

# 2007 Exhibit 1: San Jose/Santa Clara City & County Continuum of Care (CoC) Application

## Part I: CoC Organizational Structure

<b>HUD-Defined CoC Name:*</b>	<b>CoC Number*</b>
San Jose/Santa Clara City & County CoC	CA-500

### A: CoC Lead Organization Chart

<b>CoC Lead Organization:</b> Steering Committee of the Santa Clara Countywide Collaborative on Affordable Housing and Homeless Issues		
<b>CoC Contact Person:</b> Margaret Gregg		
<b>Contact Person's Organization Name:</b> Santa Clara County, Chief Executive Office, Office of Affordable Housing		
<b>Street Address:</b> 1735 North First Street, Suite 265		
<b>City:</b> San Jose	<b>State:</b> CA	<b>Zip:</b> 95112
<b>Phone Number:</b> (408) 441-4257	<b>Fax Number:</b> (408) 436-1956	
<b>Email Address:</b> Margaret.Gregg@ceo.sccgov.org		

### B: CoC Geography Chart

Geographic Area Name	6-digit Code
Cupertino	060906
Gilroy	061452
Milpitas	062274
Mountain View	062382
Palo Alto	062682

Geographic Area Name	6-digit Code
San Jose	063258
Santa Clara (City of)	063354
Santa Clara County	069085
Sunnyvale	063660

# CoC Structure and Decision-Making Processes

## C: CoC Groups and Meetings Chart

CoC Planning Groups		Meeting Frequency (check only one column)				Enter the number of organizations/entities that are members of each CoC planning group listed on this chart.
		At Least Monthly	At Least Quarterly	At Least Biannually	Annually	
<p>Note concerning <b>Blue Ribbon Commission on Ending Homelessness and Solving the Affordable Housing Crisis (“BRC”)</b> referred to below: through efforts of the Collaborative, this top-flight leadership group was established in 2007 to develop implementation action steps, funding resources and public support for the County and San Jose 10-Year Plans to End Homelessness and new 20-year plan guiding affordable housing development. The BRC is co-chaired by Chair of the Santa Clara County Board of Supervisors and Mayor of San Jose, and managed by the Chair of the CoC’s Steering Committee.</p>						
<b>CoC Primary Decision-Making Group</b>						
<b>Name:</b>	<b>Steering Committee</b>	X				<b>27</b>
<b>Role:</b>	The Board of Directors for the Santa Clara Collaborative on Affordable Housing and Homeless Issues; plans and oversees implementation of strategies toward ending homelessness; monitors outcomes; determines project priorities					
<b>Other CoC Committees, Sub-Committees, Workgroups, etc.</b>						
<b>Name:</b>	<b>Executive Committee</b>	X				<b>11</b>
<b>Role:</b>	Coordinates Committee work, addresses current issues, sets Steering Committee agenda, updates and enforces by-laws, represents the Collaborative in other forums					
<b>Name:</b>	<b>Santa Clara Countywide Collaborative on Affordable Housing and Homeless Issues</b>			X		<b>152</b>
<b>Role:</b>	The Continuum of Care membership body; meets bi-annually for a Retreat in August and Annual Meeting to elect directors and officers and for general business in January.					
<b>Name:</b>	<b>Housing Committee (co-convening with BRC’s Shift to Housing First and Increase Housing Supply Work Groups)</b>	X				<b>38</b>
<b>Role:</b>	Oversees implementation and annual review of the Collaborative’s housing strategies to end homelessness; tracks housing projects in the pipeline; develops BRC’s Rapid Re-Housing, Land Use and Finance Initiatives.					
<b>Name:</b>	<b>Job Development Committee (co-convening with BRC’s Shift to Housing First Work Group)</b>	X				<b>28</b>
<b>Role:</b>	Oversees implementation and annual review of the Collaborative’s strategies to increase income through employment; develops BRC’s Wrap-Around Services Initiative.					
<b>Name:</b>	<b>Benefits Committee (co-convening with BRC’s Shift to Housing First Work Group)</b>	X				<b>25</b>
<b>Role:</b>	Oversees implementation and annual review of the Collaborative’s strategies to increase access to mainstream income and treatment benefits; develops BRC’s Wrap-Around Services Initiative.					

<b>Name:</b>	<b>Outreach to People who are Unhoused Committee (co-convening with BRC's Prevent Homelessness Work Group)</b>	<b>X</b>				<b>32</b>
<b>Role:</b>	Oversees implementation and annual review of the Collaborative's strategies to outreach to and engage people who are homeless in services and housing; convenes Countywide "Outreach Connect" events; develops BRC's Outreach & Engagement Initiative.					
<b>Name:</b>	<b>Prevention of Homelessness Committee (co-convening with BRC's Prevent Homelessness Work Group)</b>	<b>X</b>				<b>24</b>
<b>Role:</b>	Oversees implementation and annual review of the Collaborative's strategies to prevent homelessness; develops BRC's Discharge Planning Initiative through sub-committees: Corrections/Probation, Mental Health, Drug & Alcohol and Foster Care.					
<b>Name:</b>	<b>Technology Committee</b>		<b>X</b>			<b>14</b>
<b>Role:</b>	Oversees implementation and annual review of the Collaborative's strategies to assess needs and measure success; HMIS oversight; sponsors trainings and monthly User Group Meetings; meets in-person bi-annually and as-needed by email. <i>Counsels BRC on technology strategies.</i>					
<b>Name:</b>	<b>Shelter Provider Network</b>	<b>X</b>				<b>24</b>
<b>Role:</b>	Shares information and resources, promulgates services/housing program quality assurance standards; conducts site visits to assess program performance; sponsors monthly trainings.					
<b>Name:</b>	<b>Outcomes Committee (ad hoc)</b>		<b>X</b>			<b>5</b>
<b>Role:</b>	Develops tools to be used by the Housing, Prevention, Outreach to Unhoused People, Benefits, Job Development and Technology Committees to review and refine measurable outcomes of the Collaborative's strategies assigned to each of those committees.					
<b>Name:</b>	<b>Unhoused People's Involvement in CoC (ad hoc)</b>		<b>X</b>			<b>8</b>
<b>Role:</b>	Engages people who are experiencing or recently have experienced homelessness in the Collaborative including through committee membership, focus group participation and other mechanisms; takes into consideration time and economic resource barriers to participation					
<b>Name:</b>	<b>Project Homeless Connect Planning Group (ad hoc)</b>		<b>X</b>			<b>22</b>
<b>Role:</b>	Plans County and City of San Jose-sponsored Project Homeless Connect events (a one-day concentrated effort to assist chronically unhoused residents on the road to permanent housing by connecting them to a range of services; committee meets monthly before PHC events.					
<b>Name:</b>	<b>Homeless Assistance Grants Committee</b>		<b>X</b>			<b>10</b>
<b>Role:</b>	Recommends to the Steering Committee the process and tools to use in outreaching for, reviewing, scoring and ranking projects; <i>meets January – May and convenes Collaborative in Fall to discuss funding priorities</i>					
<b>Name:</b>	<b>Review and Rank Panel</b>	<b>X</b>				<b>6</b>
	Reviews, scores and recommends to the Steering Committee the priority order of applicants; recommends program amendments to applicants; <i>meets three times in April-May</i>					
<b>Name:</b>	<b>Appeals Panel</b>				<b>X</b>	<b>3</b>
<b>Role:</b>	Considers appeals of Review and Rank Panel recommendations presented by applicants for recommendation to the Steering Committee					

## D: CoC Planning Process Organizations Chart

	Specific Names of All CoC Organizations	Geographic Area Represented	Subpopulations Represented, if any	
<b>PUBLIC SECTOR</b>	<b>STATE GOVERNMENT AGENCIES</b>			
	Office of Assembly Member Jim Beall	ALL		
	California Department of Human Services, Child Health and Disability Prevention Program – Foster Care	ALL	Y	
	California Department of Motor Vehicles	ALL		
	California Employment Development Department – Job Services	ALL		
	California Employment Development Department – Migrant Farmworker Program	ALL		
	<b>LOCAL GOVERNMENT AGENCIES</b>			
	Santa Clara County Board of Supervisors Don Gage Blanca Alvarado	SANTA CLARA COUNTY		
	Santa Clara County Chief Executive Office	SANTA CLARA COUNTY		
	Santa Clara County Office of Affordable Housing	SANTA CLARA COUNTY		
	Santa Clara County Office of Veterans Services	SANTA CLARA COUNTY	VET	
	Santa Clara County School Linked Services	SANTA CLARA COUNTY	Y	
	Santa Clara County Social Services Agency, Office of the Director	SANTA CLARA COUNTY	Y	
	Santa Clara County Social Services Agency, Department of Employment and Benefit Services	SANTA CLARA COUNTY		
	Santa Clara County Social Services Agency Department of Aging and Adults Services – Adult Protective Services	SANTA CLARA COUNTY		
	Santa Clara County Social Services Agency Employment Connection	SANTA CLARA COUNTY		
	Santa Clara County Social Services Agency Department of Development and Operational Planning	SANTA CLARA COUNTY		
	Santa Clara County Social Services Agency Department of Family and Children Services	SANTA CLARA COUNTY	Y	
	Santa Clara Valley Health & Hospital System, Office of the Director	SANTA CLARA COUNTY		
	Department of Alcohol and Drug Services, Santa Clara Valley Health & Hospital System	SANTA CLARA COUNTY	SA	
	Mental Health Department, Santa Clara Valley Health & Hospital System	SANTA CLARA COUNTY	SMI	VET

Public Health Department, Santa Clara Valley Health & Hospital System	SANTA CLARA COUNTY	HIV	
Santa Clara Valley Water District	SANTA CLARA COUNTY		
Valley Transportation Authority	SANTA CLARA COUNTY		
Santa Clara County Cities Association	CUPERTINO GILROY MILPITAS MOUNTAIN VIEW PALO ALTO SAN JOSE SANTA CLARA CITY OF SUNNYVALE		
City of Gilroy Parks and Recreation	GILROY		
City of Gilroy, Community Services Division	GILROY		
City of Gilroy, Housing and Community Development	GILROY		
City of Morgan Hill, Office of the Mayor	MORGAN HILL (069085)		
City of Morgan Hill, Community Development Department	MORGAN HILL (069085)		
City of Palo Alto, Human Relations Commission	PALO ALTO		
City of Palo Alto, Human Services Division	PALO ALTO		
City of San Jose, Office of the Mayor	SAN JOSE		
City of San Jose Housing Department	SAN JOSE		
City of San Jose, Department of Planning Building and Code Enforcement	SAN JOSE		
City of Santa Clara, Office of the Mayor	SANTA CLARA		
City of Santa Clara, Housing and Community Services Division	SANTA CLARA		
<b>PUBLIC HOUSING AGENCIES</b>			
Housing Authority of the County of Santa Clara	ALL		
<b>SCHOOL SYSTEMS / UNIVERSITIES</b>			
Gavilan College	ALL		
Gilroy Unified School District (Migrant Education, Pre-School, After School Programs)	GILROY		
Morgan Hill Unified School District	MORGAN HILL (069085)		
San Jose State University	ALL		
San Jose Unified School District	SAN JOSE		
Santa Clara County Office of Education	SANTA CLARA COUNTY		
Santa Clara Unified School District – Educational Options (Adult Education)	SANTA CLARA		

	<b>LAW ENFORCEMENT / CORRECTIONS</b>			
	Santa Clara County Department of Correction	SANTA CLARA COUNTY		
	Santa Clara County Department of Probation	SANTA CLARA COUNTY		
	Santa Clara County Office of the Sheriff	SANTA CLARA COUNTY		
	Santa Clara County Superior Court – Mental Health/Drug Treatment Court	ALL	SMI	SA
	Santa Clara County Superior Court – Outreach Court	ALL		
	City of Gilroy Police Department	GILROY		
	City of Palo Alto Police Department	PALO ALTO		
	City of Morgan Hill Police Department	MORGAN HILL (069085)		
	City of San Jose Police Department	SAN JOSE		
	<b>LOCAL WORKFORCE INVESTMENT ACT (WIA) BOARDS</b>			
	work2future (Silicon Valley Workforce Investment Network)	SAN JOSE GILROY		
	NOVA (North Valley Job Training Consortium)	CUPERTINO MILPITAS MOUNTAIN VIEW PALO ALTO SANTA CLARA SUNNYVALE		
	<b>OTHER</b>			
	Representative Zoe Lofgren, U.S. House of Representatives	ALL		
	U.S. Department of Agriculture, Food and Nutrition Service, FSP	ALL		
	U.S. Department of Housing and Urban Development, CPD	ALL		
	U.S. Department of Veterans Affairs	ALL	VET	
	U.S. Social Security Administration	ALL	SMI	SA
<b>PRIVATE SECTOR</b>	<b>NON-PROFIT ORGANIZATIONS</b>			
	Alliance for Community Care	ALL	SMI	SA
	ASK the Guardian	GILROY	SA	
	Bill Wilson Center	ALL	Y	
	Center for Employment Training	ALL		
	Charities Housing Development Corporation	ALL		
	City of Gilroy Senior Center	GILROY		
	Community Services Agency	MOUNTAIN VIEW, LOS ALTOS		
	Community Solutions	GILROY	SMI	DV
	Community Technology Alliance	ALL		

Cupertino Community Services	CUPERTINO		
EHC Lifebuilders	ALL	SA	VETS
Family Supportive Housing	SAN JOSE		
GANAS (Glenview Neighbors Achieving Success)	GILROY		
Gilroy Family Resource Center	GILROY		
Girl Scouts	ALL		
Go Kids	ALL		
HomeBase/The Center for Common Concerns	ALL		
Housing Choices Coalition	SANTA CLARA MOUNTAIN VIEW SAN JOSE		
Housing for Independent People	ALL	SMI	DV
Indochinese Resettlement and Cultural Center	SAN JOSE		
InnVision, the Way Home	SAN JOSE	SMI	SA
Learning and Loving Education Center	GILROY MORGAN HILL (069085)		
Loaves and Fishes	SAN JOSE		
MACSA (Mexican American Community Services Agency)	ALL		
Meals on Wheels	ALL		
Morgan Hill Substance Abuse	ALL	SA	
Mothers Against Drug/Alcohol Abuse	GILROY	SA	
Mt. Madonna YMCA – Parents Helping Parents	GILROY		
Neighborhood Housing Services Silicon Valley	ALL		
Next Door Solutions to Domestic Violence	ALL	DV	
Next Step Center	ALL	VET	
Opportunities Industrialization Center West (OICW)	PALO ALTO		
PALS, Providing Assistance/Linkages to Services	ALL	SMI	SA
Peninsula Habitat for Humanity	ALL		
Planned Parenthood	ALL		
Rebekkah Children’s Services	GILROY		
Red Cross, Silicon Valley Chapter	ALL		
San Andreas Regional Center	ALL		
Silicon Valley Independent Living Center	GILROY	SMI	SA
South County Collaborative	ALL		
South County Housing	GILROY		
Spring Board Forward	ALL		
Support Network for Battered Women	MOUNTAIN VIEW	DV	
Tzu Chi Foundation	MILPITAS		
Unity Care	ALL	Y	
Vietnamese Voluntary Foundation	ALL		
Vision Literacy	GILROY		

<b>FAITH-BASED ORGANIZATIONS</b>			
Advent Lutheran	MORGAN HILL (069085)		
Catholic Charities of San Jose	ALL		
CHAM - Community Homeless Alliance Ministry	SAN JOSE		
City Team Ministries	SAN JOSE		
Gilroy United Methodist Church	GILROY		
Sacred Heart Community Services	SAN JOSE		
Salvation Army	SAN JOSE		
San Jose Cathedral Foundation	SAN JOSE	SMI	
South Valley Community Church	GILROY		
St. Joseph's Family Center	GILROY		
St. Mary's Church	GILROY		
Trinity Episcopal Cathedral	SAN JOSE		
<b>FUNDERS / ADVOCACY GROUPS</b>			
Affordable Housing Network	ALL		
Bay Area Legal Aid	ALL		
California Rural Legal Assistance	ALL		
Child Advocates	ALL		
First 5 Santa Clara County	ALL		
Full Circle Fund			
The Health Trust	ALL	HIV	
Housing Trust of Santa Clara County	ALL		
Local Initiatives Support Corporation (LISC)	ALL		
Mental Health Advocacy Project	ALL	SMI	
Nolan Foundation	ALL		
Project Sentinel	ALL		
Silicon Valley Community Foundation	ALL		
Silicon Valley Council of Nonprofits	ALL		
United Way of Silicon Valley	ALL		
<b>BUSINESSES (BANKS, DEVELOPERS, BUSINESS ASSOCIATIONS, ETC.)</b>			
Adobe	ALL		
Bank of America	ALL		
SCS Development Corporation - Citation Homes	ALL		
Citibank	ALL		
Dan Lopez and Associates	ALL		
4 <sup>th</sup> Street Pizza Company	SAN JOSE		
Homebuilders Association of Northern California	ALL		
IBM	ALL		
KB Home South Bay	ALL		
Morgan Hill Chamber of Commerce	MORGAN HILL (069085)		
Palo Alto Downtown Business and Professional Association, Downtown Streets Team	PALO ALTO	SMI	SA
Palo Alto Hotel	PALO ALTO		
San Jose/Silicon Valley Chamber of Commerce	ALL		

Silicon Valley Leadership Group	ALL		
Spectrum Equity Investors	ALL		
Tri-County Division of the California Apartment Association	ALL		
Working Partnerships	ALL		
<b>HOSPITALS / MEDICAL REPRESENTATIVES</b>			
Alzheimers Association	ALL		
Gardner Family Health Network	ALL	SMI	SA
Health Trust/Health Connections	ALL	HIV	SMI
Kaiser Santa Teresa	SAN JOSE		
Kaiser Permanente Gilroy	GILROY		
Hospital Council of Northern and Central California	ALL	SMI	SA
Rota Care	ALL		
Santa Clara Valley Health & Hospital System, Santa Clara Valley Medical Center	ALL		
Santa Clara Valley Health & Hospital System, Valley Health Center, Gilroy	GILROY	HIV	
Santa Clara Valley Health & Hospital System Homeless Health Care Program	SANTA CLARA COUNTY	HIV	
St. Louise Regional Hospital	GILROY	HIV	SMI
Veterans Affairs Palo Alto Health Care System	ALL	VETS	SA
<b>HOMELESS / FORMERLY HOMELESS PERSONS</b>			
Kathleen Carrington	GILROY		
Norman Carroll	PALO ALTO SAN JOSE		
Chester	SAN JOSE		
Diane Guido Evans	GILROY		
Susanna/CHAM	SAN JOSE		
Joel Wolfberg	PALO ALTO		
<b>OTHER</b>			
Jerry Burstein	SAN JOSE		
Dina Campeau	ALL		
Charlotte Pizzo	SAN JOSE		
Mary Ellen Salzano	GILROY		
Timoteo Vasquez	GILROY		
Benito County Human Services Agency	IN NEIGHBOR COUNTY		

## E: CoC Governing Structure Chart

1. Is the CoC's primary decision-making body a legally recognized organization (check one)?

Yes, a 501(c)(3)

Yes, a 501(c)(4)

Yes, other – specify: **Unincorporated California Public Benefit Association** (legally recognized for some very limited purposes)

No, not legally recognized

2. If your CoC were provided with additional administrative funds from HUD, would the primary decision-making body, or an agent designated by it (e.g. a city or non-profit organization), be able to be responsible for activities such as applying for HUD funding and serving as the grantee, providing project oversight, and monitoring? Explain.

At this time the answer is “no,” but the Steering Committee of the Santa Clara County Collaborative on Affordable Housing and Homeless Issues will continue to consider the issue.

The Collaborative's main concerns are:

a. A single grantee with multiple sponsors could wield undue control in how grant funds are expended by negotiating grant amendments with HUD without the Steering Committee's (Continuum of Care's) input or approval. That risk is minimized now because our Continuum of Care has multiple grantees and our local HUD office requests the Steering Committee's input on grant amendments. However, if single grantees become necessary to afford appropriate oversight, we would expect that that HUD regulations or McKinney-Vento statutes be amended to require CoC approval of grant amendments.

b. As an unincorporated public benefit association with an all-volunteer board and limited dedicated staff, it could not assume all of those responsibilities, and an appropriate designee is not apparent. Members of the Collaborative are not interested in an existing community based organization knowledgeable about homelessness and housing issues and the requirements of these HUD Continuum of Care grants assuming the role. There is concern about confidentiality and conflicts of interest in that regard. At this lean economic time in local government, County and City agencies are not interested in assuming the role, and prefer to expend their resources creating housing and services and administering the programs they fund. The Collaborative could incorporate and hire staff, but the administrative funds required to perform the scale of work suggested would eclipse the value of 2.5% of Supportive Housing Program grant funds. The Collaborative is well aware that much of the grantees' and sponsors' costs in administering the grants are borne by the agencies. The Collaborative would not choose to raise funds for itself to serve in that role, preferring instead to raise funds for housing and services.

It should be noted that the Steering Committee's answer is based on the current “project oversight and monitoring” responsibilities of grantees.

If this question also means to elicit the Steering Committee's willingness to assume the monitoring activities currently undertaken by HUD, then its answer is that it is unwilling to assume those responsibilities at any time. HUD, and not the Continuum of Care, has authority to deobligate and/or require repayment of funds. Its review of and input on, decisions regarding appropriateness of grant management activities are necessary filters to support continued funding.

<p>3. What percentage of the decision-making body membership represents the private sector, including non-profit providers, homeless or formerly homeless persons, advocates and consumer interests, etc.?</p>	<p>70%</p>
<p>4a. Indicate how the <b>members</b> of the primary decision-making body are selected (check all that apply):</p> <p> <input checked="" type="checkbox"/> Elected                      <input type="checkbox"/> Assigned/Volunteer  <input checked="" type="checkbox"/> Appointed                      <input type="checkbox"/> Other – specify: _____ </p>	
<p>4b. Briefly explain the selection process. (For example, if 5 members are appointed and 6 are elected, explain why this process was established and describe how it works.)</p> <p>The processes of the Santa Clara County Collaborative on Affordable Housing and Homeless Issues to elect/appoint members of the decision making body (the Steering Committee/Board of Directors) are contained in its by-laws, adopted by the members of the Collaborative (representing over 160 nonprofit, government and for-profit agencies and unaffiliated individuals):</p> <p>Steering Committee/Board of Director members conduct the activities and affairs and exercise the corporate powers of the Collaborative unless California law requires the entire membership to act. The number of <b>elected</b> Directors is at least 17, and an additional six Directors are <b>appointed</b> ex-officio voting members.</p> <p><b><u>Elected Members</u></b></p> <p>Steering Committee/Board of Director members are <b>elected</b> by the entire membership of the Collaborative at its annual meeting in January to ensure representation in policy and planning decisions by stakeholders from both the private and public sector: nonprofit developers of affordable housing, services providers, government representatives, shelter providers, higher education, business representatives, client advocates/unhoused, formerly unhoused representatives, advocacy groups, employment and training agencies, labor and at-large members.</p> <p>Nominees for <b>elected</b> Steering Committee/Board of Director membership within the specified stakeholder groups are requested and published in advance of the meeting. Additional nominations may be made at the annual meeting.</p> <p><b><u>Appointed Members</u></b></p> <p>Six ex-officio voting members are <b>appointed</b> to provide on-going representation from our Continuum of Care’s key <i>governmental departments</i> and <i>networks</i> of agencies who work toward ending homelessness:</p> <ul style="list-style-type: none"> <li>▪ the Santa Clara County Homeless Concerns Coordinator, a staff position within the County’s Office of Affordable Housing;</li> <li>▪ the San Jose Homeless Coordinator, a staff position within the San Jose Department of Housing;</li> <li>▪ the Housing Authority;</li> <li>▪ the Emergency Assistance Network of the United Way of Silicon Valley;</li> <li>▪ the Affordable Housing Network; and</li> <li>▪ the South County Collaborative.</li> </ul>	

5. Indicate how the **leaders** of the primary decision-making body are selected (check all that apply):

- Elected                       Assigned/Volunteer  
 Appointed                       Other – specify: \_\_\_\_\_

**F: CoC Project Review and Selection Chart**

<b>1. Open Solicitation</b>	
a. Newspapers <input checked="" type="checkbox"/>	d. Outreach to Faith-Based Groups <input checked="" type="checkbox"/>
b. Letters/Emails to CoC Membership <input checked="" type="checkbox"/>	e. Announcements at CoC Meetings <input checked="" type="checkbox"/>
c. Responsive to Public Inquiries <input checked="" type="checkbox"/>	f. Announcements at Other Meetings <input checked="" type="checkbox"/>
<b>2. Objective Rating Measures and Performance Assessment</b>	
a. CoC Rating & Review Committee Exists <input checked="" type="checkbox"/>	j. Assess Spending (fast or slow) <input checked="" type="checkbox"/>
b. Review CoC Monitoring Findings <input checked="" type="checkbox"/>	k. Assess Cost Effectiveness <input checked="" type="checkbox"/>
c. Review HUD Monitoring Findings <input checked="" type="checkbox"/>	l. Assess Provider Organization Experience <input checked="" type="checkbox"/>
d. Review Independent Audit <input checked="" type="checkbox"/>	m. Assess Provider Organization Capacity <input checked="" type="checkbox"/>
e. Review HUD APR for Performance Results <input checked="" type="checkbox"/>	n. Evaluate Project Presentation <input checked="" type="checkbox"/>
f. Review Unexecuted Grants <input checked="" type="checkbox"/>	o. Review CoC Membership Involvement <input checked="" type="checkbox"/>
g. Site Visit(s) [on rotating basis] <input checked="" type="checkbox"/>	p. Review Match <input checked="" type="checkbox"/>
h. Survey Clients <input checked="" type="checkbox"/>	q. Review All Leveraging Letters (to ensure that they meet HUD requirements) <input checked="" type="checkbox"/>
i. Evaluate Project Readiness <input checked="" type="checkbox"/>	
<b>3. Voting/Decision System</b>	
a. Unbiased Panel / Review Committee <input checked="" type="checkbox"/>	d. One Vote per Organization <input checked="" type="checkbox"/>
b. Consumer Representative Has a Vote <input checked="" type="checkbox"/>	e. Consensus (general agreement) <input type="checkbox"/>
c. All CoC Members Present Can Vote <input type="checkbox"/>	f. Voting Members Abstain if Conflict of Interest <input checked="" type="checkbox"/>

**G: CoC Written Complaints Chart**

<p>Were there any written complaints received by the CoC regarding any CoC matter in the last 12 months?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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## Part II: CoC Housing and Service Needs

### H: CoC Services Inventory Chart

(1)  <b>Provider Organizations</b>	(2) <b>Prevention</b>					(3) <b>Outreach</b>			(4) <b>Supportive Services</b>									
	Mortgage Assistance	Rental Assistance	Utilities Assistance	Counseling/Advocacy	Legal Assistance	Street Outreach	Mobile Clinic	Law Enforcement	Case Management	Life Skills	Alcohol & Drug Abuse	Mental Health Counseling	Healthcare	HIV/AIDS	Education	Employment	Child Care	Transportation
Alcoholics Anonymous											X							
Alliance for Community Care						X			X			X						
Alum Rock Counseling Services									X			X						
Ambassador Training Program				X														
American Red Cross – Silicon Valley Chapter		X																
Asian Americans for Community Involvement	X	X	X						X	X			X				X	
Asian Law Alliance				X	X													
ASK the Guardian											X							
Bill Wilson Center		X				X			X	X	X	X	X	X	X	X	X	X
Bridge Counseling Services												X						
California Department of Family and Children Services – Gilroy Family Resource Center									X	X	X							
California Employment Development Department (Job Services, Migrant Farmworker Program)															X	X		
California Rural Legal Assistance				X	X				X									
California School Age Consortium																	X	
Catholic Charities of San Jose		X		X	X	X			X	X	X	X	X	X	X	X		X
Center for Relationship Abuse Awareness										X								
Center for Employment Training					X				X	X					X	X		
Center for Training Careers																X		
Chamberlain Mental Health Services												X						
Charities Housing Development Corporation				X														

Child Advocates				X															
Child Health Disability and Prevention Program (Foster Care)				X							X	X							X
Children’s Dental Initiative, Mobile Dental Clinic												X							
Children’s Home Society																		X	
Choices for Children																		X	
City of Campbell		X																	
City of Gilroy (Housing and Community Development)		X																	
City of Gilroy Police Department								X											
CHAM (Community Homeless Alliance Ministry)				X															
City of Los Altos Police Department								X											
City of Mountain View Police Dept.								X											
City of Palo Alto Child Care Subsidy Program																		X	
City of Palo Alto Police Department								X											
City of Palo Alto, Department of Human Services	X	X	X	X															X
City of San Jose Housing Department	X	X	X	X		X													
City of San Jose Police Department								X											
City of San Jose Unified School District												X		X					
City Team Ministries						X		X	X	X	X	X	X	X	X	X	X	X	X
Community Child Care Council of Santa Clara County (4 C Council)				X															
Community Services Agency of Mountain View and Los Altos		X		X				X											X
Community Solutions				X				X			X								
Community Technology Alliance “CTA”: (searchable on-line directory for all services)	X	X	X	X	X			X	X	X	X	X	X	X	X	X	X	X	X
Consumer Credit Counseling Services				X					X										
CONTACT Cares of Santa Clara County				X							X								
County School Districts, CalSafe Programs				X															
Cupertino Community Services	X	X	X	X				X	X					X	X				X
Dayworker Center									X					X	X				
East San Jose Community Law Center, Santa Clara Law School				X	X														
EHC Lifebuilders (Emergency Housing Consortium)		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Family Supportive Housing		X	X	X				X	X					X	X	X			
First 5 of Santa Clara County												X		X					





Santa Clara/San Benito County Head Start									X	X		X	X						X
Santa Clara County School-Linked Services System									X	X		X		X	X				
Santa Clara County Social Services Agency		X		X					X	X	X	X						X	
Santa Clara County Superior Court, Adult Dual Diagnosis Treatment Drug Court				X	X				X		X	X	X						
Santa Clara County Superior Court, Juvenile Mental Health Court				X	X				X		X	X	X						
Santa Clara County Superior Court Outreach Court					X														
Santa Clara University School of Law, Legal Assistance for Low-Income Immigrants				X	X														
Santa Clara Valley Health and Hospital System		X		X					X		X	X	X	X					
School Health Centers of Santa Clara County													X						
Silicon Valley Health Coalition													X	X					
Silicon Valley Independent Living Center	X	X		X			X	X			X				X	X			
Silicon Valley WIN One Stop – work2future										X						X	X		
South County Mental Health Center												X							
South County/San Martin Public Health													X	X					
Springboard Forward																		X	
San Jose Cathedral Foundation				X	X				X	X					X	X			X
St. Joseph’s Family Center	X	X		X					X				X		X	X	X	X	X
Sunnyvale Community Services	X	X	X	X															
Support Network for Battered Women				X	X				X										
The Health Trust				X			X		X				X	X					X
Toothmobile							X						X						
Tzu Chi Foundation													X						
United Way of Silicon Valley Emergency Assistance Network	X	X	X	X															
Unity Care									X	X									
Veterans Affairs Palo Alto Health Care System									X		X	X	X	X					
Vietnamese Voluntary Foundation - VIVO													X		X	X			
WestEd PITC (Program for Infant and Toddler Caregivers)																			X
Working Partnerships				X															

## I: CoC Housing Inventory Charts

Emergency Shelter: Fundamental Components in CoC System – Housing Inventory Chart													
Provider Name	Facility Name	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code <input type="checkbox"/>	Target Pop		Year-Round			Total Year-Round Beds	Other Beds	
			Ind.	Fam.		A	B	Fam. Units	Fam. Beds	Indiv. Beds		Seasonal	O/V*
<b>Current Inventory</b> <b>(Available for Occupancy on or before Jan. 31, 2006)</b>			Ind.	Fam.									
Asian Americans for Community Involvement	Asian Women's Place*	DV	0	0	063258	FC	DV	4	13	0	13	0	0
Bill Wilson Center	Runaway and Homeless Youth Shelter	PA	16	0	063354	YMF		0	0	16	16	0	0
City Team Ministries	City Team Rescue Mission*	PA	54	0	063258	SM		0	0	54	54	0	0
Community Homeless Alliance Ministry	First Christian Church Shelter	D	0	0	063258	M		3	11	2	13	0	0
Community Solutions	La Isla Pacifica	DV	0	0	061452	FC	DV	3	14	0	14	0	0
Cupertino Community Services	Rotating Shelter	PA	15	0	060906	SM		0	0	15	15	0	0
Emergency Housing Consortium (dba "EHC Lifebuilders")	Armory – Sunnyvale	PA	0	0	063660	SMF		0	0	0	0	125	0
EHC Lifebuilders	Armory - Gilroy	PA	0	0	061452	SMF		0	0	0	0	125	0
EHC Lifebuilders	Our House	PA	10	0	063258	YMF		0	0	10	10	0	0
EHC Lifebuilders	Boccardo Reception Center*	PA	125	0	063258	SMF		0	0	125	125	0	0
EHC Lifebuilders	Boccardo Rept. Ctr.*	PA	0	40	063258	FC		10	40	0	40	0	0
EHC Lifebuilders	Casa SAY	D	0	0	062383	YMF		0	0	6	6	0	0
Family Supportive Housing	San Jose Family Shelter*	PA	0	143	063258	FC		35	143	0	143	0	0
InnVision	Clara Mateo Shelter	PA	38	24	069081	SMF	M	6	24	38	62	0	0

InnVision	Commercial St. Inn*	PA	15	0	063258	SF		0	0	15	15	0	0			
InnVision	Commercial St. Inn*	PA	0	40	063258	FC		12	40	0	40	0	0			
InnVision	Community Inns	PA	15	0	063258	SM		0	0	15	15	0	0			
InnVision	Hotel de Zinc	PA	15	0	062682	SMF		0	0	15	15	0	0			
InnVision	Julian Street	PA	60	0	063258	SMF		0	0	60	60	0	0			
InnVision	Montgomery St. Inn*	PA	31	0	063258	SM		0	0	31	31	0	0			
Next Door Solutions to Domestic Violence	Next Door Solutions*	DV	0	0	063258	FC	DV	7	19	0	19	0	0			
Salvation Army	Hospitality House	PA	22	0	063258	SM		0	0	22	22	0	0			
Support Network for Battered Women	Emergency Shelter	DV	0	0	062382	FC	DV	6	16	0	16	0	0			
<b>SUBTOTALS:</b>			416	247	<b>SUBTOTAL CURRENT INVENTORY:</b>			86	320	424	744	250	0			
<b>New Inventory in Place in 2006</b> (Available for Occupancy Feb. 1, 2006 – Jan. 31, 2007)			Ind.	Fam.												
N/A			0	0				0	0	0	0	0	0			
<b>SUBTOTALS:</b>			0	0	<b>SUBTOTAL NEW INVENTORY:</b>			0	0	0	0	0	0			
<b>Inventory Under Development</b> (Available for Occupancy after January 31, 2007)			Anticipated Occupancy Date													
N/A																
<b>SUBTOTAL INVENTORY UNDER DEVELOPMENT:</b>								0	0	0	0	0	0			
<b>Unmet Need</b>								<b>UNMET NEED TOTALS:</b>			0	0	0	0	0	0
<b>Total Year-Round Beds—Individuals</b>					<b>Total Year-Round Beds—Families</b>											
1. Total Year-Round Individual Emergency Shelter (ES) Beds:			424	6. Total Year-Round Family Emergency Shelter (ES) Beds:					320							
2. Number of DV Year-Round Individual ES Beds:			0	7. Number of DV Year-Round Family ES Beds:					62							
3. Subtotal, non-DV Year-Round Individual ES Beds (Line 1 minus Line 2):			424	8. Subtotal, non-DV Year-Round Family ES Beds (Line 6 minus Line 7):					258							
4. Total Year-Round Individual ES Beds in HMIS:			416	9. Total Year-Round Family ES Beds in HMIS					247							
5. HMIS Coverage—Individual ES Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number):			98%	10. HMIS Coverage—Family ES Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number):					96%							

## I: CoC Housing Inventory Charts

<b>Transitional Housing: Fundamental Components in CoC System – Housing Inventory Chart</b>											
Provider Name	Facility Name	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code <input type="checkbox"/>	Target Pop		Year-Round			Total Year-Round Beds
						A	B	Fam. Units	Fam. Beds	Indiv. Beds	
<b>Current Inventory</b>			Ind.	Fam.							
<b>(Available for Occupancy on or before January 31, 2006)</b>											
Bill Wilson Center	Youth Transitional*	PA	10	0	063258	YMF		0	0	10	10
Bill Wilson Center	Young Parents with Children	PA	0	16	063354	FC		8	16	0	16
Bill Wilson Center	Young Parents with Children*	PA	0	10	063660	YFC		5	10	0	10
Bill Wilson Center	Young Parents with Children*	PA	0	10	062382	YFC		5	10	0	10
Bill Wilson Center	Youth Transitional*	PA	0	8	061452	YFC		4	8	0	8
Bill Wilson Center	Youth Transitional*	PA	8	0	063660	YMF		0	0	8	8
City Team Ministries	House of Grace	PA	22	0	063258	SF		0	0	22	22
City Team Ministries	City Team Rehab	PA	60	0	063258	SM		0	0	60	60
City Team Ministries	Heritage House	PA	20	0	063258	SF		0	0	20	20
Cupertino Community Services	Transitional Housing*	PA	11	12	060930	M		2	12	11	23
EHC Lifebuilders	5 <sup>th</sup> Street*	PA	40	0	063258	SMF		0	0	40	40
EHC Lifebuilders	Boccardo Reception Ctr*	PA	50	0	063258	SMF		0	0	50	50
EHC Lifebuilders	Boccardo Reception Ctr*	PA	0	40	063258	FC		10	40	0	40
EHC Lifebuilders	Our House	PA	12	0	063258	YMF		0	0	12	12
EHC Lifebuilders	San Martin Family Living Center*	PA	0	81	069085	FC		18	81	0	81

EHC Lifebuilders	San Martin Family Living Center [seasonal]*	PA	0	72	069085	FC		16	72	0	72
EHC Lifebuilders	Sobrato Family Living Center* [partially HUD funded]	PA	0	112	063354	FC		28	112	0	112
EHC Lifebuilders	Sobrato Trans. Aptmnts*	PA	0	32	061452	FC		8	32	0	32
Family Supportive Housing	Glenn Art* - Transitional Housing for Families	PA	0	33	063258	FC		10	33	0	33
Housing Authority of the County of Santa Clara	Ochoa Family Shelter [seasonal]*	PA	0	258	061452	FC		75	258	0	258
InnVision	InnVision Villa*	PA	9	46	063258	M		14	46	9	55
InnVision	Montgomery Street Inn*	PA	39	0	063258	SM	VET	0	0	39	39
InnVision	Julian Street Inn*	PA	10	0	063258	SMF		0	0	10	10
InnVision	HomeSafe San Jose* [partially HUD funded]	DV	0	0	063258	FC	DV	24	75	0	75
InnVision (with Community Services of Mountain View)	Graduate House	N	0	0	062382	SMF		0	0	6	6
Next Door Solutions to Domestic Violence	HomeSafe Santa Clara* [partially HUD funded]	DV	0	0	063354	FC	DV	24	66	0	66
San Jose Cathedral Foundation	Worker House for Men*	PA	20	0	063258	SM		0	0	20	20
San Jose Cathedral Foundation	Worker House for Women and Children*	PA	0	25	063258	FC		7	25	0	25
Salvation Army	Hospitality House	PA	46	0	063258	SM		0	0	46	46
Salvation Army	Volunteer Recovery	PA	6	0	063258	SM		0	0	6	6
Unity Care	Martinvale*	PA	6	0	063258	YMF		0	0	6	6
<b>SUBTOTALS:</b>			369	755	<b>SUBTOTAL CURRENT INVENTORY:</b>			258	896	375	1271

<b>New Inventory in Place in 2006</b> (Available for Occupancy Feb. 1, 2006 – Jan. 31, 2007)			Ind.	Fam.									
EHC Lifebuilders	Sobrato Transitional Apartments in Gilroy	PA	0	168	061452	FC		37	168	0	168		
Unity Care	Unity Place	PA	6	0	063258	YMF		0	0	6	6		
<b>SUBTOTALS:</b>			6	168	<b>SUBTOTAL NEW INVENTORY:</b>			37	168	6	174		
<b>Inventory Under Development</b> (Available for Occupancy after January 31, 2007)			Anticipated Occupancy Date										
City Team Ministries	Recovery Program Graduates Housing		June, 2007		063258	SM		0	0	2	2		
<b>SUBTOTAL INVENTORY UNDER DEVELOPMENT:</b>								0	0	2	2		
<b>Unmet Need</b>								<b>UNMET NEED TOTALS:</b>		26	86	35	121
<b>Total Year-Round Beds—Individuals</b>				<b>Total Year-Round Beds—Families</b>									
1. Total Year-Round Individual Transitional Housing Beds:		381		6. Total Year-Round Family Transitional Housing Beds:				1,064					
2. Number of DV Year-Round Individual TH Beds:		0		7. Number of DV Year-Round Family TH Beds:				141					
3. Subtotal, non-DV Year-Round Individual TH Beds (Line 1 minus Line 2):		381		8. Subtotal, non-DV Year-Round Family TH Beds (Line 6 minus Line 7):				923					
4. Total Year-Round Individual TH Beds in HMIS:		375		9. Total Year-Round Family TH Beds in HMIS				923					
5. HMIS Coverage—Individual TH Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number):		98%		10. HMIS Coverage—Family TH Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number):				100%					

## I: CoC Housing Inventory Charts

<b>Permanent Supportive Housing*: Fundamental Components in CoC System – Housing Inventory Chart</b>											
Provider Name	Facility Name	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code □	Target Pop.		Year-Round			Total Year-Round Beds
						A	B	Fam. Units	Fam. Beds	Indiv./CH Beds	
<b>Current Inventory</b>			Ind.	Fam.							
<b>(Available for Occupancy on or before January 31, 2006)</b>											
EHC Lifebuilders	Markham Terrace*	PA	95	0	063258	SMF		0	0	95 / 0	95
EHC Lifebuilders	Markham Plaza*	PA	50	0	063258	SMF		0	0	50 / 40	50
EHC Lifebuilders	Sobrato Family Living Center*	PA	0	88	063354	FC		22	88	0	88
Housing Authority of the County of Santa Clara	EHC Lifebuilders – Shelter Plus Care/ Off the Streets (S+C)*	PA	9	0	062682	SMF		0	0	9 / 9	9
Housing Authority of the County of Santa Clara	Shelter Plus Care TRA*	PA	101	0	069085	SMF		0	0	101 / 39	101
Housing Authority of the County of Santa Clara	Shelter Plus Care TRA*	PA	0	276	069085	FC		89	276	0	276
Housing Authority of the County of Santa Clara	Section 8 Vouchers	D	0	0	069085	M		10	25	4 / 4	29
Housing Authority of the County of Santa Clara	Section 8 Vouchers (Housing First for Families)	D	0	0	063258	FC		50	125	0	125
Housing for Independent People	Sesame Court	PA	6	0	063258	SMF	VET	0	0	6 / 0	6
Housing for Independent People	Sunset Leasing*	PA	2	10	063258	M		5	10	2/0	12
InnVision	North County Inns*	PA	20	0	062682	SMF		0	0	20 / 20	20
InnVision	Sunset Square*	PA	0	45	069085	FC		15	45	0	45
InnVision	Hester Project*	PA	10	0	063258	SF		0	0	10 / 10	10

<b>Subtotals:</b>			293	419	<b>Subtotal Current Inventory:</b>			191	569	297/ 122	866
<b>New Inventory in Place in 2006 (Available for Occupancy Feb. 1, 2006 – Jan. 31, 2007)</b>			Ind.	Fam.							
Charities Housing Development Corporation	San Antonio Place*	PA	8	19	062382	M		8	19	8 / 0	27
Community Working Group	Opportunity Center*	PA	70	42	062682	M		18	42	70 / 60	112
EHC Lifebuilders	Sobrato Transitional Aptmnts in Gilroy	PA	0	68	061452	FC		15	68	0	68
EHC Lifebuilders	Housing Homeless People with Alcohol Addiction*	PA	27	0	069085	SMF		0	0	27 / 27	27
Housing Authority of the County of Santa Clara	Section 8 Vouchers	D	0	0	063258	SMF		0	0	11 / 11	11
Housing Authority of the County of Santa Clara	Section 8 Vouchers	PA	15	26	063258	M		15	26	15 / 15	41
Unity Care	Unity Place	PA	18	0	063258	YMF		0	0	18 / 9	18
<b>Subtotals:</b>			138	155	<b>Subtotal New Inventory:</b>			56	155	149/ 122	304
<b>Inventory Under Development (Available for Occupancy after January 31, 2007)</b>			Anticipated Occupancy Date								
South County Housing	Royal Court Apartments		June, 2007		069085	FC		12	20	0/0	20
Catholic Charities	Navigator Project*		July 2007		063258	SMF		0	0	29/29	29
EHC Lifebuilders	New Directions*		Sept. 2007		069085	SMF		0	0	25/25	25
First Community Housing	Curtner Gardens		Fall, 2007		063258	SMF		0	0	27/27	27
EHC Lifebuilders	Housing Homeless People with Alcohol Addiction*		Dec., 2007		063258	SMF		0	0	15/15	15
Housing Authority of the County of Santa Clara	Section 8 Vouchers		Feb. 2007 – Jan. 2008		063258	M		35	61	35/35	96
Charities Housing Development Corporation	Paseo Senter I* [partially HUD funded]		April 2008		063258	M		7	11	6 / 5	17
Charities Housing Development Corporation	Paseo Senter II*		Spring, 2008		063258	M		31	49	5/5	54

<b>Subtotal Inventory Under Development:</b>		85	141	142/ 141	283
<b>Unmet Need</b>		<b>Unmet Need Totals:</b>		107	431
				1915/ 1115	2346
<b>Total Year-Round Beds—Individuals</b>			<b>Total Year-Round Beds—Families</b>		
1. Total Year-Round Individual Permanent Housing Beds:	446	6. Total Year-Round Family Permanent Housing Beds:	724		
2. Number of DV Year-Round Individual PH Beds:	0	7. Number of DV Year-Round Family PH Beds:	0		
3. Subtotal, non-DV Year-Round Individual PH Beds (Line 1 minus Line 2):	446	8. Subtotal, non-DV Year-Round Family PH Beds (Line 6 minus Line 7):	724		
4. Total Year-Round Individual PH Beds in HMIS:	431	9. Total Year-Round Family PH Beds in HMIS	574		
5. HMIS Coverage—Individual PH Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number):	97%	10. HMIS Coverage—Family PH Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number):	79%		

## J: CoC Housing Inventory Data Sources and Methods Chart

<b>(1) Indicate date on which Housing Inventory count was completed: 01/29/2007</b>	
<b>(2) Identify the method used to complete the Housing Inventory Chart (check one):</b>	
<input checked="" type="checkbox"/>	<b>Housing inventory survey</b> – CoC conducted a housing inventory survey (via mail, fax, e-mail, web-based, phone or on-site) of homeless programs/providers to update current bed inventories, target populations for programs, beds under development, etc.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS data to complete the Housing Inventory Chart
<input type="checkbox"/>	<b>HMIS plus housing inventory</b> – Used HMIS data supplemented by a survey of providers NOT participating in the HMIS
<b>(3) Indicate the percentage of providers completing the housing inventory survey:</b>	
100%	Emergency shelter providers
100%	Transitional housing providers
100%	Permanent supportive housing providers
<b>(4) Indicate steps to ensure data accuracy for 2007 Housing Inventory Chart (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Instructions</b> – Provided written instructions for completing the housing inventory survey.
<input type="checkbox"/>	<b>Training</b> – Trained providers on completing the housing inventory survey.
<input checked="" type="checkbox"/>	<b>Updated prior housing inventory information</b> – Providers submitted updated 2006 housing inventory to reflect 2007 inventory.
<input checked="" type="checkbox"/>	<b>Follow-up</b> – CoC followed-up with providers to ensure the maximum possible response rate and accuracy of the housing inventory survey.
<input checked="" type="checkbox"/>	<b>Confirmation</b> – Providers or other independent entity reviewed and confirmed information in 2007 Housing Inventory Chart after it was completed.
<input checked="" type="checkbox"/>	<b>HMIS</b> – Compared HMIS and housing inventory survey data to check for consistency.
<input checked="" type="checkbox"/>	<b>Other</b> – specify: Personalized email to each provider to confirm accuracy.
<b>Unmet Need:</b>	
<b>(5) Indicate type of data that was used to determine unmet need (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Sheltered count</b> (point-in-time)
<input checked="" type="checkbox"/>	<b>Unsheltered count</b> (point-in-time)
<input checked="" type="checkbox"/>	<b>Housing inventory</b> (number of beds available)
<input checked="" type="checkbox"/>	<b>Local studies or data sources</b> – specify: <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Santa Clara County Homeless Census and Surveys (2007 and 2005) which include data on the number of people homeless and sheltered at a point in time and over the course of a year, and provide data from surveys relevant to determining type of housing needed;</li> <li><input checked="" type="checkbox"/> Housing Silicon Valley: A 20 Year Plan to End the Affordable Housing Crisis (February, 2007); project development pipeline from Santa Clara County Office of Affordable Housing and City of San Jose Department of Housing;</li> <li><input checked="" type="checkbox"/> “HousingSCC” (a searchable website for affordable housing in Santa Clara County);</li> <li><input checked="" type="checkbox"/> Consolidated and Annual Action Plans for Cupertino, Gilroy, Milpitas, Mountain View, Palo Alto, San Jose, Santa Clara, Sunnyvale and for the Urban County, Santa Clara County;</li> <li><input checked="" type="checkbox"/> HUD Annual Progress Reports of Transitional Housing Programs - housing at exit;</li> <li><input checked="" type="checkbox"/> Keys to Housing: A 10-Year Plan to End Chronic Homelessness in Santa Clara County;</li> <li><input checked="" type="checkbox"/> City of San Jose’s Homeless Strategy (a 10-year plan to end homelessness); and</li> <li><input checked="" type="checkbox"/> Department of Mental Health’s MHSA-CSS Plan and reports (for pipeline of transitional housing units with FSP-wrap-around supportive services).</li> </ul>
<input type="checkbox"/>	<b>National studies or data sources</b> – specify:
<input checked="" type="checkbox"/>	<b>Provider opinion through discussions or survey forms</b>
<input type="checkbox"/>	<b>Other</b> – specify:

<b>(6a) Indicate the method(s) used to calculate or determine unmet need (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Stakeholder discussion</b> – CoC stakeholders met and reviewed data to determine CoC’s unmet need
<input type="checkbox"/>	<b>Locally-determined formula</b> – Used locally-determined formula based on local point-in-time (PIT) count data and housing inventory to calculate unmet need
<input checked="" type="checkbox"/>	<b>Applied statistics</b> – Used local PIT enumeration data and applied national or other local statistics
<input checked="" type="checkbox"/>	<b>HUD unmet need formula</b> – Used HUD’s unmet need formula*
<input type="checkbox"/>	<b>Other</b> – specify:

**(6b) If more than one method was used in 6a, please describe how these methods were used.**

The Collaborative determined the number of additional beds needed for each category of shelter/housing first based on the assumptions that the number of currently unsheltered homeless people in the community represents the need for some level of housing: shelter/transitional/permanent supportive/housing or permanent housing affordable to people with extremely low income, and the need will not change dramatically (e.g. our prevention efforts will mitigate against a large increase in the number of unsheltered people). We judged that the type of shelter/housing needed for sheltered and unsheltered homeless people depends upon 1) whether the homeless person/family is transitionally, episodically or chronically homeless; 2) the particular challenges of the homeless person with respect to mental illness, substance abuse, age, veterans or domestic violence victim status, health, job history, income level, etc.; and 3) the homeless person’s housing preference. We were informed by our HUD-funded transitional housing program’s Annual Progress Report data concerning housing at exit. We then applied our local statistics (from our count and survey) to input numbers into HUD’s unmet need formula using the provided worksheet. We adjusted for the number of new units of transitional, mental health treatment units with wrap-around supportive services our Mental Health Department is funding with Mental Health Services Act funds. We also adjusted for our experience that some people who are homelessness, especially families, need housing affordable to people with extremely low incomes with minimal services to exit homelessness. Finally, we also utilized the 10-Year Planning Task Force’s analysis that we need 2,500 units of permanent supportive housing over the next 10 years to end chronic homelessness for individuals and families based on existing housing units and units in the pipeline.

## CoC Homeless Population and Subpopulations

### K: CoC Point-in-Time Homeless Population and Subpopulations Chart

Indicate date of last point-in-time count: 1/29/2007				
Part 1: Homeless Population	Sheltered		Unsheltered	Total
	Emergency	Transitional		
1. Number of Households <b>with</b> Dependent Children:	76	221	69	366
1a. Total Number of Persons in these Households (adults and children)	240	756	261	1257
2. Number of Households <b>without</b> Dependent Children**	740	342	4,644	5726
2a. Total Number of Persons in these Households	759	346	4,840	5945
<b>Total Persons (Add Lines 1a and 2a):</b>	999	1102	5101	7202
Part 2: Homeless Subpopulations below)	Sheltered		Unsheltered	Total
a. Chronically Homeless	223		1534	1757
b. Severely Mentally Ill	553		1336	1889
c. Chronic Substance Abuse	92		850	942
d. Veterans	237		705	942
e. Persons with HIV/AIDS	34		235	269
f. Victims of Domestic Violence	95		622	717
g. Unaccompanied Youth (Under 18)	48		114	162

\*\* Includes single individuals, unaccompanied youth, and other adults (such as a married couple without children)

## L: CoC Homeless Population and Subpopulations Data Sources & Methods Chart

### L-1: Sheltered Homeless Population and Subpopulations

<b>(1a) Check method(s) used to count sheltered homeless persons in the CoC (check all that apply):</b>
<input checked="" type="checkbox"/> <b>Survey</b> – Providers count the total number of clients residing in their programs during the PIT count.
<input type="checkbox"/> <b>HMIS</b> – CoC used HMIS to complete the PIT sheltered count and subpopulation information.
<input type="checkbox"/> <b>Other</b> – specify:
<b>(1b) If multiple methods are checked, briefly describe how data collected using the methods were combined to produce the count.</b> N/A
<b>(2a) Check the method(s) used to gather the subpopulation information on sheltered homeless persons reported in Part 2: Homeless Subpopulations (check all that apply):</b>
<input type="checkbox"/> <b>Point-in-time (PIT) interviews with each adult and unaccompanied youth</b> – All sheltered adults and unaccompanied youth were interviewed to gather subpopulation information.
<input checked="" type="checkbox"/> <b>Sample of PIT interviews plus extrapolation</b> – A sample of sheltered adults and unaccompanied youth were interviewed to gather subpopulation information, and extrapolation techniques were applied to produce the total sheltered homeless population.
<input type="checkbox"/> <b>Non-HMIS client-level information</b> - Providers used individual client records (e.g., case management files) to provide subpopulation data for each adult and unaccompanied youth.
<input type="checkbox"/> <b>Provider expertise</b> – Providers estimated the percentage of clients belonging to each subpopulation based on their knowledge of their client population as a whole.
<input type="checkbox"/> <b>HMIS</b> – CoC used HMIS to gather subpopulation information on sheltered homeless persons.
<input type="checkbox"/> <b>Other</b> –specify:
<b>(2b) If multiple methods are checked, briefly describe how the methods were combined to produce the subpopulation information.</b> N/A
<b>(3) Indicate CoC’s steps to ensure data quality of the sheltered count (check all that apply):</b>
<input checked="" type="checkbox"/> <b>Instructions</b> – Provided written instructions to providers for completing the sheltered PIT count.
<input checked="" type="checkbox"/> <b>Training</b> – Trained providers on completing the sheltered PIT count.
<input checked="" type="checkbox"/> <b>Remind and Follow-up</b> – Reminded providers about the count and followed up with providers to ensure the maximum possible response rate and accuracy.
<input checked="" type="checkbox"/> <b>HMIS</b> – Used HMIS to verify data collected from providers for the sheltered PIT count.
<input checked="" type="checkbox"/> <b>Other</b> –specify:  Continuum of Care and CDBG jurisdictions hired a professional, Applied Survey Research (ASR), to develop the count and survey methodology, oversee implementation, analyze data and report results. ASR was chosen for its technical expertise and experience, and for comparability of data as it also conducted the CoC’s last sheltered/unsheltered count.  <i>Count</i> The shelter count was conducted using a list of all known shelters operating in Santa Clara county provided by the Santa Clara Office of Affordable Housing.  <i>Survey</i> <input checked="" type="checkbox"/> ASR selected a convenience sample approach for surveys, augmented by a strategy to increase the sample size significantly. Strategic attempts were made to reach individuals of various subset groups such as homeless youth, minority ethnic groups, military veterans, domestic violence victims and migrant workers.

- Survey-takers were trained by ASR to conduct the surveys; training sessions led potential interviewers through a detailed and lengthy orientation that included project background information, and detailed instruction on respondent eligibility, interviewing protocol, prompting for detailed response and confidentiality.
- Surveys administered in shelters by trained program staff.
- No self-administered surveys were accepted for methodological reasons.
- An incentive gift was offered to survey respondents in appreciation for their time and participation.
- Interviewers were asked to inquire if the homeless person had already taken the survey.
- Care was taken by interviewers to ensure that respondents felt comfortable regardless of the street or shelter locations. During the interviews, respondents were encouraged to be candid in their responses and were informed that these responses would be framed as general findings, would be kept confidential and would not be traceable to any one individual.
- The survey requested respondents' initials and date of birth, so that duplication could be avoided without compromising the respondents' anonymity.
- Upon completion of the survey, an extensive verification process was conducted to eliminate potential duplicates. This process examined respondents' date of birth, initials, gender, ethnicity, length of homelessness, and consistencies in patterns of responses to other questions on the survey.
- The number of valid surveys (1,019) provided a confidence interval of +/-5% with a 95% confidence level.

**(4) How often will sheltered counts of sheltered homeless people take place in the future?**

- Biennial (every two years)**
- Annual**
- Semi-annual**
- Other – specify:**

**(5) Month and Year when next count of sheltered homeless persons will occur: January, 2009**

**(6) Indicate the percentage of providers providing populations and subpopulations data collected via survey, interview and/or HMIS:**

<b>99.4%</b>	Emergency shelter providers (all but one agency which has 13 of CoC's 2,100+ emergency shelter/transitional housing beds)
<b>100%</b>	Transitional housing providers

**L-2: Unsheltered Homeless Population and Subpopulations\***

<b>(1) Check the CoC's method(s) used to count unsheltered homeless persons</b> (check all that apply):	
<input type="checkbox"/>	<b>Public places count</b> – CoC conducted a point-in-time (PIT) count <u>without</u> client interviews.
<input checked="" type="checkbox"/>	<b>Public places count with interviews</b> – CoC conducted a PIT count and interviewed unsheltered homeless persons encountered during the public places count: <input type="checkbox"/> ALL persons were interviewed <b>OR</b> <input checked="" type="checkbox"/> Sample of persons were interviewed
<input type="checkbox"/>	<b>Public places count using probability sampling</b> – High and low probabilities assigned to designated geographic areas based on the number of homeless people expected to be found in each area. The CoC selected a statistically valid sample of each type of area to include in the point-in-time count and extrapolated results to estimate the entire homeless population.
<input type="checkbox"/>	<b>Service-based count</b> – Interviewed people using non-shelter services, such as soup kitchens and drop-in centers, and counted those that self-identified as unsheltered homeless persons.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS for the count of unsheltered homeless people homeless people or for subpopulation information.
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(2) Indicate the level of coverage of the PIT count of unsheltered homeless people:</b>	
<input checked="" type="checkbox"/>	<b>Complete coverage</b> – The CoC counted every block of the jurisdiction.
<input type="checkbox"/>	<b>Known locations</b> – The CoC counted in areas where unsheltered homeless people are known to congregate or live.
<input type="checkbox"/>	<b>Combination</b> – CoC combined complete coverage with known locations by conducting counts for every block <u>in a portion of the jurisdiction</u> (e.g. central city) AND conducting counts in other portions of the jurisdiction where unsheltered persons are known to live.
<input type="checkbox"/>	<b>Used service-based or probability sampling</b> (coverage is not applicable)
<input type="checkbox"/>	<b>Other</b> –specify:
<b>(3) Indicate community partners involved in PIT unsheltered count</b> (check all that apply):	
<input checked="" type="checkbox"/>	<b>Outreach teams</b>
<input checked="" type="checkbox"/>	<b>Law Enforcement</b>
<input checked="" type="checkbox"/>	<b>Service Providers</b>
<input checked="" type="checkbox"/>	<b>Community volunteers</b>
<input checked="" type="checkbox"/>	<b>Homeless and/or formerly homeless persons</b>
<input checked="" type="checkbox"/>	<b>Other</b> – specify: Park rangers; media (to recruit volunteers)
<b>(4) Indicate CoC's steps to ensure data quality of the unsheltered count</b> (check all that apply):	
<input checked="" type="checkbox"/>	<b>Training</b> – Conducted training(s) for PIT enumerators.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS to check for duplicate information.
<input checked="" type="checkbox"/>	<b>Other</b> –specify:  <input checked="" type="checkbox"/> Continuum of Care and CDBG jurisdictions hired a professional, Applied Survey Research (ASR), to develop the count and survey methodology, oversee implementation, analyze data and report results. ASR was chosen for its technical expertise and experience, and for comparability of data as it also conducted the CoC's last sheltered/unsheltered count.
<i>Count</i>	
<input checked="" type="checkbox"/>	Recruited, trained, paid and deployed homeless individuals to conduct street count because of their intimate knowledge of the street and first-hand knowledge of places homeless individuals were likely to be found
<input checked="" type="checkbox"/>	Conducted street enumeration during narrow timeframe when sheltered and unsheltered homeless do not co-mingle
<input checked="" type="checkbox"/>	Streets, road, and highways were traveled by foot, car, or bike to count people on the streets, in vehicles and in encampments

- Enumerators were debriefed upon their return by deployment captains; observational comments and the integrity of the enumeration effort were reviewed and assessed.
- Empirical data from the survey was used to generate a “multiplier” to determine the number of unsheltered people in vehicles and encampments (out of concern for the privacy of the homeless community and safety of the enumerators, census workers were instructed not to approach vehicles or to enter encampment areas but instead when they could not clearly count the number of occupants, to note the number of vehicles or encampments discovered).

*Survey*

- Survey-takers were trained by ASR to conduct the surveys; training sessions led potential interviewers through a detailed and lengthy orientation that included project background information, and detailed instruction on respondent eligibility, interviewing protocol, prompting for detailed response and confidentiality.
- ASR selected a convenience sample approach for surveys, augmented by a strategy to increase the sample size significantly. Strategic attempts were made to reach individuals of various subset groups such as homeless youth, minority ethnic groups, military veterans, domestic violence victims and migrant workers.
- Trained homeless interviewers administered surveys to the “street” homeless because they were familiar with the conditions and problems of homeless persons and it was hoped they would be more likely to obtain responses to the survey questions.
- No self-administered surveys were accepted for methodological reasons.
- An incentive gift was offered to survey respondents in appreciation for their time and participation.
- Interviewers were asked to inquire if the homeless person had already taken the survey.
- Care was taken by interviewers to ensure that respondents felt comfortable regardless of the street or shelter locations. During the interviews, respondents were encouraged to be candid in their responses and were informed that these responses would be framed as general findings, would be kept confidential and would not be traceable to any one individual.
- The survey requested respondents’ initials and date of birth, so that duplication could be avoided without compromising the respondents’ anonymity.
- Upon completion of the survey, an extensive verification process was conducted to eliminate potential duplicates. This process examined respondents’ date of birth, initials, gender, ethnicity, length of homelessness, and consistencies in patterns of responses to other questions on the survey. No self-administered surveys were accepted
- The number of valid surveys (1,019) provided a confidence interval of +/-5% with a 95% confidence level.

**(5) How often will CoC conduct PIT counts of unsheltered homeless people in the future?**

- Biennial (every two years)**
- Annual**
- Semi-annual**
- Quarterly**
- Other – specify:**

**(6) Month and Year when next PIT count of unsheltered homeless persons will occur:**

January 2009

# CoC Homeless Management Information System (HMIS)

## M: CoC HMIS Charts

CoCs should complete this section in conjunction with the lead agency responsible for the HMIS. All information is to be as of the date of application submission.

### M-1: HMIS Lead Organization Information

Organization Name: Community Technology Alliance	Contact Person: Ray Allen
Phone: (408) 437-9170	Email: <a href="mailto:ray@ctagroup.org">ray@ctagroup.org</a>
Organization Type: State/local government <input type="checkbox"/> Non-profit/homeless provider <input checked="" type="checkbox"/> Other <input type="checkbox"/>	

### M-2: List HUD-defined CoC Name(s) and Number(s) for *every* CoC in HMIS Implementation:

HUD-Defined CoC Name*	CoC #	HUD-Defined CoC Name*	CoC #
San Jose/Santa Clara City & County CoC	CA-500		

### M-3: HMIS Implementation Status

HMIS Data Entry Start Date for your CoC <b>OR</b> Anticipated Date Entry Start Date for your CoC (mm/yyyy)	<b>If no data entry date, indicate reason:</b> <input type="checkbox"/> New CoC in 2007 <input type="checkbox"/> Still in planning/software selection process <input type="checkbox"/> Initial implementation
<b>01/2004</b>	

Briefly describe significant challenges/barriers the CoC has experienced in:

- HMIS implementation: We have data entered on over 90% of all beds housing people who are homeless in our HMIS. Non-housing projects, such as “drop-in” and services-only centers, and homeless outreach programs (including Project Homeless Connect events) enter client data into HMIS. Our largest providers of “services only” are using swipe cards to assist in the efficient collection of the data. The County and City of San Jose require HMIS participation of agencies that receive their funding for homeless services or housing (except for programs primarily serving victims of domestic violence and programs which provide meals/food only). The City of San Jose is working to support agencies it funds which provide only meals/food to begin entering HMIS data. Our challenge is not coverage, but data quality. (See our answer to question M-5, below.)
- HMIS Data and Technical Standards Final Notice requirements:  
Our HMIS is fully compliant with the Data and Technical Standards.  
  
System security and client confidentiality have always been our top priority and HMIS-participating agencies ranked Community Technology Alliance high in its annual performance survey for security features including Static IP addresses, firewalls, password protocols, confidentiality training and the Release of Information process.  
  
To ensure that project partners continued to consider HMIS as a useful tool and non-punitive, issues with sharing *critical* data with funders and policy-makers were addressed through recent adoption of a policy by the Steering Committee of the Collaborative: partner agency or program level aggregate data will only be given to funders and policy makers if either:  
a) the request comes directly from the agency;  
b) the requesting jurisdiction sends a copy of the request to the agency and the agency confirms that Community Technology Alliance has permission to send the information.

Client Destinations: One significant area of difficulty is accurately determining the destination of clients after exiting programs. Due to the nature of the population we serve, often that information is not available. All our participating agencies realize the importance of this outcome, but the reality is that frequently, especially for emergency shelter programs, clients simply disappear. They may be going into permanent housing situations, but we have no way to accurately capture that key outcome.

**M-4: CoC Client Records**

Calendar Year	Number of Client Records Entered in HMIS / Analytical Database (Duplicated) for CoC	Number of Unduplicated Clients Entered in HMIS / Analytical Database for CoC
2004	5170	5038
2005	8065	7918
2006	9803	9756

**Please provide a brief explanation of the reason(s) for any decreases in the number of records (duplicated or unduplicated) from year to year.**  
N/A

**M-5: Data Collection/Completeness and Coverage**

(a) Indicate the percentage of unduplicated client records with null or missing values on the date that the point-in-time count was conducted.

Universal Data Element	% Null/Missing Values	Universal Data Element	% Null/Missing Values
Name	0.00%	Gender	1.37%
Social Security Number	15.62%	Veteran Status	4.88%
Date of Birth	1.69%	Disabling Condition	26.18%
Ethnicity	2.03%	Residence Prior to Program Entry	5.54%
Race	2.08%	Zip Code of Last Permanent Address	12.30

**Briefly describe how the CoC ensures that valid program entry and exit dates are being recorded in the HMIS for persons served.**

Data quality and exception reports are made available to project partners and end-user training emphasizes the importance of data completeness, including valid program entry and exit dates. For Emergency Shelters, all programs are required to use a feature of our HMIS application specifically designed for checking clients in and out of shelter beds. This gives us a much more accurate accounting of the number of clients in beds at any given time. HMIS data collection completeness is also discussed at the monthly Shelter Providers Network group attended by a majority of end-user agencies. Agencies receiving HUD Continuum of Care funding know that their renewal project applications will be scored in part based upon participation in HMIS and the project’s exception score (although our HUD Continuum of Care-funded projects enjoy an extremely favorable average data completion rate of over 98%). We are seeking additional funding and requesting the assistance of the Collaborative to secure financial support so that we can continue to provide the additional training and on-going support required to ensure that data is complete. In the interim, Community Technology Alliance is utilizing a pool of dedicated, technically savvy volunteers to augment the project.

(b) Indicate current OR anticipated HMIS bed coverage of 75% for each housing type.

	75% bed coverage	Anticipate 75% bed coverage	Date anticipate achieving
Emergency Shelter	Y	N/A	N/A
Transitional Housing	Y	N/A	N/A
Permanent Supportive Housing	Y	N/A	N/A

**(c) If CoC has not yet achieved or does not anticipate achieving 75% bed coverage for all beds (including DV beds), please explain why.**

N/A

**M-6: Training, Data Quality and Implementation of HMIS Data & Technical Standards**

For each item listed below, place an “X” in the appropriate box to indicate your response: Yes (Y), No (N) or Planned/In Progress (P). Check *only one column* per item.

	Y	N	P
<b>1. Training Provided:</b>			
Basic computer training	Y		
HMIS software training	Y		
Privacy / Ethics training	Y		
Security Training	Y		
System Administrator training	Y		
<b>2. CoC Process/Role:</b>			
Is the CoC able to aggregate all data to a central location at least annually?	Y		
Does the CoC monitor compliance with HMIS Data & Technical Standards Final Notice?	Y		
<b>3. Security—Participating agencies have:</b>			
Unique username and password access?	Y		
Secure location?	Y		
Locking screen savers?	Y		
Virus protection with auto update?	Y		
Individual or network firewalls?	Y		
Restrictions on access to HMIS via public forums (e.g. PKI digital certificates or IP filtering)?	Y		
<b>4. Security—Agency responsible for centralized HMIS data collection and storage has:</b>			
Procedures for off-site storage of HMIS data?	Y		
Disaster recovery plan that has been <u>tested</u> ?	Y		
<b>5. Privacy Requirements:</b>			
If your state has additional confidentiality provisions, have they been implemented? <input type="checkbox"/> Check here if there are no additional state confidentiality provisions.	Y		
Is there a “Purpose for data collection” sign at each intake desk for all participating agencies?	Y		
Has each participating agency adopted a written privacy policy, including the uses and disclosures of client information?	Y		
Does each participating agency have a privacy policy posted on its website (if applicable)?	Y		
<b>6. Data Quality—CoC has process to review and improve:</b>			
Client level data quality (i.e. missing birth dates etc.)?	Y		
Program level data quality (i.e. data not entered by agency in over 14 days)?	Y		
CoC bed coverage (i.e. percent of beds)?	Y		
<b>7. Unduplication of Client Records—the CoC:</b>			
Uses only HMIS data to generate unduplicated count?	Y		
Uses data integration or data warehouse to generate unduplicated count?		N	
<b>8. OPTIONAL: Uses of HMIS Data—CoC uses HMIS data for:</b>			
Point-in-Time Count	Y		
Project/Program performance monitoring	Y		
Program purposes (e.g. case management, bed management, program eligibility screening)	Y		
Statewide data aggregation (e.g. data warehouse)		N	

## Part III: CoC Strategic Planning

### N: CoC 10-Year Plan, Objectives, and Action Steps Chart

Objectives to End Chronic Homelessness <u>and</u> Move Families and Individuals to Permanent Housing	2007 Local Action Steps	Lead Person	Baseline (Current Level)	Numeric Achievement in 12 months	Numeric Achievement in 5 years	Numeric Achievement in 10 years
1. Create new PH beds for chronically homeless persons.	<p><b>Introduction:</b> Meeting our objective to create 171 new PH beds for chronically homeless people (including 141 beds under development on the Housing Inventory Chart) by June, 2008, and 556 new beds by June, 2012, will involve five strategies with multiple action steps to be taken this year:</p> <ol style="list-style-type: none"> <li>1. lease-up units;</li> <li>2. issue section 8 housing vouchers;</li> <li>3. recruit new private landlords;</li> <li>4. construct new units; and</li> <li>5. increase funding.</li> </ol> <p>Action steps pertaining to various strategies are organized below in a timeline. We will monitor progress on each action step using the time line indicated.</p> <p><b><i>1. Create beds to be occupied by January 31, 2008</i></b></p> <p>1a. In July, 2007, begin lease-up 29 new units of permanent supportive housing for chronically homeless adults through the Navigator Project using 2006 bonus funds.</p>		244 total Beds	415 total Beds	1050 total Beds	1500 total Beds
		Ellen Dumesnil, Executive Director, Catholic Charities of San Jose				

1b. Transfer grant, and transferee then lease-up 25 units of permanent supportive housing for chronically homeless adults who are frequent users of the health emergency system through the New Directions in Housing and Health Care Project using 2005 bonus funds.	Barry Del Buono, Executive Director, EHC Lifebuilders				
1c. Place 27 chronically homeless people with Full Service Partnership wrap-around supportive services in Curtner Gardens (funded by Housing Plus Funds -- Mental Health Services Act and County Affordable Housing Funds, awarded in February, 2007 by the SCC Board of Supervisors).	Robert Dolci, Housing Development, SCC Dept. of Mental Health				
1d. Lease-up 15 units with HUD-Housing Homeless People with Alcohol Addiction grant funds.	Barry Del Buono, Executive Director, EHC Lifebuilders				
1e. Screen qualified applicants and issue section 8 vouchers to approximately 35 chronically homeless individuals under local preference.	Candace Capogrossi, Deputy Executive Director of Housing Programs, Housing Authority of Santa Clara County				
1f. Implement PROGRESS program to house and provide supportive services to approximately 3 chronically homeless people using HOME funds (TBRA) approved by the San Jose City Council in November, 2006.	Leslye Krutko, Director of San Jose Housing Department				
<b>2. Create beds to be occupied between February 1, 2008 – January 31, 2009</b>					
2a. Recruit landlords to begin leasing in Summer, 2008, 18-26 new units of permanent supportive housing for chronically homeless adults through the new Santa Clara County Department of Mental Health Permanent Supportive Housing Program using 2007 bonus funds.	Robert Dolci, Housing Development, SCC Dept. of Mental Health				

2b. Recruit landlords to begin leasing in Summer, 2008, 7 new units of permanent supportive housing for chronically homeless adults through the new Gilroy Place Project using 2007 CoC hold harmless funds.	David Cox, Executive Director, St. Joseph's Family Center				
2c. Continue construction on Paseo Senter I and Paseo Senter II which when opened in Spring, 2008, will provide 10 units of permanent housing and Full Service Partnership wrap-around supportive services for chronically homeless people (funded by Housing Plus Funds -- Mental Health Services Act and County Affordable Housing Funds, awarded in February, 2007 by the SCC Board of Supervisors).	Chris Block, Executive Director, Charities Housing Development Corporation				
2d. Issue NOFA for Housing Plus Funds to create and develop approximately permanent supportive housing units for people who are chronically homeless with FSP wraparound supportive services utilizing Mental Health Services Act and County Affordable Housing Funds (some units may be occupied after February 1, 2009).	Marjorie Matthews, Director, County Office of Affordable Housing				
<b>3. Create beds to be occupied after February 1, 2009</b>					
3a. Begin construction on Peacock Commons project to create 8 new units of permanent housing for chronically homeless youth available for occupancy in early-Fall 2009 using 2007 CoC hold harmless funds.	Sparky Harlan, Executive Director, Bill Wilson Center				
3b. Continue development of Fourth Street Apartments to create 12 new permanent housing units and Full Service Partnership wrap-around supportive services for chronically homeless people available for occupancy in Summer, 2009, with Housing Plus Funds loan awarded in February, 2007 by the SCC Board of Supervisors.	Geoffrey Morgan, Senior Project Manager, First Community Housing				
3c. Take action required by the Local Redevelopment Authority to pursue the Collaborative's previously submitted application to reuse the "surplus" Richey U.S. Army Reserve Center San Jose, CA for housing for people who are chronically homeless.	Chris Block, Chair, Steering Committee, SCC Collaborative				

<p><b>4. Create new beds of new units for occupancy at any time by increasing funding or housing inventory</b></p>					
<p>4a. Coordinate and consolidate current CBO and County efforts to recruit a bank of landlords to house chronically homeless individuals (including MHSA-FSP clients) including by offering incentives such as 24/7 staff availability, workshops about mental health related issues for landlords and housing staff, master lease agreements, tenant screening, continued rent subsidies when tenants hospitalized, in rehabilitation or jail, annual recognition for community service; continue exploring feasibility of web-based directory and application.</p>	<p>Kathy Espinoza-Howard, Project Director, Off the Streets Team</p>				
<p>4b. Continue work toward partnering with the Tri-County Division of the California Apartment Association to host workshops on the topic of “barriers to housing.”</p>	<p>Robert Dolci, Chair, Rehousing Initiative, Shift to Housing First Work Group, Blue Ribbon Commission (BRC)</p>				
<p>4c. Encourage agencies to submit applications for:</p> <ul style="list-style-type: none"> <li>▪ City of San Jose’s New Construction/Adaptive Reuse Construction loans (up to \$20 Million) for one of NOFA’s target populations: individuals who are chronically homeless.</li> <li>▪ City of San Jose’s Housing Trust Fund – Neighborhood-Based Special Needs Housing dollars (\$1.5 millions) for new construction of acquisition/rehabilitation of permanent rental housing for chronically homeless people.</li> <li>▪ Housing Authority of Santa Clara County’s Project-Based Voucher to use in newly constructed or rehabilitated rental housing that will serve up to 50 chronically homeless individuals</li> </ul>	<p>Robert Dolci, Chair, Housing Committee</p>				

	<p>4d. Continue to explore the feasibility of:</p> <ul style="list-style-type: none"> <li>▪ an interagency council or a joint powers authority to coordinate homeless issues and administer future new source of funding for housing;</li> <li>▪ seeking funding to update a study that evaluated various funding sources, their feasibility and the amount of funding generated to increase the housing supply; and</li> <li>▪ funding to survey voters on their willingness to fund additional permanent housing units for chronically homeless people through a bond, taxes or fees.</li> </ul>	Leslye Krutko, Chair, Finance Initiative, Increase Housing Supply Work Group, BRC				
	4e. Partner with developers to access \$5 million in MHSA funds for new housing for the chronically homeless mentally ill.	Robert Dolci, County Department of Mental Health, Housing Advisory Committee				
	4f. Consider recommendation from the Shift to “Housing First” Working Group to request that cities include supportive housing or “no-income” units as part of their overall housing plans and include “non-income producing” units into financing calculation for affordable housing projects to allow for adequate operating costs.	Supervisor Don Gage, Co-Chair, Blue Ribbon Commission				
	<b>5. Monitor Outcomes</b>					
	5a. Review and take appropriate action on status of units created for occupancy by February, 2009 at the August, 2007 Collaborative Retreat and January, 2008 Collaborative Annual Meeting.	Chris Block, Chair, Steering Committee				
2. Increase percentage of homeless persons staying in PH over 6 months to at least 71%.	<b>1. Meet Supportive Services needs of tenants to maintain housing.</b>		92%	90%	93%	95%
	1a. Use Mental Health Services Act Funding to: sustain existing and create additional FSP wrap-around services for older adults, adults and transitional aged youth	Robert Dolci, Housing Development, SCC Dept. of Mental Health				

<p>1b. Submit request to State Department of Mental Health for funding for Planning and Early Implementation Activities under the Workforce Education and Training Component of the MHSA to support activities that will contribute to remedying the shortage of qualified individuals to provide services to address severe mental illness in the public health system.</p>	<p>Robert Dolci, Housing Development, SCC Dept. of Mental Health</p>				
<p>1c. Provide medical services to homeless people who chronically consume alcohol served by EHC LifeBuilder’s HUD-funded <i>Housing for People Who Are Homeless and Addicted To Alcohol</i> grant including psychiatric evaluation and management, primary care evaluation and management services, and psychology therapy services with an RN case management component.</p>	<p>Michael Lipman, Director, FQHC programs, Santa Clara Valley Health and Hospital System, Valley Homeless Healthcare Program</p>				
<p>1d. Expand medical treatment capacity for people who are homeless through Health Resources and Services Administration grant targeting chronically homeless injection drug users (primary care, Hepatitis C Clinic).</p>	<p>Michael Lipman, Director, FQHC programs, Santa Clara Valley Health and Hospital System, Valley Homeless Healthcare Program</p>				
<p><b><i>2. Support property management to improve housing retention:</i></b></p>					
<p>2a. Sponsor trainings for “Property Managers Housing the Chronic Homeless” to enhance housing retention.</p>	<p>Kathy Espinoza-Howard, Project Director, Off the Streets Team</p>				
<p>2b. Continue work to establish funding for the creation of a housing specialist to serve as liaison between newly placed tenant and landlords (to work as part of an Assertive Community Treatment teams).</p>	<p>Dina Campeau, Chair, Outreach and Engagement Committee</p>				

	<b>3. Monitor outcomes:</b>					
	3a. Review housing retention rates based on Service Point data-to-date in January and August of each year.	Chris Block, Chair, Executive Committee				
3. Increase percentage of homeless persons moving from TH to PH to at least 61.5%.	<b>1. Increase income of people in TH so they can afford PH:</b>		75%	72%	74%	81%
	1a. Collaborative members, including those receiving HUD Continuum of Care Funds, will participate in two trainings sponsored by 1) the Social Services Agency and 2) HomeBase to increase homeless persons access to SSI/SSDI benefits.	Margaret Gregg, County Homeless Concerns Coordinator				
	1b. Consider outcomes from County's Food Stamp Program project pilot designed to decrease barriers to FSP benefits access by people who are homeless to determine if the project should be expanded.	Maureen O'Malley-Moore, Policy Analyst to Supervisor Donald F. Gage, Chair Benefits Committee				
	1c. Continue work toward identifying and eliminating system barriers to general assistance and SSI/SSDI mainstream benefits access.	Maureen O'Malley-Moore, Policy Analyst to Supervisor Donald F. Gage, Chair Benefits Committee				
	<b>2. Remove past-history barriers homeless people exiting transitional housing face in accessing permanent housing.</b>					
	2a. Seek to eliminate or modify industry practice on pass/fail on credit check; establish rent guarantee, repair and maintenance and tenant training programs as assurances to rental agreements (benefits access to permanent housing by those exiting transitional housing as well as by chronically homeless people into Housing First Programs).	Marjorie Matthews, Chair, Rapid Rehousing/Wrap-Around Services Initiative, Shift to Housing First Work Group, BRC				

<p><b>3. Develop permanent housing affordable to people exiting TH programs (ELI) to increase their opportunity for placement in PH.</b></p>					
<p>3a. Continue consideration through the Community and Economic Development Committee and San Jose City Council of:</p> <ul style="list-style-type: none"> <li>▪ changing San Jose Income Allocation Policy to create a new funding goal of targeting 30% of the funding for large development projects and rehabilitation assistance to extremely-low income housing;</li> <li>▪ changing San Jose Inclusionary Zoning Policy to deepen the required affordability levels under the inclusionary housing policy for rental developments.</li> <li>▪ identifying a permanent source of funding for affordable housing through such mechanisms as a local bond, levying recording fees or increasing reconveyance taxes.</li> </ul>	<p>Leslye Krutko, Director, San Jose Department of Housing</p>				
<p>3b. Sponsor Affordable Housing Week in 2008 to educate and elicit public support for the creation of affordable housing, including ELI units.</p>	<p>Chris Block, Chair, Steering Committee</p>				
<p>3c. Consider the option of using the HousingSCC website inventory of affordable housing to track units available by income level in each jurisdiction.</p>	<p>Chris Block, Chair, Steering Committee</p>				
<p><b>4. Monitor outcomes:</b></p>					
<p>4a. Review Collaborative's Minimum Performance Standards for Programs Serving and Housing people who are homeless for edits; continue monitoring agencies for compliance with standards.</p>	<p>Rita Castro-Hawkins, Chair, Shelter Provider Network</p>				
<p>4b. Review rates of permanent housing access for those exiting TH programs based on Service Point data-to-date in January and August of each year.</p>	<p>Chris Block, Chair, Executive Committee</p>				

4. Increase percentage of homeless persons employed at exit to at least 18%.	<b>1. Increase employment opportunities for people who are homeless by supporting them in becoming job-ready, especially for growth occupations.</b>		31%	35%	45%	55%
	1a. Support adult clients' access of new intensive case management and connection to activities (that increase employment, retention, earnings and occupational skills for local growth occupations) through the work2future One Stop Centers supported by work2future's \$1 Million set-aside of anticipated funding for Dislocated Workers.	Jenny Niklaus, Chair, Job Development Committee				
	1b. Support youth clients' access of new intensive case management and connection to activities (that increase employment, retention, earnings and occupational skills for local growth occupations) through the work2future One Stop Centers supported by work2future's \$1.2 Million set-aside of anticipated funding for Older Youth Program.	Jenny Niklaus, Chair, Job Development Committee				
	1c. Continue work to develop additional funding across the County to support employment and retention services including by demonstrating the positive financial impact to the County when homeless people are employed.	Jenny Niklaus, Chair, Job Development Committee				
	1d. Continue outreach to bring corporate partners to the planning table to develop effective employment placement and retention programs.	Rebecca Garcia, Team Leader for Impact #4 Team, Job Development Committee				
	<b>2. Monitor outcomes:</b>					
	2a. Continue work with the support of CTA to track employment access and income on HMIS for all clients; report every four months to the Steering Committee on employment rates to date of clients exiting HUD-funded projects; consider mechanisms to remove barriers to continued success.	Jenny Niklaus, Chair, Job Development Committee				

5. Ensure that the CoC has a functional HMIS system.	<b>1. Improve the quality of data being input into HMIS:</b>	Ray Allen, Chair, Technology Committee, Executive Director of Community Technology Alliance, HMIS Lead Organization	94% Bed Cover- age	93% Bed Cover- age	97% Bed Cover- age	97% Bed Cover- age
	1a. continue User Group and End User trainings					
	1b. periodically evaluate HMIS data collection practices periodically					
	1c. regularly provide agencies with exception reports					
	1d. continue efforts to cause jurisdictions and foundations to include in their grants to homeless services and housing providers funds to support entry of data into HMIS.					
	1e. provide Review and Rank Committee with annual exception reports with the assistance of the Collaborative, seek additional funding to support agencies in quality data entry					
	<b>2. Promote participation in HMIS</b>					
	2a. Support agencies receiving MHSA funding to begin entering data into HMIS if they have not previously been set-up to enter data	Ray Allen, Chair, Technology Committee				
	2b. Continue active participation in Bay Area regional group to implement a Regional HMIS and start to import local HMIS data into the Data Warehouse.					
	<b>3. Sustain HMIS</b>	Chris Block, Chair, Steering Committee				
	3a. Sustain funding to the Collaborative's HMIS Lead Entity, Community Technology Alliance (CTA) to support its preparation of agencies to participate in, assistance to agencies participating in and administration of the HMIS.					
<b>Barriers: If your CoC will not meet one or more of the above objectives, briefly describe why not (use less than two paragraphs). N/A</b> San Jose/Santa Clara City & County CoC anticipates exceeding HUD's objectives.						

## O: CoC Discharge Planning Policy Chart

Publicly Funded Institution(s) or System(s) of Care in CoC Geographic Area	None	Initial Discussion	Protocol in Development	Formal Protocol Finalized	Formal Protocol Implemented
Foster Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Health Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mental Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Corrections	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Foster Care:

Preparation for successful emancipation of foster youth in Santa Clara County is governed by the County Social Services Agency, Department of Family and Children Services's (DFCS) "California Connected by 25 Foster Youth Initiative (CC25) Plan." All social workers that have youth emancipating out of the child welfare system must refer the youth to the CC25 and Social Services Agency's Employment Services Unit.

Early outreach and Independent Living Program education is provided to 14 and 15 year old foster youth. Youth must be assessed beginning at age 15 ½ and with the youth's active involvement, a Transitional Independent Living Plan (TILP) prepared. The TILP describes the youth's current level of functioning, emancipation goals, progress towards achieving the TILP goals, and programs and services needed. (For youth who enter foster care after their 16th birthday, the TILP must be completed prior to the Dispositional Hearing making the youth a Dependent Child of the Court.) The TILP is updated annually. The services described in the TILP must assist the youth to attain emancipation goals, including "*acquisition of safe and affordable housing, upon emancipation.*"

Emancipation Conferences are held between DFCS, the youth, parents, relatives, caregivers, service providers and other people important to the youth, to review and plan for emancipation, with follow-up conferences at six month intervals.

The CC25 program provides educational, employment and housing opportunities for youth funded in part by the Annie E. Casey Foundation, the Stuart Foundation, the Walter S. Johnson Foundation and the Hewlett Foundation, including:

- A work experience, training and employment program that coordinates Santa Clara County Workforce Investment Boards, area community colleges, school districts and employers (including employment with the County) to help foster youth prepare for and obtain jobs with high wage and high growth careers;
- A transitional housing program funded by the State of California's THP-Plus program;
- Foster Youth Savings Accounts through an IDA program with County funds providing the savings match.
- Affordable housing through dorm room housing with San Jose State, a host family housing program providing youth the option of living in a supportive family setting, and funds for a first, last and security deposit funded through CalWORKS set-aside funds.

Transitional aged youth with **mental health issues** are supported with wraparound, Assertive Community Treatment and Transition to Independence services designed to address the transition needs of youth. Services are provided through Mental Health Services Act funded-Full Service Partnership (FSP) Teams. FSP teams are responsible for assisting enrollees to achieve their housing,

employment/education/vocation goals in addition to providing necessary case management and treatment services. Enrollees are linked as appropriate to program that offer independent living skills training, computer classes, financial aid workshops and other community life functioning skills.

Youth emancipating out of the County's foster care system are **not placed into HUD McKinney-Vento Continuum of Care funded programs** as they are not homeless.

**The Collaborative (CoC) understands and agrees with the discharge planning protocol of the Social Services Agency, its members are active participants in CC25 and support its efforts to reduce homelessness among youth from the foster care system.**

**Health Care:**

The County's Santa Clara Valley Medical Center discharge planning protocol states that all patients are provided a comprehensive, multidisciplinary discharge planning program as needed. Need is assessed at admission. A patient-specific discharge plan is then developed by the Case Manager with input from the patient, the patient's family/support system, physician, nursing, case management, social services and all other appropriate staff members. The discharge plan is updated throughout the patient's hospital stay as necessary to meet the needs of the patient and to provide appropriate discharge services.

The Case Manager recommends and coordinates the discharge planning process for patients who have complex medical, financial or post-hospital care needs. Guidelines for intervention include the likelihood of a patient's capacity for self-care of the possibility of the patient being cared for in the environment from which he or she entered the hospital. The Medical Social Worker is responsible for identifying and assessing psychological, social, financial, cultural and environmental issues as they influence the continuum of patient care and the plan for discharge. The Medical Social Worker (MSW) provides assistance and advocacy in obtaining financial resources and government entitlements, coordinates post-hospital non-medical housing and refers to outside agencies for assistance with *permanent housing*. The MSW also provides information and referral to a broad range of community resources with the goal of supporting independence and optimal functioning, including substance abuse programs, support groups, day care, legal resources and in-home community based services.

For homeless patients who are frequent users of the hospital emergency department and who do not remain hospitalized long enough for effective discharge planning to occur, intensive case management is provided post-discharge by the Hospital Council of Northern and Central California's New Directions project. This is a collaborative project among County and nonprofit agencies and SCC hospitals, funded by the Health Trust, to eliminate unnecessary use of emergency departments and reduce avoidable hospitalizations. HCNCC and its partners increase linkages to housing, primary care and community resources, such as mental health, transportation, and substance abuse treatment programs.

The Blue Ribbon Commission has charged the Silicon Valley Health Coalition with planning and making recommendations for improving outcomes for discharging homeless individuals from health facilities, ensuring that the policy aligns with California's new law to improve post-hospital transition of homeless individuals. The SVHC members include all of the major health care providers within the geography of the CoC, most of which are active members of the Collaborative. The group has discussed the difficulties the hospitals have in the current situation, shared best practices in the County for assessing patients for homelessness, begun work on drafting a model admission assessment tool to be used by hospital staff to assess homeless status on admission to have a model admission assessment tool for accurately determining housing status which can be recommended for use at all hospitals in the County. The group also identified current options for

meeting an unhoused patients' needs at discharge **without using HUD McKinney-Vento funded projects**, identified the ideal housing and services options for each level of care needed by a patient being discharged, and identified components needed for a Medical Respite site. The group next will attempt to identify the volume of unhoused patient discharges that could be discharged to a medical respite site when permanent or rehabilitation housing are not immediately available.

**The Collaborative (CoC) understands the discharge protocol for the Santa Clara Valley Medical Center, approves of its efforts to effectively plan for discharge of patients into housing and is working in partnership with it to produce appropriate housing options without using HUD McKinney-Vento funds.**

**Mental Health:**

Individuals treated by the Santa Clara County Department of Mental Health are regularly reviewed by appropriate teams of practitioners (24-Hour Care staff, Service Teams, Treatment Teams) in consultation with the patient, family and others as indicated, for readiness for discharge into environments which provide stepped-down levels of care. These include stepping down from State Hospitals to Institutes for Mental Disease/Skilled Nursing Facilities, and from Institutes for Mental Disease/Skilled Nursing Facilities or Acute Inpatient Facilities to Crisis Residential Facilities or independent board and care homes. (Only in cases where the individual *refuses all* placement options will a client be discharged from an Acute Inpatient Facility to a shelter setting.) **None of these residential treatment facilities are funded by HUD McKinney-Vento grants.** Discharge from Crisis Residential Facilities is managed by program staff in coordination with outpatient service teams for placement into an appropriate living arrangement such as independent housing, supported housing, shared housing home or the like.

Recognizing that a significant barrier to individuals transitioning from mental health 24-hour settings is finding immediate stable and safe housing, the Department of Mental Health has acquired units of transitional housing funded by state Mental Health Services Act (MHSA) funds allocated to the County. These units provide short-term housing (up to 180 days) to consumers being provided mental health treatment services through the mental health department. Supporting clients in the housing is MHSA-funded Full Service Partnership ("FSP"), wrap-around, integrated, "whatever it takes" services/or community re-entry services designed for people who have experienced chronic homelessness. The goal is to find permanent housing for each enrollee within the first 180 days. The Transitional Housing Units vendor is charged with doing as much as possible to refer the enrollee to appropriate care and support before discharge.

To assist with access to permanent housing units **which are not HUD McKinney-Vento funded**, units of new, permanent supportive housing also are being developed and subsidized with \$4 million in MHSA and County Affordable Housing Fund dollars. The Department of Mental Health has drafted a Housing Plan including incentives for private landlords to rent to people who have experienced chronic homelessness. To support maintenance of the permanent unit, if an FSP enrollee loses his/her subsidy and housing because he/she was hospitalized or participating in a rehabilitation program for an extended period of time, he/she can be put on fast track (as appropriate to fair housing law) for getting back into the housing program.

Additional MHSA-funded FSP wrap-around services support other adults and transition age youth in maintaining their housing which is not MHSA-funded.

The Collaborative (CoC) members were active participants in creating the Department of Mental Health's MHSA treatment and housing plans, and members of the Department of Mental Health, including its Director, are active members of the Collaborative and Blue Ribbon Commission.

**The CoC understands and agrees with the Mental Health Department’s protocol to house and provide wrap-around supportive services to those discharged from mental health 24-hour settings and is working in partnership with it to produce appropriate housing options without using HUD McKinney-Vento funds.**

**Corrections:\***

The Department of Corrections is developing a discharge protocol informed by and as an active participant in the Blue Ribbon Commission’s Prevention-Discharge Planning Work Group and Corrections/Probation subcommittee.

Elements of the protocol under consideration are:

1. Screen for homelessness and at-risk status during initial intake of clients entering criminal justice system and initiate housing and case management services immediately.
2. Establish a countywide centralized case management team to provide assistance to clients while in public institutions and plan for discharge.
3. Divert homeless people arrested for public inebriation and nuisance violations from the criminal justice system.
4. Respond to the requirements of California law (Proposition 83) regarding the parole and placement of sex offenders upon release.
5. Accountability for its success in preventing and ending homelessness.
6. Implement re-entry programs for those released from prison to assist with job training and placement, **non McKinney-Vento funded** housing, and benefits.

While the Department of Corrections has not finalized a formal discharge protocol, in fact several County programs described below are specifically designed and funded to provide housing with services and treatment to homeless people either transitioning out of the County Corrections system, or diverted out of the Criminal Justice System:

The Providing Assistance with Linking to Services (PALS) program provides intensive discharge planning services while mentally ill offenders are in custody, housing placement at exit and continues with assistance for one year including case management, income benefits access, vocational assistance, group counseling, specialized psychiatric treatment and therapy and peer support.

Santa Clara County Superior Court has a Mental Health/Drug Treatment Court for people suffering from mental illness and/or substance abuse and charged in criminal court. All judges hearing criminal assignments in Superior Court refer defendants directly to the Treatment Court under a protocol established to change sentencing practices relating to mentally ill and dually diagnosed defendants. The Treatment Court Team (including a liaison with the Department of Corrections) weekly meeting involves all partners in consensus-based review and decision-making concerning each defendant’s situation, treatment and discharge plan.

The Department of Mental Health’s Jail Aftercare and Recovery Services program provides Full Service Partnership intensive, wrap-around, “whatever it takes” services to homeless adults and youth in need of mental health and/or substance abuse treatment as an alternative to incarceration, as a condition of early release from jail/youth facility detention or upon serving their court ordered sentence. The FSP Teams are charged with acquiring **needed levels of housing through use of**

**housing funds managed by the FSP Team.**

Recognizing that a significant barrier to individuals returning to the community from incarceration is finding immediate stable and safe housing, specialized transitional housing beds are set-aside for those released from jail, and 75 new transitional housing units are being developed for FSP-enrollees being released from jail to provide stabilization and the opportunity to develop a plan for employment, education and long-term housing.

The FSP Teams, existing and new transitional housing units, and current and enhanced services available through the PALS and Treatment Courts, are funded through dollars from the Mental Health Services Act, County General Fund, HHS/SAMHSA, Juvenile Justice Crime Prevention Act, MediCal Revenue, Comprehensive Drug Court Implementation (CDCI), Drug Court Partnership (DCP) grants, and two new grants awarded to the County in 2007 through the California Department of Corrections and Rehabilitation's Mentally Ill Offender Crime Reduction Program (MIOCR): \$1.5 million for the County's Department of Mental Health's Justice and Recovery Courtroom to Community Partnership and another \$1.5 million for its Youth Development Partnership.

To assist with access to permanent housing units **which are not HUD McKinney-Vento funded**, as noted above, units of new, permanent supportive housing also are being developed and subsidized with \$4 million in MHSA and County Affordable Housing Fund dollars. To enhance permanent housing access by this population, the Department of Mental Health approved a Housing Plan governing use of MHSA funds which prioritizes placement of FSP-clients into permanent housing who experience multiple barriers to housing including coming from jail and have no other housing options, has no landlord references for the last 3 years, has a limited source of income, has an arrest record, has a felony conviction and permits case-by-case consideration of tenants who have committed a sex-related crime.

In addition, the City of Palo Alto Police Department, with the Collaborative's Off the Street Team project, is developing and seeking SAMHSA funding for a new Restorative Policing Program to divert chronically homeless at or pre-arrest into housing and treatment.

**The Collaborative (CoC) understands the current status of the Department of Corrections work toward finalizing and implementing a protocol and is supporting its effort through the Blue Ribbon Commission Discharge Planning initiative.**

## P: CoC Coordination Chart

<b>1. Consolidated Plan Coordination</b>	<b>YES</b>	<b>NO</b>
a. Do Con Plan planners, authors and other Con Plan stakeholders participate in CoC general planning meetings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Do CoC members participate in Con Plan planning meetings, focus groups, or public forums?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Were CoC strategic plan goals addressing homelessness and chronic homelessness used in the development of the Con Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>2. Jurisdictional 10-year Plan Coordination</b>		
a. Is there one or more formal jurisdictional 10-year Plan(s) being developed and/or being implemented within your CoC geography that are separate from the CoC 10-year plan? (If No, you may skip to Question 3a.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Do 10-year Plan conveners, authors and other stakeholders participate in CoC general planning meetings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Have 10-year Plan participants taken steps to align their planning process with the local CoC plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Were CoC strategic plan goals used in the development of the 10-year Plan(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Provide the number of jurisdictions within your CoC geography that have formally implemented a 10-year plan(s).	2	
<b>3. Public Housing Agency Coordination</b>		
a. Do CoC members meet with CoC area PHAs to improve coordination with and access to mainstream housing resources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

## Q: CoC Project Priorities Chart

HUD-defined CoC Name:* San Jose/Santa Clara City & County CoC						CoC #: CA-500			
(1) SF-424 Applicant Name  (Please Remove Examples)	(2) Project Sponsor Name	(3) Project Name	(4) Priority	(5) Requested Project Amount	(6) Term	(7) Program and Component Type			
						SHP New	SHP Renewal	S+C New	SRO New
<input checked="" type="checkbox"/> Santa Clara County ** Department of Mental Health	Santa Clara County Department of Mental Health	Mental Health Permanent Supportive Housing Project	1	\$702,301	2	PH			
Bill Wilson Center	Bill Wilson Center	Peacock Commons - Permanent Supportive Housing for Homeless Youth	2	\$237,230	1	PH			
Catholic Charities of San Jose	Catholic Charities of San Jose	Family Housing	3	\$488,880	1	PH			
St. Joseph's Family Center	St. Joseph's Family Center	Gilroy Place	4	\$287,217	1	PH			
Community Technology Alliance	Community Technology Alliance	HMIS SCC (Homeless Management Information System – Santa Clara County)	5	\$303,716	1		HMIS		
Santa Clara Unified School District – Educational Options	Santa Clara Unified School District – Educational Options	Career Advantage and Retraining Program (CARP)	6	\$200,534	1		SSO		
Emergency Housing Consortium of Santa Clara County (dba EHC Lifebuilders)	Emergency Housing Consortium of Santa Clara County	Boccardo Family Living Center in San Martin	7	\$93,866	1		TH		
InnVision, the Way Home	InnVision, the Way Home	Julian Street Inn	8	\$104,030	1		SH-TH		

Bill Wilson Center	Bill Wilson Center	Transitional Housing Program for Homeless Youth and Young Families in North Santa Clara County	9	\$298,645	1		TH		
InnVision, the Way Home	InnVision, the Way Home	InnVision Villa	10	\$168,888	1		TH		
Bill Wilson Center	Bill Wilson Center	Transitional Housing Program for Homeless Youth and Young Families (Central and South County)	11	\$548,476	1		TH		
Emergency Housing Consortium of Santa Clara County	Emergency Housing Consortium of Santa Clara County	Boccardo Regional Reception Center TH Program for Single Adults w/ Disabilities	12	\$290,883	1		TH		
InnVision, the Way Home	InnVision, the Way Home	Safe Haven PH for Women (Hester Avenue)	13	\$104,437	1		SH-PH		
Housing for Independent People, Inc.	Housing for Independent People, Inc.	Sunset Leasing Project	14	\$133,333	1		PH		
Cupertino Community Services	Cupertino Community Services	CCS Transitional Housing Program	15	\$82,533	1		TH		
Charities Housing Development Corporation	Charities Housing Development Corporation	San Antonio Place and Scattered Sites	16	\$160,427	1		PH		
San Jose Cathedral Foundation	San Jose Cathedral Foundation	St. Joseph the Worker House for Homeless Women and Children	17	\$96,600	1		TH		
San Jose Cathedral Foundation	San Jose Cathedral Foundation	St. Joseph the Worker House for Homeless Men	18	\$45,000	1		TH		

Family Supportive Housing, Inc.	Family Supportive Housing, Inc.	Transitional Housing for Families	19	\$197,077	1		TH		
InnVision, the Way Home	InnVision, the Way Home	North SSC Transitional Housing for Families	20	\$106,805	1		TH		
InnVision, the Way Home	InnVision, the Way Home	HomeSafe San Jose	21	\$66,150	1		TH		
InnVision, the Way Home	InnVision, the Way Home	Sunset Square	22	\$211,612	1		PH		
Emergency Housing Consortium of Santa Clara County	Emergency Housing Consortium of Santa Clara County	Off the Streets Project for Homeless Addicted to Alcohol	23	\$496,169	1		PH		
InnVision, the Way Home	InnVision, the Way Home	Montgomery Street Inn	24	\$210,000	1		TH		
Emergency Housing Consortium of Santa Clara County	Emergency Housing Consortium of Santa Clara County	Sobrato Transitional Apartments for Single Mothers and Their Children	25	\$92,011	1		TH		
Emergency Housing Consortium of Santa Clara County	Emergency Housing Consortium of Santa Clara County	Boccardo Reception Center Family Resource Center and TH for Families	26	\$354,018	1		TH		
InnVision, the Way Home	InnVision, the Way Home	North County Inns	27	\$221,399	1		PH		
InnVision, the Way Home	InnVision, the Way Home	North SCC Supportive Housing Coalition	28	\$138,894	1		TH		
Emergency Housing Consortium of Santa Clara County	Emergency Housing Consortium of Santa Clara County	Sobrato Family Living Center – Permanent Supportive Housing for Homeless Families	29	\$102,462	1		PH		
Emergency Housing Consortium of Santa Clara County	Emergency Housing Consortium of Santa Clara County	Sobrato Family Living Center – Trans. Housing Program for Homeless Families	30	\$211,231	1		TH		

<b>(8) Subtotal: Requested Amount for CoC Competitive Projects:</b>					<b>\$6,754,824</b>
<b>(9) Shelter Plus Care Renewals:</b>					<b>S+C Component Type</b>
Housing Authority of the County of Santa Clara	Housing Authority of the County of Santa Clara	Shelter Plus Care: 5022	<b>31</b>	\$2,056,104	1 <b>TRA</b>
Housing Authority of the County of Santa Clara	Housing Authority of the County of Santa Clara	Shelter Plus Care: 5232	<b>32</b>	\$509,772	1 <b>TRA</b>
<b>(10) Subtotal: Requested Amount for S+C Renewal Projects:</b>					<b>\$2,565,826</b>
<b>(11) Total CoC Requested Amount (line 8 + line 10):</b>					<b>\$9,320,650</b>

CoC-Q

**R: CoC Pro Rata Need (PRN) Reallocation Chart**  
(Only for Eligible Hold Harmless CoCs)

<p><b>1a. Will your CoC be using the PRN reallocation process?</b>    <input checked="" type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p><b>1b. If Yes,</b> explain the open decision making process the CoC used to reduce and/or eliminate projects (use no more than one-half page).</p> <p>At a public meeting, in 2006, based on community input, the Steering Committee determined that: 1) all project applications, new and renewal, would be reviewed and scored by the Review and Rank Committee (R&amp;R); 2) R&amp;R would determine if any renewal project should not be renewed, or subjected to decreased funding, due to performance measures score; 3) R&amp;R would then analyze whether any hold harmless funds should be utilized for a new permanent housing project taking into consideration the value to the Continuum of the new and renewal project, the availability of alternative funding for either, whether any HUD capital funds were invested in the renewal project, and the impact on people who are homeless if the renewal project lost funding. The R&amp;R then would make its recommendations to the Steering Committee for decision. The Collaborative's applications committee (anyone interested can be a member) then also created and the Steering Committee adopted scoring tools, additional application materials, and the project review process. In advance of the local competition, one agency voluntarily determined not to renew three of its grants and those funds were reallocated to new permanent supportive housing. The nonconflicted R&amp;R Committee read, analyzed, discussed with applicants and between themselves, then scored all applications submitted for consideration. Based on performance scores, it determined that two projects should not be renewed, and the funding of another agency's multiple projects reduced by a total amount, and these funds be allocated to three new permanent housing projects. The decisions were communicated to the concerned agencies along with a reminder of the appeals process. The decision and reasons for it also were discussed with each agency. Two agencies appealed the funding recommendations. An Appellate Panel met, considered the appeals and upheld the recommendations of the R&amp;R Committee. The recommendations of the R&amp;R and Appeals Committees were accepted by consensus of the Steering Committee.</p>
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<b>2. Enter</b> the total 1-year amount of <i>all</i> SHP projects that are eligible for renewal in 2007, which amount you have <b>verified with your field office</b> :					<b>\$6,052,523</b>
<b>3. Starting</b> with the total entered above for question 2, subtract the amount your CoC proposes to use for new permanent housing project, and enter the remaining amount:					<b>\$5,039,196</b>
<b>4. Enter the Reduced or Eliminated Grant(s) in the 2007 Competition</b>					
<b>(1) Expiring Grants</b>	<b>(2) Program Code</b>	<b>(3) Component</b>	<b>(4) Annual Renewal Amount</b>	<b>(5) Reduced Amount</b>	<b>(6) Retained Amount from Existing Grant</b>
CA01B600014	SHP	TH	\$162,369	\$162,369	\$0
CA01B600019	SHP	TH	\$159,292	\$52,487	\$106,805
CA01B600021	SHP	TH	\$179,700	\$40,806	\$138,894
CA01B600025	SHP	SSO	\$56,275	\$56,275	\$0
CA01B600026	SHP	TH	\$78,750	\$12,600	\$66,150
CA01B600028	SHP	PH	\$409,450	\$409,450	\$0
CA01B600030	SHP	TH	\$157,500	\$157,500	\$0
CA01B600031	SHP	TH	\$121,840	\$121,840	\$0
<b>(7) TOTAL:</b>			\$1,325,176	\$1,013,327	\$311,849
<b>5. Newly Proposed Permanent Housing Projects in the 2007 Competition*</b>					
<b>(8) 2007 Project Priority Number</b>	<b>(9) Program Code</b>	<b>(10) Component</b>	<b>(11) Transferred Amounts</b>		
#2	SHP	PH	\$237,230		
#3	SHP	PH	\$488,880		
#4	SHP	PH	\$287,217		
<b>(12) TOTAL:</b>			\$1,013,327		

### S: CoC Project Leveraging Summary Chart

<b>Name of Continuum</b>	<b>Total Value of Written Commitment</b>
San Jose/Santa Clara City & County CoC	\$11,697,800.67

**T: CoC Current Funding and Renewal Projections**

<b>Supportive Housing Program (SHP) Projects:</b>												
Type of Housing	All SHP Funds Requested (Current Year)		Renewal Projections									
	2007		2008		2009		2010		2011		2012	
Transitional Housing (TH)	\$3,001,069		\$3,001,069		\$3,001,069		\$3,001,069		\$3,001,069		\$3,001,069	
Safe Havens-TH	\$104,030		\$104,030		\$104,030		\$104,030		\$104,030		\$104,030	
Permanent Housing (PH)	\$3,041,508		\$3,815,805		\$4,053,035		\$4,053,035		\$4,053,035		\$4,053,035	
Safe Havens-PH	\$104,437		\$104,437		\$104,437		\$104,437		\$104,437		\$104,437	
SSO	\$200,534		\$200,534		\$200,534		\$200,534		\$200,534		\$200,534	
HMIS	\$303,716		\$303,716		\$303,716		\$303,716		\$303,716		\$303,716	
<b>Totals</b>	\$6,755,294		\$7,529,591		\$7,766,821		\$7,766,821		\$7,766,821		\$7,766,821	
<b>Shelter Plus Care (S+C) Projects:</b>												
Number of S+C Bedrooms	All S+C Funds Requested (Current Year)		Renewal Projections									
	2007		2008		2009		2010		2011		2012	
	Units	\$	Units	\$	Units	\$	Units	\$	Units	\$	Units	\$
SRO	17	\$155,244	17	\$155,244	17	\$155,244	17	\$155,244	17	\$155,244	17	\$155,244
0	33	\$401,544	33	\$401,544	42	\$511,056	42	\$511,056	42	\$511,056	42	\$511,056
1	32	\$451,200	32	\$451,200	32	\$451,200	32	\$451,200	32	\$451,200	32	\$451,200
2	39	\$660,816	39	\$660,816	39	\$660,816	39	\$660,816	39	\$660,816	39	\$660,816
3	28	\$682,416	28	\$682,416	28	\$682,416	28	\$682,416	28	\$682,416	28	\$682,416
4	8	\$214,656	8	\$214,656	8	\$214,656	8	\$214,656	8	\$214,656	8	\$214,656
5	0	\$0	0	\$0	0	\$0	0	\$0	0	\$0	0	\$0
<b>Totals</b>	157	\$2,565,876	157	\$2,565,876	166	\$2,675,388	166	\$2,675,388	166	\$2,675,388	166	\$2,675,388

## Part IV: CoC Performance

### U: CoC Achievements Chart

2006 Objectives to End Chronic Homelessness and Move Families and Individuals to Permanent Housing	12-month Measurable Achievement Proposed in 2006	Accomplishments
1. Create new PH beds for chronically homeless persons.	<b>CREATE 206 NEW BEDS FOR CHRONICALLY HOMELESS PERSONS.</b>	<p><b>OBJECTIVE MET:</b> 210 new beds for chronically homeless people created (all funded, but not all yet available for occupancy):</p> <p><i>Summary of a-h below:</i>            Catholic Charities/Navigator: 29 beds            CWG/Opportunity Center: 70 beds            EHC/HP Alcohol Addictions: 27 beds            Housing Authority/Section 8: 26 beds            Unity Care/Unity Place: 9 beds            FCH/Curtner Gardens: 27 beds            FCH/Fourth St.: 12 beds            CHDC – Paseo Senter I: 5 beds            CHDC – Paseo Senter II: 5 beds</p>
	<b><i>Increase stock of beds:</i></b>	
	a. Catholic Charities/Navigator Project: master lease 29 new units for chronically homeless people.	a. Project funded with 2006 competition bonus funds. Landlords recruited and lease-up will commence in approximately July, 2007.
	b. Community Working Group/Opportunity Center project: house 40 chronically homeless people in new mixed-use housing complex.	b. In the past year, the Opportunity Center has provided permanent supportive housing in 70 units for 70 chronically homeless individuals.
	c. EHC Lifebuilders/New Directions project: master-lease 25 new units for chronically homeless, including frequent users of the emergency hospitals.	c. EHC and HUD are working toward transfer of the grant; transfer and rent-up are expected in approximately September, 2007.
	d. EHC Lifebuilders/Housing Homeless People with Alcohol Addictions project: master-lease 42 new units for chronically homeless people who have alcohol addictions.	d. As of January, 2007, 27 units were leased-up with HUD funding available for an additional 15 units. (Difficulties with match funding has delayed full rent-up.)

	<p>e. Housing Authority of the County of Santa Clara/Section 8 Voucher program: award 61 Sect. 8 vouchers to chronically homeless individuals.</p>	<p>e. The Housing Authority awarded approximately 26 vouchers to chronically homeless people under local preference upon monthly turnover in the program. (Eligibility screening difficulties slowed the award process.)</p>
	<p>f. Unity Care/Unity Place: house 9 chronically homeless youth in new housing complex.</p>	<p>f. Unity Place opened on time and with housing for 9 chronically homeless people.</p>
	<p><b><i>Prepare for development of additional units of permanent housing for chronically homeless people:</i></b></p> <p>g. Actively participate with Local Redevelopment Authorities in preparing Re-Use plans for three military bases within Santa Clara County. Advocate for creation of mixed-use housing, including for chronically homeless people.</p>	<p>g. Partnerships of Collaborative members submitted applications to the LRA for re-use of the Onizuka AFB (Sunnyvale) and Richey Army Reserve Center (San Jose) to produce approximately 236 new units of housing, approximately 60 for people who are chronically homeless; the third opportunity has not yet arisen.</p>
	<p>h. Apply through local processes for Mental Health Services Act (MHSA) funds to develop housing units for chronically homeless people with mental illness.</p>	<p>h1. Housing Plus Funds (County Affordable Housing Fund and Department of Mental Health-MHSA funds) were awarded to First Community Housing Partnership for the Fourth Street Apartments and Curtner Gardens projects and to Charities Housing for the Paseo Senter I and Paseo Senter II projects to fund 49 units of permanent housing for chronically homeless people with Full Service Partnership supportive services; 37 to be available in the next year.</p> <p>h2. In addition to the more than \$6 million for housing contained in the County's MHSA 3-year plan, an estimated \$5 million will be available each year for new housing for the homeless mentally ill. The County Mental Health Department has formed a Housing Advisory Committee to develop the process for partnering with developers to access these funds.</p>

<p>2. Increase percentage of homeless persons staying in PH over 6 months to 71%.</p>	<p><b>90% WILL REMAIN IN PERMANENT SUPPORTIVE HOUSING FOR AT LEAST 6 MONTHS.</b></p>	<p><b>OBJECTIVE EXCEEDED:</b> 92% remained in permanent supportive housing for at least 6 months.</p>
	<p><i>Meet Supportive Services Needs of Tenants:</i></p> <p>a. Through partnerships and collaborations among homeless service agencies and mainstream mental health, health and substance abuse mainstream agencies, increase integrated services available on-demand to those in permanent housing.</p>	<p>a1. Funded Full Service Partnership Teams (FSP) to provide integrated, wrap-around, “whatever-it-takes” supported services to 255 adults (180 for Criminal Justice System involved adults) through Mental Health Services Act (MHSA) funding.</p> <p>a2. City of San Jose created the Promoting Growth and Early Self-Sufficiency Program (PROGRESS) for chronically homeless individuals and families. This two-year pilot self-sufficiency program will provide housing assistance (HOME-TBRA), job training and wrap-around services for 15 households. It is a collaborative effort between the City, the Housing Authority, the WIB (work2future) and a CBO. Success will be monitored for replication.</p> <p>a3. The City of San Jose’s Housing Services Partnership, a collaboration between three CoC agencies, assists clients in maintaining their housing through rental assistance and supportive services. The program provided those and other services (transitioning people into permanent housing with rental and move-in assistance) to 813 individuals and 851 families in the past year.</p>

	<p>b. Seek additional financial resources for supportive services from Mental Health Services Act (MHSA) funds.</p>	<p>b. Developed County plan for submission to California Department of Mental Health for \$5.3 million in surplus MHSA-CSS funds for FY 2007-2008 including for 75 additional FSP slots for wrap-around, “whatever it takes” supportive services.</p>
	<p><b><i>Mitigate Against Evictions and Engage Private Landlords (using SHP and S+C vouchers) in continued rental to people who are homeless:</i></b></p> <p>c. Provide two Collaborative-wide trainings focused on effective techniques to balance the interests of property management and the provision of supportive services in PH projects to mitigate against evictions, yet ensure continued project/lease viability.</p>	<p>c1. Shelter Provider Network sponsored four trainings to support continued tenancies in permanent supportive and other housing:</p> <ul style="list-style-type: none"> <li>▪ the many faces of mental illness seen in the homeless population</li> <li>▪ an interactive workshop to provide an overview to recognizing and responding to domestic violence.</li> <li>▪ cultural diversity and competency in delivery of housing and services.</li> <li>▪ information case management files should contain</li> </ul> <p>c2. The Collaborative Off the Streets Team project created training curriculum for property managers housing the chronic homeless for benefit of all Collaborative members and specifically targeted to staff at HUD-funded permanent housing projects.</p>

	<p>d. At each Outreach Connect and during Affordable Housing Week (see Objectives 8a and 3k, below), include in media messages the need for and advantages of private landlords master-leasing units to CBO's to house homeless people.</p>	<p>d1. In response to the Collaborative advocacy, the Chair of the County Board of Supervisors used his State of the County speech to announce the County's commitment to ending homelessness and two new initiatives – one to address the affordable housing crisis and homelessness including by assisting people who are homeless to move directly into affordable rental housing; and another to improve services to the homeless population.</p> <p>d2. Project Homeless Connect and Outreach Connect events were covered by the local media; major Silicon Valley employers Adobe and IBM exposed their work forces to the needs of people who are unhoused including for private rental units by sponsoring and volunteering at Project Homeless Connect.</p> <p>d3. Affordable Housing Week's "Seminar to End homelessness and Solve the Affordable Housing Crisis" engaged multiple sectors of the community in action toward ending homelessness including renting units to those who are homeless.</p> <p>d4. The Blue Ribbon Commission's "Campaign" Working Group is developing strategies to catalyze the community to action around solutions to homelessness including. Support for private apartment leasing.</p>
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	<p>e. Collaborative representatives on 10-Year Plan Implementation Leadership Group (charged with implementation of Santa Clara County and San Jose 10-Year Plans to End Chronic Homelessness) will urge priority implementation of 10-Year Plan Action Step to designate an office charged with enlisting private landlords to master-lease to CBOs and accept unhoused people as tenants.</p>	<p>e1. The Blue Ribbon Commission’s “Shift to Housing First Working Group” met with the Executive Director of the Tri-County Divisions of the California Apartment Association representing 213 rental units to discuss the barriers to renting which people who are homeless face. The group discussed methods of information exchange and building relationships between apartment managers, support providers and potential tenants.</p> <p>e2. The Department of Mental Health’s newly created Housing Plan includes a series of incentives to offer landlords renting their units to chronically homeless people suffering from mental illness and the DMH has developed a marketing brochure concerning its housing program.</p> <p>e3. The Collaborative’s Off the Streets Team project designed and is working toward implementing a program to centralize and coordinate recruitment and engagement of private landlords utilizing the successful model of Catholic Charities of San Jose.</p>
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<p>3. Increase percentage of homeless persons moving from TH to PH to 61.5%.</p>	<p><b>INCREASE PERCENTAGE OF HOMELESS PERSONS MOVING FROM TH TO PH TO 71%</b></p>	<p><b>OBJECTIVE EXCEEDED:</b> 75% of homeless persons moved from Transitional Housing to Permanent Housing.</p>
	<p><i>Increase income to increase access to PH that is affordable:</i></p> <p>a. Increase access to Supplemental Security Income and Social Security Disability Income benefits:</p> <p>i. Collaborative will sponsor a training for health care providers who treat homeless people to enhance appropriate diagnoses in support of SSI/SSDI applications.</p>	<p>ai1. The Collaborative is sponsoring a training conducted by HomeBase to focus on identifying and documenting cognitive disorders as an eligibility factor in SSI/SSDI applications and on creating SSI/SSDI pre-release agreements between the SSA and correctional facilities to take place June 25, 2007.</p> <p>ai2. Collaborative has secured the agreement of the Social Services Administration to conduct training for the Collaborative in Summer, 2007, aimed at increasing access to SSI/SSDI by people who are homeless.</p>

	<p>b. Increase access to Food Stamp Program (FSP) Benefits:</p> <p>i. Each homeless housing/service provider will actively participate in the SCC SSA Food Stamp Program’s redesigned application process by appointing a FSP liaison to process FSP applications in lieu of clients needing to appear at the FSP office.</p> <p>ii. Collaborative will advocate to and support the SCC Social Services Agency in extending existing ABAWD waiver for at least an additional year thereby increasing access to FSP benefits by chronically homeless people.</p> <p>iii. Continue meetings with FSP representative to design a Restaurant Meals Program enabling those without places to cook to better utilize FSP benefits.</p> <p>iv. Homeless housing/service provider staff will attend trainings sponsored by the FSP focused on increasing access to FSP benefits by people who are homeless.</p>	<p>bi. Collaborative members and Santa Clara County Food Stamp Program staff attended HUD-sponsored training on removing barriers to homeless persons’ access to food stamps benefits. As a result:</p> <ul style="list-style-type: none"> <li>▪ The County implemented a pilot project to expedite and streamline FSP applications for people who are homeless by permitting enrollment at homeless service venues, food banks and community centers – pilot agency Collaborative members are active participants</li> <li>▪ The County has been conducting food stamp application telephone interviews with families who cannot get to a benefits office;</li> </ul> <p>bii. The County’s Able-Bodied Adults without Dependents (ABAWD) waiver was extended for another year increasing eligibility by people who are homeless for food stamps.</p> <p>biii. The County Board of Supervisors approved a FSP-Restaurant Meals Program enhancing the usefulness of the benefit to people who are homeless.</p> <p>biv. Collaborative members including HUD-funded providers attended a series of FSP trainings sponsored by the County Social Services Agency FSP and by the Shelter Provider Network specifically focused on applications by people who are homeless.</p>
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	<p>c. Collaborative representatives on 10-Year Plan Implementation Leadership Group will urge priority implementation of 10-Year Plan strategies to increase access to County-administered mainstream benefits.</p>	<p>c1. Collaborative presented to the Leadership Group as a priority need increased access to County-administered mainstream benefits resulting in:</p> <ul style="list-style-type: none"> <li>▪ Creation of Food Stamp Program pilot project for expedited and stream-lined application process;</li> <li>▪ Policy Analyst to Chair of Board of Supervisors becoming Chair of the Collaborative’s Benefits Committee with focused work on removing barriers to Food Stamps, General Assistance and SSI/SSDI Benefits;</li> <li>▪ Blue Ribbon Commission’s “Wrap-Around Services Initiative” including streamlined to benefits by unhoused people.</li> <li>▪ The Mental Health Department’s RFPs for MHSA FSPs requiring FSP vendors to coordinate the efforts of mainstream providers of essential services to each FSP enrollee: “social services, probation, drug treatment and mental health court, criminal justice, juvenile justice, education, mental health.”</li> </ul> <p>c2. The City of San Jose maintained funding for the Housing Services Partnership (a collaboration of three CBOs) to provide wrap-around services including permanent housing search, rental and move-in assistance.</p>
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	<p>d. Review Benefits Access: Income and Treatment Committee and/or Shelter Provider Network to specially meet with representatives of: Veterans Health Care, Veterans Benefits, SSA and the SCC Social Services Agency General Assistance, Food Stamp Program and CalWORKs (TANF) program managers to: 1) assess each benefit program's success in serving people who are homeless; and 2) consider changes to increase access. The Mental Health Advocacy Project will attend to ensure consumers' experiences are relayed.</p>	<p>d1. Through discussions with Collaborative member Valley Homeless Healthcare Program and the Veteran's Administration, in October 2006 a VA internist began seeing patients in the VHHP clinic space focusing on linkage to the VA's specialized homeless veterans treatment and housing programs.</p> <p>d2. The five Project Homeless Connect and Outreach Connect planning sessions brought together mainstream income benefits providers to discuss barriers to access, and on-site applications for people who are homeless at these events including the Veterans Administration, County Social Services Agency (general assistance and food stamp benefits), federal Social Security Administration, County Departments of Alcohol and Other Drug Services and of Mental Health and Valley Homeless Health Care mobile health and dental vans. The December Project Homeless Connect alone resulted in <b>50 new cases</b> opened for County Social Services (food stamps, medical and general assistance).</p>
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	<p><b><i>Enhance TH Clients' Acceptance as a Tenant</i></b></p> <p>e. Through partnerships and collaborations, TH providers will provide or link their clients to credit-check and credit-correction services.</p>	<p>e1. HUD funded TH providers routinely assist their clients in accessing credit reports, and then either refer them to Consumer Credit Counseling Services for in-person assistance or to on-line assistance, or provide in-house correction services; some programs in the past year also leveraged the volunteer time of financial experts to assist in credit clearance and financial education.</p> <p>e2. Department of Mental Health approved a Housing Plan, written by the Chair of the Collaborative's Housing Committee, governing use of MHSA funds. It creates a housing placement priority for those who experience multiple barriers to housing including "needs credit repair or needs to establish credit, has no landlord references for the last 3 years, has a limited source of income, has bad rent history, has an arrest record, has a felony conviction and permits case-by-case consideration of tenants who have committed a sex-related crime."</p>
	<p>f. TH providers will support clients in utilizing the Santa Clara County Superior Court's "Outreach Court" to resolve outstanding criminal misdemeanor warrants.</p>	<p>f. There were 7 Outreach Court [for people who are homeless] sessions, co-sponsored by EHC Lifebuilders, a major transitional housing provider in the community and the Santa Clara County Superior Court from June 2006 through May 2007 and 114 individuals were assisted.</p>

	<p><b><i>Support the creation of permanent units affordable to people with extremely low incomes, such as clients exiting TH:</i></b></p> <p>g. Collaborative will advocate to support the creation of units affordable to those with extremely low incomes (ELI) in the Coyote Valley development.</p>	<p>g1. Collaborative members have been active participants in Coyote Valley Affordable Housing Focus Group meetings advocating for 1500 of 4000 rental units dedicated as ELI.</p> <p>g2. Collaborative member City of San Jose:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> authorized issuance of housing revenue bonds for Casa Feliz Apartments to develop 59 studio units affordable to individuals with incomes that do not exceed 35% of the area median income;</li> <li><input checked="" type="checkbox"/> approved a funding commitment to First Community Housing for development of the 100-unit North First Street Apartment affordable housing project with 35 units of extremely low income housing (at or below 25% of AMI);</li> <li><input checked="" type="checkbox"/> approved a funding commitment for the development of the 86-unit Fairways at San Antonio affordable family housing project of which 22 units will be at or below 30% AMI and 4 units will be at or below 25% AMI.</li> </ul> <p>County Affordable Housing Fund (Round Three) funded these units for extremely low income people:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Senior Housing Solutions – Milpitas Senior Group: 5 units</li> <li><input checked="" type="checkbox"/> Bridge Housing Corporation Fabian Way Senior Apartments – 66 units</li> <li><input checked="" type="checkbox"/> Charities Housing Development Corporation, Paseo Senter II – 101 units (36 set-aside for people who are homeless)</li> <li><input checked="" type="checkbox"/> South County Housing, Royal Court Apartments: 55 units (5 set-aside for people who are homeless)</li> </ul>
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	<p>h. Collaborative will advocate to support passage of California AB 2634 which will require Housing Elements to include plans for ELI housing units.</p>	<p>h. Collaborative advocated to State leaders for passage of AB 2634; bill passed and was signed into law.</p>
	<p>i. Collaborative will advocate for passage of local ordinance to increase sales tax with portion of proceeds to develop ELI housing units.</p>	<p>i1. Collaborative endorsed and encouraged voters to support local ordinance to increase sales tax which did not succeed on the November, 2006, local ballot.</p> <p>i2. The Blue Ribbon Commission's "Increase Housing Supply" Work Group has included in its recommended Finance Initiative funding a survey of voters to determine interest in helping to finance affordable housing efforts through bonds or through taxes and fees.</p>
	<p>j. Collaborative will consider supporting California housing bond, newly placed on November 2006 ballot.</p>	<p>j. Collaborative endorsed and advocated for California's housing bond which passed in November, 2006, resulting in additional state funding available for housing for people who are homeless.</p>
	<p>k. Collaborative will again sponsor Affordable Housing Week in 2007 to educate and elicit public support for the creation of affordable housing, including ELI units.</p>	<p>k. A team of public sector, private sector, and nonprofit organizations came together to plan and implement a series of educational events for Affordable Housing Week 2007. Over 1300 people participated in events throughout the week, including a bus tour of affordable housing developments, an affordable housing resource fair, and a Project Homeless Connect event.</p>

<p>4. Increase percentage of homeless persons becoming employed by 11%.</p>	<p><b>INCREASE PERCENTAGE OF HOMELESS PERSONS BECOMING EMPLOYED BY 12%</b></p>	<p><b>OBJECTIVE EXCEEDED (WITH EXPLANATION)</b></p> <p>In 2006, 34.4% of those exiting our HUD-funded programs were employed. This year the raw percentage is 31%. If however we exclude the data from our SSO project which does not have income at exit sources from over 300 clients because of the short-term nature of assistance sought, 49% of clients were employed at exit, <b>an increase of 14.6%.</b></p>
	<p><i>Create job opportunities:</i></p> <p>a. Hire a Job Developer: Collaborative representatives on 10-Year Plan Implementation Leadership Group will urge priority funding for a Job Developer, charged with engaging employers within the County to hire homeless people into existing, or customized, supported employment positions, and facilitating job placement and supports with homeless employment service providers.</p>	<p>a1. The Collaborative presented to the Leadership Group its priority recommendation to retain a Job Developer to outreach to employers on behalf of people who are homeless. As the result, the Blue Ribbon Commission’s “Shift to Housing First” Working Group’s Wrap-Around Services Initiative includes strategies to facilitate collaboration among employment agencies and programs such as the WIB to create job training and employment opportunities for people who are homeless and to increase the number of employers who hire formerly homeless individuals.</p>

		<p>a2. The Department of Mental Health’s FSP Team vendors providing services <i>to transition aged youth</i> are “required to have educational/vocational specialists, integrate access to and support of education and employment services by developing partnerships with existing employment development services in Santa Clara county.</p> <p>a3. The Department of Mental Health’s FSP Team vendors providing services to <i>adults</i> are required to “work with each enrollee to develop action steps to build job-readiness and linkages to employment resources. The FSP Team will develop or build on existing strong ties to prevocational and vocational providers in the community to develop the employment component with the Personal Service Plan and in finding and securing employment opportunities. Case management counselors will be utilized to provide guidance and reassurance as possibilities for gainful employment arise.</p>
	<p><b><i>Design work experience programs for those not yet employable in private market due to skill set or work history:</i></b></p> <p>b. Income and Treatment Committee to complete review of Palo Alto Downtown Streets Team (sponsored by the Palo Alto Downtown Business and Professional Association), City of Palo Alto Seasonal Worker Program and customized, supported employment programs and design a model Local Government/Business Hiring Program. Present to 10-Year Plan Implementation Leadership Group for implementation.</p>	<p>b. Income and Treatment Committee was split, and new Job Development Committee and Benefits Committee formed. Job Development Committee engaged the local WIB in its work, resulting in the WIB agreeing to pilot a project to provide intensive services to people who are homeless. (See next accomplishment.)</p>

	<p>c. Silicon Valley Workforce Investment Board and NOVA Workforce Investment Network (WIB) representatives will be engaged through the Santa Clara County Office of Affordable Housing and City of San Jose Housing Department to actively participate with the Income and Treatment Committee to increase public and private employment opportunities for people who are homeless.</p>	<p>c1. The Silicon Valley Workforce Investment Board, now called work2future, has been actively involved in the past year in supporting employment for people who are homeless:</p> <ul style="list-style-type: none"> <li>▪ it will fund up to \$1 Million to provide intensive services from July, 2007 – June, 2008, to 250 adults, including as a target, adults who are homeless, at three One-Stop Centers to increase employment, retention, earnings and occupational skills for local growth occupations;</li> <li>▪ it will fund up to \$1.2 million to provide intensive services from July, 2007 – June, 2008, to 250 youth who are homeless or aged out of foster care to provide activities to increase employment, retention, earning and occupational skills for local growth occupations;</li> <li>▪ its mobile one-stop employment services van is regularly scheduled to serve clients at specified City of San Jose’s homeless services programs;</li> <li>▪ it is an active partner in the Social Services Agency’s Connect by 25 project to employ youth who have emancipated from foster care; and</li> <li>▪ it is meeting with the Job Development Committee.</li> </ul> <p>c2. Two of the member agencies of the Board of Directors of the NOVA Workforce Board are also members of the Collaborative’s Board of Directors, called the Steering Committee and members of the Blue Ribbon Commission’s “Shift to Housing First Work Group, Wrap-Around Services Initiative”; staff of one of those two agencies was appointed Chair the Collaborative’s Job Development Committee in the last year.</p>
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<p>5. Ensure that the CoC has a functional HMIS system.</p>	<p><b>95% AVERAGE AGENCY HMIS PERFORMANCE SCORE</b></p>	<p><b>OBJECTIVE EXCEEDED:</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> the average data completion rate of HUD Continuum of Care-funded programs 98.45%</li> <li><input checked="" type="checkbox"/> 94% of all beds entered into HMIS</li> <li><input checked="" type="checkbox"/> supportive services only, drop-in centers and outreach programs entering data into HMIS</li> <li><input checked="" type="checkbox"/> efficient collection of accurate data enhanced by use of swipe cards at drop-in and services-only programs, at Project Homeless Connect and at largest shelters (program is expanding).</li> </ul>
	<p><i>Sustain HMIS Support:</i></p> <p>a. Sustain funding to the Collaborative’s HMIS Lead Entity, Community Technology Alliance (CTA) to support its preparation of agencies to participate in, assistance to agencies participating in and administration of the HMIS.</p>	<p>a. The Collaborative presents as its top-ranked renewal project CTA’s application for renewal funding of HMIS-SCC. This project leverages more than twice its requested HUD funding.</p>
	<p>b. Request that jurisdictions and foundations include in their grants to homeless services and housing providers funds to support entry of data into HMIS.</p>	<p>b1. The Collaborative has made this request of funders, without positive results to date.</p> <p>b2. The City of San Jose requires that all federal and city funded agencies serving people who are homeless actively participate in HMIS (except for programs primarily serving victims of domestic violence and programs which only serve food/meals). It also is supporting food/meal only programs to begin entering data. It’s Consolidated Plan calls for efforts to bring in new resources into the community to cover the costs associated with the services.</p>
	<p><i>Promote HMIS Performance:</i></p> <p>c. CTA to continue to provide agencies with regular exception reports, and to provide the agencies and Review and Rank Committee with annual Performance Score based on data fields accurately completed.</p>	<p>c. CTA provides agencies with exception reports regularly, and in the interim upon request. With the permission of each agency, it provided the Review and Rank Committee with a report of exception rates for each project seeking renewal funding used to score project applications.</p>

	<p>d. Review and Rank Committee to continue to score applicants for HUD Continuum of Care funding on HMIS Performance and accuracy of data in ServicePoint generated APRs.</p>	<p>d. The Steering Committee's scoring factors, utilized by the Review and Rank Committee, included HMIS exception reports.</p>
	<p>e. For operating years ending in 2006, 50% of programs (other than those serving victims of domestic violence and unaccompanied minor youth who do not have legal status to consent) will submit to HUD APRs with data generated from HMIS.</p>	<p>e. At least 50% of the agencies who prepared APRs for operating years ending in 2006 utilized HMIS data to prepare the APRs.</p>
	<p><b><i>Participate in Regional HMIS:</i></b></p> <p>f. Continue active participation in Bay Area regional group to implement a Regional HMIS.</p>	<p>f. The Collaborative is an active participant in the Regional Homeless Information Network (RHINO). RHINO is a collaboration among 11 counties' Continuums of Care in the San Francisco and Monterey Bay areas whose vision is to obtain a better understanding of the homeless population in the region, as a whole. Designed to leverage data already being collected by each continuum's homeless management information system (HMIS), RHINO will serve as a regional data warehouse that will be utilized to analyze trends, gaps in services, and mobility patterns of the homeless population, as well as to inform policy makers and funders. The Collaborative's HMIS lead, Community Technology Alliance, also leads this collaborative and its efforts in designing, developing, deploying, and providing reports for the collaboration.</p>
<p>Briefly explain the reasons for not meeting one or more of your proposed measurable achievements.</p>		
<p>N/A; all measurable outcomes met.</p>		
<p><i>OPTIONAL:</i> If desired, you may use this space to describe your CoC's most significant accomplishments over the past 12 months.</p> <p>Most of our significant accomplishments are reported above; we choose to speak to one more:</p> <p>The Collaborative's efforts to engage strong leadership in implementing its strategic goals toward ending homelessness were rewarded when the new Chair of the County Board of Supervisors announced in his January, 2007, State of the County, that one of his administration's four major focuses would be housing and homelessness.</p>		

As a catalyst to implementation of strategies toward ending homelessness, early in 2007 the Blue Ribbon Commission on Ending Chronic Homelessness and Solving the Affordable Housing Crisis was established under the banner, "Housing Choices for Unheard Voices." The Commission, co-chaired by Supervisor Don Gage and Mayor Chuck Reed (San Jose) is made up of 26 community leaders chosen for their commitment to ending homelessness and providing additional affordable housing throughout the County. The Commission will use the Santa Clara County's and City of San Jose's Ten-Year Plans to End Homelessness and the newly developed Twenty-Year Plan to Solve the Affordable Housing Crisis as models for a set of strategic initiatives to meet the goals of preventing homelessness, providing permanent housing and increasing the housing supply. The Commission will develop and access new sources of funding to assist in the implementation of the strategies and launch a public awareness and educational campaign to educate the public and get them involved in ending homelessness. Working groups have determined to address the following issues: discharge planning, outreach and engagement, rapid re-housing, wrap-around services, land use and finance. The outcome of the Commission is to establish goals for ending homelessness and providing enough housing throughout the County to house all future citizens. The Commission will issue an *implementation* plan by the end of 2007.

## V: CoC Chronic Homeless (CH) Progress Chart

<b>1. Enter the total number of chronically homeless persons in your CoC and the total number of permanent housing beds designated for the chronically homeless in your CoC for each year.</b>					
<b>Year</b>	<b>Number of CH Persons</b>		<b>Number of PH beds for the CH</b>		
<b>2005</b>	2,676		83		
<b>2006</b>	2,676		96		
<b>2007</b>	1,757		242		
<b>Briefly describe the reason(s) for any increases in the total number of chronically homeless persons between 2006 and 2007:</b>					
N/A					
<b>2. Indicate the number of new PH beds in place and made available for occupancy for the chronically homeless between February 1, 2006 and January 31, 2007:</b>					122
<b>3. Identify the amount of funds from each funding source for the development and operations costs of the new CH beds created between February 1, 2006 and January 31, 2007.</b>					
<b>Cost Type</b>	<b>Public/Government</b>				<b>Private</b>
	<b>HUD McKinney-Vento</b>	<b>Other Federal</b>	<b>State</b>	<b>Local</b>	
<b>Development</b>	\$400,000	\$4,955,500	\$689,000	\$1,969,500	\$5,476,230
<b>Operations</b>	\$425,127	\$219,912	\$0	\$0	\$562,284
<b>TOTAL</b>	\$825,127	\$5,175,412	\$689,000	\$1,969,500	\$6,038,514

## W: CoC Housing Performance Chart

<b>1. Participants in Permanent Housing (PH)</b>		
HUD will be assessing the percentage of all participants who remain in S+C or SHP permanent housing (PH) for more than six months. SHP projects include both SHP-PH and SHP-Safe Haven PH renewals. Complete the following chart using data based on the <u>most recently submitted</u> APR for Question 12(a) and 12(b) for PH projects included on your CoC Priority Chart:		
<input type="checkbox"/>	No applicable PH renewals are on the CoC Project Priorities Chart	APR Data
<input checked="" type="checkbox"/>	<u>All</u> PH renewal projects with APRs submitted are included in calculating the responses below	
a.	Number of participants who <b>exited</b> PH project(s)—APR Question 12(a)	19
b.	Number of participants who did <b>not leave</b> the project(s)—APR Question 12(b)	164
c.	Number who <b>exited</b> after staying 7 months or longer in PH—APR Question 12(a)	16
d.	Number who did <b>not leave</b> after staying 7 months or longer in PH—APR question 12(b)	153
e.	Percentage of all participants in PH projects staying 7 months or longer (c. + d. divided by a. + b., multiplied by 100 = e.)	92%
<b>2. Participants in Transitional Housing (TH)</b>		
HUD will be assessing the percentage of all TH clients who moved to a permanent housing situation. TH projects include SHP-TH and SHP-Safe Haven/TH <i>not</i> identified as permanent housing. Complete the following chart using data based on the <u>most recently submitted</u> APR Question 14 for TH renewal projects included on your CoC Priorities Chart.		
<input type="checkbox"/>	No applicable TH renewals are on the CoC Project Priorities Chart	APR Data
<input checked="" type="checkbox"/>	<u>All</u> TH renewal projects with APRs submitted are included in calculating the responses below	
a.	Number of participants who exited TH project(s)—including unknown destination	365
b.	Number of participants who moved to PH	275
c.	Percent of participants in TH projects who moved to PH (b. divided by a., multiplied by 100 = c.)	75%

## X: Mainstream Programs and Employment Project Performance Chart

<input type="checkbox"/>	No applicable renewal projects for the Mainstream Programs and Employment Chart are included in the CoC Priorities Chart.
<input checked="" type="checkbox"/>	All renewal projects on the CoC Priorities Chart that are not exempted from reporting in the APR are included in calculating the responses below.

(1) Number of Adults Who Left (Use same number in each cell)	(2) Income Source	(3) Number of Exiting Adults with Each Source of Income	(4) Percent with Income at Exit (Col 3÷Col 1 x 100)
858	a. SSI	56	7%
858	b. SSDI	15	2%
858	c. Social Security	12	1%
858	d. General Public Assistance	69	8%
858	e. TANF	76	9%
858	f. SCHIP	0	0%
858	g. Veterans Benefits	3	.3%
858	<b>h. Employment Income</b>	263	31%
858	i. Unemployment Benefits	7	8%
858	j. Veterans Health Care	0	0%
858	k. Medicaid	5	.6%
858	l. Food Stamps	19	2%
858	m. Other (please specify)	16	2%
858	n. No Financial Resources	404	47%

## Y: Enrollment and Participation in Mainstream Programs Chart

Check those activities implemented by a <b>majority</b> of your CoC's homeless assistance providers (check all that apply):	
<input checked="" type="checkbox"/>	A majority of homeless assistance providers have case managers systematically assist clients in completing applications for mainstream benefit programs.
<input checked="" type="checkbox"/>	The CoC systematically analyzes its projects' APRs to assess and improve access to mainstream programs.
<input checked="" type="checkbox"/>	The CoC has an active planning committee that meets at least three times a year to improve CoC-wide participation in mainstream programs.
<input type="checkbox"/>	A majority of homeless assistance providers use a single application form for four or more of the above mainstream programs.
<input checked="" type="checkbox"/>	The CoC systematically provides outreach and intake staff specific, ongoing training on how to identify eligibility and program changes for mainstream programs.
<input checked="" type="checkbox"/>	The CoC or any of its projects has specialized staff whose primary responsibility is to identify, enroll, and follow-up with homeless persons on participation in mainstream programs.
<input checked="" type="checkbox"/>	A majority of homeless assistance providers supply transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs.
<input checked="" type="checkbox"/>	A majority of homeless assistance providers have staff systematically follow-up to ensure that mainstream benefits are received.
<input checked="" type="checkbox"/>	The CoC coordinates with the State Interagency Council(s) on Homelessness to reduce or remove barriers to accessing mainstream services.

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**Z: Unexecuted Grants Awarded Prior to the 2006 CoC Competition Chart**

Provide a list of all HUD McKinney-Vento Act awards made prior to the 2005 competition that are not yet under contract (i.e., signed grant agreement or executed ACC).

Project Number	Applicant Name	Project Name	Grant Amount
CA01B500001	Emergency Housing Consortium (dba EHC Lifebuilders)	New Directions in Housing and Healthcare	\$840,383 (2-year grant; grant transfer in progress)
		<b>Total:</b>	\$840,383

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**AA: CoC Participation in Energy Star Chart**

HUD promotes energy-efficient housing. All McKinney-Vento funded projects are encouraged to promote energy efficiency, and are specifically encouraged to purchase and use Energy Star labeled products. For information on the Energy Star initiative go to: <http://www.energystar.gov>.

Have you notified CoC members of the Energy Star initiative?  Yes  No

Percentage of CoC projects on CoC Priority Chart using Energy Star appliances: 87%

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**AB: Section 3 Employment Policy Chart**

	YES	NO
1. Is any project in your CoC requesting HUD funds for housing rehabilitation or new construction?	<input type="checkbox"/>	<input checked="" type="checkbox"/>