# Before Starting the Special CoC Application

You must submit both of the following parts in order for us to consider your Special NOFO Consolidated Application complete:

- 1. the CoC Application, and
- 2. the CoC Priority Listing.

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

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

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

CoC Approval is Required before You Submit Your CoC's Special NOFO CoC Consolidated Application

- 24 CFR 578.9 requires you to compile and submit the Special NOFO CoC Consolidated Application on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

#### **Answering Multi-Part Narrative Questions**

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

#### Attachments

Questions requiring attachments to receive points state, "You must upload the [Specific Attachment Name] attachment to the 4A. Attachments Screen." Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

# 1A. Continuum of Care (CoC) Identification

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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1A-1. CoC Name and Number: CA-604 - Bakersfield/Kern County CoC

1A-2. Collaborative Applicant Name: Bakersfield-Kern Regional Homeless

Collaborative

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Behavioral Health and Recovery Services

1A-5.	New Projects	
	Complete the chart below by indicating which funding opportunity(ies) your CoC applying for projects under. A CoC may apply for funding under both set asides; however, projects funded through the rural set aside may only be used in rural areas, as defined in the Special NOFO.	
1.	Unsheltered Homelessness Set Aside	Yes
2.	Rural Homelessness Set Aside	No

Yes

# 1B. Project Capacity, Review, and Ranking–Local Competition

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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- Frequently Asked Questions

1B-1.	Web	Posting of Your CoC Local Competition Deadline–Advance Public Notice. (All Applicants)	
	Spec	ial NOFO Section VII.B.1.b.	
	You r	nust upload the Local Competition Deadline attachment to the 4A. Attachments Screen.	
		the date your CoC published the deadline for project application submission for your CoC's local etition.	08/04/2022
	40.0	Declark Decision and Decision Decision Service (All Applicants)	
	1B-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. (All Applicants)	
		Special NOFO Section VII.B.1.a.	
		You must upload the Local Competition Scoring Tool attachment to the 4A. Attachments Screen.	

	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes

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

1. Established total points available for each project application type.

1B-3.	Projects Rejected/Reduced-Notification Outside of e-snaps. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4A. Attachments Screen.	
1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	Did your CoC inform the applicants why their projects were rejected or reduced?	Yes
3.	If you selected yes, for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, list the latest date of any notification. For example, if you notified applicants on 6/26/22, 6/27/22, and 6/28/22, then you must enter 6/28/22.	09/28/2022

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1B-3a.	Projects Accepted-Notification Outside of e-snaps. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Notification of Projects Accepted attachment to the 4A. Attachments Screen.	
	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, list the latest date of any notification. For example, if you notified applicants on 6/26/22, 6/27/22, and 6/28/22, then you must enter 6/28/22.	09/28/2022
1B-4.	Web Posting of the CoC-Approved Special NOFO CoC Consolidated Application. (All Applicants)	
	Special NOFO Section VII.B.1.b.	
	You must upload the Web Posting-Special NOFO CoC Consolidated Application attachment to the 4A. Attachments Screen.	
	Enter the date your CoC posted its Special NOFO CoC Consolidated Application on the CoC's website or affiliate's website—which included:  1. the CoC Application, and 2. Priority Listings.	10/18/2022

# 2A. System Performance

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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  Special NOFO CoC Application Navigational Guide
- Section 3 ResourcesFrequently Asked Questions

2A-1.	Reduction in the Number of First Time Homeless–Risk Factors.	
	Special NOFO Section VII.B.2.b.	
	Describe in the field below:	
1.	how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;	
2.	how your CoC addresses individuals and families at risk of becoming homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time or to end homelessness for individuals and families.	

- 1.Persons thought to be at risk of experiencing homelessness are screened with a Quick Referral Tool (QRT) and referred to the CoC CES from numerous agency "access points" countywide. The CoC assesses at-risk persons using the Single Adult and Family versions of the Prevention/Re-Housing Vulnerability Index -Service Prioritization Decision Assistance Tool (PR-VI-SPDAT). The PRVI-SPDAT is an evidence-based triage tool that evaluates, prioritizes and recommends services for at-risk persons based on a number of factors: household size and composition, safety in current location, legal problems, prior homelessness, frequent moves, threat of eviction, debt, financial resources, overcrowding, medical issues, substance abuse, mental or other disabilities, and other issues making it hard to remain in housing.
- 2.Following the VI-SPDAT assessment, CES places persons at risk of experiencing homelessness on a service priority list, from which they are connected to the Bakersfield Homeless Center (now renamed The Open Door Network) for ESG-funded and State funded prevention and diversion services including housing stabilization or relocation and short and/or medium-term rental assistance to prevent them from losing their housing. Homeless prevention and diversion services may include housing stability case management, housing search and placement, landlord-tenant mediation, tenant legal services, and credit repair. Financial assistance may include up to 6 months of rental assistance, rental arrears, utility payments, security and utility deposits, and moving costs. Supportive service linkages may include employment services, income benefits, health care, mental health and/or substance abuse treatment, and transportation.
- 3. The BKRHC and CES Administrator are responsible for implementing the strategy for reducing the number of individuals and families experiencing homelessness for the first time, working in concert with the Prevention and Diversion Committee and Discharge Services Committee.

2A-2.	Length of Time Homeless–Strategy to Reduce. (All Applicants)
	Special NOFO Section VII.B.2.c.
	Describe in the field below:
1.	your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

- 1.Our CoC utilizes by-name-lists to track the length of time homeless by subpopulation. This allows the CoC to identify if we are having more significant challenges housing one population over another and allows us to strategize targeted housing efforts around this data. Coupled with the by-name-list data, we utilize weekly case conferencing for homeless individuals with the longest LOH. During case conferencing, we identify our barriers to housing the individual, what our next steps are for the person, and by when we think we will get them housed. This targeted effort has helped us reduce LOH as demonstrated in our monthly BNL reports.
- 2.CES prioritizes individuals quickly, without preconditions or service participation requirements. The prioritization standards established by the Housing Committee and approved by the Governing Board, ensure individuals who are homeless with the longest history of homelessness and greatest service needs receive priority for any type of housing and homeless assistance available within the BKRHC including Permanent Supportive Housing (PSH), Rapid Rehousing (RRH), and other interventions. All CoC funded PSH beds(vouchers) are prioritized in accordance with HUD notice CPD16-11. CoC partner agencies confer weekly through case conferencing to discuss individuals and families as they are matched to appropriate housing resources from the housing priority list. Partner agencies then coordinate efforts to move rapidly and take advantage of the matched housing resource, resulting in permanent housing placement.
- 3. The Chair of the CoC Planning & Performance Committee is responsible for overseeing the CoC's strategy to reduce LOT homeless. Quarterly reviews provide the opportunity for supportive coaching for agencies that are not able to meet the required system performance measure.

2A-3.	Successful Permanent Housing Placement or Retention. (All Applicants)	
	Special NOFO Section VII.B.2.d.	
	Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:	
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and	
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.	

- 1.The CoC identifies individuals and families who return to homelessness through CES, Street Outreach and a feedback loop with case managers. Information about individual returns to homelessness is brought to the case conferencing process for assessment and determination about use of resources to address the return to homelessness. Wherever possible, flexible funds are used to address barriers when clients on the verge of eviction.
- 2. CoC strategies to increase the rate at which individuals and persons in families exit from ES, TH, and RRH to PH destinations include: The PHA spearheads efforts to increase the supply of affordable PH units working with the Kern County Affordable Housing Coalition, which consists of affordable housing developers and city/county planners. Funding to create new PH units was secured from the state NPLH and Homekey and CoC/City/County HHAP programs. Access to existing PH units is facilitated through landlord liaison and incentives, housing navigators and locators, use of Padmission, a CoC wide landlord engagement strategy and an annual Landlord's Summit on Homelessness. The PHA's state funded risk mitigation guarantees landlords reimbursement if damaged. Weekly case conferencing using a Prioritized Housing List ensures timely PH placements targeting the most vulnerable, needy homeless individuals and families.
- 3.Our CoC has successfully assisted families in retaining their permanent housing or exiting to other permanent housing through intensive case management services that are tailored to each person's unique needs. The case manager uses motivational interviewing techniques to create an individualized housing stability plan with the family and assists them in reaching their goals. The case manager immediately focuses on ensuring that the families basic needs are met, food, water, hygiene items, household items. Then through critical time intervention methods, the case manager assists the family in identifying critical goals to work on first, such as sobriety, mental health access, and medical access. They then begin focusing on longer term goals such as family reunification or employment. As the families goals are achieved and they become more stable, the intensity of services declines. If at any time the families progress in their plan declines or they become unstable, case management services will re-intensify. This method of case management intervention that focuses on an individualized plan has proven successful.

2A-4.	Returns to Homelessness–CoC's Strategy to Reduce Rate. (All Applicants)
	Special NOFO Section VII.B.2.e.
	Describe in the field below:
1.	how your CoC identifies individuals and families who return to homelessness;
2.	your CoC's strategy to reduce the rate of additional returns to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

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- 1.CoC service providers identify recidivism at intake by pulling universal data from HMIS on all persons entering HMIS to determine which individuals had a previous exit to permanent housing. In addition, a cross-analysis of names pulled from HMIS and the CoC's At-Risk prioritization list from the Coordinated Entry System is conducted. The data is analyzed to understand common factors and determinants of recidivism. The Committee reviews monthly system performance measure reports to identify individuals who have recently returned to homelessness using data from SPM Measure 2.
- 2.The CoC's revised 10-year Plan to End Homelessness by 2028 outlines strategies to reduce returns to homelessness. Objective #2 under the revised plan is to prevent homelessness and repeated homelessness whenever possible. Goal #1 of the objective specifically addresses plans to reduce the number of people who return to homelessness after having been placed in permanent housing. Strategies and actions steps include providing aftercare, monitoring, and case management for 3 years after placement or longer if needed; education on how to access the CES; and a focus on increased self sufficiency. Further, the Homeless Prevention and Discharge Planning Committee of the CoC is exploring various strategies to reduce recidivism.
- 3. The Homeless Prevention and Discharge Planning Committee of the CoC is responsible for overseeing these strategies. Representatives from the Mission at Kern County and the County Department of Veteran Services co-chair this committee.

2A-5.	Increasing Employment Cash Income–Strategy. (All Applicants)	
	Special NOFO Section VII.B.2.f.	
	Describe in the field below:	
1.	the strategy your CoC has implemented to increase employment cash sources;	
2.	how your CoC works with mainstream employment organizations to help individuals and families increase their cash income; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.	

- 1.The CoC has implemented a number of strategies to increase employment income by creating additional joint bridge employment programs to provide job training skills and temporary employment. Through its job placement program the Bakersfield Homeless Center (BHC) advocates for homeless, formerly homeless and those at risk of homelessness obtain employment through City, County and corporate job contracts. The program provides "hard to hire" adults with living wage jobs while they develop the skills, resume and contacts for long-term employment. Job placement outreach is conducted through the KCNC DC (resource center for homeless youth), Garden Pathways (formerly incarcerated), and CoC members. Organizations provide clients with information about job opportunities, computer/printer use, job search assistance, a mailing address/phone number, and clothes for interviews, bus passes, and payment of fees for certifications required. America's Job Center (AJC) and the California Department of Rehabilitation (DOR) provide a continuum of employment and vocational training services.
- 2.The Department of Human Services CalWORKS program helps homeless persons prepare for and access employment. Job fairs are held and local employers notify agencies of job opportunities. CoC members work with employment organizations to increase client cash income. AJC shares information about job fairs and employment opportunities with private employers, staffing agencies promote employment opportunities, DOR provides employment services for disabled individuals and provide paid work experience programs and ETR provides free apprenticeship programs. Free vocational training is available through WESTEC, Bakersfield College, Job Corps, and Bakersfield Adult School. Greater Bakersfield Legal Assistance eliminates barriers to employment including outstanding fines, citations and warrants through Homeless Court.
- 3.BKRHC oversees the CoC's strategy to increase employment income.

2A-5a.	Increasing Non- employment Cash Income–Strategy. (All Applicants)	
	Special NOFO Section VII.B.2.f.	
	Describe in the field below:	
1.	the strategy your CoC has implemented to increase non-employment cash income;	
2.	your CoC's strategy to increase access to non- employment cash sources; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non- employment cash income.	

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- 1.A major objective of Kern County's Plan to End Homelessness by 2028 is to "improve the economic security, health, and stability of homeless and at-risk people." A goal and implemented strategy of the CoC is to "enhance benefits counseling skills of BKRHC member and partner agency case managers." To enhance these skills, the CoC SOAR Committee meets monthly to help increase access to SSI/SSDI benefits. GBLA conducts these trainings, which are typically attended by between 20 and 25 CoC member and partner agency employees.
- 2. Many CoC member or partner agencies are mainstream benefit administrators for benefits such as General Assistance, Food Stamps, TANF, and WIC. These agencies keep abreast of changes to these benefits and share information with CoC members. Consequently, virtually all CoC agency supervisors and case managers, including CES employees, are knowledgeable of and able to help eligible individuals and families experiencing homelessness access the appropriate non-employment cash income sources. Homeless youth can receive assistance with Food Stamps, TANF, and General Assistance at the KCNC DC.
- 3.BKRHC oversees the CoC's strategy to increase non-employment cash income.

# 2B. Coordination and Engagement–Inclusive Structure and Participation

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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   Section 3 Resources
- Frequently Asked Questions

2B-1.	Inclusive Structure and Participation-Participation in Coordinated Entry. (All Applicants)
	Special NOFO Sections VII.B.3.a.(1)
	In the chart below for the period from May 1, 2021 to April 30, 2022:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted–including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

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

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

### You must select a response for elements 1 through 32 in question 2B-1.

2B-2.	Open Invitation for New Members. (All Applicants)
	Special NOFO Section VII.B.3.a.(2), V.B.3.g.
	Describe in the field below how your CoC:
1.	communicated the invitation process annually to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and
4.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, other People of Color, persons with disabilities).

- 1.The CoC actively solicits members during presentations to the public, smaller non-profits, individuals, or organizations. The website features prominent "Get Involved" and "Signup for Updates" buttons and publishes membership opportunities through social media and email communication.
- 2.The CoC has partnerships with agencies focused on serving individuals with disabilities. The Independent Living Center of Kern County has an Aging and Disability Resource Center which refers individuals to resources. The CoC contracts with a consultant who ensures the website and materials are accessible. Services available to member agencies include sign language and access to language line services for phone, video and documentation translation services. All documents and reports are made available through PDF. Video and presentations are provided with captioning.
- 3. The CoC partners with local outreach organizations to lead the Lived Experience Advisory Board and Youth Advisory Board, which includes formerly homeless persons. These committees work to ensure that persons experiencing homelessness have an opportunity to be part of the decision making process within the CoC, partake in CoC activities, and be included in shaping CoC processes. The LEAB and YAB committees actively outreach to ensure persons experiencing homelessness are encourage to join the CoC.
- 4.The DEI Committee is composed of representatives that serve specific populations in our homeless system. Organizations such as All of Us or None, ShePower, Kern County Black Chamber of Commerce, Delano Association for the Developmentally Disabled, The Center for Gender Diversity, Tejon Tribe, American Civil Liberties Union, and the United Farm Workers participate and represent the Black/African American, Hispanic/Latin(a)(o)(x), LGBTQ+, Native American, other people of color, developmentally disabled, Asian, and youth.

2B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness. (All Applicants)	
	Special NOFO Section VII.B.3.a.(3)	
		-
	Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness or an interest in preventing and ending homelessness;	
	communicated information during public meetings or other forums your CoC uses to solicit public information; and	
3.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.	

1.The Executive Director and CoC members engage a broad range of community stakeholders with an "open door" policy and provide outreach and engagement to city and county leadership, faith community members, community service organizations, those with lived experience, neighborhood organizations and local businesses. BKRHC has developed a stakeholder input and feedback process which has multiple points of entry for organizations and individuals to provide feedback, including via the website, social media, and public comment during all committee meetings. BKRHC also proactively engages the community by providing presentations throughout Kern County which always include an opportunity for questions, answers and feedback.

The CoC is Brown Act compliant, making all meetings of the Governing Board and more than a dozen Standing Committees open to the public. Each agenda includes an opportunity for public comment. Materials for meetings including the agenda and minutes are housed on the CoC website and also posted at the CoC physical location. A distribution list is maintained and anyone seeking to receive regular communication can receive a monthly newsletter and notice of any committee meeting on a regular basis. The CoC also actively uses social media as another method of communicating information about public meetings as needed.

3. The CoC believes it is critical to receive feedback regarding improvements or new approaches to preventing and ending homelessness. The CoC compiles stakeholder feedback received via the CoC email, website, telephone and mail to present at Governing Board meetings. The Governing Board Chair may respond to feedback immediately, agendize for a future meeting or refer for consideration by a standing committee.

2P. 4	Public Notification for Proposals from Organizations Not Previously Funded. (All Applicants)
20-4.	
	Special NOFO Section VII.B.3.a.(4)
	Describe in the field below how your CoC notified the public:
1.	that your CoC's local competition was open and accepting project applications;
2.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
3.	about how project applicants must submit their project applications;
	about how your CoC would determine which project applications it would submit to HUD for funding; and
5.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

- 1. The CoC notified the public that the local competition was open and accepting project applications by posting on our website, distributing an email to the entire listsery, placing a notice in the local paper and posting on social media. In addition, approval to participate in the local competition and accompanying materials were an agendized item on the Governing Board agenda which is also publicly noticed following Brown Act requirements.
- 2.The "Notice to Potential Applicants" was approved, along with the LOI template, instructions and NOFO timeline. A training webinar was conducted virtually on the LOI, ranking and application process for new and renewal projects. This webinar and all training and virtual meetings were conducted with closed captioning for individuals who are deaf/hard of hearing and published on the website. Multiple notices were also provided via social media and tagging a wide array of stakeholders to reach the broadest number of potential applicants. The City of Bakersfield and County of Kern also shared notices through their social media channels.'
- 3. The Collaborative Applicant reviews all LOIs received by the deadline to ascertain whether they meet minimum threshold requirements. New and renewal applicants that pass threshold are invited to submit a project application and a Ranking Packet to compete for evaluation and scoring.
- 4. The P&P Committee assigned a Ranking Subcommittee to develop the protocol for project applications that passed threshold. A Ranking Priority Scale is used to assign scores to the Ranking Packets. A Domestic Violence Ranking Packet Addendum was developed to ensure that DV applications would have the same amount of points as other projects in the same housing type and a sliding scale was developed based on those measures. A non-conflicting review panel was approved by the Governing Board to review project applications, score them and provide a priority list for Governing Board to review and approve.
- 5.Closed captioning is used during meetings and accessible electronic formats were made available to individuals with disabilities.

# 2C. Coordination / Engagement–with Federal, State, Local, Private, and Other Organizations

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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2C-1.	Coordination with Federal, State, Local, Private, and Other Organizations. (All Applicants)
	Special NOFO Section VII.B.3.b.
	In the chart below:
	select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or
2.	select Nonexistent if the organization does not exist within your CoC's geographic area.

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with Planning or Operations of Projects
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	
18.		

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2022 openial from a coo fippingation	ı ago	10, 10, 2022

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

- 1.All ESG funded recipients and City of Bakersfield and Kern County ESG Program administrators are CoC members. CoC annually conducts a gaps and needs assessment to determine funding priorities. Through the CoC, the City/County distribute ESG Funding Priority Surveys to CoC members, the results of which are reviewed by CoC Planning and Performance Committee and Governing Board prior to inclusion in draft Action Plans. CoC staff meet regularly with ESG recipients to plan and allocate ESG and other funding. Both jurisdictions hold stakeholder meetings for input on their draft Annual Action Plans, including ESG allocations, and host Public Hearings prior to approval, which are also attended by CoC members. ESG agreements include language that ESG grantees must be involved in the CoC, active HMIS and CES users.
- 2.CoC participates in evaluating and reporting performance by sharing HMIS, CES, AHAR, SPMs, and LSA reports that include ESG recipients and subrecipients. Data source information is reviewed and used to monitor progress and effectiveness. ESG recipients and subrecipients are also participating members of CoC committees that meet throughout the year and address ESG funding.
- City and County submit annual CAPERs to evaluate and report on performance of ESG program recipients. In addition to client service data, City reports include performance standards that were developed by CoC Planning and Performance Committee, with participation of ESG recipients and City. Quarterly performance reports are reviewed in-house by the Committee, which provides technical assistance to improve outcomes for any programs that are performing below established standards. CAPER reports are prepared using data imported from HMIS and submitted through SAGE.
- 3.CoC provides the City/County with results of annual homeless PIT Count and HIC for inclusion in both Annual Action Plans and Five-Year Consolidated Plans. CoC provided PIT and HIC CoC-wide and city-level data to all ESG recipients in its geographical boundaries.
- 4.CoC reports and documents including its Plan to End Homelessness and its Cost- Benefit Analysis of the Housing First Approach are provided to the City/County for inclusion in Consolidated Plan updates. CoC members regularly participate in City/County stakeholder meetings and focus groups on homelessness. City/County import HMIS data into their annual CAPERs using SAGE. CoC also responds to requests for information.

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	2C-3.	Discharge Planning Coordination. (All Applicants)		
		Special NOFO Section VII.B.3.c.		
			_	
		Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.		
	1.	Foster Care	Yes	
	2.	Health Care	Yes	
	3.	Mental Health Care	Yes	
	4.	Correctional Facilities	Yes	
2C-4.	Ç <sub>0</sub> C C	ollaboration Related to Children and Youth–SEAs, LEAs, School Districts. (All		]
	Applica	,		-
	Specia	I NOFO Section VII.B.3.d.		
				٦
		yes or no in the chart below to indicate the entities your CoC collaborates with:		
1.		Education Provider		Yes
	<b>.</b>	Education Agency (SEA)		Yes
3.	1	Education Agency (LEA)		Yes
4.	School	Districts		Yes
	1			
2C-4a.	CoC C Partne	ollaboration Related to Children and Youth–SEAs, LEAs, School Districts–Form rships. (All Applicants)	al	
	Specia	I NOFO Section VII.B.3.d.		
				7
	Descri	be in the field below:		
1.	how yo	our CoC collaborates with the entities checked in Question 2C-4; and		
2.	the for	mal partnerships your CoC has with the entities checked in Question 2C-4.		

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The CoC works with youth education providers to address existing gaps in services, aggressively seek funding, and co-host events and trainings. The Governing Board has a position specific to education (KCSOS) and another position specific to homeless youth. The CoC's Homeless Youth Committee (HYC) includes service providers, LEAs and those with lived experience. Youth education providers regularly attend CoC meetings.

CoC members have signed membership agreements to collaborate with each other. Homeless and DV shelters link families with LEAs, some through formal agreement. Through agreement, KCSOS and other CoC agencies are colocated at KCNC's Dream Center (DC), an assessment point for CES. CoC has service agreements with youth providers.

KCSOS holds leadership roles within the CoC. KCSOS coordinates with 47 LEAs who have procedures to identify homeless students. The HYC has created a comprehensive services directory. KCSOS manages contracts with the Department of Human Services for childcare. A broad approach is in place to engage, identify and expedite services to homeless families.

The CoC's Charter has a MV/Education position on the Governing Board held by the Kern County Superintendent of schools (KCSOS).

2C-4b.	CoC Collaboration Related to Children and Youth–Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services. (All Applicants)	
	Special NOFO Section VII B.3 d.	

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

#### (limit 2,500 characters)

All CoC members have signed membership agreements to collaborate with each other. All partner agencies screen for educational needs of participants and apprise them of education service eligibility. Homeless and DV shelters in Kern link families with LEAs, some through formal agreement. Through these efforts a broad community approach is in place through CoC members to engage, identify and expedite services to homeless families. The CoC has also developed a by name list for Families to ensure that every family accesses available services and all agencies focus on rapidly rehousing them. The CoC has case conferencing specific to families and the results are reported to the CES Committee to ensure the CoC is responding quickly to changing needs and dynamics.

2C-5.	Mainstream Resources–CoC Training of Project Staff. (All Applicants)	
	Special NOFO Section VII.B.3.e.	

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

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	Mainstream Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	TANF-Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	Yes
5.	Employment Assistance Programs	Yes
6.	Other	

You must select a response for elements 1 through 6 in question 2C-5.

2C-5a.	Mainstream Resources–CoC Collaboration with Project Staff Regarding Healthcare Organizations. (All Applicants)
	Special NOFO Section VII.B.3.e.
	Describe in the field below how your CoC:
	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
	works with project staff to collaborate with healthcare organizations to assist program participants with enrolling in health insurance;
3.	provides assistance to project staff with the effective use of Medicaid and other benefits; and
4.	works with projects to promote SOAR certification of program staff.

- 1.Through the SOAR Committee, the CoC has been providing up to date information regarding SSI and SSDI. During monthly meetings topics include challenges with the local SSA offices and potential solutions to current issues. They also discuss available resources for providers assisting individuals with applications for SSI benefits. Training is provided by subject matter experts in multiple CoC committees.
- 2. The CoC is part of a national healthcare and homelessness initiative to comprehensively evaluate access to healthcare. The CoC has also helped develop new Whole Person Care sites within navigation centers and rural communities and is working closely with Managed Care Plans as they transition to CalAIM. The CoC enjoys a close relationship with the Kern County Behavioral Health and Recovery Services department, having supported multiple projects to provide services to those who are unsheltered and those in emergency shelter facilities. That support has secured competitive MHSA funds to address unsheltered intensive service needs clients. The CoC also works closely with the public hospital, Kern Medical, and Clinica Sierra Vista, who provides street medicine. Staff from all three entities sit on Discharge Planning Services, Planning and Performance or directly on the Governing Board. 3.As a member of the CoC, Department of Human Services provides regular updates and information regarding the availability of homeless assistance programs during regular ongoing meetings and the SOAR committee regularly disseminated opportunities to program staff. Care managers are trained to enroll clients in Medicaid and other benefits. Current information is also shared to distribution lists, social media and the CoC website.

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# 3A. New Projects With Rehabilitation/New Construction Costs

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
  24 CFR part 578
  Special NOFO CoC Application Navigational Guide

- Section 3 Resources
- Frequently Asked Questions

3A-1.	Rehabilitation/New Construction Costs-New Projects. (Rural Set Aside Only).	
	Special NOFO Section VII.A.	
	If the answer to the question below is yes, you must upload the CoC Letter Supporting Capital Costs attachment to the 4A. Attachments Screen.	
	Is your CoC requesting funding for any new project(s) under the Rural Set Aside for housing rehabilitation or new construction costs?	No

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

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

3B-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. (Rural Set Aside Only)	
	Special NOFO Section VII.C.	
	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
3B-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. (Rural Set Aside Only)	
	Special NOFO Section VII.C.	
	You must upload the Project List for Other Federal Statutes attachment to the 4A. Attachments Screen.	
	If you answered yes to question 3B-1, describe in the field below:	
	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and	
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.	

# 4A. Attachments Screen For All Application Questions

		Please read the following guidance to help you successfully upload attachments and get maximum points:										
1.		You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.										
4. 5.		You must upload an attachment for each document listed where 'Required?' is 'Yes'										
		We prefer that you use PDF files, though other file types are supported–please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images and reduces file size. Many systems allow you to create PDF files as a Print Option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.  Attachments must match the questions they are associated with.  Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process.  If you cannot read the attachment, it is likely we cannot read it either.  - We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).  - We must be able to read everything you want us to consider in any attachment.										
							7.		Open attachments once uploaded to ensure they are the correct attachment for the required Document Type.			
							Document Type	Requ	ired?	Document Description	Date Attached	
							1B-1. Local Competition Announcement	Yes		Local Competition	10/18/2022	
1B-2. Local Competition Scoring Tool	Yes		Local Competition	10/18/2022								
1B-3. Notification of Projects Rejected-Reduced	Yes		Notification of P	10/18/2022								
1B-3a. Notification of Projects Accepted	Yes		Notification of P	10/18/2022								
1B-4. Special NOFO CoC Consolidated Application	Yes											
3A-1. CoC Letter Supporting Capital Costs	No											
3B-2. Project List for Other Federal Statutes	No											
P-1. Leveraging Housing Commitment	No		Leverage Housing	10/18/2022								
P-1a. PHA Commitment	No		PHA Commitment	10/18/2022								
P-3. Healthcare Leveraging Commitment	No		Healthcare Levera	10/18/2022								
P-9c. Lived Experience Support Letter	No		Lived Experience	10/14/2022								
Plan. CoC Plan	Yes		CoC Plan	10/18/2022								

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## **Attachment Details**

**Document Description:** Local Competition Announcement

## **Attachment Details**

**Document Description:** Local Competition Scoring Tool

# **Attachment Details**

Document Description: Notification of Projects Rejected-Reduced

# **Attachment Details**

**Document Description:** Notification of Projects Accepted

# **Attachment Details**

**Document Description:** 

# **Attachment Details**

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**Document Description:** 

## **Attachment Details**

**Document Description:** 

## **Attachment Details**

**Document Description:** Leverage Housing Commitment

# **Attachment Details**

**Document Description:** PHA Commitment

# **Attachment Details**

**Document Description:** Healthcare Leveraging Commitment

# **Attachment Details**

**Document Description:** Lived Experience Support Letter

# **Attachment Details**

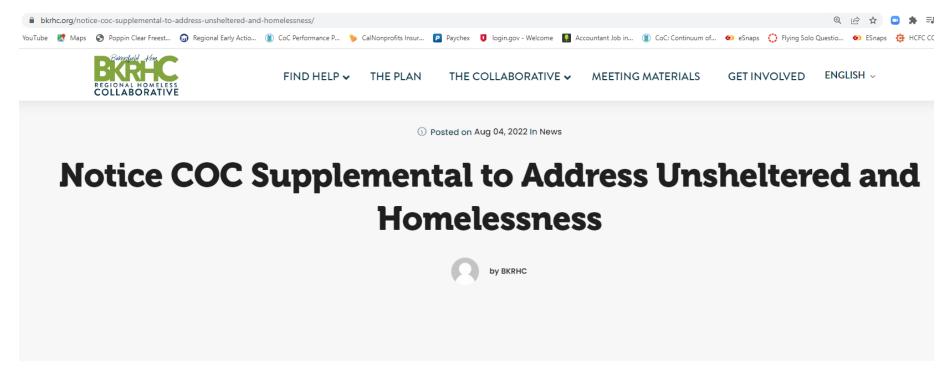
**Document Description:** CoC Plan

# **Submission Summary**

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

Page	Last Updated	
1A. CoC Identification	10/14/2022	
1B. Project Review, Ranking and Selection	10/18/2022	
2A. System Performance	10/18/2022	
2B. Coordination and Engagement	Please Complete	
2C. Coordination and Engagement–Con't.	10/18/2022	
3A. New Projects With Rehab/New Construction	No Input Required	
3B. Homelessness by Other Federal Statutes	10/14/2022	
4A. Attachments Screen	Please Complete	
Submission Summary	No Input Required	

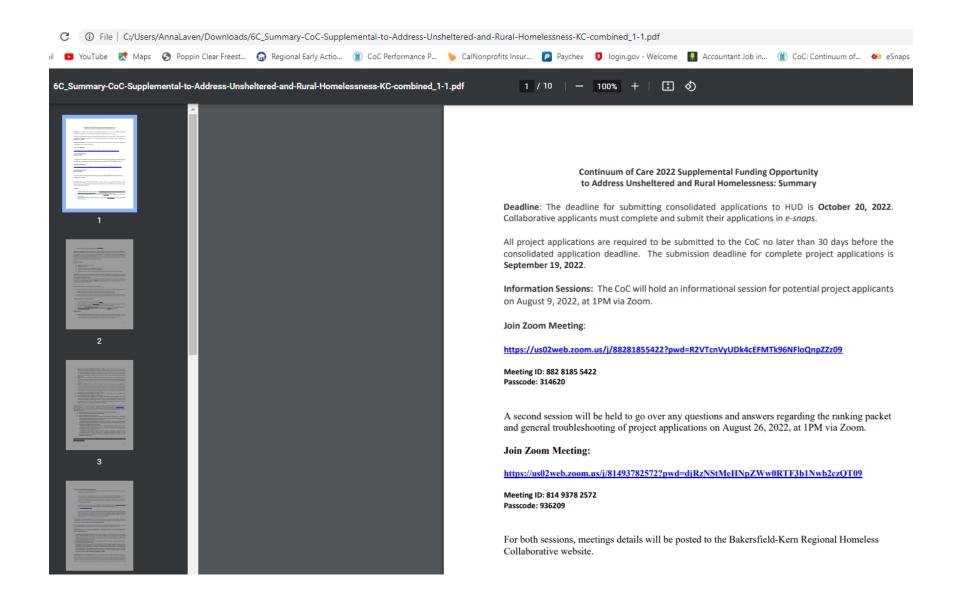
#### Local Competition Announcement – Unsheltered Special NOFO



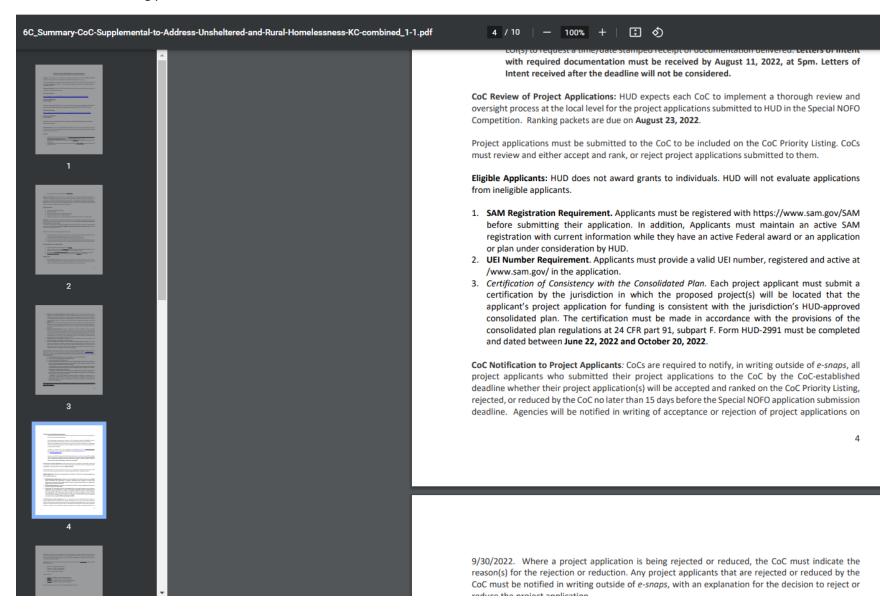




#### Detailed View: First page of LOI packet:



#### Detailed view: Ranking packet submission deadline:



# Continuum of Care 2022 Supplemental Funding Opportunity to Address Unsheltered and Rural Homelessness: Summary

**Deadline**: The deadline for submitting consolidated applications to HUD is **October 20, 2022**. Collaborative applicants must complete and submit their applications in *e-snaps*.

All project applications are required to be submitted to the CoC no later than 30 days before the consolidated application deadline. The submission deadline for complete project applications is **September 19, 2022**.

**Information Sessions:** The CoC will hold an informational session for potential project applicants on August 9, 2022, at 1PM via Zoom.

#### Join Zoom Meeting:

https://us02web.zoom.us/j/88281855422?pwd=R2VTcnVyUDk4cEFMTk96NFloQnpZZz09

Meeting ID: 882 8185 5422

Passcode: 314620

A second session will be held to go over any questions and answers regarding the ranking packet and general troubleshooting of project applications on August 26, 2022, at 1PM via Zoom.

### Join Zoom Meeting:

https://us02web.zoom.us/j/81493782572?pwd=djRzNStMeHNpZWw0RTF3b1Nwb2czQT09

Meeting ID: 814 9378 2572

Passcode: 936209

For both sessions, meetings details will be posted to the Bakersfield-Kern Regional Homeless Collaborative website.

**Available Funds:** Approximately \$322,000,000 is available. Of this amount, \$267,500,000 is available for projects as part of the Unsheltered Homelessness Set Aside and \$54,500,000 is available only for projects that serve rural areas.

#### Funding:

- Unsheltered Homelessness Set Aside. The <u>maximum award for this funding opportunity is the CoC's Preliminary Pro Rata Need (PPRN) or \$60,000,000, whichever is less.</u>
- Preliminary Pro Rata Need is a little more than \$2 billion for the approximately 400 CoCs nationwide.
- Unsheltered Homelessness Set Aside amount available is \$267,500,000 or approximately 13% of the \$2 billion.

• Kern County CoC amount available is \$8,189,867.

**Program Description:** The purpose is to target efforts to reduce unsheltered homelessness, particularly in communities with very high levels of unsheltered homelessness and homelessness in rural areas. HUD will award funding to communities to implement coordinated approaches -- grounded in Housing First and public health principles -- to reduce the prevalence of unsheltered homelessness, and improve services engagement, health outcomes, and housing stability among highly vulnerable unsheltered individuals and families.

### **Eligible activities:**

- Permanent Supportive Housing
- 2. Rapid Re-housing
- 3. Joint Transitional Housing and Rapid Re-housing
- 4. Supportive services only Coordinated Entry
- 5. Supportive services only non-coordinated entry (SSO-Street Outreach and SSO Other)

**SSO-Other**: Project will fund stand-alone support services to individuals and families experiencing homelessness or who have been homeless in the prior 6-months **but are now residing in permanent housing (that is not PSH or RRH)**.

This means, the recipient is providing supportive services to individuals and families experiencing homelessness for whom the applicant is <u>not</u> also providing housing or housing assistance. Means stand-alone supportive services.

Examples of stand-alone supportive services include:

- 1. Housing navigation activities for people experiencing homelessness when the applicant is not also providing any ongoing housing assistance (e.g., rental assistance),
- 2. Childcare services to individuals and families experiencing homelessness,
- 3. Drop-in centers that provide supportive services to people experiencing homelessness, and
- 4. Family reunification services to reunite people experiencing homelessness with their families.

#### **Project Application: Funding/Budget:**

- 1. The initial grant term for projects will be 3 years
- 2. Match must be no less than <u>25 percent</u> of the total request, including Administration costs, but excluding Leasing costs (i.e., Leased Units and Leased Structures).
- 3. CoC Program funds cannot be awarded if used to replace state or local government funds.
- 4. No funds may be used to shelter program participants in existing shelter beds.

#### Eligible costs:

1. **Rent or utility assistance** after 2 months of nonpayment of rent or utilities to prevent eviction or loss of utility service. Funds may be used to pay rent or utility arrear payments up to 6 months on behalf of program participants residing in permanent housing.

- 2. Short-term emergency lodging in motels or shelters, either directly or through vouchers. Eligible costs include lodging costs in motels or hotels for program participants; pro-rata share of sheltering program participants in existing shelters so long as the costs are actual costs of creating new and temporary beds in emergency shelters and not to permanently increase the capacity of the shelter. No funds may be used to shelter program participants in existing shelter beds.
- 3. **Repairs**, (such as insulation, window repair, door repair, roof repair, and repairs) that are necessary to make housing habitable to be used for transitional or permanent housing by people experiencing homelessness. The total cost of repairs may not exceed \$10,000 per structure.
- 4. **Capacity building activities** maintain or improve the skills of recipients include employee education, job training, staff retention activities such as financial incentives to staff, paying for continuing education opportunities, cross training within an organization, staff training & professional licensing or certification, & other professional development activities. Applicant may apply for up to 20% of funds requested as part of the project, including project administrative costs, for capacity building activities.
- 5. **Emergency food and clothing assistance**. The cost of providing meals or groceries and clothing to program participants are eligible costs.
- 6. Costs associated with making use of Federal Inventory property programs to house homeless individuals and families. Federal Inventory property programs means the Use of Federal Real Property to Assist the Homeless program authorized by title V of the Act, and implemented by 24 CFR part 581, and the Single Family Property Disposition Program authorized by section 204(g) of the National Housing Act.

**Letter of Intent**: New project applicants must complete the **Letter of Intent**. Only one LOI per applicant is required. The LOI template is available on the BKRHC Home website: <a href="www.bkrhc.org">www.bkrhc.org</a> The following documentation <a href="MUST BE SUBMITTED FOR EACH NEW PROJECT APPLICANT AGENCY">MUST BE SUBMITTED FOR EACH NEW PROJECT APPLICANT AGENCY along with the LOI:

- 1. Copies of bylaws and articles of incorporation (non-governmental only);
- 2. Proof of 501(c)3 status (non-governmental only);
- 3. List of current Board of Directors; and
- 4. Financial statements prepared by a licensed Certified Public Accountant in accordance with Generally Accepted Accounting Principles for the most recently available two (2) years. For organizations with annual revenues of:
  - -- \$300,000 or more, these statements should be audited in accordance with generally accepted auditing standards and Government Auditing Standards issued by the Controller General of the United States of America;
  - -- \$50,000 to \$300,000 statements should be submitted that have been reviewed by a Certified Public Accountant in accordance with standards applicable in the United States of America to review engagements; and
  - -- \$50,000 or less should submit compiled financial statements prepared by an independent Certified Public Accountant. All statements submitted must include any management letters or other correspondence issued by the auditors in connection with the financial statements.

The following documentation MUST BE SUBMITTED ALONG WITH THE LOI(s) BY EACH NEW PROJECT APPLICANT AGENCY:

#### 1. Most recent audited financial statement

Projects submitted without documentation required by this notice will not be considered in the 2022 Consolidated Application.

For Collaborative membership, contact or LOI information contact the BKRHC, Destiny Reveles (Compliance Coordinator) or Anna Laven (Executive Director), 661-526-0111. Meetings of the BKRHC Governing Board are open to the public and generally scheduled to meet the last Wednesday of each month, 9:00am, at the Mission at Kern County, 816 E 21<sup>st</sup> St, Bakersfield CA 93305.

LETTERS OF INTENT AND ALL REQUIRED DOCUMENTATION MUST <u>NOT BE MAILED</u>. Documentation must be delivered VIA EMAIL TO <u>coordinator@bkrhc.org</u>
CC: anna.laven@bkrhc.org.

It is the responsibility of the submitter/applicants/sponsor to confirm receipt of the emailed LOI(s) to request a time/date stamped receipt of documentation delivered. Letters of Intent with required documentation must be received by August 11, 2022, at 5pm. Letters of Intent received after the deadline will not be considered.

**CoC Review of Project Applications:** HUD expects each CoC to implement a thorough review and oversight process at the local level for the project applications submitted to HUD in the Special NOFO Competition. Ranking packets are due on **August 23, 2022**.

Project applications must be submitted to the CoC to be included on the CoC Priority Listing. CoCs must review and either accept and rank, or reject project applications submitted to them.

**Eligible Applicants:** HUD does not award grants to individuals. HUD will not evaluate applications from ineligible applicants.

- 1. **SAM Registration Requirement.** Applicants must be registered with https://www.sam.gov/SAM before submitting their application. In addition, Applicants must maintain an active SAM registration with current information while they have an active Federal award or an application or plan under consideration by HUD.
- 2. **UEI Number Requirement**. Applicants must provide a valid UEI number, registered and active at /www.sam.gov/ in the application.
- 3. Certification of Consistency with the Consolidated Plan. Each project applicant must submit a certification by the jurisdiction in which the proposed project(s) will be located that the applicant's project application for funding is consistent with the jurisdiction's HUD-approved consolidated plan. The certification must be made in accordance with the provisions of the consolidated plan regulations at 24 CFR part 91, subpart F. Form HUD-2991 must be completed and dated between June 22, 2022 and October 20, 2022.

**CoC Notification to Project Applicants**: CoCs are required to notify, in writing outside of *e-snaps*, all project applicants who submitted their project applications to the CoC by the CoC-established deadline whether their project application(s) will be accepted and ranked on the CoC Priority Listing, rejected, or reduced by the CoC no later than 15 days before the Special NOFO application submission deadline. Agencies will be notified in writing of acceptance or rejection of project applications on

9/30/2022. Where a project application is being rejected or reduced, the CoC must indicate the reason(s) for the rejection or reduction. Any project applicants that are rejected or reduced by the CoC must be notified in writing outside of *e-snaps*, with an explanation for the decision to reject or reduce the project application.

**Bonus Points**: HUD will award bonus points to CoCs based on number of <u>unsheltered</u> people reported in 2019 PIT Count.

- 30 points 10,000 or more people
- 20 points 5,000 to 9,999 people
- 10 points 1,000 to 4,999 people
- 0 points 999 or fewer people

#### Of CA's 44 CoCs:

- <u>1 CoC</u> has 10,000 or more unsheltered people;
- 3 CoCs have 5,000 to 9,999 unsheltered people;
- 18 CoCs have 1,000 to 4,999 unsheltered people; and
- <u>22 CoCs</u> have 999 or fewer unsheltered people.

No state will receive more than 10 Consolidated Application awards

Date

Anna Laven, Executive Director Bakersfield Kern Regional Homeless Collaborative 1900 E. Brundage Ln Bakersfield, CA 93307

# RE: Letter of Intent – FY 2022 Continuum of Care Supplemental to Address Unsheltered Homelessness Application

### Dear Anna:

Please let this serve as the Letter of Intent for Agency Name to apply for List of Projects. Agency Name will be applying for funding through the FY 2022 Continuum of Care Program Supplemental to Address Unsheltered Homelessness Notice of Funding Opportunity. Agency Name is an active member of the Bakersfield Kern Regional Homeless Collaborative in good standing.

Applicant's Legal Name: Agency Name

Please contact the following persons regarding the Consolidated Application:

Points of Contact: Name AND Name

Organization: Agency Name Agency Name

Title: Title Title

Mailing Address: Street Number Street Number

City, State, Zip Code City, State, ZIP Code

E-mail Address: E-mail E-mail

Phone: Telephone Number Telephone Number

#### Included with this Letter of Intent are:

- Click or tap here to enter text.
- Click or tap here to enter text.
- Click or tap here to enter text.

### Sincerely,

Name

Title

### **AGENCY SPECIFIC INFORMATION ENTERED HERE**

### MAKE SURE TO INCLUDE GRANT NAME AND PROGRAM TYPE

### **PUT ALL PROJECTS IN THIS SECTION**

### **Letter of Intent**

HU	D TH	HRESHOLD REQUIREMENTS			
	1.	Active SAM registration number:			
	2.	Valid DUNS number in application:			
	3. Our agency has no Outstanding Delinquent Federal Debts- It is HUD policy, consistent with t				
		purposes and intent of 31 U.S.C. 3720B and 28 U.S.C. 3201(e),			
		OR I certify that our agency has outstanding delinquent federal debt, however we have a			
		negotiated repayment schedule and the repayment schedule is not delinquent, or other			
	arrangements satisfactory to HUD are made before the award of funds by HUD.				
	4.	Our agency has no Debarments and/or Suspensions - In accordance with 2 CFR 2424, no award			
		of federal funds may be made to debarred or suspended applicants, or those proposed to be			
		debarred or suspended from doing business with the Federal Government.			
	5.	Our agency agrees to disclose any violations of Federal criminal law in the box below. (attach			
		additional pages if necessary)			
		1 0 2 22222 11			
	6.	Our agency agrees to disclose the required certifications as specified in the NOFO.			
	0.	our agency agrees to disclose the required certifications as specified in the NOFO.			
		Faith-based activities			
		Does your proposed renewal program use direct program funds to support or engage in any			
		explicitly religious activities, including activities that involve overt religious content, such as			
		worship, religious instruction, or proselytization, or any manner prohibited by law?			
		Yes No			
		Involuntary family separation			
		Does the project accept all families with children under age 18 without regard to the age of any			
		child? In general, under the HEARTH Act, any project sponsor receiving funds to provide			
		emergency shelter, transitional housing, or permanent housing to families with children under			
		age 18. Note there is an exception outlined in the Act: Project sponsors of transitional housing			
		receiving funds may target transitional housing resources to families with children of a specific			
		age only if the project sponsor: (1) operates a transitional housing program that has a primary			
		purpose of implementing evidence based practice that requires that housing units be targeted to			
		families with children in a specific age group; and (2) provides assurances, as the Secretary shall			
		require, that an equivalent appropriate alternative living arrangement for the whole family or			
		household unit has been secured.			
		Yes. Project certifies that is accepts all families with children under age 18 without regard to			

<ul> <li>No. Project does not comply with this requirement. A narrative is attached explaining how the project will comply with this HEARTH Act requirement.</li> <li>No. Project does not comply with this requirement but qualifies for an exception because it is implementing an evidence based practice that requires housing units targeted to families with children in a specific age group. A narrative is attached explaining how the project will comply with the exception, including identification of the evidenced based practice being utilized.</li> <li>N/A. Project does not serve families.</li> <li>N/A. Project is new and has not started yet.</li> </ul> Discrimination Policy Does your program deny services to potential recipients based on any of the following:					
<ul> <li>Age</li> <li>Color</li> <li>Yes</li> <li>No</li> <li>Disability</li> <li>Yes</li> <li>No</li> <li>Familial Status</li> <li>Yes</li> <li>No</li> <li>Gender</li> <li>Yes</li> <li>No</li> <li>Marital Status</li> <li>Yes</li> <li>No</li> <li>National Origin</li> <li>Yes</li> <li>No</li> <li>Race</li> <li>Yes</li> <li>No</li> <li>Religion</li> <li>Yes</li> <li>No</li> <li>Sexual Orientation</li> <li>Yes</li> <li>No</li> <li>If you answered "yes" to any of the above, please explain why in the box below (expand box as needed).</li> </ul>					
<ol> <li>This project will serve the population which meet program eligibility requirements as described in the Act. This includes any additional eligibility criteria for certain types of projects contained in the NOFO.</li> </ol>					
If the project is not providing participant data in the HMIS – indicate one or more of the four (4) reason(s) for non-participation:					
<ul> <li>☐ Federal law prohibits (please cite specific law)</li> <li>☐ New project not yet in operation</li> <li>☐ Other (please specify prohibition)</li> </ul>					

- 8. Our agency meets HUD financial expectations Note: If a project applicant has previously received HUD grants, the organization must have demonstrated its ability to meet HUD's financial expectations. If any of the following have occurred, the project applicant would NOT meet this threshold criteria:
  - a) Outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon;
  - b) Audit finding(s) for which a response is overdue or unsatisfactory;
  - c) History of inadequate financial management accounting practices;
  - d) Evidence of untimely expenditures on prior award;
  - e) History of other major capacity issues that have significantly affected the operation of the project and its performance;
  - f) History of not reimbursing subrecipients for eligible costs in a timely manner, or at least quarterly; and
  - g) History of serving ineligible program participants, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes.
- This project is Consistent with Jurisdictional Consolidated Plan(s) All projects must be
  consistent with the relevant jurisdictional Consolidated Plan(s). The CoC will be required to
  submit a Certification of Consistency with the Consolidated Plan at the time of application
  submission to HUD.

### **CoC THRESHOLD REQUIREMENTS**

- 1. This project meets Housing First and/or Low Barrier Implementation
- 2. Our agency will be able to provide the match requirement for your renewal project (including a commitment letter or MOU)?
  - Match must equal 25 percent of the total grant request including Admin costs but excluding leasing costs (i.e., any funds identified for Leased Units and Leased Structures). Match must be met on an annual basis. HUD requires match letters to be submitted with the e-snaps application. Match contributions can be cash, in-kind, or a combination of the two; and, match must be used for an eligible cost as set forth in Subpart D of CoC Program interim rule. For an in-kind match, the recipient may use the value of property, equipment, goods, or services contributed to the project, provided that, if the recipient or sub recipient had to pay for such items with grant funds, the costs would have been eligible. If third party services are to be used as match, the third party service provider that will deliver the services must enter into a memorandum of understanding (MOU) before the grant is executed documenting that the third part will provide such services and value towards the project.

3.	Our agency is an active CoC participant
	Describe what local Continuum of Care committees, subcommittees, and/or working groups
	that your agency participates in on a regular basis in the box below (expand box as needed).
	Please include the names and titles of those participating as well as their level of
	involvement/participation.

4. I have attached our agencies last audited financial

5.	Does your agency provide for the participation of not less than one homeless individual or formerly homeless individual on the board of directors or other equivalent policymaking entity of the recipient or sub recipient, to the extent that such entity considers and makes policies and decisions regarding any project, supportive services, or assistance provided under this part. This requirement is waived if a recipient or sub recipient is unable to meet such requirement and obtains HUD approval for a plan to otherwise consult with homeless or formerly homeless persons when considering and making policies and decisions?  Yes No
	If not, please provide an action plan/timeline on when your agency will be compliant with this requirement in the box below (expand box as needed).
	Does your agency, to the maximum extent practicable, involve homeless individuals and families through employment; volunteer services; or otherwise in constructing, rehabilitating, maintaining, and operating the project, and in providing supportive services for the project?  Yes No  If not, please provide an action plan/timeline as to when your agency will be compliant with this
	requirement in the box below (expand box as needed).

### **Anna Laven**

**From:** Destiny Reveles

Sent: Thursday, August 4, 2022 5:56 PM
Cc: Rick Ramos; Destiny Reveles

**Subject:** Continuum of Care 2022 Supplemental Funding Opportunity to Address Unsheltered and Rural Homelessness: Summary

Attachments: 6C\_Summary CoC Supplemental to Address Unsheltered and Rural Homelessness - KC.docx; LOI Fillable.docx; Letter of Intent Form (2022)

HUD Special NOFO).docx

Dear Governing Board, Executive Board & Distribution List,

**Deadline**: The deadline for submitting consolidated applications to HUD is <u>October 20, 2022</u>. Collaborative applicants must complete and submit their applications in *e-snaps*.

All project applications are required to be submitted to the CoC no later than 30 days before the consolidated application deadline. The submission deadline for complete project applications is **September 19, 2022**.

You will find three attachments.

- Notice COC Supplemental to Address Unsheltered and Homelessness
- Letter Of Intent Template
- Letter of Intent Template attachment

Letter of Intent Q&A session with be held on:

Friday August 9, 2022, at 1PM

### Join Zoom Meeting:

https://us02web.zoom.us/j/88281855422?pwd=R2VTcnVyUDk4cEFMTk96NFloQnpZZz09

Meeting ID: 882 8185 5422

Passcode: 314620

Friday August 24, 2022, at 1PM

Join Zoom Meeting:

https://us02web.zoom.us/j/81493782572?pwd=djRzNStMeHNpZWw0RTF3b1Nwb2czQT09

Meeting ID: 814 9378 2572

Passcode: 936209

Letters of Intent with required documentation must be received by <u>August 11, 2022, at 5pm.</u> Letters of Intent received after the deadline will not be considered.

LETTERS OF INTENT AND ALL REQUIRED DOCUMENTATION MUST <u>NOT BE MAILED</u>. Documentation must be delivered VIA EMAIL TO <u>coordinator@bkrhc.org</u>
CC: anna.laven@bkrhc.org .

### Nbgd#

Destiny Reveles Compliance Coordinator Bakersfield Kern Regional Homeless Collaborative

Coordinator@bkrhc.org
Main: (661)526-0111 Ext. 101

Cell: (661)546-3535

2



## Bakersfield/Kern County CoC Ranking Packet for New CoC Project

**Instructions:** Please complete one packet for each new project application.

Lead Agency Information Agency Name: Agency Address:	State:	7in:			
City: Phone:	Fax:	Zip: email:			
. Henci		Ciridin			
Grant/Application Contact Person:					
Name:					
Phone:					
Email:					
Agency Director:					
Name:					
Phone:					
Email:					
HMIS Contact Person:					
Name:					
Phone:					
Email:					
Project Information:					
Name of Project:					
Project Address:					
Grant amount:					
Program Type:					
Primary Population:					
Project Description: In addition to a general overview of the project, be sure to include the length					
of time of the activity (can be up to three years); who the partners of the activity are and					
collaborative approach; and ability t	o scale the project)				
Total Number of Units:					

Proposed budget amounts by activity	Prop	osed	budget	amounts	by	activity	۷:
-------------------------------------	------	------	--------	---------	----	----------	----

Activity:	Budget Amount:
Leased Units	
Leased Structures	
Rental Assistance	
Supportive Services	
Operations	
HMIS	
Administration	
Total:	
Name and Signature of Person who will complete the appl	ication:
Name and Signature of Person authorized to sign the HUD	application:
I certify, on behalf of my agency that all information conta true, based on our current records for the project. I und failing to provide accurate information will have a negative result in removal from the Continuum of Care Application	lerstand that falsifying information or impact on my overall review and may
Executive Director/CEO/President	Date

### **Background Information:**

The Continuum of Care (CoC) will consider the need to fund new projects as required by the U.S. Department of Housing and Urban Development (HUD). New projects must meet minimum project eligibility, capacity, timeliness, and performance standards identified in the NOFA or they will be rejected from consideration for funding.

While considering the need to fund new projects, the CoC Independent Review Panel will review the information that HUD noted in the 2022 Special Unsheltered NOFO, which is as follows:

- 1. When considering new projects for award, HUD will review financial information; Annual Performance Reports (APRs); and information provided from the local HUD CPD Field Office, including monitoring reports and uniform guidance audit reports as applicable, and performance standards on prior grants, and will assess projects using the following criteria on a pass/fail basis:
  - a. Whether the project applicant's performance met the plans and goals established in the initial application, as amended;
  - b. Whether the project applicant demonstrated all timeliness standards for grants being renewed, including those standards for the expenditure of grant funds that have been met:
  - The project applicant's performance in assisting program participants to achieve and maintain independent living and records of success, except HMIS-dedicated projects that are not required to meet this standard; and,
  - d. Whether there is evidence that a project applicant has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site.

### I. EXPERIENCE

(30 Points Total Max)

- A. **(15 Points Max)** Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.
- B. (10 Points Max) Describe experience with utilizing a Housing First approach. Include:
  - 1.) Eligibility criteria;
  - 2.) Process for accepting new clients;
  - 3.) Process and criteria for exiting clients. *Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal*

records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, actual or perceived sexual orientation, gender identity. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that project participation is terminated in only the most severe cases.

C. (5 Points Max) Describe experience in effectively utilizing federal funds, including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitor findings, and timely submission of required reporting on existing grants.

Points Awarded for I.A	Points Awarded for I.B	Points Awarded for I.C	

### II. DESIGN OF HOUSING & SUPPORTIVE SERVICES

(25 Points Total Max)

- A. **(15 Points Max)** Extent to which the applicant:
  - 1. Demonstrate understanding of the needs of unsheltered clients to be served, especially those with severe service needs and the elderly.
  - 2. Demonstrate the type, scale and location of the housing fit the needs of the clients to be served.
  - 3. Demonstrate type, and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served.
  - 4. Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits (MediCal, Medcare, Medicaid, SSI, Food Stamps, early childhood education, etc.).
  - 5. Establish performance for housing and income that are objective, trackable and meet or exceed any established HUD, HEARTH or CoC benchmarks.
- B. **(5 Points Max)** Describe the plan to assist clients rapidly secure and maintain permanent housing that is safe, affordable accessible and acceptable to their needs.
- C. **(5 Points Max)** Describe how clients will be assisted to increase employment and or income and to maximize their ability to live independently.

Points Awarded for II.A	Points Awarded for II.B	Points Awarded for II.C

### III. TIMELINESS

(10 Points Total Max)

A. Describe plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for 60 days, 120 days and 180 days after grant award.

Points Awarded for III.A	

### IV. FINANCIAL

(40 Points Total Max)

- A. **(5 Points Max)** Project is cost effective -comparing projected cost per person served to CoC average within project type.
- B. Audit
  - 1. (5 Points Max) Most recent audit found no exceptions to standard practices
  - 2. **(5 Points Max)** Most recent audit identified agency as 'low risk'
  - 3. (5 Points Max) Most recent audit indicates no findings
- C. (20 Points Max) Budgeted costs are reasonable, allocable, and allowable

| Points Awarded |
|----------------|----------------|----------------|----------------|----------------|
| for IV.A       | for IV.B1      | for IV.B2      | for IV.B3      | for IV.C       |
|                |                |                |                |                |

### V. PROJECT EFFECTIVENESS

(5 Points Total Max)

A. Coordinated Entry Participation- 95% of entries to project are from CE referrals. Please describe experience participating or the plan to participate in Coordinated Entry.

# I. Equity Factors: Agency Leadership, Governance & Policies (12 Points)

Max Points	Measure	Factor/Goal	Narrative (1,000 Characters) Include what percentage of managerial & leadership positions are filled by staff from under-represented populations.	Points Awarded
3	New project has under- represented individuals (BIPOC, LGBTQ+, etc.) in managerial & leadership positions	Yes/No		

Max Points	Measure	Factor/Goal	Narrative (1,000 Characters) Include how many are on the board of directors & how many have lived experience	Points Awarded
3	New project's organizational board of directors includes representation from more than one person with lived experience (per 578.75(g))	Yes/No	,	

Max	Measure	Factor/Goal	Narrative	Points
Points			(1,000 Characters)	Awarded
			Explain the process in detail	
3	New project has relational process for receiving and incorporating feedback from persons with lived experience or a plan to create one	Yes/No		

Max Points	Measure	Factor/Goal	Narrative (1,000 Characters)  Explain the plan in detail	Points Awarded
3	New project has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not	Yes/No		

impose undue barri	ers	
that exacerbate		
disparities and outcome	omes	

# I. Equity Factors: Program Participant Outcomes (9 Points)

Max Points	Measure	Factor/Goal	Narrative (1,000 Characters) Explain what results of the review of participant	Points Awarded
3	New project describes their plan for reviewing program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age. If already implementing plan, describe findings from outcomes review	Yes/No	outcomes were	

Max	Measure	Factor/Goal	Narrative	Points
Points			(1,000 Characters)	Awarded
			Explain what changes were identified & what plan entails	
3	New project describes	Yes/No		
	plan to review whether			
	programmatic changes			
	are needed to make			
	program participant			
	outcomes more equitable			
	and developed a plan to			
	make those changes. If			
	already implementing			
	plan, describe findings			
	from review			

Max Points	Measure	Factor/Goal	Narrative (1,000 Characters) Explain what schedule is & who will review data	Points Awarded
3	New project describes plan to work with HMIS lead to develop a schedule for reviewing	Yes/No	·	

HMIS data with		
disaggregation by race,		
ethnicity, gender identity,		
and or/age. If already		
implementing plan,		
describe findings from		
review		

Total Pts Available	Project Ranking Score	Total Pts Awarded
131		
	CoC Project Type Points	
	Total Points	

### **Anna Laven**

From: Anna Laven

Sent: Wednesday, September 28, 2022 5:05 PM

To: Miles Middleton; Stacy Kuwahara; Rhonda Barnhard; allisond@mercyhouse.net; Jim Wheeler; Lauren Skidmore; Barbara Vadnais; Suzanne

Robertson; Heather Kimmel; Anna Laven

**Cc:** Destiny Reveles; Rick Ramos; albaptiste@kern.org; Curt Williams; Steve Peterson

**Subject:** Unsheltered NOFO Project Applicants - Approved/Rejected Applications

Attachments: FINAL CoC RANKING POLICY 2022 - Gov Bd approved.docx; HUD Ranking Tool Special NOFO\_GB Approved\_20220928.xlsb

Dear Unsheltered NOFO applicants,

Thank you for applying to the 2022 Unsheltered Special NOFO. Your projects were reviewed, scored and ranked by a non-conflicted review panel and final approval of the projects and award amounts was made by the Governing Board at today's meeting as determined to be in the best interest of the CoC as a whole. I am attaching the finalized priority list. All projects were ranked and approved. No projects were rejected. Because they were all quality projects and had the ability to scale, projects (with the exception of TH-RRH) were reduced to allow all projects to be funded within the total funding available. As discussed at Governing Board, the TH-RRH project would not be able to scale down and fills an identified gap in the community. Therefore the TH-RRH project was left at the requested project amount.

If after review you would like to appeal the decision by Governing Board on the basis that the score is not reflective of the application information provided or there was bias or unfairness in the process, please follow the steps as indicated on the attached Ranking Policy. Appeals must be made in writing and are due to me (cc: Destiny Reveles) by COB on Monday, October 3.

Congratulations and thank you for the work that you do to transform the community and the lives of those experiencing unsheltered homelessness, especially those with intensive service needs.

Should you have any questions, please don't hesitate to let me know.

Thanks, Anna

Dr. Anna Laven
Executive Director
Bakersfield Kern Regional Homeless Collaborative
Anna.laven@bkrhc.org

Office 661-899-5427 Ext. 104

Cell 310-592-8557 1900 E. Brundage Lane Bakersfield, CA 93307 www.bkrhc.org

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Thanks, Anna

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Cell 310-592-8557 1900 E. Brundage Lane Bakersfield, CA 93307 www.bkrhc.org



## OF THE COUNTY OF KERN

Creating brighter futures...one home, one family at a time

### **Written Commitment for Housing Support**

October 14, 2022:

The Housing Authority of the County of Kern (the Authority) is committed to assisting the Bakersfield-Kern Regional Homeless Collaborative (BKRHC) in meeting the needs of homeless persons by providing the following housing resources for persons experiencing homelessness or fleeing domestic violence as a match commitment in the Fresh Start application:

Housing Choice Vouchers set aside (50%): up to 50% of all turnover housing subsidy vouchers per year are set aside to serve homeless clients coming through CES (approximately 150 this year). While there is no ongoing case management funding source for these vouchers, the CoC coordinated with the City of Bakersfield and County of Kern to use one time HHAP 2 funds from the state to support case management services for these vouchers for three years. In addition, the first six months of case management is leveraged through Cal-Aim funding.

In addition to the above understanding, the Authority confirms that the eligibility criteria for our services will comply with the HUD program and fair housing rules, and we will not further restrict access to services through additional eligibility requirements.

These resources will be available to project participants upon award of the Fresh Start grant and are valued at \$1,440,000. This equals 50 vouchers at approximately \$800 per voucher for a three year period. The value of our services is based on actual housing costs or typical rental charges. Our in-kind service contributions have been valued at a rate consistent with the amount paid for housing not supported by CoC funds.

Sincerely,

Heather Kimmel

Heather Kimmel

**Assistant Executive Director** 

hkimmel@kernha.org







### **Notification of Home Safe Allocation**

September 26, 2022

To: Kern County Homeless Continuum of Care and partners

Reference: All County Welfare Directors Letter dated October 15, 2021

To Whom It May Concern,

Kern County Aging and Adult Services Department, Adult Protective Services Program (APS), was made aware of additional funding for the Home Safe Program on September 21, 2022. Aging and Adult Services Department is pleased to share that we will be awarded and agree to accept the amount of \$1,201,128 for the period of June 30, 2024 thru June 30, 2025. Some may recall that APS has been utilizing the Home Safe Program for the past three years and been an active member of the Homeless CoC since 2018.

Home Safe is a locally administered program that aims to prevent or address homelessness among seniors and adults with disabilities who are APS clients or in the APS intake process. Tribal grantees may also serve individuals that appear eligible for APS who are homeless or at risk of homelessness.

Eligibility for Home Safe is defined in WIC Section 15770 as an individual that meets all three conditions:

 Is an adult protective services client, or is in the process of intake to adult protective services (including those who have been assigned for investigation);
 Note: Individuals who may be served through a tribal social services agency do

GROUNDED & BOUNDLESS





not need to be involved in adult protective services, but should otherwise appear to be eligible for adult protective services as defined in WIC Section 15610.10

- 2. Is homeless or at imminent risk of homelessness; and
- 3. Voluntarily agrees to participate in the program.

Benefits of the program and services available include, but are not limited to, assessment of individual housing needs; housing stabilization services; navigation or search assistance to recruit landlords and assist individuals in locating affordable or subsidized housing; enhanced case management; housing-related financial assistance; coordination of mental health assistance; and Multi-Disciplinary Team (MDT) coordination.

CDSS requires Home Safe grantees to consult with their broader homelessness response systems as they develop and implement their Home Safe. This includes establishing or continuing to support meaningful partnerships with the local homeless Continuum of Care (CoC), tribal housing authorities, housing and homelessness agencies within incorporated cities, In Home Supportive Services (IHSS), aging organizations (Departments of Aging and Area Agencies on Aging), and other local housing service providers, as appropriate.

Please contact Jeremy Oliver at 661-868-1034 or <a href="mailto:oliverj@kerncounty.com">oliverj@kerncounty.com</a> if you have additional questions, wish to learn more, or would like more information about the monthly MDT held to coordinate services for APS clients. APS will continue to bring you more information as the program develops and advances. Additionally, we look forward







to working with the CoC's continued efforts to address those that are homeless or at imminent risk of homelessness.

Sincerely,

Interim Director

Kern County Aging and Adult Services









## OF THE COUNTY OF KERN

Creating brighter futures...one home, one family at a time

# **Commitment for Partnership**2022 Continuum of Care Application

October 14, 2022:

The Housing Authority of the County of Kern (the Authority) commits to partnering with the Continuum of Care (CoC) by pairing vouchers available through the agency's housing resources with CoC-funded supportive services to serve persons who are homeless, or at imminent risk of homelessness.

The Authority commits to work with the Bakersfield-Kern Regional Homeless Collaborative (BKRHC) and other stakeholders to develop a prioritization plan for a potential allocation of Stability Vouchers. In addition, the Authority has already created a preference for general admission to Housing Choice Voucher Program through the coordinated entry process for individuals and families experiencing homelessness per HUD's definition in the HEARTH Act.

This commitment is applicable to the projects being submitted to the U.S. Department of Housing and Urban Development (HUD) for funding consideration under the 2022 CoC Supplemental Notice of Funding Opportunity to Address Unsheltered Homelessness. The housing resources will be available during the operating period of the projects selected for funding.

Currently the Authority serves persons experiencing homelessness as defined by HUD through the following housing programs:

- No-Place Like Home (50%): There are a total of 60 units being developed through the no-place like home program. 50% of those units are designated for homeless persons with a mental disability, and are referred to the development through CES. Services are to be provided on site by Kern Behavioral Health and Recovery Services, and are paid for through their operating budgets.
- Homes for Healthy Californians (100%): This is a state funded program that serves clients who are homeless and have a severe mental or physical disability. There are currently 3 vouchers available, and participants are referred through the CES. There is no ongoing case management funding source for these vouchers. The first six months of case management is leveraged through Cal-Aim funding





- O Housing Choice Vouchers set aside (50%): up to 50% of all turnover vouchers per year are set aside to serve homeless clients coming through CES (approximately 150 this year). While there is no ongoing case management funding source for these vouchers, the CoC coordinated with the City of Bakersfield and County of Kern to use one time HHAP 2 funds from the state to support case management services for these vouchers for three years. In addition, the first six months of case management is leveraged through Cal-Aim funding.
- HHAP 1 Tenant based Rental Assistance (100%): State funding allocated for tenant based rental assistance. This created 48 new vouchers for our community that are issued through CES. There is no ongoing case management funding source for these vouchers. The first six months of case management is leveraged through Cal-Aim funding
- Homekey (100%): There are a total of 198 units being developed through the Homekey program. All of these units will serve persons who are homeless, and are referred to the development through CES or the child welfare system.
   Services will be provided by various agencies and will be paid for out of the operating accounts.

Note: If the activity above indicates that it only accepts referrals through CES, we are pairing that activity to any street outreach projects funded in this application. We know that many homeless individuals access CES through street outreach, and that is how all of the above vouchers and units are filled. If the activity above indicates that there is no ongoing funding source, we are pairing that activity to any Supportive Services Only projects funded in this application.

Sincerely,

Heather Kimmel

Assistant Executive Director

hkimmel@kernha.org

Heather Kimmel



## OF THE COUNTY OF KERN

Creating brighter futures...one home, one family at a time

#### Written Commitment for Health Care Services

October 14, 2022

The Housing Authority of the County of Kern (the Authority) is committed to assisting the Bakersfield-Kern Regional Homeless Collaborative (BKRHC) in meeting the needs of homeless persons by providing the following resources for persons experiencing homelessness or fleeing domestic violence.

The Authority is pleased to leverage funding from their CalAIM funded project as an inkind contribution to the Fresh Start project. Homeless and at-risk clients who are enrolled in Medi-Cal plans are referred to the Authority for housing navigation, security deposit, and sustaining services. These clients are actively engaged with healthcare and are under the treatment of physicians for physical and/or mental health conditions. Project eligibility for program participants in the new PH-PSH project will be based on CoC program fair housing requirements and will not be restricted by the healthcare service provider.

The proposed in-kind match is calculated for a three-year term. The value of services we will provide in match equals \$262,398. This is calculated based on our reimbursement rate of \$85 per billable service plus the actual cost of the security deposit. We anticipate security deposit assistance to equal \$165,000 and navigation services to cost \$95,898.

Sincerely,

Heather Kimmel

**Assistant Executive Director** 

hkimmel@kernha.org

Heather Kimmel







September 15, 2022

Lauren Skidmore, CEO Bethany Services 160 E. Truxtun Avenue Bakersfield, CA 93305

Dear Ms. Skidmore,

The purpose of this letter is to demonstrate our support and commitment to Bethany Services PSH project and Special NOFO grant application to the Kern County CoC. Under the proposed project, we will assist Bethany Services in providing medical support to unsheltered homeless individuals with severe service needs by committing to the following services:

Substance abuse treatment or recovery in the form of outpatient-based Medication Assisted Treatment (MAT) services, counseling services, care coordination, and clinic-based full-scope primary care including preventative health care, urgent medical care, chronic disease management, women's health services. Kern Medical will provide access to recovery services for all program participants who qualify and chose to receive those services.

The estimated annual value of these services is \$382,000.

We fully endorse Bethany Services application and look forward to building upon our existing partnership to facilitate access to responsive, personalized, and culturally appropriate services for unsheltered individuals entering permanent supportive housing throughout our shared service area.

Sincerely

Natalee Garrett

Vice President of Strategic Development



September 12, 2022

Lauren Skidmore, CEO Bethany Services 1600 E. Truxtun Ave. Bakersfield, CA 93305

Dear Ms. Skidmore,

Re: Letter of Support for the Continuum of Care Supplemental to Address Unsheltered Homelessness NOFO

Kern Behavioral Health and Recovery Services (KernBHRS) is pleased to support the proposal made by Bethany Services in the application for Continuum of Care Supplemental to Address Unsheltered Homelessness NOFO. The proposed Rapid Rehousing/Transitional Housing Program would fill a current gap in the local homeless service continuum and assist to address our community's homeless crisis. This project will improve the existing system by providing services for individuals requiring mental health, physical health and substance use care during their stay within a Transitional Housing Program. This population is often underserved in our community, and this type of resource does not currently exist.

The substance use and mental health needs of those living on the streets is often a significant barrier, impeding these individuals from maintaining placement in emergency shelters and permanent supportive housing. Wrapping services around residents within a Transitional Housing Program provides an opportunity to improve long term outcomes for treatment and housing.

KernBHRS will partner with Bethany Services to provide in-kind services for the proposed program. The department will assign staff to support residents to facilitate engagement, linkage and referral for mental health and substance use services. KernBHRS will coordinate aftercare groups for current and former residents with behavioral health challenges, to promote independent living and housing stability and provide training and consultation to support Bethany Services in the provision of aftercare. KernBHRS staff will maintain and distribute information pertaining to local behavioral health housing availability and quality standards. Specific staffing and services include the following:

- Engagement and Referral Support provided onsite 8 hours per week by Substance Abuse Counselor (or equivalent).
- Aftercare Groups provided offsite 2 hours bi-weekly by Substance Abuse Counselor and Peer Support Specialist.
- Training and Consultation provided offsite 2 hours monthly by Recovery Specialist and Peer Support Specialist.
- Housing Availability and Quality Standards documents prepared and distributed once monthly (10 hours per month) by Recovery Specialist.





### **Program Budget**

Position	Cost Per 1.0 FTE	Annual Cost	Cost for 3 years
Substance Use Disorder Specialist (or equivalent)	· ·	(0.2 FTE) \$21,618	\$64,854
Substance Use Disorder Specialist	\$108,091	(0.025 FTE) \$2,702	\$8,106
Peer Support Specialist	\$85,740	(0.037 FTE) \$3,215	\$9,645
Recovery Specialist	\$125,067	(0.075 FTE) \$9,380	\$28,140
		Total Cost \$36,915	\$110,745
	Substance Use Disorder Specialist (or equivalent) Substance Use Disorder Specialist Peer Support Specialist	Substance Use Disorder Specialist (or equivalent)  Substance Use Disorder Specialist  Peer Support Specialist  \$108,091 \$108,091 \$108,091 \$200 \$300 \$300 \$300 \$300 \$300 \$300 \$300	Substance Use Disorder Specialist (or equivalent)       \$108,091       (0.2 FTE) \$21,618         Substance Use Disorder Specialist       \$108,091       (0.025 FTE) \$2,702         Peer Support Specialist       \$85,740       (0.037 FTE) \$3,215         Recovery Specialist       \$125,067       (0.075 FTE) \$9,380

KernBHRS looks forward to the successful award of this application to meet a very important need in our homeless community. If there is any further assistance required, please do not hesitate to contact me at <a href="mailto:skuwahara@kernbhrs.org">skuwahara@kernbhrs.org</a> or (661) 868-6609.

Sincerely,

Stacy Kuwahara, LMFT Behavioral Health Director

Kern Behavioral Health and Recovery Services





September 8, 2022

Mr. Larry Haynes, Chief Executive Officer Mercy House Living Centers PO Box 1905 Santa, CA 92702

### Dear Larry:

The purpose of this letter is to demonstrate our support and commitment to Mercy House's PSH project and Special NOFO grant application to the Kern County CoC. Under the proposed project, we will assist Mercy House in providing medical support to unsheltered homeless individuals with severe service needs by committing to the following services:

Clinic based behavioral health care through a team comprised of a 1FTE Therapist and .2FTE Psychiatrist and clinic-based full-scope primary care including preventative health care, urgent medical care, chronic disease management, women's health services and substance abuse disorders.

The estimated annual value of these services is \$235,000.

We have had the opportunity to work with Mercy House through program providing health assessment, diagnosis and treatment for homeless persons receiving emergency shelter within their Brundage Lane Navigation Center in the City of Bakersfield. We fully endorse Mercy House's application and look forward to building upon our existing partnership to facilitate access to responsive, personalized, and culturally appropriate services for unsheltered individuals entering permanent supportive housing throughout our shared service area.

Sincerely,

Natalee Garrett

Vice President of Strategic Development



### Written Commitment for Health Care Services

October 17, 2022

Flood Bakersfield Ministries, Inc. (Flood) is committed to assisting the Bakersfield-Kern Regional Homeless Collaborative (BKRHC) in meeting the needs of homeless persons by providing the following resources for persons experiencing homelessness or fleeing domestic violence.

Flood is pleased to leverage resources from their Kern Behavioral Health and Recovery Service (KernBHRS) funded project as an in kind contribution to the *Unsheltered Location & Connection Street Outreach Project*. Through this project, unsheltered and chronically homeless clients that have severe needs, including mental health and substance use disorders, will be engaged, assessed, and connected to KernBHRS, Clinica Sierra Vista, CalAIM, and other behavioral healthcare providers for sustaining services.

Flood has an extended and ongoing partnership with KernBHRS and this serves as a secure source for our match.

The proposed in-kind match is calculated for a three-year term. The value of services we will provide in match equals \$344,450. This is calculated based on our cost to provide an additional street outreach team, equipment, and vehicle.

Sincerely,

Jim Wheeler

**Executive Director** 

Flood Ministries

jim@floodbako.com



## **MERCY** HOUSE



October 11, 2022

Dear Dr. Anna Laven,

Re: Letter of Support for the Continuum of Care Supplemental to Address Unsheltered Homelessness Notice of Funding Opportunity Application

The Bakersfield-Kern Regional Homeless Collaborative's Lived Experience Advisory Board (LEAB) is pleased to support the Bakersfield-Kern Regional Homeless Collaborative's (CoC) application to the Continuum of Care Supplemental to Address Unsheltered and Rural Homelessness Notice of Funding Opportunity (NOFO).

The LEAB is a standing committee led and facilitated by members of Flood Bakersfield Ministries and Brundage Lane Navigation Center – Mercy House, organizations which have an active presence in the CoC's outreach and emergency shelter efforts, and represented by individuals with lived experience of homelessness, members across multiple CoC organizations, and the general public. Their work allows firsthand contact to serve individuals and families experiencing homelessness with severe service needs, engage them in CoC/LEAB involvement opportunities, provide meaningful outreach and trust building, and learn what can be done to improve the CoC's service delivery. Through these combined efforts, several organizations within the CoC employ persons formerly experiencing homelessness.

The LEAB's purpose is to provide a forum for individuals with lived experience to be active members of the CoC, regularly convene and present to other committees, and provide an intentional opportunity to have involvement in decision making processes within the CoC. Several of our CoC standing committees include individuals with lived experience and our CoC's Youth Action Board (YAB) is comprised entirely of youth with lived experience. Items within the LEAB are presented during committee convenings such as our Coordinated Entry System (CES) committee and items requiring action are presented at Governing Board for further discussion and approval. Our CoC Governing Board includes two seats comprised of voting members with lived experience, one of which represents youth. Participation in the committees and Governing Board demonstrates their active roles in forming policy and shaping the impact they have for those experiencing homelessness.

Focus groups and surveys are utilized to ensure that the voices of individuals with lived experience are heard, their expertise is compensated accordingly through best practices, and their input is included in strategic planning. The LEAB has developed and begun implementation of a survey to be given at the beginning, middle, and end of an individual's journey through our CoC's homeless system. The data will

be reviewed quarterly within LEAB and presented to the committees and the Governing Board for further discussion on any findings or recommendations for process improvement.

On behalf of the CoC's Lived Experience Advisory Board and as the authorized representative, we stand by the CoC's efforts to involve individuals with lived experience of homelessness in decision-making and the CoC's work to improve the lives of those we serve within Kern County.

Sincerely,

Diane Contreras

Chair - BKRHC Lived Experience Advisory Board

stare Contreras

**Director of Operations** 

Flood Bakersfield Ministries



# Plan for Serving Individuals and Families Experiencing Homelessness with Severe Service Needs

### **Leveraging Housing Resources**

The CoC has dedicated considerable effort to address the permanent housing needs for those with severe service needs and elderly persons and families experiencing homelessness. To that end, the CoC uses a CES process to ensure easy access to entry, with a no wrong door approach, and to address the housing and stabilization needs of **all** individuals and families. The CoC completed a CES SWOT Analysis earlier this year and is enacting the findings from that analysis to continually improve the easy access to entry we seek to provide for all community members.

In addition, the CoC has developed and actively supports case management for five By Name Lists (BNL) including chronically homeless, intensive service needs (aka severe service needs), elderly, youth, and veterans. The Intensive Service Needs list was created nearly two years ago and includes people with two of three of the following conditions: mental health conditions, physical health conditions/medical impairments and/or substance abuse. The Intensive Services Needs BNL is jointly managed by Kern Behavioral Health and Recovery Services and Flood Ministries (the CoC's primary street outreach provider). The Elderly BNL includes those who are 60 or older and is managed by the local PHA. Inflow and outflow, along with other metrics, are monitored monthly for each BNL and case conferencing occurs at least monthly if not more regularly to address the unique needs of those with severe service needs or who are elderly. Progress toward supporting these two unique groups is reported out in the Built for Zero Committee, CES Committee and to the Governing Board. These strategics have helped to ensure that the CoC is comprehensively prioritizing and addressing those with high needs and levels of vulnerability and connecting them with housing, stabilization and healthcare services.

The CoC has consistently and aggressively applied for permanent housing projects, including permanent supportive housing or rapid re-housing, that uses subsidies not funded through the CoC or ESG Programs to support serving those with severe service needs and elderly. These projects will provide at least 50 percent of the units necessary for the proposed projects as described below:

# • In the case of a permanent supportive housing projects, provide at least 50 percent of the units included in the project; or

- o No-Place Like Home (50%): There are a total of 60 units being developed through the no-place like home program. 50% of those units are designated for homeless persons with a mental disability, and are referred to the development through CES. Services are to be provided on site by Kern Behavioral Health and Recovery Services, and are paid for through their operating budgets.
- O Homes for Healthy Californians (100%): This is a state funded program that serves clients who are homeless and have a severe mental or physical disability. There are

- currently 3 vouchers available, and participants are referred through the CES. There is no ongoing case management funding source for these vouchers. The first six months of case management is leveraged through Cal-Aim funding
- o Housing Choice Vouchers set aside (50%): up to 50% of all turnover vouchers per year are set aside to serve homeless clients coming through CES (approximately 150 this year). While there is no ongoing case management funding source for these vouchers, the CoC coordinated with the City of Bakersfield and County of Kern to use one time HHAP 2 funds from the state to support case management services for these vouchers for three years. In addition, the first six months of case management is leveraged through Cal-Aim funding.
- o HHAP 1 Tenant based Rental Assistance (100%): State funding allocated for tenant based rental assistance. This created 48 new vouchers for our community that are issued through CES. There is no ongoing case management funding source for these vouchers. The first six months of case management is leveraged through Cal-Aim funding
- O Homekey (100%): There are a total of 198 units being developed through the Homekey program. All of these units will serve persons who are homeless, and are referred to the development through CES or the child welfare system. Services will be provided by various agencies and will be paid for out of the operating accounts.
- Home Safe a locally administered program that aims to address homelessness among seniors and adults with disabilities who are Adult Protective Service clients. The most recent award is \$1,201,128 through June 30, 2025 and includes enhanced case management, housing navigation, housing-related financial assistance, and coordination of mental health assistance.

Note: If the activity above indicates that it only accepts referrals through CES, we are pairing that activity to any street outreach projects funded in this application. We know that many homeless individuals access CES through street outreach, and that is how all of the above vouchers and units are filled.

If the activity above indicates that there is no ongoing funding source, we are pairing that activity to any Supportive Services Only projects funded in this application.

# • In the case of a rapid re-housing project, serve at least 50 percent of the program participants anticipated to be served by the project.

• The Joint TH an PH-RRH Project will lease a 20-bed facility in Bakersfield for the TH portion and the RRH portion is composed of scattered site rental units and will provide up to 24 months of assistance to 81 unsheltered, high service need persons per year through the CES. Supportive services provided from non CoC or ESG programs include transportation, education, employment search and placement, community-based referrals, household furnishings, and life skills training. Partner agencies will provide mental and behavioral health services and substance use treatment. Post-housing clients will receive up to 6 months of aftercare case management to assist with move-in and ensure stability with home visits and phone calls.

#### Landlord Recruitment

The CoC has dedicated considerable resources toward landlord recruitment and their units to utilize for tenant-based assistance and to support the technical assistance and training needs of providers so that there is consistent community-wide effort toward landlord recruitment.

The CoC pays for and administers the software known as Padmission. Utilizing Padmission as a shared resource across all collaborative members, case managers, housing navigators and housing locators, staff and landlords can list units that are available to clients. Padmission allows for improved housing search assistance, management of landlord relationships and tracking performance with analytics and reports. Two CoC Standing Committees, the Housing Committee and the Planning and Performance Committee, review issues related to outflow (placements into permanent housing), housing inventory and landlord recruitment.

The CoC and service provider partners also work with the Income Property Association of Kern (IPAK) to present the annual California Landlord Summit. The Summit affords an opportunity to engage with landlords and property owners, share information about the benefits and opportunities of working with voucher programs, and provides an opportunity for new partnerships and commitments toward housing availability. CoC members and services providers also participate on the landlord advisory committee that was recently established and on the California Association of Housing Authorities on their landlord engagement committee.

Due to recent economic impacts in the community, the vacancy rates have consistently been well below 2% in Kern County for over the last year and a half. In response to this shift in housing supply, the CoC chose to dedicate over half of its HHAP 3 (CA state funds) or \$1,000,000 toward landlord incentives to increase unit availability for intensive service needs, elderly and other clients housed through vouchers. The PHA also provides risk mitigation/landlord partnership funds up to \$2,500 within the first 18 months of a rental agreement. Working in partnership, the CoC and County of Kern also earmarked HHAP 2 funds for case managers for rural communities in Kern County to better recruit landlords and locate permanent housing solutions for clients outside of Metro Bakersfield. The CoC sought and secured private funding through a local healthcare foundation to support case management specific to those on the elderly by name list to support identifying units across Kern County and served 58 elderly through that project.

The CoC is funding the development of a comprehensive communication strategy for landlords to ensure we are spreading a positive message about vouchers. Including the local PHA, IPAK, service providers and the primary legal services supporting landlord/tenant disputes, a working group has collaborated with a consultant in the creation of materials to help translate highly bureaucratic language into easily understood information for dissemination to new or current landlords and property owners. Nearing the final stages of development the materials will include a fact sheet, myths vs. facts sheet, rack card, new landlord website, and a brief (3-4 minute) film.

### **Leveraging Healthcare Resources**

The CoC engages in leveraging healthcare in a number of formal and informal ways including participation in a Healthcare and Homeless Pilot Initiative project with a number of local providers including Dignity Health, Kaiser Permanente, Adventist Health, Clinica Sierra Vista

and Kern Medical. The pilot initiative group established three goals, to streamline discharge services from hospital settings, develop a robust and integrated data infrastructure between healthcare and homeless service providers, and a regional recuperative care plan. In collaboration with four other communities including Tallahassee, Washington County, Sacramento and Anchorage, the CoC is also benefiting from technical assistance from the Institute for Healthcare Initiatives, Community Solutions, and the National Institute for Medical Recuperative Care (NIMRC).

The CoC includes healthcare, behavioral health and substance use partners in formal decision-making and ensure the healthcare vantage point is understood. A representative from Kern Behavioral Health and Recovery Services sits on the Governing Board and any number of healthcare partners participate in CES. Two medical care partners are users of HMIS including Clinica Sierra Vista and Adventist Health Hospital. An administrator from the largest local managed care plan serving over 250,000 members sits on the Strategic Action Steering Committee. Representatives from Adventist Health Hospital and Kaiser Permanente were also committee members for the non-conflicted ranking panel for the Unsheltered NOFO projects.

The CoC has a Standing Committee focused on Discharge Planning Services and fully supports the work of the committee members. There are a number of healthcare providers who participate on the committee and who regularly work closely with the emergency shelters, navigation centers and street outreach teams including Public Health, Kern Behavioral Health and Recovery Services, Good Samaritan Hospital and Bakersfield Recovery Services.

To continue to understand best practices and the intersection between healthcare and homelessness, the CoC funded and supported teams from the CoC and Clinica Sierra Vista (street medicine provider) to attend the Healthcare and Homelessness Conference in Seattle earlier this year. The CoC has also funded and supported opportunities to see other sites and community best practices, including a trip to Fullerton for a full day conversation with the Illumination Foundation and to visit recuperative care and PSH sites.

Managed Care Plans: The CoC most recently has worked closely with local managed care plans (Kern Health Systems and Healthnet) on the launch of CalAIM and to support applications to the HHIP (Healthcare for Homeless Incentive Program) to ensure that projects are in alignment with CoC priorities and fill existing gaps in resources. The CoC has hosted stakeholder forums, informational sessions, and has also attended regular meetings with the MCPS to help drive the work around healthcare and homelessness. To that end, CalAIM is anticipated to substantially support these projects through case management, housing navigation and six months of aftercare services to ensure a robust throughput to permanent housing solutions and stability for intensive service needs and elderly clients.

**Kern Behavioral Health and Recovery Services (KernBHRS):** KernBHRS is a major CoC partner, and as is further described below, is fully integrated in every step of the homeless to housing journey by providing outreach support, onsite services at navigation centers, and aftercare services for those placed into permanent supportive housing.

**Kern Medical:** Kern's public hospital and only advanced trauma care center between Fresno and Los Angeles, Kern Medical, has been a strong partner to the CoC. The former CEO of the Hospital Authority that oversees Kern Medical sits on the BKRHC Executive Board. Kern Medical was the operator for the temporary isolation units used for Covid isolation and

quarantine for those experiencing homelessness. In addition, they were the primary provider for Covid vaccines, allowing all navigation centers and shelters to host vaccination clinics the first day the tier opened for those experiencing homelessness. Their services are also co-located at both of Bakersfield's two navigation centers and their clinics are a regular source of healthcare for those experiencing severe service needs.

Kern Health Systems (the MCP for CalAIM), Kern Behavioral Health and Recovery Services and Kern Medical have shown a strong commitment to the CoC and are fully supportive of the projects proposed under the Unsheltered Special NOFO. Their commitments will allow a full spectrum of treatment options for severe service needs and elderly unsheltered individuals and families. Services will include:

- Medi-Cal plan enrollment
- Housing navigation, security deposit and sustaining services
- Treatment provided by physicians, psychiatrists and therapists
- Outpatient-based Medication Assisted Treatment (MAT)
- Counseling services
- Care Coordination
- Clinic-based full-scope primary care including preventive health, urgent care, chronic disease management, and women's health services
- Substance use engagement and referral support
- Substance use aftercare groups
- Substance use training and consultation

## Current Strategy to Identify, Shelter, and House Individuals and Families Experiencing Unsheltered Homelessness

**Introduction:** Currently there are four organizations providing street-level outreach to people experiencing unsheltered homelessness in Kern County.

- California Veterans Assistance Foundation (CVAF) who is primarily, but not solely focused on unsheltered veterans.
- Clinica Sierra Vista (Clinica) who is primarily focused on providing street medicine to unsheltered individuals who have immediate and chronic health care needs.
- *Kern Behavioral Health and Recovery Services (KernBHRS)* who is focused on reaching those who have severe behavioral health needs.
- Flood Bakersfield Ministries, Inc. (Flood) who is the primary street outreach provider in Kern County.

Community Action Partnership of Kern (CAPK) is the BKRHC Coordinated Entry System (CES) lead agency and they also manage the 2-1-1 system which is one of the main access points for people experiencing unsheltered homelessness. CAPK works closely with the street outreach service providers to help coordinate an efficient system-wide response.

Street outreach is intended to be a face-to-face interaction with people experiencing unsheltered homelessness for the purpose of providing immediate support, intervention, and connections with homeless assistance programs, behavioral health resources and/or mainstream social

services and housing programs. Providers in the BKRHC believe it is important to meet the client where they congregate or reside, develop relationships based on trust and honesty, and work with them in the field to end their cycle of homelessness.

The primary and ultimate goal of street outreach is to find affordable housing for each individual, with access to voluntary wraparound services needed to stay healthy and housed, including employment training, substance use treatment and mental health care.

While this is ideally accomplished quickly, street outreach often requires time and interactions with individuals experiencing unsheltered homelessness; therefore, street outreach should not be seen as one-time engagements. Rather, each interaction should be seen as an opportunity for outreach staff to build a relationship and help people work toward making a connection to housing and services.

Providers in the BKRHC believe the key to the success of outreach and engagement efforts is regular follow-up and building trust with individuals through regular interactions, including learning about the individuals' current social network and supports.

Initial Encounter. Street outreach in the BKRHC begins with an initial contact or "encounter." An encounter is a unique unduplicated contact with an unsheltered homeless individual or household. The goal of the initial contact is to build rapport, triage the individual's immediate needs, and make referrals to necessary services which might include (but not limited to) shelter placement, linkages to behavioral or physical health care providers, assistance with ID's or other vital documents, water and or snacks. If the individual is willing, a full assessment can be administered. The BKRHC currently uses the Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT). All street outreach service providers have been trained in administering the VI-SPDAT. This process is important as the more quickly a person is assessed the sooner they can be added to CES and matched to housing resources.

In the event an unsheltered person does not wish to engage with street outreach staff, teams are trained to respect client choice during the encounter. Street outreach teams are encouraged to make an offer of service again in the future using their professional discretion in determining the length of time between offers of service, but normally does not exceed seven (7) calendar days whenever possible and circumstantially appropriate for the individual. The follow up outreach attempt does not necessarily need to be completed by the same outreach staff that was involved in the initial encounter.

Ongoing engagement. If the client is open to engagement, but is not willing to agree to participate in the VI-SPDAT street outreach teams commit to continued engagement with the individual. Flood and other agencies have developed a less-lengthy intake form for which first-time clients usually agree to participate. This allows the street outreach team to enter the client into the agency's street outreach program and into the Homeless Management Information System (HMIS). This makes it possible for the various street outreach organizations to share information between agencies.

Ongoing engagement speaks of continued meaningful activities and/or services designed to build relationships with unsheltered homeless people to provide ongoing support, intervention, and connections with homeless assistance programs and/or mainstream social services and housing programs. This ongoing engagement involves several elements.

#### Direct Services

Street outreach providers are trained to either directly or through referral, offer an array of services that meet basic needs and help integrate/re-integrate clients into the community. These services may include basic needs, case management, transportation, and of course housing assistance.

### Basic Needs

The provision of goods to meet basic needs can be used to build rapport and to advance progress towards goals, including housing, but they are distributed with a "no strings attached" philosophy. These basic needs items can include:

- Hygiene products (toothbrushes, socks, soap, etc.)
- Small snacks and water
- Blankets and Cold weather clothing (hats, gloves, coats available during office hours)
- Seasonal supplies when available (sunscreen, bug spray, hand warmers, etc.)

## Case Management

In the context of street outreach, case management refers to the acts of supporting and navigating unsheltered clients through the process of moving from the street to stable housing. Clients that are being case managed are provided services in the following ways.

- Benefits enrollment (mainstream resources, connection to SOAR, etc.)
- Navigation of courts
- ID/Birth Certificate assistance
- Health referrals
- Treatment referrals
- Employment referrals
- Transportation to appointments
- Family Reunification
- Crisis Intervention
- Advocacy (hospitals, community, law enforcement, etc.)
- Housing Referrals

### **Transportation**

Street outreach staff provide transportation directly to unsheltered persons when a referral is made to an organization or service not within reasonable walking proximity. That transportation will most often be accomplished through the street outreach agency vehicle, but in some circumstances may include providing transportation, or accompanying the person as necessary, on public transit or private transportation like a taxi or Uber (as funding sources allow).

Prior to providing transportation to any unsheltered person in any circumstance, staff determines if it is appropriate to provide transportation based upon the individual's current state and safety considerations.

### **Current Strategy to Provide Immediate Access to Low Barrier Permanent Housing**

The CoC utilizes a Housing First Approach to provide immediate access to low barrier permanent housing for individuals and families experiencing unsheltered homelessness. All clients are assessed through the CES, and, based upon their specific needs and level of vulnerability, are provided resources/referrals to any housing options they may qualify for, both in and out of the BKRHC network. If a client is referred to a BKRHC housing program, street outreach workers make all efforts to facilitate a connection to that provider, and assist, as needed *throughout* the housing process. This means that street outreach workers are often asked to participate in problem solving and case conferencing, whenever necessary. The CoC is able to monitor system performance and outflow by activity type and the by name lists allow the CoC to collectively follow the effectiveness of street outreach strategies and make course corrections as needed.

## Linkages and Referrals

Street outreach workers are often the only people that individuals in crisis turn to when an emergency or special need arises. In the BKRHC, street outreach teams are encouraged to provide trust and safety to those on the streets by being consistent, reliable, and familiar faces in individuals' lives.

Street outreach workers are trained to leverage support and provide linkages and referrals to an array of services. Those linkages and referrals can include among others, behavioral health visits, medical health services, and shelter placement.

### Linkages and Referrals to Behavioral Health Services

The goal of street outreach staff is to increase people experiencing homelessness' ability to access behavioral health services as appropriate. This means street outreach staff proactively divert people experiencing homelessness away from the criminal justice system and into treatment as appropriate. Street outreach staff are trained to provide trauma screening and to make linkages and referrals to trauma-informed services as well.

Additionally, street outreach staff are trained to assess and link people experiencing homelessness that are in crisis, including those who may be a suicidal risk. Staff know how to respond to each individual in crisis depending on the perceived severity of the crisis. In every crisis situation, staff utilize the following process.

- Assess for safety and try to resolve the crisis onsite,
- Assist the individual in accessing KernBHRS services,
- Contact KernBHRS Homeless Adult Team (HAT) for consultation,
- Request a Crisis Intervention Team (CIT), or Relational Outreach Engagement Moel (ROEM) Team
- If necessary, call 9-1-1.

### Linkages and Referrals to Medical Services

Generally, street outreach staff work in partnership with local hospitals and CalAIM health care providers (formerly Kern Medical's Whole Person Care) program to ensure that individuals with an identified physical need are connected to medical services.

In addition, the work of Clinica Sierra Vista's Street Medicine Team seeks out unsheltered homeless individuals that need medical attention. Along with a team of support staff and volunteers, Dr. Matthew Beare and the Street Medicine Team provide medical services that include but are not limited to:

- Vaccines
- HIV Testing
- Medication
- Harm Reduction Supplies
- Food/Water
- Harm Reduction Supplies and Education

For the last 3 years, Dr. Beare and his team have focused their efforts to serve the vulnerable and underserved communities, delivering the very extraordinary service of Street Medicine to the homeless individuals throughout Kern County.

Through heavy rain, dense fog, freezing temperatures and the valley soaring heatwaves Dr. Beare and his team never fail to meet with "Street Patients" each week delivering

- Diagnostic results and follow up care
- Referrals for specialty providers; Therapist, Substance Use Counselors, and Infectious Disease.
- Warm Handoffs to the organizations dental and optometry providers
- Vital patient forms; Disability, SSI, Pre-Op
- Transportation opportunities to area shelters and hospitals.

# **Current Strategy to Provide Immediate Access to Low-Barrier Shelter and Temporary Housing for Individuals and Families Experiencing Unsheltered Homelessness**

In Kern County, Flood is the primary referring agency for all four Emergency Shelters in metro Bakersfield. These shelters include the Bakersfield Homelessness Center with its focus on families and single women, and the Mission at Kern County. Both have added forty additional beds in the last year. Additionally, in the last year two new low-barrier Navigation Centers have opened, adding another 300 beds to the community, the M Street Navigation Center and the Brundage Lane Navigation Center. These "shelters" were created to address the barriers that many people experiencing unsheltered homelessness face: partners, pets, and possessions. In addition, CVAF has repurposed scattered site units as emergency shelter targeting unsheltered Veterans, transitional age youth and elderly. Two new day navigation centers have opened this year in rural communities as well. Providing meals, case management and extensive wrap around services ranging from showers to dental care, these centers in Arvin and Delano are helping to meet a significant need in rural communities. Taken together, these new resources have added extra opportunities for the BKRHC to provide options to the unsheltered in Kern County. With these new resources, the 2022 PIT Count was the first time where Bakersfield/Kern had a higher number of those sheltered than unsheltered.

Street outreach teams work closely with the various shelters to identify openings each day, and Flood works through the waiting list to identify those with the most severe needs for placement in the open shelter beds.

### Coordination and Collaboration

The BKRHC street outreach teams work closely with local law-enforcement, code-enforcement, and the local park ranger programs to ensure that all engagements with unsheltered homeless individuals are approached with care and concern. Flood street outreach teams generally accompany City and County code-enforcement teams to encampments with the engagement process mentioned above.

In addition, Flood provides ongoing training to local law-enforcement, code enforcement and park rangers to ensure that all interactions with people experiencing homelessness are engagement not enforcement focused.

Flood also coordinates with KernBHRS Homeless Adult Teams (HAT) and Relational Outreach Engagement Model (ROEM) teams to link those who have been identified with severe behavioral health needs. This is accomplished through a warm hand-off process that ensures that clients continue to receive services and attention while they are transitioned to new case managers. These clients are discussed on a case-conferencing call that occurs weekly on Friday afternoons. Each ROEM unit has an embedded psychologist within the team and Releases of Information (ROIs) are signed by clients in order to protect client information and data sharing between Flood outreach teams and KernBHRS teams.

BKRHC street outreach providers meet every other month as a working group to assess outreach efforts in the community, discuss challenges, share best practices, review data, and coordinate services. These meetings are led by Flood and are a part of the larger CES Committee.

Performance outcomes are address at the Planning & Performance Committee meetings where the outcomes for agencies providing street outreach are reviewed and addressed as needed.

Through the partnership with KernBHRS a Street Outreach Referral Line has bee established so that members of the community can refer people experiencing homelessness to Flood for follow-up. The referral line is monitored Monday through Friday from 8:00 AM to 5:00 PM. Callers are able to leave messages on weekends and Flood staff respond at the open of business each Monday.

Anyone experiencing homelessness can call 2-1-1. 2-1-1 is an information and referral resource that is available 24 hours a day, seven days a week, 365 days a year. 2-1-1 navigators are trained to do assessments and offer referrals to people experiencing homelessness to an array of homeless service provider resources. 2-1-1 is operated by CAPK and CAPK serves as the lead for the BKRHC's CES.

When an individual is assessed by a 2-1-1 navigator a referral is sent to Flood or other street outreach teams to provide support and engagement services to the individual or family. Upon engagement street outreach teams verify homelessness, offer shelter placement, and other needed services.

Working closely with CES staff, street outreach teams seek to ensure that unsheltered person(s) are added to the appropriate CES By-Name List working with the client to complete all

necessary documentation. These By-Name lists are reviewed regularly and outreach staff participate in case conferencing in order to ensure that those with the highest vulnerabilities and severest needs are prioritized for stable housing.

When an unsheltered person has been identified as a match for a vacancy through CES, street outreach staff are asked to assist in locating the individual as well as organizing and arranging transportation and connection to the housing opportunity.

## **Data Collection & Confidentiality**

Street outreach staff are trained to receive explicit consent from any unsheltered person prior to enrolling them as a participant in outreach services and then document the consent. Outreach staff are also responsible for maintaining records of consent to receive service, as well as any consents pertaining to the release and sharing of personal information. Finally, street outreach staff are responsible for ensuring HMIS consent is in place prior to entering data into HMIS, as per HMIS training.

Some unsheltered individuals encountered will not be cognitively well enough to provide consent. In those rare instances, street outreach staff are trained to work with allied professionals to have a capacity assessment completed on the person to determine their legal ability to provide consent for themselves.

### Geographic & Frequency of Coverage

Outreach is an extensive countywide effort, covering different geography and climates, including rural, mountains, desert, and the Bakersfield area. Flood has 8 full-time, 2-person street outreach teams who cover all geographic areas of the County. The California Veteran's Assistance Foundation has one street outreach worker who engages veterans experiencing homelessness in Bakersfield and rural areas. Clinica Sierra Vista street medicine focus on the Kern River and downtown areas, and KernBHRS ROEM teams are currently focused on the densest areas of homelessness in the County, namely Oildale and downtown.

Generally, street outreach occurs seven days a week. The metro Bakersfield area is covered Monday through Friday from 6:00 AM to 6:00 PM and from 7:00 AM to 4:00 PM on Saturdays and Sundays. For the outlying and rural areas of the County, street outreach teams follow a monthly schedule that allows coverage for all 8,200 square miles and all geographic areas of the County on a regular and ongoing basis.

Outreach funding includes federal ESG and VA, and state HEAP, CESH, and MHSA dollars.

### Professional Ethics & Training

The overriding philosophy of street outreach efforts in the BKRHC is to treat others, as you would want to be treated. At the very least, do no harm. This applies not only to how street outreach teams interact with those experiencing homelessness, but also with coworkers, supervisors, administrators, other agency staff, policy-makers, and so forth. With unsheltered individuals and families, providers are expected to consistently provide competent, compassionate care in whatever forms that may take.

All BKRHC street outreach workers are trained to utilize a person-centered approach, focused on the individual's strengths and resources. This means that staff are taught to never makes

assumptions about what a person might need or want. Street outreach staff receive regular training in evidence-based practices and seek to be proficient in utilizing such practices.

Street outreach staff training is designed to cover the following areas:

- Cultural Competency
- Trauma-Informed Care
- Harm Reduction
- Mental Health First-Aid
- VI-SPDAT and other Assessment Tools
- Behavioral Health and Social Services Provided by the County of Kern
- Homeless Services Provided by Members of the Bakersfield-Kern Regional Homeless Collaborative
- Documentation and Case-Noting in HMIS
- Privacy & Confidentiality
- Telehealth

### Lived Experience

Currently about 30% of Flood's staff have lived experience. Nearly all have experienced one or more episodes of unsheltered homelessness. Many of them became Flood clients before they were hired as staff. Other street outreach agencies also seek to hire people with lived experience. This has been a point of emphasis within the CoC. All staff whether they have lived experience or not are compensated equally.

## Strategy to Identify, Shelter and House Individuals Experiencing Unsheltered Homelessness with Data and Performance

The CoC is committed to data informed decision making and has implemented a number of measures to ensure strategies are focused on data and performance. Data and performance is at the heart of the CoC and multiple Standing Committees engage in performance based conversation to ensure that strategies are implemented with fidelity to best practices and to ensure feedback loops provide opportunities for adjustment and correction. At the individual and sub-population based level, CES Committee, Built for Zero Committee, BNL leads (including intensive services and elderly) and case conferencing all produce monthly or sometimes weekly data and performance reports that allow for tracking of throughput in the system. The Planning and Performance Committee meets monthly, looking at system performance and data by activity type. The DEI committee reviews data related to marginalized communities. The HMIS Data Quality Committee reviews data quality to ensure that decisions are able to be made on the basis of sound information contained in the system. The Independent Review Panel reviews HUD and ESG based projects and provides feedback to Planning and Performance Committee. All of these committees report monthly or quarterly to the Governing Board. The Executive Board receives an item for discussion on a quarterly basis related to system performance.

This year the CoC sought to ensure services were provided equitably to maximize access and throughput with a focus on intensive service needs, BIPOC and other marginalized groups by

completing a CES SWOT Analysis with consultants from Homebase. The CoC also completed a landscape analysis for the entire system. This work resulted in the Executive Board approving the establishment of outcomes specific to system performance milestones to be met by 2024.

Results from both the SWOT analysis and landscape analysis have prompted a number of changes the CoC is currently implementing. While the CES as a whole is set up and functioning smoothly and was found to be responsive when things are not working well and adapting accordingly, CES is currently creating additional points of access, additional location-based outreach strategies, increasing outreach to rural areas and providing additional behavioral health training. Policy and procedures manuals are being adapted to make them more user friendly and a year long training series called "CoC University" has been formalized.

## Identify and Prioritize Households Experiencing or with Histories of Unsheltered Homelessness

The CoC maintains a functioning HMIS and CES which are repositories of data regarding individuals and families who have been enrolled in programs or assessed through street outreach through the CES. The CoC adheres to data-driven decisions to reduce unsheltered homelessness including the use of by name lists for severe service needs and elderly sub-populations. In addition to the recently completed CES SWOT Analysis, the by name list process uniquely allows the CoC to quickly identify and provide street outreach services and permanent housing. Through CES and monthly tracking of BNLs, changes in individual level inflow and outflow is coordinated on a weekly, if not monthy, basis. Changes to the CES policies and procedures to further enhance throughput in the system are in progress, including increasing access points to aid in identification, assessment and program eligibility processes taking place as early as possible. There has been considerable expansion in coordination between CES, street outreach, street medicine, and behavioral health and recovery services which has increased access to identification of housing, housing navigation services and access to healthcare and other supportive services in the last two years. Providing safe camping and parking locations which opened this summer are additional steps the CoC, in coordination with the county, has taken to increase access and provide housing navigation services. The CoC has made significant efforts to align data sources from PIT, CES, HMIS, HIC and Street Outreach to maximize identification and provision of street outreach services.

### Involving Individuals with Lived Experience of Homelessness in Decision Making

The CoC values the voices of those with lived experience of homelessness and regularly seeks those voices in the decision-making process. The CoC has two seats on the Governing Board dedicated to those with lived experience, one specifically focused on youth. The CoC also has two standing committees, the Lived Experience Advisory Board and the Youth Advisory Board, comprised of those with lived experience who regularly present to other committees and agenda items are brought to those committees for discussion regarding upcoming action items for the Governing Board. The CoC engages in the best practice of providing financial support to participants in recognition of the expertise they bring. The CoC regularly uses surveys and focus groups to ensure those voices are heard on specific topics as they arise and as a regular feedback

loop for the Coordinated Entry System. For example, as the first recuperative care facility in the region was under development, the CoC sought the insight of those with lived experience to better understand what would help the new facility to be a place of healing and restoration. The recently completed CES SWOT Analysis heavily focused on the voices of those with lived experience and those findings are currently in the implementation stage. The LEAB itself is currently developing a survey to be given annually as well.

# **Supporting Underserved Communities and Supporting Equitable Community Development**

The CoC has a number of mechanisms to ensure it is regularly focusing on underserved communities in our geographic area and offering equitable housing interventions to address their needs. Two years ago the Governing Board went through a process to review its charter and determined equitable community development could be best generated by ensuring additional seats at the table. At that time, the Governing Board expanded to include five at-large positions, with the goal of including entities such as the Hispanic and Black Chambers of Commerce and other individuals or organizations focused on underserved communities. To ensure the CoC uses a data driven approach, a recently completed landscape analysis and CES SWOT analysis were finalized earlier this year and both heavily emphasized data analysis of equity factors and variables.

The CoC has already begun work to address several areas including resource deployment in rural communities. To that end, the CoC has worked with the county to use HHAP (state) funds to open two new navigation centers, one in Delano and one in Arvin, and case managers specifically dedicated to rural communities to focus both on access on the front end and leverage housing opportunities. The CoC has actively worked with the CES provider to facilitate additional access points and already has three family resource centers in East and South Kern who will be providing office space for CES teams to conduct intake and assessments of clients.

Working with the Diversity, Equity and Inclusion Committee, the CoC has developed three goals to focus on equitable access to interventions. The CoC and the DEI committee spent a number of months earlier this year working with state provided consultants on developing these foundational goals. Those goals include making available a language line for all service providers, committing to reviewing equity data on a quarterly basis at the Governing Board and Executive Board levels, and providing cultural humility, consciousness, and bias training for all levels of partner agencies from line staff to administration. Since then, a training working group has been established and the "CoC University" which heavily emphasizes equity-based training has been formally adopted.