the application for admission?	Yes = 1 points No = 0 points
f. Does the project actively participate in coordinated entry including attendance at meetings and case conferencing and, if applicable, are all new project entrants being referred through coordinated entry?	Yes = 1 points No = 0 points

Housing First-Housing Retention- 5 points Refer to the Housing First Checklist from USICH for more information and references. https://www.usich.gov/resources/uploads/asset_library/Housing_First_Checklist_FINAL.pdf.	Scoring Criteria
a. Will/Does the project terminate participants for failure to participate in treatment or support services including case management?	Yes = 0 points No = 1 points
b. Will/Does the project terminate participants solely for engaging in substance use?	Yes = 0 points No = 1 points
c. Will/Does the project require participants to obtain earned or benefit income as a condition of remaining in the project?	Yes = 0 points No = 1 points
d. Will/Does the project make all efforts to avoid discharging participants into homelessness including referral back to coordinated entry for those who cannot remain in the project.	Yes = 1 points No = 0 points
e. Will/Does project require participants be held to standards/behaviors not found in mainstream leases (such as not being allowed visitors, curfews, required to do chores, or not be allowed to have alcoholic beverages in their unit)?	Yes = 0 points No = 1 points

Housing First-Participant Engagement- 4 points Refer to the Housing First Checklist from USICH for more information and references. https://www.usich.gov/resources/uploads/asset_library/Housing_First_Checklist_FINAL.pdf.	Scoring Criteria
a. Will/Does the project provide participant choice in accessing services and are efforts made to connect participants to community-based services?	Yes = 1 points No = 0 points
b. Will/Does the project provide regular opportunities for program participants to provide input on project policies and operations?	Yes = 1 points No = 0 points
c. Will/Does the project employ Person Centered Planning as a guiding principle of the service planning process? (Person Centered Planning focuses on the individual; what they would like to accomplish in	Yes = 1 points No = 0 points

	terms of relationships, community participation, achieving control over their lives, and developing the skills and resources needed to accomplish those goals.)	
d.	Are/Will the project staffed be trained in clinical and non-clinical strategies to support participant engagement including harm reduction, motivational interviewing, trauma informed approaches, and strength based?	Yes = 1 points No = 0 points

	Scoring Criteria
Performance Questions- 45 points The following performance questions are based on calculations from the Annual Performance Report (APR) data. **Please provide a copy of your APR from 1/1/2022-12/31/2022 with your submission.** *Note that some questions refer to participants/individuals and others are for households. Please check that you have selected the data from the APR that correctly refers to households or individuals.*	
HMIS- 10 points Based on the APR review tool, review the categories below and if the project can answer "yes" then it meets threshold: Q6a- Data Quality: Personally Identifiable Information • Are all errors rates below 5%? Q6b- Data Quality: Universal Data Elements • Are all errors rates below 5%? Q6c- Data Quality: Income and Housing Data Quality • Are all errors rates below 15%? Q6e- Data Quality: Timeliness • Are all project start records and project exit records completed in fewer than 7 days?	**For all project types:** All 4 categories meet threshold= 10 points 3 categories meet threshold= 5 points 2 or fewer categories meet threshold= 0 points
Maintain or Exit to Permanent Housing- 10 points What is the percentage of individual exits to positive housing destination or individuals remaining in permanent housing?	**For RRH/TH-RRH:** >90% exiting to PH = 10 points 85-89% = 5 points <85% = 0 points **For PSH:** >95%: 10 points 90-94.99%= 5 points <89.99%= 0 points
Exits to Homelessness- 8 points What is the percentage of households that exited to homelessness or an unknown destination?	**For all projects:** <5%= 8 points >5%= 0 points
Maintain or Increase Income- 7 points What is the percentage of adults (over 18) that maintained or increased any income from project entry to exit/or annual assessment?	**For RRH/TH-RRH:** >35% gain or maintain their income (all types)= 7 points <34.99%= 0 points **For PSH:**

Organization Information

Account Name **Aspire Indiana Inc**   Organization Phone

EIN   **35-1341204**   UEI   **CDYFW4LQ9NJ5**

Street

City   Zip Code

Congressional District

Org Type   **Not for Profit**   Org Sub-Type **Supportive Service Provider**

President/Executive Director

Phone   Email

Applicant Name (contact)   **0053d000003aUo7AAE**

Phone   **3175870500**   Email

Is the agency registration current in SAM (www.sam.gov)?   **Yes**

Is the agency registration current with the Indiana Secretary of State?   **Yes**

Project Information

Project Name   **Aspire Mainstream II**

Description
Permanent Supportive Housing in Madison County.

Project's State   **Indiana**   Project's County   **Madison**

Project Congressional District

Pin #   **IN0093**

Does the project have unresolved HUD or IHCDA findings?   **No**

If Yes Please Explain

Housing First- project submitted Housing First Policies? (yes)

Housing Retention

Does the project terminate participants for failure to participate in treatment or support services including case management?   **No**

Does the project terminate participants solely for engaging in substance use?   **No**

Does the project require participants to obtain earned or benefit income as a condition of remaining in the project?   **No**

Does the project make all efforts to avoid discharging participants into homelessness including referral back to coordinated entry for those who cannot remain in the project? **Yes**

Does project require participants be held to standards/behaviors not found in mainstream leases (such as not being allowed visitors, curfews, required to do chores, or not be allowed to have alcoholic beverages in their unit)?   **No**

Eligibility

Did your agency participate in a Regional Planning Council this past year?   **Yes**

Did your agency send a representative to a Development Day event in the past year?   **Yes**

Did your agency attend an HMIS Coffee Talk, CoC training, office hours, or IRPA training in the past year?   **Yes**

CoC Application

Is your project applying as a sub-recipient of IHCDA?   **Yes**

Type of Project: **Supportive Housing**

Did 100% of new clients enrolled in the project the previous calendar year come from a coordinated entry referral?   **Yes**

Funding Draw & Grant Agreement Submission

Did you make a monthly draw by the 20th of each month in your last closed out project year?   **Yes**

Did you make a draw at least quarterly in ELOCCS in your last closed-out project year? (2 years prior)

Did your project submit signed agreements in a timely manner?

Yes

Did your project submit all required documentation in a timely manner?

Yes

Did your project submit close-out reports by the deadline?

Yes

Low Barrier Access

Housing First compliance is important to the CoC.
Please answer the following accurately based on the organization policies you submitted.

Does the project require clients to pass a background screening prior to the project entry (Excluding sexual offender/predator check)? **No**

Does the project require all persons with specified criminal convictions on a blanket basis to be excluded from admission (excluding registered sexual offender/predator, and background screening imposed by other funders)? **No**

Does the project require participants to be clean and sober for a specified period prior to project entry as a condition for admission? **No**

Does the project serve individuals and families regardless of sexual orientation, family composition, or marital status and are transgendered persons served according to the gender with which they identify? **Yes**

Does the project expedite the admission process including assisting in assembling necessary documents to support the application for admission? **Yes**

Does the project actively participate in coordinated entry including attendance at meetings and case conferencing and, if applicable, are all new project entrants being referred through coordinated entry? **Yes**

Participant Engagement

Does the project provide participant choice in accessing services and are efforts made to connect participants to community-based services? **Yes**

Does the project provide regular opportunities for program participants to provide input on project policies and operations? **Yes**

Does the project employ Person Centered Planning as a guiding principle of the service planning process? **Yes**

Will the project staffed be trained in clinical and non-clinical strategies to support participant engagement including harm reduction, motivational interviewing, trauma informed approaches, and strength based? **Yes**

Performance

The following performance questions are based on calculations from the Annual Performance Report (APR) data. **Please provide a copy of your APR from the previous year with your submission.** *Note that some*

Scores

Total Eligibility Score	**3**
Total Performance Score	**19**
Total Participant Engagement Score	**4**
Total Funding Draw Score	**12**
Total Housing First Score	**11**
Total Coordinated Entry Score	**5**
Total Client Voice Score	**1**
Total Policies D & I Score	**1**
Total Feedback Score	**1**
Total Reallocations Score	**0**
Total Housing Retention Score	**5**
Total Equity and Representation Score	**17**
Total Bonus Score	**3**
Total Deductions	

Total Application Score
79

IN-502 Indiana Balance of State
Web Posting of Local Competition Deadline
(Notification Emails for Renewal and New Projects, Verification of Sending
Email Notifications, Collaborative Applicant Website Notice Details)

IHCDA   Search IHCDA

On behalf of the Indiana Balance of State (IN BOS) CoC, the IHCDA Community Services team has opened the renewal application for Continuum of Care (CoC) applicants. Each renewing organization should use the Access Indiana portal to review and complete their application. Renewing partners have accounts in the new online application system.

Renewal applications will be accepted until June 26, 2023, at 5 pm Eastern Time. Office hours will be hosted on Thursday, June 8, at 1 pm Eastern Time.

Applicants can contact communityservices@ihcda.in.gov with questions.

New CoC funding applications will be accepted later this summer after the release of the HUD CoC funding notice. An announcement of funding opportunity will be released on this platform and posted on: https://www.in.gov/ihcda/indiana-balance-of-state-continuum-of-care/internal-competition/ when it is ready.

New Project Application Process Now Available

Indiana Balance of State (IN BoS) CoC is now accepting letters of interest for FY2023 CoC funding. Applicants interested in CoC funding in this year's competition should review the following request for application (RFA) instructions and submit a letter of interest to CommunityServices@ihcda.in.gov by July 31, 2023, at 5 pm Eastern Time. A template of the information needed is provided in the RFA available **here.**

Applicants that submit a letter will be given access to a new project application portal and have until August 14, 2023, at 5 pm Eastern Time to submit their full application materials. In accordance with CoC and HUD requirements, applications will be reviewed and scored by non-conflicted individuals, and new projects will be notified of their inclusion in the CoC project ranking. Projects that are not selected for inclusion may appeal that decision to the IN BOS CoC board. Applications that are included in the CoC project ranking will also need to complete additional HUD application materials.

New Project Application Webinar

IHCDA staff hosted an informational webinar for new projects on July 26th. Click **HERE** to view the recorded session.

Office Hours

Office Hours for renewal applicants will beheld on August 8, 2023 at 1:00 PM Eastern Time. The session will be recorded. **Renewal applicants can apply between June 5 and June 26, 2023.** Renewal applicants

IHCDA Keybot

| Subjects | Recipients | | Senders | Last 30 days | SEARCH |

Subject	Recipients	Advanced	Sent By	Sent ↓		
Continuum of Care (CoC) Funding Opportunity - Available Now through August 14	Subscribers of 2020 Data Standards Tr...	✓	Elizabeth Greene	07/19/2023 07:58 AM EDT	✉ COPY BULLETIN	📊 VIEW REPORT
From Jake's Desk - July 14, 2023	Subscribers of Continuum of Care (CoC...	✓	Hayley Wolf	07/14/2023 01:05 PM EDT	✉ COPY BULLETIN	📊 VIEW REPORT
Indiana Balance of State Continuum of Care releases 2023 Point In Time Count Results	Subscribers of 2022 Spring Developmen...		Ian Hauer	07/13/2023 10:14 AM EDT	✉ COPY BULLETIN	📊 VIEW REPORT
How Did We Do? IHAF Feedback Survey	Subscribers of IHAF Recipients Survey		Hayley Wolf	07/11/2023 03:30 PM EDT	✉ COPY BULLETIN	📊 VIEW REPORT
From Jake's Desk - July 7, 2023	Subscribers of Continuum of Care (CoC...	✓	Hayley Wolf	07/07/2023 01:10 PM EDT	✉ COPY BULLETIN	📊 VIEW REPORT
	Subscribers of 2022					

The Continuum of Care Program Competition covers the application and award process for annual CoC Program funding.

2023

New Project Application Process Now Available

Indiana Balance of State (IN-BoS) CoC is now accepting letters of interest for FY2023 CoC funding. Applicants interested in CoC funding in this year's competition should review the following request for application (RFA) instructions and submit a letter of interest to CommunityServices@ihcda.in.gov by 5:00 PM Eastern Time on July 31, 2023. A template of the information needed is provided in the RFA available **here**.

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IHCDA staff are hosting an informational webinar for new projects on July 26 at 1:00 PM Eastern Time. Click **here** to join the session. It will be recorded and available on this page.

Office Hours

Office Hours for renewal applicants will be held on August 8, 2023 at 1:00 PM Eastern Time. The session will be recorded. Renewal applicants can apply between June 5-June 26, 2023. Renewal applicants will be emailed information on how to access their renewal in the online application system.

You can find detailed instructions for renewal **HERE**.

A video recording of how to get started in Access Indiana can be viewed **HERE**.

A video recording of how to complete the renewal application can be viewed **HERE**.

A recording of the Office Hours will be available **HERE**.

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Bulletins

- Support
- Elizabeth Greene
    - Indiana Housing and Community Development
    - Account Settings
    - Account Administrator
    - My Profile and Security
    - Support
    - Sign Out

Create Bulletin Create Advanced Bulletin

- User Drafts
- Page Watch Drafts
- Sent
- Scheduled
- Sharing
- Archived
- Held

Has attachment?	Subject	Recipients	Advanced	Sent By	Sent ↓	Actions	
					Last 30 days		
No attachments	Compliance Reminder - HOPWA: COVID-19 Waivers and Flexibilities Expired 3/31/23	Subscribers of HOPWA Subs and Direct Recipients Subscribers of HOPWA Subs and Direct ...		Elizabeth Greene	06/12/2023 10:32 AM EDT	Copy Bulletin	View Report
No attachments	From Jake's Desk - June 9, 2023	Subscribers of Continuum of Care (CoC) List, IHCDA Participating Lenders, IHCDA Staff, IHCDA updates + Friday Note, Individual Development Account (IDA) List, Jake's Friday Note, Neighborhood Assistance Program (NAP) List, Placemaking updates, or Real Estate Department (RED) updates, Subscribers of Continuum of Care (CoC...		Hayley Wolf	06/09/2023 01:10 PM EDT	Copy Bulletin	View Report
No attachments	Lt. Gov. Crouch, IHCDA launch crowdfunding campaign for Roanoke Park	Subscribers of Huntington Subscribers of Huntington		Ian Hauer	06/09/2023 08:10 AM EDT	Copy Bulletin	View Report
No attachments	CoC Internal Renewal Project Application Open Until June 26	Subscribers of 2022 Spring Development Day Attendees, Community Services Contacts, Coordinated Entry HMIS Users, HMIS Users, IHCDA Development Day, or Regional Planning Council Chairs, Subscribers of 2022 Spring Developmen...		Elizabeth Greene	06/08/2023 09:57 AM EDT	Copy Bulletin	View Report
No attachments	Seeking Housing Opportunities for Individuals in Recovery	Subscribers of LMR List Subscribers of LMR List		Jeff Zongolowicz	06/06/2023 12:26 PM EDT	Copy Bulletin	View Report
No	Lt. Gov. Crouch, IHCDA launch	Subscribers of Fort Wayne Media			06/06/2023 08:00	Copy	

CoC Internal Renewal Project Application Open Until June 26

Community Services Notice
The Continuum of Care Internal Renewal Project Application Is Open

The IHCDA Community Services team has opened the renewal application for Continuum of Care (CoC) applicants. Each renewing organization
should use the Access Indiana portal to review and complete their application. Renewing partners have accounts in the new online
application system.

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opportunity will be released on this platform and posted on: https://www.in.gov/ihcda/indiana-balance-of-state-continuum-of-care/internal-
competition/ [https://www.in.gov/ihcda/indiana-balance-of-state-continuum-of-care/internal-competition/?
utm_content=&utm_medium=email&utm_source=govdelivery] when it is ready.

Thank you!

IHCDA Footer

IN-502 Indiana Balance of State
Local Competition Scoring Tool

Project Scoring Tools for Renewal and New Projects

Renewal Project Scoring Tool	
Eligibility- General Questions- 3 points	**Scoring Criteria**
1. CoC Engagement: (3 points total, 1 per question) • Did your agency participate in a Regional Planning Council between 7/1/22-6/30/23? • Did your agency send a representative to a Development Day event between 7/1/22-6/30/2023? • Did your agency attend an HMIS Coffee Talks, CoC training, office hours, or IRPA training between 7/1/22-6/30/23?	Yes = 1 point No = 0 points

Project Detail and Funding- 15 points	**Scoring Criteria**
1. Coordinated Entry: (5 points) • Did 100% of new clients enrolled in the project from 1/1/2022-12/31/2022 come from a coordinated entry referral?	Yes = 5 points No = 0 points
2. Funding Draw down (4 points total, for either option) • For direct-HUD funded projects: Did you make a draw at least quarterly in ELOCCS in your last closed-out project year? (FY2020) OR • For IHCDA sub-recipients: Did you make a monthly draw by the 20th of each month in your last closed out project year? (FY2020) i. For projects that started late due to contracting delays, you can indicate "yes" for this question.	Yes = 4 points No = 0 points
3. Report and Grant Agreement Submission (3 points total, 1 per question) • Submit signed agreements in a timely manner? • Submit required documentation (match letter, homeless representation, board resolutions) in a timely manner? • Submit required close-out reports by the deadline?	Yes= 1 point No= 0 points

Housing First-Low Barrier Access- 11 points Refer to the Housing First Checklist from USICH for more information and references. https://www.usich.gov/resources/uploads/asset_library/Housing_First_Checklist_FINAL.pdf.	**Scoring Criteria**
Attach a copy of your organizations Housing First policies. Please provide a copy of your organization's Housing First policies, or policies and procedures for your program.	Policies Attached= 5 points
a. Will/Does the project require clients to pass a background screening prior to project entry (excluding sexual offender/predator check)?	Yes = 0 points No = 1 points

b. Will/Does the project require all persons with specified criminal convictions on a blanket basis to be excluded from admission (excluding registered sexual offender/predator, and background screening imposed by other funders)?	Yes = 0 points No = 1 points
c. Will/Does the project require participants to be clean and sober for a specified period prior to project entry as a condition for admission?	Yes = 0 points No = 1 points
d. Will/Does the project serve individuals and families regardless of sexual orientation, family composition, or marital status and are transgendered persons served according to the gender with which they identify?	Yes = 1 points No = 0 points
e. Will/Does the project expedite the admission process including assisting in assembling necessary documents to support the application for admission?	Yes = 1 points No = 0 points
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c. Will/Does the project require participants to obtain earned or benefit income as a condition of remaining in the project?	Yes = 0 points No = 1 points
d. Will/Does the project make all efforts to avoid discharging participants into homelessness including referral back to coordinated entry for those who cannot remain in the project.	Yes = 1 points No = 0 points
e. Will/Does project require participants be held to standards/behaviors not found in mainstream leases (such as not being allowed visitors, curfews, required to do chores, or not be allowed to have alcoholic beverages in their unit)?	Yes = 0 points No = 1 points

Housing First-Participant Engagement- 4 points Refer to the Housing First Checklist from USICH for more information and references. https://www.usich.gov/resources/uploads/asset_library/Housing_First_Checklist_FINAL.pdf.	**Scoring Criteria**
a. Will/Does the project provide participant choice in accessing services and are efforts made to connect participants to community-based services?	Yes = 1 points No = 0 points
b. Will/Does the project provide regular opportunities for program participants to provide input on project policies and operations?	Yes = 1 points No = 0 points
c. Will/Does the project employ Person Centered Planning as a guiding principle of the service planning process? (Person Centered Planning focuses on the individual; what they would like to accomplish in	Yes = 1 points No = 0 points

terms of relationships, community participation, achieving control over their lives, and developing the skills and resources needed to accomplish those goals.)	
d. Are/Will the project staffed be trained in clinical and non-clinical strategies to support participant engagement including harm reduction, motivational interviewing, trauma informed approaches, and strength based?	Yes = 1 points No = 0 points

Performance Questions- 45 points The following performance questions are based on calculations from the Annual Performance Report (APR) data. **Please provide a copy of your APR from 1/1/2022-12/31/2022 with your submission.** *Note that some questions refer to participants/individuals and others are for households. Please check that you have selected the data from the APR that correctly refers to households or individuals.*	**Scoring Criteria**
HMIS- 10 points Based on the APR review tool, review the categories below and if the project can answer "yes" then it meets threshold: Q6a- Data Quality: Personally Identifiable Information • Are all errors rates below 5%? Q6b- Data Quality: Universal Data Elements • Are all errors rates below 5%? Q6c- Data Quality: Income and Housing Data Quality • Are all errors rates below 15%? Q6e- Data Quality: Timeliness • Are all project start records and project exit records completed in fewer than 7 days?	**For all project types:** All 4 categories meet threshold= 10 points 3 categories meet threshold= 5 points 2 or fewer categories meet threshold= 0 points
Maintain or Exit to Permanent Housing- 10 points What is the percentage of individual exits to positive housing destination or individuals remaining in permanent housing?	**For RRH/TH-RRH:** >90% exiting to PH = 10 points 85-89% = 5 points <85% = 0 points **For PSH:** >95%: 10 points 90-94.99%= 5 points <89.99%= 0 points
Exits to Homelessness- 8 points What is the percentage of households that exited to homelessness or an unknown destination?	**For all projects:** <5%= 8 points ≥5%= 0 points
Maintain or Increase Income- 7 points What is the percentage of adults (over 18) that maintained or increased any income from project entry to exit/or annual assessment?	**For RRH/TH-RRH:** >35% gain or maintain their income (all types)= 7 points <34.99%= 0 points **For PSH:**

	>25% gain or maintain their income (all types)= 7 points <24.99%= 0 points
Utilization- 3 points What was your average utilization of your household capacity on the four PIT dates?	**For all projects:** Average >90% for the four PIT dates in APR = 3 points
Resources- 7 points What is the percentage of funding that your grant spent in the most recently closed grant term?	**For all projects:** Total spent >95%= 7 points 94.99%-90%= 3 points <90%= 0 points
Reallocation Policy: If your project did not spend at least 75% of funding in FY2020 then your project is required to complete a resource utilization spending rationale. This form is not scored, but will be submitted alongside your IRPA response. If your project is also planning to voluntarily reallocate in the FY2023 competition, additional information will be collected later in the application to ensure your project receives the appropriate bonus points, in accordance with CoC Policy.	**For all projects that did not meet 75% spending requirement.** 0 points

Equity and Representation Questions- 20 points The following performance questions are based on calculations from the Annual Performance Report (APR) data and agency information. Please provide a copy of your APR from 1/1/2022-12/31/2022 with your submission.	**Scoring Criteria**
Survivors of Domestic Violence- 5 points (reported at entry) 1. Households served in the project have a history of domestic violence.	**For all projects:** >25% history of DV= 5 points
Severe Service Needs- 3 points (reported at entry) 1. Persons served in the project have at least one member that have 3+ mental or physical health conditions.	**For RRH & TH-RRH projects:** >15% households have 3+ condition= 3 points **For PSH projects:** >85% households have 3+ condition= 3 points
Understanding Disparity and Equity Education- 4 points (yes/no) 1. Has your agency hosted or attended training on issues related to equity and inclusion between 7/1/22-6/30/23 to: • board, (1 point) • agency leadership (1 point) and • direct service staff (1 point) 2. Does your organization track outcomes for households or individuals based on their demographics? (yes/no)	**For all projects: 3 points max** **1 point:** the agency has hosted or attended training on equity and inclusion for their board. **1 point:** the agency has hosted or attended training on equity and inclusion for leadership. **1 point:** the agency hosted or attended training on equity and inclusion for direct service staff. **For all projects: 1 point** If yes, an organization tracks outcomes based on demographics.

Ensuring Representation- 8 points (drop down/narrative) *Lived Experience of Homelessness* 1. How many people with lived experience are on your board or staff? (3 points) 2. Does your agency leadership include an individual with lived experience? (3 points) *Agency leadership would include any supervisors or directors.* 3. How many of them have a recent experience of homelessness (7 years)? (2 points)	**For all projects:** **3 points:** agency has 1 representative with lived experience on board or staff. **3 points**: agency leadership includes an individual with lived experience. **2 points**: at least one (or their only one) representative has a recent experience (last 7 years).

Bonus: Lived Experience, Representation, & Addressing Disparities (+10 Additional Points)	The following bonus points can be added to increase application points.
BONUS: Lived Experience and Representation (4 points)- narrative Please describe how your board, agency leadership and direct service staff is reflective of the population served? (3 points)	**For all projects:** *4 points total. 1 point for each of the following as it relates to the board, agency leadership, and direct service staff:* **1 point:** agency board membership is representative, **1 point:** agency leadership is representative, **1 point:** agency direct service staff is representative of population served.
Is client voice included in the operations of your organization? (1 point)	**1 point**: if yes, agency has mechanism to receive feedback from clients.
BONUS: Addressing Disparities (6 points) Does your organization have diversity and inclusion policies? (1 point) What policies does your organization have that support equity for staff and clients? (2 point) To score maximum points, please list/describe diversity and inclusion policies, anti-discrimination policies, anti-racism policies, etc. Are you gathering feedback in the areas of equity and inclusion from clients and staff? (1 point) What has the feedback told you about the areas of equity and inclusion within the organization or its programs? (2 point)	**For all projects:** *6 points total.* **1 point:** agency has diversity and inclusion policies. **2 points:** agency can describe policies they have in place that are anti-racist, or intended to prevent discrimination, and support accountability. **1 point:** agency is collecting feedback from clients and staff on the areas of equity and inclusion. **2 points:** agency can describe feedback (positive or negative) they have received about the issues of equity and inclusion in the agency or its programs.
BONUS: Reallocation (+15 Bonus Points) Is your agency voluntarily reallocating funding in this competition? How much funding are you reallocating?	**For all projects** Projects reallocating funding receive 15 bonus points

New Project Application Scoring Tool	
Section: Project Information Please describe your experience and plans for your new project by responding to the narrative and yes/no questions listed in the application.	
Question Type	**Scoring Criteria**
PIT count involvement- objective	Up to 5 points for participating in PIT count activities
Transportation provided to clients- objective	1 point for providing transportation
SSI/SSDI (SOAR) utilization- objective	1 point for offering connection to SOAR
SOAR training and technical assistance- objective	1 point for staff with training in SOAR in the last 24 months
Listing of services the project could offer through their agency, partnership, or other- objective	Up to 20 points (1 point per service selected) for services offered by the project
Section: Project Funding and Financial Information Please describe your financial experience with federal funds, and the experiences of partners in the narrative and yes/no questions listed in the application.	
Question Type	**Scoring Criteria**
Questions pertaining to the financial experiences and capacity of the organization	1 point for experience in utilizing federal funds- objective (-1) point for any project with history of returning funds to HUD or IHCDA- objective Up to 4 points for projects that have experience in utilizing funds to perform activities in the grant Up to 4 points for experience in leveraging other funds with federal resources
Section: Project Type and Compliance Please describe your project type, how it will increase units of permanent housing, and your agency's plans to comply with requirements in the narrative and yes/no questions listed in the application.	
Question Type	**Scoring Criteria**
Information on how project will apply and the type of project- objective	2 points for either an expansion project that adds units or a transition project that adds units 4 points for any project type that adds permanent housing units
Projects have experience with and agree to take referrals from coordinated entry and comply with standards- objective	5 points awarded to projects that will accept referrals from CE and follow program written standards
Projects commit to completing reports, agreements, and claims on-time- objective	Up to 4 points for projects that will meet commitments of receiving funding
Section: Project Set-up and Design Please describe your project set-up, design for services, and coordination with other systems in the narrative and yes/no questions listed in the application.	
Question Type	**Scoring Criteria**
Projects provide information on start-up	2 points for completing the chart for the project

timeline- objective	
Project describes how participants will be engaged to obtain and maintain permanent housing	Up to 6 points for projects that can 1) describe services designed to obtain and ensure housing retention especially connection to mainstream benefits 2) describe how services will be tailored to fit client needs, experience the applicant has with the Housing First model, and how projects connect to hard-to-serve clients from the moment of referral to support successful transition to permanent housing, and building strong relationships with landlords.
Coordinate and integrate with health providers	Up to 2 points for demonstrating how the applicant will partner with healthcare and mental health services
Projects follow-up to ensure benefits are received/renewed- objective/performance	1 point if yes
Tracking enrollment to move-in- objective/performance	3 point if yes
Tracking income- objective/performance	3 point if yes
Results of income tracking- performance	Up to 5 points for projects that observe improvements in income
Tracking obtaining and maintaining housing- objective/performance	4 points if tracking
Results of obtaining and maintaining housing- performance	Up to 5 points for projects that report improvements in attaining and maintaining housing
Client feedback- performance	Up to 2 points for projects that engage clients in their program, especially specific examples of how that feedback is used
Housing stability for those with disparities in outcomes- performance	Up to 3 points for projects that are evaluating their local community for eviction risks and taking appropriate measures to prepare and train staff to meet those needs and address barriers
Housing First Compliance- objective	Up to 6 points for projects that comply with Housing First
Housing First implementation-objective	Up to 5 points for projects that implement policies and practices aligned with Housing First philosophy
Healthcare partnerships	Up to 5 points for projects that engage healthcare partners and can provide documentation of their partnership
Housing partnerships	Unscored, agency can provide a letter of unit or rental assistance commitment
Equity training-objective	Up to 3 points if an agency has trained staff, leadership and board on issues of equity and inclusion
Bonus Points	
Narrative and yes/no question on experiences in promoting and addressing issues of equity and inclusion in their agency, within their services, etc	Up to 9 points for projects that demonstrate that the agency has set policies to address disparities in outcomes for clients, that they are aware of the populations served by the project and are actively promoting a culture that is reflective of that population and inclusive of their needs
Narrative to describe how feedback is being used to change policy	Up to 1 point for the description of how client feedback is used to address policy or program issues

IN-502 Indiana Balance of State
Scored Forms for One Project
(Full Application from Renewal Project, Score Sheet at End)

Organization Information

Account Name **Aspire Indiana Inc**   Organization Phone

EIN   **35-1341204**   UEI   **CDYFW4LQ9NJ5**

Street

City   Zip Code

Congressional District

Org Type   **Not for Profit**   Org Sub-Type **Supportive Service Provider**

President/Executive Director

Phone   Email

Applicant Name (contact)   **0053d000003aUo7AAE**

Phone   **3175870500**   Email

Is the agency registration current in SAM (www.sam.gov)?   **Yes**

Is the agency registration current with the Indiana Secretary of State?   **Yes**

Project Information

Project Name   **Aspire Mainstream II**

Description
Permanent Supportive Housing in Madison County.

Project's State   **Indiana**   Project's County   **Madison**

Project Congressional District

Pin #   **IN0093**

Does the project have unresolved HUD or IHCDA findings?   **No**

If Yes Please Explain

Housing First

Housing Retention

Does the project terminate participants for failure to participate in treatment or support services including case management?   **No**

Does the project terminate participants solely for engaging in substance use?
                                                                                 No

Does the project require participants to obtain earned or benefit income as a condition of remaining in the project?
                                                                                 No

Does the project make all efforts to avoid discharging participants into homelessness including referral back to coordinated entry for those who cannot remain in the project?   **Yes**

Does project require participants be held to standards/behaviors not found in mainstream leases (such as not being allowed visitors, curfews, required to do chores, or not be allowed to have alcoholic beverages in their unit)?
                                                                                 No

---

Eligibility

Did your agency participate in a Regional Planning Council this past year?
                                                                                 Yes

Did your agency send a representative to a Development Day event in the past year?
                                                                                 Yes

Did your agency attend an HMIS Coffee Talk, CoC training, office hours, or IRPA training in the past year?
                                                                                 Yes

---

CoC Application

Is your project applying as a sub-recipient of IHCDA?   **Yes**

Type of Project: **Supportive Housing**

Did 100% of new clients enrolled in the project the previous calendar year come from a coordinated entry referral?
                                                                                 Yes

---

Funding Draw & Grant Agreement Submission

Did you make a monthly draw by the 20th of each month in your last closed out project year?
                                                                                 Yes

Did you make a draw at least quarterly in ELOCCS in your last closed-out project year? (2 years prior)

Did your project submit signed agreements in a timely manner?

Yes

Did your project submit all required documentation in a timely manner?

Yes

Did your project submit close-out reports by the deadline?

Yes

Low Barrier Access

Housing First compliance is important to the CoC.
Please answer the following accurately based on the organization policies you submitted.

Does the project require clients to pass a background screening prior to the project entry (Excluding sexual offender/predator check)? **No**

Does the project require all persons with specified criminal convictions on a blanket basis to be excluded from admission (excluding registered sexual offender/predator, and background screening imposed by other funders)? **No**

Does the project require participants to be clean and sober for a specified period prior to project entry as a condition for admission? **No**

Does the project serve individuals and families regardless of sexual orientation, family composition, or marital status and are transgendered persons served according to the gender with which they identify? **Yes**

Does the project expedite the admission process including assisting in assembling necessary documents to support the application for admission? **Yes**

Does the project actively participate in coordinated entry including attendance at meetings and case conferencing and, if applicable, are all new project entrants being referred through coordinated entry? **Yes**

Participant Engagement

Does the project provide participant choice in accessing services and are efforts made to connect participants to community-based services? **Yes**

Does the project provide regular opportunities for program participants to provide input on project policies and operations? **Yes**

Does the project employ Person Centered Planning as a guiding principle of the service planning process? **Yes**

Will the project staffed be trained in clinical and non-clinical strategies to support participant engagement including harm reduction, motivational interviewing, trauma informed approaches, and strength based? **Yes**

Performance

The following performance questions are based on calculations from the Annual Performance Report (APR) data. **Please provide a copy of your APR from the previous year with your submission.** *Note that some*

questions refer to participants/individuals and others are for households. Please check that you have selected the data from the APR that correctly refers to households or individuals

HMIS

Based on the APR review tool , review the categories below and if the project can answer "yes" then it meets threshold:

Q6a- Data Quality: Personally Identifiable Information
 Are all errors rates below 5%?   **Yes**

Q6b- Data Quality: Universal Data Elements   **Yes**
 Are all errors rates below 5%?

Q6c- Data Quality: Income and Housing Data Quality   **Yes**
 Are all errors rates below 15%?

Q6e- Data Quality: Timeliness   **No**
 Are all project start records and project exit records completed in fewer than 7 days?

Q6a, Q6b, Q6c, and Q6e for the information. Information is found in the last column of the table, except for Q6e which requires information from both columns of the table.

Maintain or Exit to Permanent Housing

What is the percentage of individual exits to positive housing destination or individuals remaining in permanent housing?

Total Number of persons served: **34**

Total Number of stayers: **25**

Total clients exit to positive destination: **5   88%**

Exits to Homelessness

What is the percentage of households that exited to homelessness or an unknown destination?

Total Households
24

Total Households exit to homelessness or an unknown destination.
 4   17 %

Maintain or Increase Income

What is the percentage of adults (over 18) that maintained or increased any income from project entry to exit/or annual assessment for RRH/TH-RRH?

Total client adults (over 18)
25

Total clients to maintain or increase income stayers or exited
 18   72 %

Utilization

What was your average utilization of your household capacity on the four PIT dates? (APR days listed for Q1-January, Q2-April, Q3-July, Q4-October) Refer to APR review tool questions Q8B and Q5A for the information.

Total Households
24

Utilization Q1	**22**	Utilization Q2	**21**
Utilization Q3	**20**	Utilization Q4	**19**

Average Utilization: **0**
Average Utilization Percent**:   85 %**

Resources

What is the percentage of funding that your grant spent in the most recently closed grant term?

Funding Awarded
162503

Funding Spent
160328.45   99 %

Reallocation Policy

 If your project did not spend at least 75% of funding in last years competition, then your project is required to complete a resource utilization spending rationale. This form is not scored, but will be submitted alongside your IRPA response.

If your project is also planning to voluntarily reallocate in the this years competition, additional information will be collected later in the application to ensure your project receives the appropriate bonus points, in accordance with CoC Policy.

Resource utilization spending rationale

Equity and Representation

Survivors of Domestic Violence

Total Number of Persons Served
 34

Total Persons Served that have a history of domestic violence:
9 17 %

Severe Service Needs

Total Number of persons served:
34

Total Persons Served in the project have at least one member that have3+ mental or physical health conditions:
 16   47 %

Understanding Disparity and Equity Education

Has your agency hosted or attended training on issues related to equity and inclusion (current competition year) to:
Board;Agency Leadership;Direct Service Staff

Does your organization track outcomes for households or individuals based on their demographics?
Board;Agency Leadership;Direct Service Staff

Ensuring Representation – Lived Experience of Homelessness

How many people with lived experience are on your board or staff
2

Does your agency leadership include an individual with lived experience? (Agency leadership would include any supervisors or directors)
Yes

How many of them have a recent experience of homelessness (in the last 7 years)?
1

Bonus

Lived Experience and Representation

Please describe how your board, agency leadership and direct service staff is reflective of the population served?
Aspire's board completes a comprehensive community needs assessment every three years and a portion of the assessment is focused on creating a community profile in our designated service area. That profile includes, sex & gender, race and ethnicity, age, income, and employment status among other descriptors. Aspire's board seeks to mirror, and is required by the Health Resources and Services Administration (HRSA) to do so, its patient population. Every year the board evaluates its composition and identifies whether or not adjustments need to be made to the board's composition in order to reflect its communities.

In addition, Aspire has an intentional focus on diversity in recruitment, hiring, and retention efforts to create an inclusive work environment where everyone feels welcome and accepted. All staff participate in diversity, equity, and inclusion surveys and a comprehensive roll out of DEI related training has started with leadership and is being planned for all staff to improve competencies related to creating an inclusive workforce.

Aspire values lived experience and intentionally seeks applicants who live in the communities we serve, have lived experience, or experience with populations and the health conditions we treat and the social drivers of health we seek to address.

Is client voice included in the operations of your organization?   **Yes**

Addressing Disparities

Does your organization have diversity and inclusion policies?   **Yes**

What policies does your organization have that support equity for staff and clients?
(To score maximum points, please list/describe diversity and inclusion policies, anti-discrimination policies, anti-racism policies, etc.)
Aspire Indiana Health has implemented several HR policies to support equity for staff and clients. These policies include:

Diversity Policy (HR 2.2 Diversity): Aspire's leadership team and management at all levels of the organization are responsible for ensuring that employee differences are respected and valued in the workplace. They actively promote inclusive behaviors and foster a work environment that embraces diversity and inclusion. Openness, sharing, trust, teamwork, and involvement are encouraged to create a high-performance team that values and respects diversity.

Equal Employment Opportunity Policy (HR 2.1 Equal Employment Opportunity): Aspire is committed to providing equal opportunity in employment to all employees and applicants. The organization prohibits discrimination based on various characteristics, such as race, citizenship, national origin, genetic information, religion, creed, color, sex, sexual orientation, gender, gender orientation, age, marital status, disability, ancestry, military status, veteran status, and any other legally protected status. Aspire complies with applicable federal, state, and local laws governing non-discrimination in employment.

Pay Transparency Policy (HR 10.13 Pay Transparency): Aspire believes in equity and diversity as core values and is dedicated to providing competitive pay and a comprehensive benefits package to its employees. The organization ensures that employees have the right to inquire about, discuss, or disclose their own pay information without fear of discharge, retaliation, or discrimination. Pay transparency helps promote fairness and equal compensation within the organization.

Client Rights and Responsibilities: At Aspire, we are committed to upholding the rights and responsibilities of our clients. We firmly believe that every client has the right to receive treatment without any form of discrimination based on race, color, age, sex, religion, disability, national origin, sexual orientation, gender identity, or ability to pay. We are dedicated to providing equal access to quality care, regardless of the payment method, including Medicare, Medicaid, or CHIP. It is our responsibility to ensure that all clients are treated with respect, dignity, and fairness throughout their journey with us.

Organizational Overview Policy (HR 1.5 Organizational Overview): At Aspire, our commitment to equity and inclusion is reflected in our organizational overview. With a strong and diverse culture, fueled by employees who embody our core values, including the belief in recovery for all, the importance of an enjoyable workplace, the success of diverse and collaborative teams, integrity in all interactions, and embracing creativity and change for innovative solutions, we strive to create an inclusive environment. Through these guiding principles and our dedicated workforce, we foster equity, diversity, and well-being for both our staff and clients.

Prohibition Against Workplace Violence Policy (HR 8.5 Prohibition Against Workplace Violence): Aspire has a strong policy against workplace violence, emphasizing the importance of treating staff members with dignity and respect. The organization is committed to creating a safe and secure work environment, free from violence, coercion, and any potential risk of personal injuries or physical and emotional damage to employees or others. This policy helps protect the well-being and safety of both staff and clients.

Standards of Conduct Policy (HR 4.1 Standards of Conduct): Aspire upholds high standards of conduct in carrying out its programs, aligning with its mission and values. The organization strives to be a good corporate citizen, compliant with federal, state, and local laws and statutes. As part of its Corporate Compliance Program, Aspire has developed and articulated Standards of Conduct. These guidelines provide a framework for professional behavior, complemented by personal judgment, integrity, and common sense. The Standards of Conduct, along with personnel and operational policies and procedures, support the organization's mission and corporate values.

Are you gathering feedback in the areas of equity and inclusion from clients and staff?   **Yes**

What has the feedback told you about the areas of equity and inclusion within the organization or its programs?

  The feedback received regarding the areas of equity and inclusion within the organization has been positive. Aspire's inclusive leadership development training program, created by Gina Forrest, the organization's Culture Officer, has been well-received. The program covers various topics related to diversity, equity, and inclusion (DEI), such as cultural awareness, bias, inclusive language, microaggressions, gender identity, working across generations, and more. The training program has two major components. The first component is integrated into the new employee orientation process, ensuring that all employees receive

foundational DEI training. The second component is focused on developing the leadership and DMS staff through inclusive leadership training. This phase covers additional modules that specifically address leadership skills and soft skills, such as active listening, feedback, performance management, and leadership styles.

The feedback has indicated that the training program has been valuable in promoting equity and inclusion within the organization. By incorporating employee feedback into the program, Aspire has been able to address specific concerns and challenges faced by the staff, leading to a more engaged and productive workforce. The organization's commitment to creating a positive and empowering work environment has been recognized and appreciated. Furthermore, Aspire has taken steps to promote inclusivity and diversity in its talent acquisition efforts. The realignment of the talent acquisition team and the exploration of alternative job posting locations demonstrate a proactive approach to attract a broader range of candidates, including those from underrepresented groups. By reimagining benefits and compensation offerings, Aspire aims to align them with the values of inclusivity and belonging, further supporting the goal of creating a diverse workplace.

The establishment of the Career Success and Employee Engagement departments, separate from HR, focus on employment experience, career development, and employee engagement. The extended and reimagined orientation program, structured assessments, and clearer career pathways demonstrate Aspire's commitment to employee growth and professional development. To foster a positive and supportive work environment, the employee engagement team is organizing office hours, providing support during current events, and planning team-building activities. Regular check-ins at specific milestones allow employees to express their experiences, sense of belonging, and address any concerns they may have, contributing to higher retention rates and an engaged workforce. Overall, the feedback has been positively received and have contributed to a more inclusive and diverse organizational culture.

Reallocation

Is your agency voluntarily reallocating funding in this competition?   **No**

How much are you reallocating?

Deductions

Incomplete IRPAs will be scored only on questions that are answered. 0 points will be awarded to blank questions. Incomplete and deficient IRPA's may receive zero or negative points.

IRPA was submitted late but complete

IRPA was submitted late and is incomplete

Agencies that provide intentionally misleading or incorrect information on their IRPA will be reported to the Funding & Resources Committee. Questions may be rescored with correct data and the IRPA score will be updated to reflect those correct numbers. Corrected numbers will be reported to IRPA contact person. If data is corrected on more than 1 question, then points may be deducted from the IRPA score. Please carefully review your answers before submission.

Scores

Total Eligibility Score	**3**
Total Performance Score	**19**
Total Participant Engagement Score	**4**
Total Funding Draw Score	**12**
Total Housing First Score	**11**
Total Coordinated Entry Score	**5**
Total Client Voice Score	**1**
Total Policies D & I Score	**1**
Total Feedback Score	**1**
Total Reallocations Score	**0**
Total Housing Retention Score	**5**
Total Equity and Representation Score	**17**
Total Bonus Score	**3**
Total Deductions	

Total Application Score
79

Notification of Projects Rejected- Reduced

Good afternoon-

Yesterday the Indiana Balance of State CoC Board voted to reallocate a portion of your project. Attached is the formal notification of your reallocation, and below is an overview:

Grant: Park Center PSH- IN0150

Reallocation amount: $15,000

Please review the attached notice and let us know if you have questions. IHCDA staff will be in touch on how to make adjustments to your budget for this year's competition.

Thank you,

Community Services Team
Indiana Housing and Community Development Authority

30 South Meridian Street, Suite 900
Indianapolis, IN 46204

FAX 317 232 7778
EMAIL communityservices@ihcda.in.gov
WEBSITE: www.in.gov/ihcda

For updates from Lt. Governor Suzanne Crouch, please visit www.lg.in.gov

Please consider the environment before printing this email.

Good afternoon-

Yesterday the Indiana Balance of State CoC Board voted to reallocate a portion of your project. Attached is the formal notification of your reallocation, and below is an overview:

Grant: NWI Veterans Village Home for Heroes- IN0160
Reallocation amount: $109,024.25

Please review the attached notice and let us know if you have questions. IHCDA staff will be in touch on how to make adjustments to your budget for this year's competition.

Thank you,

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Good afternoon-

Yesterday the Indiana Balance of State CoC Board voted to reallocate a portion of your project. Attached is the formal notification of your reallocation, and below is an overview:

Grant: MHA West Central IN Younity Village Terra Ferma Consolidation- IN0133

Reallocation amount: $30,103.50

Please review the attached notice and let us know if you have questions. IHCDA staff will be in touch on how to adjust your budget for this year's competition.

Thank you,

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Good afternoon-

Yesterday the Indiana Balance of State CoC Board voted to reallocate a portion of your project. Attached is the formal notification of your reallocation, and below is an overview:

Grant: LTHC Rapid Rehousing Renewal- IN0178

Reallocation amount: $26,032

Please review the attached notice and let us know if you have questions. IHCDA staff will be in touch on how to adjust your budget for this year's competition.

Thank you,

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Good afternoon-

Yesterday the Indiana Balance of State CoC Board voted to reallocate a portion of your project. Attached is the formal notification of your reallocation, and below is an overview:

Grant: ECHO LP2/Ren16- IN0135

Reallocation amount: $30,060.80

Please review the attached notice and let us know if you have questions. IHCDA staff will be in touch on how to adjust your budget for this year's competition.

Thank you,

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Good afternoon-

Yesterday the Indiana Balance of State CoC Board voted to reallocate a portion of your project. Attached is the formal notification of your reallocation, and below is an overview:

Grant: Chapman West-Lincoln West- IN0149

Reallocation amount: $21,680.50

Please review the attached notice and let us know if you have questions. IHCDA staff will be in touch on how to adjust your budget for this year's competition.

Thank you,

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Good afternoon-

Yesterday the Indiana Balance of State CoC Board voted to reallocate a portion of your project. Attached is the formal notification of your reallocation, and below is an overview:

Grant: Kosciusko County RRH- IN0168

Reallocation amount: $30,000

Please review the attached notice and let us know if you have questions. Since this was a voluntary reallocation, and we have already begun working with you on updating your budget, no further action is needed at this time. We'll be in touch next week with an updated copy for your review. This email notification is a required component of the competition, and we appreciate your willingness to reallocate funds in the competition.

Thank you,

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Good afternoon-

Yesterday the Indiana Balance of State CoC Board voted to reallocate a portion of the CoC III project. Attached is the formal notification of your reallocation, and below is an overview:

Grant: CoC III- IN0155

Reallocation amount: $48,712.90

I would like to set-up a time with you 1x1 next week (30 minutes) to discuss the reallocation. Since this is an award with multiple organizations, and each organization has a different history of funding utilization on the award, I want to be cognizant of how we perform this reallocation. It does not make sense for us to remove the same amount of funding from each of your sub-awards, so we'll create an individual plan for each of you. As a reminder, this does not impact your funding until your 2024 PSH award.

Please let me know when you are available on Thursday next week. Adam- since we're already scheduled to chat, we can discuss this at that time.

Thank you,

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Good afternoon-

Yesterday the Indiana Balance of State CoC Board voted to reallocate a portion of the Integrated Supportive Housing project. Attached is the formal notification of your reallocation, and below is an overview:

Grant: Integrated Supportive Housing- IN0167

Reallocation amount: $15,000

I would like to set-up a time with you 1x1 next week (30 minutes) to discuss the reallocation. Since this is an award with multiple organizations, and each organization has a different history of funding utilization on the award, I want to be cognizant of how we perform this reallocation. Oaklawn's portion of the award has had the lower utilization of funds in most years, so I'd like to discuss what would work best for you all first.

Please let me know when you are available on Thursday next week.

Thank you,

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Please consider the environment before printing this email.

IN-502 Indiana Balance of State
Notification of Projects Accepted

From:	IHCDA Community Services
Cc:	"jstanfill@hoi.help"; "cs@abwservices.org"; "mistybarnett120@gmail.com"; "cburdine2@iuhealth.org"; "cynthia.kennedy@rhs.care"; "hblalock@shelteringwings.org"; "egoodlett@stecharities.org"; "ksanford@ywcancin.org"; "ckilgore@ywcaerew.org"; "tc@abwservices.org"; "lhopper@aidsministries.org"; "mike.keevin@aspireindiana.org"; "sriordan@auroraevansville.org"; "forrest@beaconinc.org"; "lvivirito@cfh.net"; "james.fries@centerstone.org"; "joshwhite@cinnaire.com"; "pambrookshire@mybrightpoint.org"; "mike.creech@cmhcinc.org"; "savannah.wood@echohousing.org"; "julie@familypromisehendrickscounty.org"; "jstowers@iuhealth.org"; "renea@thebeamanhome.org"; "jlayton@lthc.net"; "julias@lifetreatmentcenters.org"; "pfettigmhabc@gmail.com"; "mwilkey@mhawci.org"; "trish.miller@meridianhs.org"; "mary.bales@oaklawn.org"; "osppre-award@parkview.com"; "jmccartney@continentalmgt.com"; "mmoen@prevailinc.org"; "alan.oshry@studioscience.com"; "angelac@fsahc.org"; "christine.kelty@parkview.com"; "lmickler@ywcalafayette.org"; "pam.isaac@howardcountyin.gov"; "lori.phillips-steele@csh.org"; "mg@abwservices.org"; "agrill@lifetreatmentcenters.org"; "agill@ywcancin.org"; "robert.gunn@rhs.care"; "ksills@hoi.help"; "amurphy@lafayette.in.gov"; "smehas@edfgewaterhealth.org"; "jlee@alternativesdv.org"; "jessica.floyd@lifespringhealthsystems.org"; "kevin.sheward@aspireindiana.org"; "shirley.ganger@oaklawn.org"; "cmatchette@getradiant.org"; "zach.fredbloom@aspireindiana.org"; "monicaelam@mybrightpoint.org"; "tonimcgowen@comcast.net"; "apaul@sojournertruthhouse.org"; "mattbeer@mybrightpoint.org"; "hshoue@ywcaerew.org"; "mcasper@stecharities.org"; "catherinegrimes@mybrightpoint.org"; "sderico@edgewaterhealth.org"; "lwilk@getradiant.org"; Dr. Ricardo Williams; Joe Winterhaler
Subject:	CoC Renewal and New Project Ranking- Renewal Project Notification
Date:	Friday, September 1, 2023 9:46:00 PM
Attachments:	FY2023 CoC Ranking Approved 8.31.23.docx

Good evening-

Attached to this email is a copy of the renewal and new project ranking the Indiana Balance of State Board approved on August 31, 2023. All projects in the ranking have been accepted for submission to HUD in the FY2023 CoC Application.

Renewal projects were ranked in order of their performance on the renewal application tool. Renewal projects received a score notification from the communityservices@ihcda.in.gov inbox on August 15, 2023.

In accordance with CoC policy, projects can appeal the decision. Please reach out to communityservices@ihcda.in.gov if you would like to inquire about an appeal. Please reach out by September 6, 2023 about appeals so we can plan accordingly.

Please note, as a renewal project the deadline for submitting your project in ESNAPS is September 11, 2023. IHCDA staff are working with projects to submit renewals for our sub-recipients. If you submitted in ESNAPS your renewal already, thank you. Please keep an eye on your email because we are having applications reviewed to make sure to keep an eye on your email because we will reach out if corrections need to be made.

Thank you and have a great weekend.

Community Services Team
Indiana Housing and Community Development Authority

30 South Meridian Street, Suite 900
Indianapolis, IN 46204

FAX 317 232 7778
EMAIL communityservices@ihcda.in.gov
WEBSITE: www.in.gov/ihcda

For updates from Lt. Governor Suzanne Crouch, please visit www.lg.in.gov

Please consider the environment before printing this email.

Good afternoon-

You are receiving this email because you submitted an Internal Renewal Program Application on behalf of your agency.

The review team reviewed the CoC project renewals and your score is now available on the Community Services Grants portal. When you log into the portal you can download a PDF of your application responses and scores in each section. The section scores are listed at the bottom of the PDF. Attached is an Excel file of the summary scores. The workbook is locked so that edits cannot be made to it. If you want to know the detail of your scores, login to the portal to review your renewal application. You can login here: https://access.in.gov/signin/ and locate the Community Services Grants portal. Your renewal that is on the attached list should be visible. If it is not, please contact communityservices@ihcda.in.gov.

If you would like to appeal your score, please select the "appeal" option in portal. That will notify us that there is an appeal in the system and we will follow-up with you. Per IN-BoS CoC policy, you can appeal your score and the first round of appeal will be reviewed by IHCDA staff. We will advise you of next steps if you are still dissatisfied with the result of your appeal. Please do not email us directly about an appeal outside the system before you file it. We want to keep accurate record of appeals and are asking that you use the system to request your appeal.

A team of non-conflicted reviewers is reviewing new projects, and we will be producing final ranking for renewal and new projects of the IN-BoS CoC Board to approve on August 31st 2023. We will notify you of your project ranking as soon as we have board approval.

In accordance with IN-BoS CoC Policies:
Renewal projects are ranked for funding in order of their score on the IRPA. New and renewal projects are ranked together. Renewal projects that are a part of a larger grant will be ranked in accordance with the highest performing project in that grant. If you see that your competitive renewal score is different than your ranking score, that means your project is going to be ranked in accordance with the ranking score, not your competitive renewal score.

Projects that are NEW (were funded in the FY2022 Competition) did not complete an IRPA since they had not started operating when the IRPA process began and they have no data to report. We will rank the new projects from FY 2022 in Tier I.

Because of changes in several projects last year, we drafted an update to the ranking policy for

transfer projects. We anticipate this policy to be approved by the board. Projects that were a result of a "transition" between one project sponsor to another will be evaluated like a new project in the competition. Since many of you have not operated your project for enough time to have a full year's worth of data, we've evaluated and scored the project, but it will be ranked in Tier I as a new project regardless of the score.

Please let us know if you have an appeal through the portal. If you have questions, please contact communityservices@ihcda.in.gov.

Best,
Rachael, the Community Services Grants Team and Funding & Resources Committee

Rachael Sample (she/her)
Community Services Grants Manager
Indiana Housing and Community Development Authority

30 South Meridian Street, Suite 900
Indianapolis, IN 46204
PHONE 317 232 3079
FAX 317 232 7778
EMAIL rsample@ihcda.in.gov
WEBSITE: www.in.gov/ihcda

For updates from Lt. Governor Suzanne Crouch, please visit www.lg.in.gov

Please consider the environment before printing this email.

From:	Sample, Rachael
To:	Julie Randall; pambrookshire; Savannah Wood; Hannah Blalock; Jennifer Layton; Eldon Solomon; Catherine Osborne; Garvey, Kristin (IHCDA)
Cc:	Broda, Alycia
Subject:	2023 CoC Competition: Notification of New Project Inclusion in the CoC Ranking
Date:	Friday, September 1, 2023 9:28:00 PM
Attachments:	FY2023 CoC Ranking Approved 8.31.23.docx

Good evening-

Attached to this email is the 2023 CoC Ranking of new and renewal projects.

The Indiana Balance of State CoC Board has selected your new project for inclusion in the ranking. Your project score is also included in the ranking, and if you'd like to appeal you can contact communityservices@ihcda.in.gov by September 6, 2023. You can review a copy of your application score breakdown in the applicant portal. In the portal you go to the "related" tab and a PDF of your application should be available. If you don't see it there, please let me know.

As a part of your inclusion in the ranking, projects highlighted in yellow will be asked to adjust their budget. We will be reaching out to you next week to discuss these adjustments. Additionally, if you are applying as a sub-recipient of IHCDA, my colleague Alycia Broda will contact you so that we can assist you in moving your application from the platform you applied in to the HUD ESNAPS system.

Thank you!

Rachael Sample (she/her)
Community Services Grants Manager
Indiana Housing and Community Development Authority

30 South Meridian Street, Suite 900
Indianapolis, IN 46204
PHONE 317 232 3079
FAX 317 232 7778
EMAIL rsample@ihcda.in.gov
WEBSITE: www.in.gov/ihcda

For updates from Lt. Governor Suzanne Crouch, please visit www.lg.in.gov

Please consider the environment before printing this email.

IN-502 Indiana Balance of State Local Competition Selection Results
Approved Project Ranking
Results Email to Applicants
Results Email to CoC ListServ
Results Posted to CoC Website
(GovDelivery System Does not Allow Email Attachments, so Public Notice
Sends them to CoC Competition Webpage)

Accepted/Rejected	Renewal or New	Rank	Total Score	Recipient Name	Project Name	Funding	Reallocation	New Funding from Reallocation
Accepted	Renew	1	103	Oaklawn	Supportive Housing Turnock Group Home Renewal 2022	$ 122,810.00		
Accepted	Renew	2	100	IHCDA	Integrated Permanent Supportive Housing I FY2023	$ 352,072.00	$ 15,000.00	
Accepted	Renew	3	99	IHCDA	IHCDA CoC III FY2023	$ 438,416.00	$ 48,713.00	
Accepted	Renew	4	98	Centerstone	Centerstone Martinsville Plaza Apartments FY2023	$ 43,868.00		
Accepted	Renew	5	97	IU Health	FY2023 Housing Links	$ 91,432.00		
Accepted	Renew	6	95	IHCDA	Gary Pathway FY2023	$ 523,502.00		
Accepted	Renew	7	95	IHCDA	IHCDA Statewide DV RRH FY2023	$ 1,487,684.00		
Accepted	Renew	8	95	Echo	Lucas Place Renewal FY2023 (IN0166L5H022108)	$ 112,679.00		
Accepted	Renew	9	94	Edgewater	Phoenix Renewal FY2023	$ 139,382.00		
Accepted	Renew	10	92	IHCDA	IHCDA Statewide DV THRRH FY2023	$ 585,029.00		
Accepted	Renew	11	91	Housing Opportunities Inc/NWICAA	Creekview	$ 396,150.00		
Accepted	Renew	12	91	Echo	Garvin Lofts Renewal FY2023 (IN0195L5H022004)	$ 358,401.00		
Accepted	Renew	13	90	IHCDA	FSAHC Jackson Street Commons FY2023	$ 196,269.00		
Accepted	Renew	14	90	IHCDA	South Shore Commons FY2023	$ 326,145.00		
Accepted	Renew	15	89	Center for the Homeless	Center for the Homeless PSH FY2023	$ 329,201.00		
Accepted	Renew	16	89	IHCDA	Lawrenceburg Consolidated	$ 876,639.00		
Accepted	Renew	17	88	IHCDA	Brightpoint PSH FY2023	$ 658,015.00		
Accepted	Renew	18	88	IHCDA	Cedars Hope I MHANI 2022	$ 90,916.00		
Accepted	Renew	19	88	IHCDA	RMHC Scattered Site PSH FY2023	$ 124,090.00		
Accepted	Renew	20	85	IHCDA	IHCDA CoC II FY2023	$ 656,657.00		
Accepted	Renew	21	85	IHCDA	MHA West Central IN YOUnity Village/Terre Firma Consolidated FY2023	$ 270,932.00	$ 30,103.00	
Accepted	Renew	22	84	IU Health	FY2023 Bridges Supportive Housing	$ 162,819.00		
Accepted	Renew	23	84	IHCDA	Housing Opps McCord Rapid Rehousing FY2023	$ 68,577.00		
Accepted	Renew	24	84	IHCDA	Housing Opps Porter Starke Supportive Housing FY2023	$ 234,200.00		

Accepted	Renew	25		83	Echo	New Start Scattered Site Housing Renewal FY2023 (IN0123L5H022011)	$	278,713.00	
Accepted	Renew	26		83	IHCDA	Supportive Housing Rental Assistance Renewal 2022	$	424,328.00	
Accepted	Renew	27		82	IHCDA	ECHO LP2/Ren16 FY2023	$	270,547.00	$ 30,061.00
Accepted	Renew	28		82	LifeSpring	LifeSpring PSH Renewal FY2023	$	231,143.00	
Accepted	Renew	29		82	IHCDA	NWI Veterans Village Homes for Heroes FY2023	$	329,675.00	$ 109,024.00
Accepted	Renew	30		81	IHCDA	Kosciusko County RRH FY2023	$	90,807.00	$ 30,000.00
Accepted	Renew	31		81	Life Treatment Centers	LTC Rental Assistance II PSH	$	180,057.00	
Accepted	Renew	32		81	Housing Opportunities Inc/NWICAA	Perm 5	$	265,463.00	
Accepted	Renew	33		80	YWCA North Central Indiana	YWCANCIN TH to RRH for DV	$	224,512.00	
Accepted	Renew	34		79	IHCDA	Aspire Mainstream II	$	167,159.00	
Accepted	Renew	35		79	IHCDA	Chapman West-Lincoln West FY2023	$	195,124.00	$ 21,681.00
Accepted	Renew	36		78	Family Services Association of Howard C	FSAHC RRH FY2023	$	119,138.00	
Accepted	Renew	37		78	IHCDA	Marion Veterans Program	$	156,192.00	
Accepted	Renew	38		78	IHCDA	Park Center PSH FY2023	$	322,042.00	$ 15,000.00
Accepted	Renew	39		77	Aurora Inc	Aurora Evansville Beacon PSH FY2023	$	209,304.00	
Accepted	Renew	40		76	Centerstone	Centerstone Limestone PSH FY2023	$	128,360.00	
Accepted	Renew	41		75	IHCDA	Vision 1505 PSH Renewal FY 2022	$	449,804.00	
Accepted	Renew	42		74	IHCDA	Continuum of Care Renewal FY2023 (HUD CoC)	$	429,244.00	
Accepted	Renew	43		73	A Better Way	ABW Rapid Rehousing FY2023	$	369,665.00	
Accepted	Renew	44		73	IHCDA	Edgewater Scattered Site PSH FY2023	$	207,758.00	
Accepted	Renew	45		73	Lafayette Transitional Housing	LTHC UPA PSH Renewal FY22	$	467,160.00	
Accepted	Renew	46		72	AIDS Ministries	PSH AMAA 2022	$	134,116.00	
Accepted	Renew	47		71	Centerstone	Centerstone SCCMHC S+C FY2023	$	61,801.00	
Accepted	Renew	48		71	Mental Health America of West Central	Community Younity	$	78,816.00	
Accepted	Renew	49		70	Centerstone	Centerstone Stepping Stones, Inc. FY2023	$	80,273.00	
Accepted	Renew	50	na		Beacon	Beacon Blooming Families New Application FY 2022	$	331,647.00	
Accepted	Renew	51	na		IHCDA	Coordinated Entry SSO FY2023	$	480,000.00	
Accepted	Renew	52	na		IHCDA	HMIS BoS FY2023	$	683,912.00	
Accepted	Renew	53	na		IHCDA	IHCDA DV Coordinated Entry FY2023	$	275,000.00	
Accepted	Renew	54	na		Lafayette Transitional Housing	LTHC SSO CE Renewal Project FY22	$	169,950.00	
Accepted	Renew	55		61	Beacon	Beacon Crawford Homes Renewal Application FY 2022	$	1,273,492.00	

Accepted	Renew	56	63	IHCDA	Centerstone Caldwell House PH FY2023	$	48,037.00				
Accepted	Renew	57	63	IHCDA	CMHC Lawrenceburg II FY2023	$	233,564.00				
Accepted	Renew	58	63	Lafayette Transitional Housing	LTHC Rapid Re-Housing Renewal FY22	$	234,288.00	$	26,032.00		
Accepted	Renew	59	61	A Better Way	ABW Joint PH RRH Th 2022	$	459,981.00				
Accepted	Renew	60	55	IHCDA	Centerstone Dunn Supportive Housing FY2023	$	105,151.00				
Accepted	New	61	80	IHCDA	Family Promise of Hendricks County Permanent Supportive Housing	$	265,140.00			$	265,140.00
Accepted	New	62	77	IHCDA	Permanent Support Housing Expansion SESW	$	367,190.00			$	60,474.00
Accepted	New	63	76	Echo	Promise Home PSH	$	305,584.00				
Accepted	New	64	72	IHCDA	Sheltering Wings PSH	$	163,088.00				
Accepted	New	65	71	IHCDA	Marion Veterans Program PSH	$	133,698.00				
Accepted	New	66	71	Lafayette Transitional Housing Center	LTHC Renewed Hope PSH Apartments	$	522,676.00				
Accepted	New	67	65	IHCDA	Veteran Outreach Team East Central Indiana RRH	$	225,608.00				
Accepted	New	68	75	IHCDA	Motels4Now PSH	$	299,620.00				
Accepted	New	69	76	IHCDA	IHCDA DV Bonus TH RRH Expansion	$	781,640.00				

This is a courtesy copy of an email bulletin sent by Elizabeth Greene.

This bulletin was sent to the following groups of people:

Subscribers of 2022 Spring Development Day Attendees, 2023 Development Day Contacts, CoC Board and Regional Leaders, Community Services, Continuum of Care (CoC) List, Coordinated Entry HMIS Users, HMIS Users, HOPWA Subs and Direct Recipients, or IHCDA Development Day (3380 recipients)

Community Services Notice

NOFO Update: FY 2023 Competition Ranking Posted Online

The FY 2023 Competition Ranking for the IN BOS CoC's NOFO application has now been posted. To view the ranking and other pertinent information, please visit: IHCDA: Internal Competition.

The application will be submitted to HUD by the deadline of September 28, 2023.

If you have questions or concerns, please email: communityservices@ihcda.in.gov.

We will await the final decision from HUD. Thank you to all the new and renewal project applicants!

IHCDA Footer

GOVDELIVERY

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Bulletins

Support   Elizabeth Greene ⌄

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Subject	Recipients	Advanced	Sent By	Sent ↓		
NOFO Update: FY 2023 Competition Ranking Posted Online	Subscribers of 2022 Spring Developmen...	✔	Elizabeth Greene	09/12/2023 10:58 AM EDT	COPY BULLETIN	VIEW REPORT
2023 Indiana Housing Conference Update and Reminders	Subscribers of 2023 Development Day C...	✔	Tonya Dinkins	09/08/2023 04:05 PM EDT	COPY BULLETIN	VIEW REPORT
From Jake's Desk - September 8, 2023	Subscribers of IHCDA Staff, IHCDA upd...	✔	Hayley Wolf	09/08/2023 01:00 PM EDT	COPY BULLETIN	VIEW REPORT
Lt. Gov. Crouch, IHCDA launch crowdfunding campaign for Markle Park Revitalization	Subscribers of Adams, Huntington, Wel...	✔	Ian Hauer	09/06/2023 08:00 AM EDT	COPY BULLETIN	VIEW REPORT
PUBLIC NOTICE - 2022 CAPER Filing	Subscribers of 2022 Spring Developmen...	✔	Brian Philps	09/05/2023 12:01 PM EDT	COPY BULLETIN	VIEW REPORT
PUBLIC NOTICE - 2022 CAPER Filing	Subscribers of Real Estate Department...	✔	Brian Philps	09/05/2023 11:49 AM EDT	COPY BULLETIN	VIEW REPORT
Save the Date: Lead-Based Paint Training Is September 20	Subscribers of 2022 Spring Developmen...	✔	Elizabeth Greene	09/05/2023 11:01 AM EDT	COPY BULLETIN	VIEW REPORT
Lt. Gov. Crouch, IHCDA launch crowdfunding campaign for River Mill Trail Connector	Subscribers of Elkhart, Kosciusko, Ma...	✔	Ian Hauer	09/05/2023 08:05 AM EDT	COPY BULLETIN	VIEW REPORT
From Jake's Desk - September 1, 2023	Subscribers of IHCDA Staff, IHCDA upd...	✔	Hayley Wolf	09/01/2023 01:05 PM EDT	COPY BULLETIN	VIEW REPORT
Updates on the 2023 Indiana Housing Conference	Subscribers of 2022 Spring Developmen...	✔	Elizabeth Greene	09/01/2023 11:54 AM EDT	COPY BULLETIN	VIEW REPORT
Lt. Gov. Crouch, IHCDA launch crowdfunding campaign for Ashley Mariah Memorial Park Inclusive Playground	Subscribers of South Central Media or...		Ian Hauer	09/01/2023 07:55 AM EDT	COPY BULLETIN	VIEW REPORT
Lt. Gov. Crouch, IHCDA launch crowdfunding campaign for UC Nature Amphitheater	Subscribers of Dearborn, Franklin, Je...		Ian Hauer	08/30/2023 08:05 AM EDT	COPY BULLETIN	VIEW REPORT
Lt. Gov. Crouch, IHCDA launch crowdfunding campaign for Friends of Woodmere Dog Park	Subscribers of Southwest Media		Ian Hauer	08/28/2023 08:05 AM EDT	COPY BULLETIN	VIEW REPORT
From Jake's Desk - August 25, 2023	Subscribers of IHCDA Staff, IHCDA upd...	✔	Hayley Wolf	08/25/2023 01:05 PM EDT	COPY BULLETIN	VIEW REPORT
Lt. Gov. Crouch, IHCDA launch crowdfunding campaign for Christyn's Place	Subscribers of Southwest Media		Ian Hauer	08/25/2023 08:05 AM EDT	COPY BULLETIN	VIEW REPORT
RED Notices Update - August 23, 2023	Subscribers of Real Estate Department...	✔	Hayley Wolf	08/23/2023 02:15 PM EDT	COPY BULLETIN	VIEW REPORT
IN BOS CoC Board Announcement: 2023 Indiana Housing Conference Update	Subscribers of 2022 Spring Developmen...	✔	Elizabeth Greene	08/23/2023 07:58 AM EDT	COPY BULLETIN	VIEW REPORT
How Did We Do? IHAF Feedback Survey	Subscribers of IHAF Recipients Survey		Hayley Wolf	08/21/2023 03:05 PM EDT	COPY BULLETIN	VIEW REPORT
From Jake's Desk - August 18, 2023	Subscribers of IHCDA Staff, IHCDA upd...	✔	Hayley Wolf	08/18/2023 01:01 PM EDT	COPY BULLETIN	VIEW REPORT
August 2023 Issue: Partnerships Are Essential in Regions 3 and 12	Subscribers of 2022 Spring Developmen...	✔	Elizabeth Greene	08/18/2023 10:27 AM EDT	COPY BULLETIN	VIEW REPORT
IHCDA...the Magazine: Summer Issue	Subscribers of Community Services, Co...	✔	Hayley Wolf	08/14/2023 02:05 PM EDT	COPY BULLETIN	VIEW REPORT

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IHCDA

Search IHCDA

IHCDA staff hosted an informational webinar for new projects on July 26th. Click **HERE** to view the recorded session.

Office Hours

Office Hours for renewal applicants will beheld on August 8, 2023 at 1:00 PM Eastern Time. The session will be recorded. **Renewal applicants can apply between June 5 and June 26, 2023.** Renewal applicants will be emailed information on how to access their renewal in the online application system.

You can find detailed instructions for renewal **HERE**.

A video recording of how to get started in Access Indiana can be viewed **HERE**.

A video recording of how to complete the renewal application can be viewed **HERE**.

A recording of the Office Hours will be available **HERE**.

Forms & Guides	Policies & Procedures	Webinars & Final CoC NOFA Applications	Deadlines
• FY2023 CoC Ranking	• 2023 Indiana BOS CoC Competition Policies • CoC Renewal and New Project Scoring Tools • Notification of Projects Rejected Reduced	• Direct HUD-Funded Renewal Session on ESNAPS	• Renewal applications due: June 26, 2023 • New project applications due: July 15, 2023 • Projects submitted to ESNAPS: September 11, 2023 • Submission to HUD: September 28, 2023

IHCDA Keybot

GENERAL COMPETITION RESOURCES

Type here to search

10:49 AM
9/12/2023

Good evening-

Attached to this email is a copy of the renewal and new project ranking the Indiana Balance of State Board approved on August 31, 2023. All projects in the ranking have been accepted for submission to HUD in the FY2023 CoC Application.

Renewal projects were ranked in order of their performance on the renewal application tool. Renewal projects received a score notification from the communityservices@ihcda.in.gov inbox on August 15, 2023.

In accordance with CoC policy, projects can appeal the decision. Please reach out to communityservices@ihcda.in.gov if you would like to inquire about an appeal. Please reach out by September 6, 2023 about appeals so we can plan accordingly.

Please note, as a renewal project the deadline for submitting your project in ESNAPS is September 11, 2023. IHCDA staff are working with projects to submit renewals for our sub-recipients. If you submitted in ESNAPS your renewal already, thank you. Please keep an eye on your email because we are having applications reviewed to make sure to keep an eye on your email because we will reach out if corrections need to be made.

Thank you and have a great weekend.

Community Services Team
Indiana Housing and Community Development Authority

30 South Meridian Street, Suite 900
Indianapolis, IN 46204

FAX 317 232 7778
EMAIL communityservices@ihcda.in.gov
WEBSITE: www.in.gov/ihcda

IN-502 Indiana Balance of State
HUD's Homeless Data Exchange (HDX) Competition Report

2023 HDX Competition Report
FY2022 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	6067	6144	7861	1717
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1096	1103	1234	131
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	4971	5041	6627	1586

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	7535	7655	9634	1979
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1484	1540	1509	-31
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	6051	6115	8125	2010

From: CoCNOFO <CoCNOFO@hud.gov>
Sent: Friday, August 25, 2023 11:16 AM
To: Garvey, Kristin (IHCDA) <KriGarvey@ihcda.IN.gov>
Subject: LSA Usability Information

**** This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email. ****

Dear Kristin Garvey,

Thank you for your participation in 2022 LSA data collection. A comprehensive review of CoC data submissions was conducted, and the ability to use those data to produce national estimates was determined at the project type and household type level (e.g., rapid rehousing for adult only households was assessed separately from rapid rehousing for households with adults and children). This email includes usability results for **IN-502 - Indiana Balance of State CoC**.

- ***Usable*** data indicates that both data on the number of people served and data on the inventory of beds used to serve people were of sufficient quality to be used for this purpose.
- ***Partially Usable*** data indicates that while the quality of data on people served was sufficient, the data on inventory was not able to be used.
- ***Not Usable*** data indicates there were remaining and considerable issues with the data.

Usability Results

CoC	ES, SH, TH – Adult Only	ES, SH, TH – Adults and Children	ES, SH, TH – Child Only	RRH -- Adult Only	RRH – Adults and Children	RRH – Child Only	PSH -- Adult Only	PSH – Adults and Children	PSH – Child Only
IN-502	Not Usable	Not Usable	Not Usable	Not Usable	Not Usable	Not Usable	Not Usable	Not Usable	Not Usable

If you have questions regarding these determinations, please review your last data submissions for flags that were left unresolved at the end of data collection. Thank you again for your participation in the 2022 LSA data collection process.

CoC NOFO Team

Office of Special Needs Assistance Programs

U.S. Department of Housing and Urban Development

cocnofo@hud.gov

Housing Leverage for Sheltering Wings
Haven Homes Project
Operated by Sheltering Wings and Real America
13 Project Based Units
$154,392 in Housing Leverage Funds
18 Households Served by Project in Mix of Rental Assistance and Services

Indiana Housing & Community Development Authority

April 1, 2020

RealAmerica Development, LLC
8250 Dean Road
Indianapolis, IN 46240

RE: Award of Project Based Vouchers: Haven Homes of Hendricks County

The Indiana Housing and Community Development Authority reviewed the application submitted by RealAmerica Development, LLC requesting Project Base Vouchers for its Permanent Supportive Housing Project.

In keeping with its mission, IHCDA intends to award a predetermined number of project-based vouchers to supportive housing developments aimed at reducing long-term homelessness.

IHCDA commits to awarding the thirteen (13) Project Based Vouchers as described below:

Unit Size	Vouchers Requested	Current FMR	Unit Type
1 BR	4	$778	Apartments
2 BR	5	$946	Apartments
3 BR	4	$1256	Apartments

All utilities for the PBV units are to be paid by the Owner and no Utility Allowance will be provided. The initial term of the HAP contract will be 15 years and will not be considered for an amendment until the contract approaches expiration, at which point RealAmerica Development, LLC and IHCDA will determine whether a contract extension is advantageous. The award will be contingent upon the Project meeting all requirements including the HUD Subsidy Layering Review.

Sincerely,

Jeff Zongolowicz
Manager of Housing Choice Operations

ADDRESS 30 South Meridian Street, Suite 900, Indianapolis, IN 46204
PHONE 317 232 7777 **TOLL FREE** 800 872 0371 **WEB** www.ihcda.IN.gov

State of Indiana
Lieutenant Governor
Suzanne Crouch

EQUAL OPPORTUNITY EMPLOYER AND HOUSING AGENCY

IN-BoS Indiana Balance of State
Healthcare Formal Agreements
Brightpoint PSH Expansion
Sheltering Wings PSH
Family Promise PSH
LTHC Renewed Hope PSH

The Otis R Bowen Center for Human Services, Inc.
2621 East Jefferson Street
Warsaw, IN 46580
(800) 342.5653
www.bowencenter.org

August 9, 2023

Healthcare, Substance Abuse, and Mental Health Services Agreement

This agreement is by and between Bowen Center and Community Action of Northeast Indiana dba Brightpoint, Permanent Supportive Housing (PSH) program.

Bowen Center agrees to:

1. Provide access to its array of substance abuse treatment and recovery services to all program participants who qualify and choose the services.
2. Provide access to its array of mental health treatment services to all program participants who qualify and choose the services.
3. Provide access to its array of healthcare services to all program participants who qualify and choose the services.
4. Project eligibility for program participants in the project will be based on CoC fair housing requirements and will not be restricted by Bowen Center.
5. Access to these services will be available throughout the entirety of the grant term.

Robert Ryan, President/CEO

Bowen Center   BOWEN CENTER
8/10/23

Stephen T. Hoffman
Stephen T. Hoffman
President & CEO
Brightpoint

Healthcare Formal Agreement
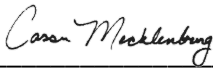
August 7, 2023

This agreement is by and between Cummins Behavioral Health Systems, Inc. and Sheltering Wings.

Cummins Behavioral Health Systems, Inc. agrees to:

1. Provide access to its array of behavioral health treatment and recovery services to all program participants who qualify and choose the service.

2. Project eligibility for program participants in the project will be based on CoC Program fair housing requirements and will not be restricted by the healthcare service provider.

3. Access to behavioral health treatment and recovery services will be available throughout the entirety of the grant term.

Amy J. Mace   8/8/23   _Cassie Mecklenburg_   8/8/23
_____   _____
Amy Mace   Cassie Mecklenburg
President and CEO   Executive Director
Cummins Behavioral Health Systems, Inc.   Sheltering Wings

FamilyPromise
of Hendricks County

Healthcare Formal Agreement

September 19, 2023

This agreement is by and between Family Promise of Hendricks County and Hickory Recovery Network

Hickory Recovery Network agrees to:

1. Provide access to its array of substance use treatment and recovery services to all Family Promise of Hendricks County program participants who qualify and choose the service.
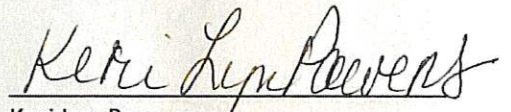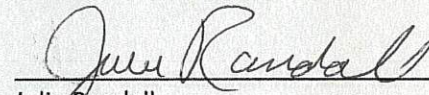
2. Eligibility will meet fair housing requirements and not be restricted by the Hickory Recovery Network.

3. Access to substance use treatment and recovery will be available throughout the grant term.

Julie Randall
Executive Director
Family Promise of Hendricks County

Keri Lyn Powers
Regional Director of Bus. Development
Hickory Recovery Network

WE ALL BELONG
AT FAMILY PROMISE

Family Promise of Hendricks County, Inc. is a 501(c)(3) public charity and contributions are tax deductible to the fullest extent allowed by law.

238 North Vine Street, Plainfield, IN 46168   (317) 296-3742   www.FamilyPromiseHendricksCounty.org

MEMORANDUM OF UNDERSTANDING

BETWEEN
Lafayette Transitional Housing Center
and
Valley Oaks Health

Purpose: Lafayette Transitional Housing Center provides housing and supportive services to individuals and families who are experiencing homelessness. LTHC recognizes that there are many factors that must be addressed for each person to remain stably housed. To that end, LTHC encourages agencies whose services overlap with the needs of our guests to provide intensive supportive care. Partner agencies are encouraged to coordinate care with LTHC tenants for assessments, enrollments, interventions, etc. to help meet the holistic needs of those who had experienced homelessness and help them sustain their housing.

Parties:
This agreement is between Lafayette Transitional Housing Center (herein after called LTHC) and Valley Oaks Health (herein after called Valley Oaks) for the purpose of conducting this memorandum of understanding.

Term of Agreement:
This agreement will commence on October 1, 2024 and will end September 30, 2025. LTHC and Valley Oaks can agree to review and/or renegotiate the provisions of this agreement at any time deemed appropriate.
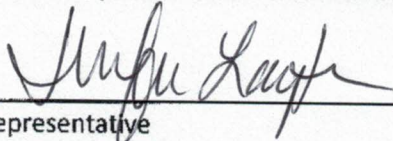
Programming:
Valley Oaks will make the following services available to the 40 tenants of the Renewed Hope Permanent Supportive Housing Project:

Case Management Services/Life Skills – these services include direct assistance in gaining access to needed medical, social, educational, and other services; coordination of care; oversight of each individual case and linkage to other appropriate services, and training in activities of daily living. Case managers are required to have a Bachelor's Degree in Psychology, Social Work or another Human Behavioral field. The hourly rate for case management services is $26.50 per quarter hour.
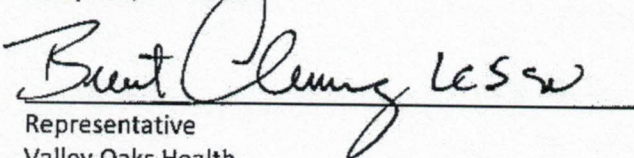
Value of Service:
Valley Oaks will provide the above programming at no cost to LTHC. The total value of the in-kind services is $117,000/year for two FTE staff salaries/fringe. These services are reimbursed by Medicaid.

_____   _____
Representative   Date 8/1/23
Lafayette Transitional Housing Center
815 North 12th Street
Lafayette, IN 47904

_____   _____
Representative   Date 8/1/2023
Valley Oaks Health
425 North 26th Street
Lafayette, IN 47904