

## Before Starting the CoC Application

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

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

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

1. The FY 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2021 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It  
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

### Answering Multi-Part Narrative Questions

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

### Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.

- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

## 1A. Continuum of Care (CoC) Identification

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

**1A-1. CoC Name and Number:** GU-500 - Guam CoC

**1A-2. Collaborative Applicant Name:** Government of Guam/Guam Housing & Urban Renewal Authority

**1A-3. CoC Designation:** CA

**1A-4. HMIS Lead:** The Salvation Army Guam Corps

## 1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

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<b>1B-1.</b>	<b>Inclusive Structure and Participation–Participation in Coordinated Entry.</b>	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p.	

In the chart below for the period from May 1, 2020 to April 30, 2021:

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)	No	No	No
2.	Agencies serving survivors of human trafficking	Yes	Yes	No
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	CoC-Funded Victim Service Providers	Yes	Yes	Yes
5.	CoC-Funded Youth Homeless Organizations	Yes	Yes	Yes
6.	Disability Advocates	Yes	Yes	No
7.	Disability Service Organizations	Yes	Yes	Yes
8.	Domestic Violence Advocates	Yes	Yes	Yes
9.	EMS/Crisis Response Team(s)	No	No	No
10.	Homeless or Formerly Homeless Persons	Yes	Yes	No
11.	Hospital(s)	Yes	Yes	No
12.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
13.	Law Enforcement	No	No	No
14.	Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	No	No
15.	LGBT 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	No	No
20.	Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
21.	Non-CoC-Funded Victim Service Providers	Yes	Yes	Yes
22.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Nonexistent	No	No
23.	Organizations led by and serving LGBT persons	Yes	No	No
24.	Organizations led by and serving people with disabilities	Yes	Yes	No
25.	Other homeless subpopulation advocates	Yes	Yes	No
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	No
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.	Faith Based Organizations	Yes	Yes	No
34.	Office of Homelessness and Poverty Prevention	Yes	Yes	No

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

	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, persons with disabilities).

**(limit 2,000 characters)**

1. The CoC has an ongoing recruitment for membership and encourage attendees who show interest during meetings or participated in outreaches. Application forms are provided to those who have attended several meetings, understand membership requirements, and are able to fulfill the time commitment. Interested parties submit their application forms via the CoC's website which launched in June 2021. The CoC also solicit membership via media such as radio, television, or newspaper interviews. Existing members are encouraged to recruit volunteers and members. The CoC has recruited four government agencies: the Office of the Lieutenant Governor of Guam, the Office of Homelessness Assistance and Poverty Prevention, Department of Youth Affairs and the Guam Memorial Hospital Authority. The CoC currently has 27 member organizations.
2. The CoC accommodates requests for information in accessible formats such as enabling closed captioning during virtual meetings. Audio or written recordings of meetings are available.
3. The CoC Board includes one member who is a representative of historically underserved populations which includes homeless or formerly homeless

persons who is formally homeless and a veteran. Recruitment is continuous and ongoing.

4. Guam is a U.S. Island territory in Micronesia, in the Western Pacific. The minorities comprise Asians, citizens of neighboring islands in Micronesia. The CoC membership includes the Korean Shelter that serves the Korean community; the Micronesian Resource Center One Stop Shop that provides services to members of the Freely Associated States of Micronesia; the Dept. of Integrated Services for Individuals with Disabilities and Guma Mami that serves individuals with disabilities; the Guam Behavioral Health and Wellness Center that serves individuals with mental health and substance abuse issues; and the Guam Legal Services Corporation Disability Law Center that provides legal assistance to individuals with disabilities and victims of violence.

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

Describe in the field below how your CoC:

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

**(limit 2,000 characters)**

1. The CoC continues to maintain an open-door strategy and proactively encourages and welcomes input from the public and diverse stakeholders to address homeless prevention and re-housing efforts. Weekly strategic planning discussions are held with partners and community to discuss challenges to address barriers to housing and in general, brainstorming solutions ‘outside the box’ for new resources and maximize existing resources, and actively engage new stakeholders in the development of new business processes. The CoC is organized into several sub-committees (Advocacy, Education and Awareness, Information Technology, Strategic Planning, and Review and Ranking) which allow members and the public to contribute in their areas of interest and expertise in the planning and implementation of services.
2. The CoC holds monthly general membership meetings that are open to the public. The meetings are announced via social media, and email. Members are encouraged to invite guests to provide input or share new perspectives, or provide assistance to the CoC. The format for the meetings includes planning, information sharing, program updates, and announcements. Virtual meetings have been held due to COVID-19 restrictions but have resulted in more individuals attending the monthly meetings and increased input/information from attendees.
3. Information gathered at meetings or other CoC events is incorporated in to the CoC planning activities. The outcomes have resulted in point-to-point free transit services with dedicated bus IDs and coordination of transportation scheduling, and a dedicated process for issuance of Government of Guam picture identification cards. The CoC has collaborated with new non-member groups and individuals for community events and program activities, including realty groups, small business owners and corporate groups. Non-member organizations contribute their expertise in educational services, housing,

employment, health and mental health care, and other areas relating to homelessness.

<b>1B-4.</b>	<b>Public Notification for Proposals from Organizations Not Previously Funded.</b>	
	NOFO Section VII.B.1.a.(4)	

<b>Describe in the field below how your CoC notified the public:</b>	
<b>1.</b>	<b>that your CoC’s local competition was open and accepting project applications;</b>
<b>2.</b>	<b>that your CoC will consider project applications from organizations that have not previously received CoC Program funding;</b>
<b>3.</b>	<b>about how project applicants must submit their project applications;</b>
<b>4.</b>	<b>about how your CoC would determine which project applications it would submit to HUD for funding; and</b>
<b>5.</b>	<b>how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.</b>

**(limit 2,000 characters)**

1. The CoC applied standard procedures of notifying the public of the CoC NOFO & open to accept new and renewal project applications by posting a press release on CoC website, discussions in Strategic Planning Committee, CoC meetings, and via email. The CoC also broaden its efforts to notify the public and members not previously funded by reaching out to them via meetings, sharing information, and encouraging them to apply. The notices included information on available funds, important dates, and offered technical assistance.
2. The Review and Ranking Committee (RRC) rates and evaluates each application to determine which programs will be included in the Competition process. RRC adheres to an evaluation tool that address CoC’s priorities. The Committee comprises members who do not receive CoC funding.
3. The CoC published a press release on how project applicants can submit their project applications and submission deadlines. Agencies who had never applied before were encouraged to submit an abstract and if proposal is feasible, they were assisted to register in esnaps to work on their specific project application. CoC contact information was given if there were questions and the CoC Lead offered to provide technical assistance for all applicants.
4. The Review and Ranking Committee reviewed, evaluated & ranked new and renewal project applications based on performance, number of persons served including timely expenditures and submissions of required reports. The projects that met the criteria are included in the Priority Listing and will submit to HUD for funding.
5. The CoC includes representatives from organizations representing individuals with disabilities, who share information on the RFT to their stakeholders. The CoC accommodates effectively communication with individuals with disabilities by providing electronic copies of the notice and information, and posting it on the GHC website that features accessibility tools.

## 1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

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

In the chart below:

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with 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	No
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)	Nonexistent
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	Nonexistent
12.	Organizations led by and serving LGBT persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	No
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.	Guam Interagency Council on Homelessness	Yes
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section VII.B.1.b.	

Describe in the field below how your CoC:

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

**(limit 2,000 characters)**

1. The PHA is the Grantee and Collaborative Applicant of the CoC. GHURA also is the recipient of entitlement funds including ESG and ESG CV funds. The PHA works closely with the CoC to determine other organizations aside from the current subrecipient that has the ability to administer the ESG CV funds. These organizations were selected based on performance with recommendations from the CoC. Allocations of funds were determined depending on the number of staff and capability and capacity of the organization. The CoC provided data, gaps in services and population to prioritize for effective use of resources. 2. The PHA staff has the oversight for both CoC and ESG funded programs. The staff collaborate with HMIS lead in the evaluation, plus ensuring projects are set up properly & staff are inputting program participants information properly, validating & uploading the CSV report for CAPER and ESG CV into SAGE for quarterly reporting. Staff provide technical assistance to all subrecipients to ensure data quality and prepare the report in SAGE. Staff also work with DV service providers and HMIS lead which administers the comparable database. All reporting requirements are performed by the staff who coordinate with HUD TA providers for trainings and technical assistance. 3. The CoC's HMIS lead work with shelter and service providers to verify HIC data to ensure accuracy. The data is then shared with the Consolidated Plan jurisdiction and other entities that may use the data and also posted in the PHA and CoC's website. 4. The CoC and ESG staff are in the same unit of the PHA that prepare the Consolidated Plan and Action Plan including CAPER. Thus, collaboration is seamless because staff ensure that homelessness is addressed and information provided are accurate. Staff also participate in public hearings and encourage subrecipients to attend and provide inputs. All communications are done via online platforms.

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

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



1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.	No
6.	Other. (limit 150 characters)	

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, Local Liaisons & State Coordinators.	
	NOFO Section VII.B.1.d.	

Describe in the field below:

1.	how your CoC collaborates with youth education providers;
2.	your CoC's formal partnerships with youth education providers;
3.	how your CoC collaborates with State Education Agency (SEA) and Local Education Agency (LEA);
4.	your CoC's formal partnerships with SEAs and LEAs;
5.	how your CoC collaborates with school districts; and
6.	your CoC's formal partnerships with school districts.

**(limit 2,000 characters)**

1. The CoC trains on educational rights under McKinney-Vento & trauma-informed care. Participants include administrators of all public & private schools; faculty & staff of preschool programs, middle & high schools, & Guam's only public secondary alternative school for at-risk students who are in danger of dropping out of school & who have been expelled or suspended for major offenses at public middle & high schools.
2. The GDOE Head Start representative is a Board member of the CoC and provides support and information on homeless school-age children as requested by both the CoC and GDOE.
3. GDOE is both the SEA & LEA and collaborates with the CoC to identify & support homeless students in all public elementary, middle, high, & secondary alternative schools. As GDOE looked to support virtual learning during the pandemic, community learning centers were created in designated schools including all those near homeless shelters. Additional computer labs were setup at homeless shelters where needed. GDOE provided food commodities to augment CoC outreaches & food distribution through CoC recipients.
4. The bylaws of GDOE advisory groups specify a representative for homeless students. Thus, a CoC member sits on both the Guam Advisory Panel for Students with Disabilities & the Guam Interagency Coordinating Council for Early Intervention Services to Young Children.
5. GDOE is a single public-school district & supports homeless students identified by the CoC or teachers to minimize disruption in education when they transfer to other schools. CoC membership includes a GDOE Head Start staff member who obtains additional assistance as needed from other GDOE divisions that assist at-risk students & their families. These GDOE entities work to address issues faced by identified homeless students in enrolling, attending

& succeeding in school.

6. See response to #4 as GDOE is a single public-school district that serves as both SEA & LEA.

1C-4a.	CoC Collaboration Related to Children and Youth–Educational Services–Informing Individuals and Families Experiencing Homelessness about Eligibility.	
	NOFO Section VII.B.1.d.	

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

**(limit 2,000 characters)**

GDOE is the grantee for the Guam Head Start Program whose Social Service Supervisor is an active CoC member. Staff provides information, brochures, and posters on the educational rights of homeless children from the National Center for Homeless Education to GDOE schools and CoC programs. This information is available to program participants under CoC and shelters. As part of the intake process, referrals are made to GDOE as needed. The Head Start representative on the CoC then obtains the assistance of other GDOE divisions to support the education of homeless students, specifically GDOE Student Support Services Division (SSSD) and the GDOE Student Parent Community Engagement (SPCE) Project, which assists at-risk students and their families. Head Start, SSSD, and SPCE work collaboratively to ensure that the issues faced by any identified homeless children in enrolling, attending and succeeding in school, are addressed and resolved.

In addition, various GDOE divisions participate in the CoC's annual homeless community outreaches to provide information services, conduct intake, and make referrals as needed to support the learning of homeless students.

1C-4b.	CoC Collaboration Related to Children and Youth–Educational Services–Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section VII.B.1.d.	

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

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

9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Annual Training—Best Practices.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC coordinates to provide training for:

- |    |  |
|----|--|
| 1. | Project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and |
| 2. | Coordinated Entry staff that addresses safety and best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).       |

**(limit 2,000 characters)**

1 & 2) During the quarterly Guam Homeless Coalition meetings, the CoC coordinates training for project staff and coordinated entry staff that address safety and best practices by providing information on trauma informed care, victim centered care, safety planning protocols and other best practices for servicing survivors of domestic violence/family violence and sexual assault. There is also opportunity for more in-depth free quarterly online training from the Guam Coalition Against Sexual Assault and Family Violence on various topics that directly support victim-survivors of domestic violence and sexual assault. In addition, government agencies and other non-profit organizations on Guam such as the Guam Behavioral Health & Wellness Center, the Office of the Attorney General Crimes Victim Division, and Victim Advocate Reaching out (VARO) host trainings on privacy and confidentiality rights of victim-survivors, mental health and trauma-informed best practices, and advocacy trainings. Recent trainings have covered confidentiality, but in the past have also covered trauma informed care, the basics of domestic/family violence and sexual assault, community resources, cultural consideration when serving victims, etc. These trainings are usually either two or four half day trainings featuring both on-island and off-island presenters. The CoC disseminates information regarding these training opportunities and individual organizations may require that their project staff attend.

1C-5a.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Using De-identified Aggregate Data.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking survivors.

**(limit 2,000 characters)**

Statistical data is collected from three DV service providers, and qualitative data is gathered primarily from monthly homeless outreaches, the women's shelter, and from victim-survivors in emergency housing and includes information such as protective/restraining orders, custody issues, child support and alimony,

natural supports and where survivors exit after discharge. The information is used to address gaps within their respective programs and collectively by all providers as part of the CoC strategic planning process to determine vulnerable populations with greatest need. Review of data reflect that survivor, particularly survivors of sexual assault, are requiring longer stays at the women's shelter due to their traumatic experience and challenges to accessing community resources that support financial independence. Individual and counseling sessions are available if a survivor chooses to engage in such services. Since the onset of the COVID-19 pandemic, there has been an island-wide decrease in available in-person counseling specific to addressing domestic violence and sexual violence trauma. With the island transitioning back to social normalcy and the reopening of public spaces and decreased government social distancing restrictions, there has been a steady upsurge of victim-survivors seeking emergency shelter from December 2020 through October 2021. Additionally, the greatest need for longer option stable housing is for individuals and families from the Federally Associated States, primarily due to long term unemployment associated with not having a high school diploma and a driver's license. Housing for this group generally includes mom and children and requires intensive case management due to multiple issues associated with challenges to attain sustainable resources. De-identified aggregate data is shared among the CoC and has increased communication, leading to early detection of victim-survivors housing and other mental health needs.

1C-5b.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Coordinated Assessment–Safety, Planning, and Confidentiality Protocols.	
NOFO Section VII.B.1.e.		

Describe in the field below how your CoC's coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:

1.	prioritize safety;
2.	use emergency transfer plan; and
3.	ensure confidentiality.

**(limit 2,000 characters)**

1. The CoC provides shelter and supportive services for DV victim-survivors through programs that use designated transfer sites, notification of consumer rights, and explanations of potential risks when entering housing programs are all addressed upon initial contact and intake. The CoC also works with consumers on healing trauma, self-determination, and safety. Social Workers and consumers develop realistic safety plans that include members of their household. Safety plans are updated to reflect present circumstances and progress in completing personal goals, and are adjusted prior to discharge from the program and incorporates community and family support identified by consumers. Six months of continued care services, such as intensive case management, such as safety planning, educational assistance, advocacy, transportation, and referrals to counseling and other mental health and health enriching programs, are provided.
2. If victim-survivors reasonably believe that there is a threat of imminent harm from further violence if they were to remain in the same dwelling unit, CoC members work together to provide emergency shelter so they can transfer from their current unit to a location unknown to the perpetrator.
3. The CoC uses a separate HMIS database specific for data entry. Data

entered is private and cannot be viewed by participating partners; however, demographic information allows users to analyze the total number of households that were provided housing services without breach of identifying information. Additionally, Catholic Social Service and VARO coordinate efforts from the time that contact is made with a victim-survivor via their 24-hour crisis hotlines, community outreaches, or referrals from other agencies. Confidentiality disclosures are introduced to consumers at the time of intake. All consumers are placed in shelters that are undisclosed to the community, and designated transfer sites are utilized to maintain victim and staff safety.

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

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

1C-7.	Public Housing Agencies within Your CoC’s Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy. You Must Upload an Attachment(s) to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.g.	

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at <https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf> or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC’s geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2020 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Guam Housing & Urban Renewal Authority		Yes-Both	No

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

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

Describe in the field below:

1.	steps your CoC has taken, with the two largest PHAs within your CoC’s geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or
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2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.
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**(limit 2,000 characters)**

1. Guam has only one PHA which is GHURA. The PHA prioritizes applicants experiencing homelessness with the Emergency Housing Voucher (EHV) Program made available through the American Rescue Plan Act. Through EHV Program, the PHA works closely with the CoC to distribute housing choice vouchers to assist individuals and families who are homeless, at-risk of homelessness, fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking, or were recently homeless or have a high risk of housing instability. The CoC followed up with the PHA on the letter that was submitted by the Guam Homeless Coalition recommending the adoption of a Homeless Admission Preference policy. The PHA advised the CoC that such policy may be considered in future revisions of the Admissions and Continued Occupancy Policy.

2. Although there are no local preference points for unsheltered homeless persons at this time, the PHA's Public Housing Admissions and Continued Occupancy Policy provides local preference points for applicants who are homeless because their unit is rendered uninhabitable by a fire or other natural disaster within the 30-day period immediately prior to application, or because their unit has been condemned and the court has ordered the unit to be vacated; and families who are homeless or about to be homeless because their unit has been condemned and the municipality has ordered the unit to be vacated. The PHA tracks new admissions who were experiencing homelessness at entry in the Family Reports for New Admissions Certifications.

<b>1C-7b.</b>	<b>Moving On Strategy with Affordable Housing Providers.</b>	
	Not Scored—For Information Only	

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

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

<b>1C-7c.</b>	<b>Including PHA-Funded Units in Your CoC's Coordinated Entry System.</b>	
	NOFO Section VII.B.1.g.	

Does your CoC include PHA-funded units in the CoC's coordinated entry process?	Yes
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1C-7c.1.	<b>Method for Including PHA-Funded Units in Your CoC’s Coordinated Entry System.</b>	
	NOFO Section VII.B.1.g.	
	If you selected yes in question 1C-7c., describe in the field below:	
1.	how your CoC includes the units in its Coordinated Entry process; and	
2.	whether your CoC’s practices are formalized in written agreements with the PHA, e.g., MOUs.	

**(limit 2,000 characters)**

1.The PHA is the recipient of 87 Emergency Housing Vouchers (EHV). The EHV Program provides assistance to individuals and families who are experiencing homelessness, at risk of homelessness, fleeing or attempting to flee domestic violence or a disastrous event, victims of domestic violence, dating violence, sexual assault, stalking, human trafficking or have recently become homeless. The CoC/GHC ensures all EHV eligible individuals and families are screened and entered into the Coordinated Entry System, with the exception of those fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking or human trafficking that are entered on a comparable database. The CoC also assesses and refers individuals and families to the EHV Program via the Coordinated Entry System, and attends EHV participant appointments/briefings as needed. In addition, the CoC’s participating service providers actively informed and supported the Coordinated Entry System to build EHV waitlist referral process, and continue to ensure EHV referral and service engagement from providers serving special needs populations, refer eligible individuals and families for assessment using the Coordinated Entry System, support landlord outreach and recruitment to ensure an adequate pool of rental units are available for individuals and families.

2.The PHA and the Guam Homeless Coalition (GHC), Guam’s Continuum of Care, entered into a Memorandum of Understanding (MOU) to delineate the specific roles and responsibilities between the PHA and the GHC for efficient and successful administration and leasing of Emergency Housing Vouchers to individuals and families to prevent or help improve their homeless situation or prevent high risk of housing instability. The MOU includes information on measurements of success, lead liaisons, target population, services to be provided to eligible EHV families, roles and responsibilities, and program evaluation.

1C-7d.	<b>Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.</b>	
	NOFO Section VII.B.1.g.	

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?	Yes
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1C-7d.1.	<b>CoC and PHA Joint Application–Experience–Benefits.</b>	
	NOFO Section VII.B.1.g.	
	If you selected yes to question 1C-7d, describe in the field below:	
1.	the type of joint project applied for;	
2.	whether the application was approved; and	

3. how your CoC and families experiencing homelessness benefited from the coordination.

**(limit 2,000 characters)**

1. The CoC coordinated with the PHA to submit a joint application for additional housing vouchers was during the application process for the FY 2019 Mainstream Voucher Program and has been in operations.
2. The application was approved on November 1, 2018.
3. The CoC and families experiencing homelessness benefited from the coordination. As the Collaborative Applicant for the CoC program, the PHA regularly consults with program partners to determine the best use of HUD funds in serving homeless individuals with disabilities. The PHA works closely with CoC subrecipients to ensure that various social service agencies provide support services for clients experiencing various types of disabilities, including mental illness and substance abuse. The PHA routinely conducts desk audits and ongoing site monitoring of program partners, which benefits the CoC as it ensures program and regulatory compliance. As members of the CoC's Guam Homeless Coalition, partner agencies track and monitor program participants of supportive housing services and adhere to the Coordinated Entry System, which allows for more efficient placement of homeless individuals and families as intake workers utilize a shared database to conduct assessments on individuals and identify appropriate services. Moreover, the types of voluntary services offered to clients include the following: outreach and assessment for persons with disabilities applying for its programs, case management, disability determination service, health planning, vocational rehabilitation training, job placement services, transportation to supportive services, assistance in filling out and submitting forms, obtaining documentation of homelessness, assistance in locating rental housing units that meet their needs, and assessment for eligibility to participate in mainstream programs.

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers.	
	NOFO Section VII.B.1.g.	

Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program–List of PHAs with MOUs.	
	Not Scored–For Information Only	

Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

<b>PHA</b>
Guam Housing and ...



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

**Name of PHA:** Guam Housing and Urban Renewal Authority

## 1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

1C-8.	Discharge Planning Coordination.	
	NOFO Section VII.B.1.h.	

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

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	No

1C-9.	Housing First–Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition.	5
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition that have adopted the Housing First approach.	5
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-coordinated entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1C-9a.	Housing First–Project Evaluation.	
	NOFO Section VII.B.1.i.	

Describe in the field below how your CoC regularly evaluates projects to ensure those that commit to using a Housing First approach are prioritizing rapid placement and stabilization in permanent housing and are not requiring service participation or preconditions of program participants.

**(limit 2,000 characters)**

The CoC review the CES Community Queue periodically to review referrals and check if the organization started the process to house the individual/family being assisted. All CoC funded projects are using the Housing First Approach that prioritize rapid placement and stabilization in permanent housing and do not

require service participation or preconditions of program participants. Guam has 93% of permanent housing retention. The CoC ensures that participants in PSH maintain housing stability. In addition, The CoC conducts periodic review on all CoC funded projects. This assessment includes data from HMIS that would identify the organizations implementing Housing First. For example, CoC staff look at length of time from the number of days of enrollment to move-in date, and check how quickly projects move people from enrollment to move-in. However, Guam is challenged with shortage of rental housing inventory also high cost of rent due to the huge military presence on island. The military has higher housing allowance compared to the FMR thus, most landlords prefer to rent to the military.

Additionally, staff review the percentage of households that come from unsheltered locations & incentivize the rapid placement of households through the evaluation in the CoC Program Competition. The CoC RRC emphasis are on the following: 1) housing placement rates, 2) prioritizing unsheltered clients for housing, 3) prioritizing persons with little to no income & 4) housing retention, organizations that struggle with Housing First concepts are likely to be subject to a review; CoC Staff are able to address challenges with Housing First implementation by providing technical assistance.

1C-9b.	Housing First–Veterans.	
	Not Scored–For Information Only	

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	Yes
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1C-10.	Street Outreach–Scope.	
	NOFO Section VII.B.1.j.	

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

**(limit 2,000 characters)**

The CoC continues to conduct at the individual and community levels. The individual outreaches are conducted following receipt of referrals of homeless individuals or families from the community and of street homeless when new faces are identified. An available team from any of the CoC Individual outreaches are conducted 100% within the island territory. The larger community outreaches are coordinated with other NGOs and government partners to provide health screening, immunizations, HIV/STD testing, and on-site access to mainstream and employment programs. These outreaches are held at community parks, mayor’s offices or community centers, as well as in a roving, mobile clinic. Street homeless are picked up from specified locations, as well as clients residing in emergency shelters, for transport to these outreaches. These outreaches are publicized on different CoC partner websites, social

media, mayor's offices, and flyers are distributed to street homeless. Street outreaches are conducted weekly at known sites where homeless congregate and at the only homeless kitchen located in the central capital village of Hagatna. Personal contacts and wellness checks are made during these interactions, and all contacts are provided food bags which also includes minimal PPEs such as face masks and bar soap. The outreach teams comprise multi-ethnic members who can communicate with the homeless in their respective languages. The frequency of the contacts has resulted in public trust and active response when an individual eventually requests for assistance. The primary strategy employed by the CoC is to remain connected to the street homeless and provide continuous assurance of availability to assist should the homeless decide they want to be assisted and/or sheltered. The CoC has implemented a procedural policy with new form development to capture each individual at every outreach contact to add to HMIS for both record documentation and follow up actions.

<b>1C-11.</b>	<b>Criminalization of Homelessness.</b>	
	NOFO Section VII.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to prevent the criminalization of homelessness in your CoC's geographic area:

1.	Engaged/educated local policymakers	Yes
2.	Engaged/educated law enforcement	Yes
3.	Engaged/educated local business leaders	Yes
4.	Implemented communitywide plans	Yes
5.	Other:(limit 500 characters)	

<b>1C-12.</b>	<b>Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).</b>	
	NOFO Section VII.B.1.i.	

	2020	2021
Enter the total number of RRH beds available to serve all populations as reported in the HIC–only enter bed data for projects that have an inventory type of “Current.”	28	56

<b>1C-13.</b>	<b>Mainstream Benefits and Other Assistance–Healthcare–Enrollment/Effective Utilization.</b>	
	NOFO Section VII.B.1.m.	

Indicate in the chart below whether your CoC assists persons experiencing homelessness with enrolling in health insurance and effectively using Medicaid and other benefits.

	Type of Health Care	Assist with Enrollment?	Assist with Utilization of Benefits?
1.	Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
2.	Private Insurers	No	No
3.	Nonprofit, Philanthropic	Yes	No
4.	Other (limit 150 characters)		
	Medically Indigent Program	Yes	Yes

1C-13a.	Mainstream Benefits and Other Assistance–Information and Training.	
	NOFO Section VII.B.1.m	

	Describe in the field below how your CoC provides information and training to CoC Program-funded projects by:
1.	systemically providing up to date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC’s geographic area;
2.	communicating information about available mainstream resources and other assistance and how often your CoC communicates this information;
3.	working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and
4.	providing assistance with the effective use of Medicaid and other benefits.

**(limit 2,000 characters)**

All homeless provider and community partner who incorporates case management services within their respective organization includes a process for connecting unemployed or low-income clients to mainstream benefits such as TANF, SNAP, Medicaid and state-funded Medically Indigent Program a state funded health insurance, and coordinate with the Social Security Administration for eligibility due to age or disability. These resources serve to provide financial assistance for basic needs and medical needs as other services are navigated. Caseworkers generally has primary responsibility for initiating this connection, including assisting to obtain documents necessary to establish eligibility and completing the application form. For individuals who may be ineligible for federally funded mainstream benefits, the Social Worker/Caseworker assist to connect the individual to state-funded or community-based services. Community outreaches which often includes an array of service providers has been effective in reconnecting homeless to services or in new connections for future follow-up by the respective partners. The CoC has provided financial assistance for the payment of identification cards, passports, court and police clearances needed for employment. If the homeless is from off-island and need birth certificate or other required documents to meet eligibility to participate in the program, the local CoC collaborates and follow-up with external, off-island entities for those documents. Any changes to program funding or eligibility criteria are reported to CoC members via email and formally at the monthly coalition meetings. Program personnel are generally invited to provide a presentation at the monthly meetings. GHURA remains the organization responsible for overseeing the CoC's strategy to ensure access to mainstream benefits.

1C-14.	Centralized or Coordinated Entry System–Assessment Tool. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.n.	

	Describe in the field below how your CoC's coordinated entry system:
1.	covers 100 percent of your CoC's geographic area;
2.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
3.	prioritizes people most in need of assistance; and
4.	ensures people most in need of assistance receive assistance in a timely manner.

**(limit 2,000 characters)**

1. Guam's Coordinated Entry System (CES) covers the entire geographic area. The project's current sponsor is CSS. CoC members who are CES end-users are positioned throughout the entire island of Guam. However, DV clients are not captured by CES. Should a DV client seek assistance at a CES entry point, the client will be immediately referred to one of the CoC's DV shelters or DV projects administered by the CoC. DV client information is entered into a standalone HMIS system with the data de-identified and aggregated for reporting. 2. The CE system reaches people who are least likely to apply for homeless assistance outside of special outreaches. This is demonstrated through the CoC's implementation of the "No Wrong Door" policy. Essentially, all CoC members regardless of what service they provide, will make every effort to guide clients to the necessary programs or specific agencies required to deliver assistance. Furthermore, routine monthly outreaches are conducted to engage those individuals who do not attend special outreaches. Finally, several agencies within the CoC operate 24 hours a day, seven days a week to ensure access is available at any time of the day. These organizations have CE end-users who also work 24/7. 3. The VI-SPDAT suite of triage tools are used by the CoC helps prioritize people most in need of assistance based on their score on the VI-SPDAT. The score recommends if individuals or families will need assistance with Rapid Rehousing or Permanent Supportive Housing. The CoC's standard assessment tool is attached. 4. Coordinated Entry System ensures that referred clients receive assistance in a timely manner by referring the clients to the proper programs/agencies that suit their needs.

1C-15.	Promoting Racial Equity in Homelessness—Assessing Racial Disparities.	
	NOFO Section VII.B.1.o.	

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	Yes
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1C-15a.	Racial Disparities Assessment Results.	
	NOFO Section VII.B.1.o.	

Select yes or no in the chart below to indicate the findings from your CoC's most recent racial disparities assessment.

1.	People of different races or ethnicities are more likely to receive homeless assistance.	Yes
2.	People of different races or ethnicities are less likely to receive homeless assistance.	No

3.	People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	Yes
4.	People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	No
5.	There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	No
6.	The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	Yes

1C-15b.	<b>Strategies to Address Racial Disparities.</b>	
	NOFO Section VII.B.1.o.	

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	No
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	No
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	No
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

1C-15c.	<b>Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment.</b>	
	NOFO Section VII.B.1.o.	

Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

**(limit 2,000 characters)**

Guam is a U.S. island and unincorporated territory in Micronesia, in the Western Pacific with an estimated population of 168,801 (July 2021 est.). The Ethnic groups comprises Chamorro 37.3%, Filipino 26.3%, White 7.1%, Chuukese 7%,

Korean 2.2%, Other Pacific Islander 2%, other Asian 2%, Chinese 1.6%, Palauan 1.6%, Japanese 1.5%, Pohnpeian 1.4%, Mixed 9.4%, Other 0.6%. Guam's demographics differ from that of the U.S. mainland where BIPOC groups are the minority. Still, the CoC applies a similar concept of addressing racial/ethnic disparities in service provision. The race/ethnicity data is included in the demographics in HMIS as well as the PIT count survey forms. The analyzed data shows that persons from disproportionately represented racial or ethnic groups have different entry points into the system. Users can also view disaggregated data by ethnic group, and compare income, disabilities, and history of homelessness. The CoC facilitates an open discussion about the disparities and prepares action steps by addressing barriers in the provision and outcomes of assistance; for instance, language and literacy is often a good starting point. The Micronesian Resource Center (MRC) is staffed with multilingual case workers who provide one-to-one case management and workshops in our clients' home languages. The MRC works collaboratively with local government agencies and other non-profits, and engages other minority-serving organizations to exchange ideas about outreach and assessment processes that improve equitable outcomes. The homeless service providers train staff on racial/ethnic disparities, race relations and underserved populations; participate in diversity & inclusion network and its monthly trainings including workshop sessions and TA with HUD; convene focus groups of people experiencing homelessness to provide firsthand accounts on the root causes that led to their homelessness; and address the barriers to access assistance available to meet their needs.

<b>1C-16.</b>	<b>Persons with Lived Experience—Active CoC Participation.</b>	
	NOFO Section VII.B.1.p.	

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

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

<b>1C-17.</b>	<b>Promoting Volunteerism and Community Service.</b>	
	NOFO Section VII.B.1.r.	



Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement among people experiencing homelessness in the CoC's geographic area:

1.	The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	Yes
2.	The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).	Yes
3.	The CoC works with organizations to create volunteer opportunities for program participants.	Yes
4.	The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	Yes
5.	Provider organizations within the CoC have incentives for employment and/or volunteerism.	Yes
6.	Other:(limit 500 characters)	
	The CoC has a network of members who provide people experiencing homelessness with work readiness workshops, connection to available jobs they would be qualified for, and assistance in overcoming employment barriers. The CoC has expanded its partnerships with local government agencies, such as the Public Transit Authority, the Guam Department of Revenue, and Taxation and Department of Public Health and Social Services in providing free rides and assisting the homeless acquire Guam ID.	Yes

## 1D. Addressing COVID-19 in the CoC’s Geographic Area

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1D-1.	<b>Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.</b>	
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NOFO Section VII.B.1.q.	
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Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:	
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1.	unsheltered situations;
2.	congregate emergency shelters; and
3.	transitional housing.

**(limit 2,000 characters)**

In early March 2020, prior to the pandemic State of Emergency on Guam, the CoC disseminated COVID-19 and infectious disease protocols from sources such as the CDC Information on COVID-19, National Healthcare for the Homeless Council’s Resources on Influenza and the HUD Infectious Disease Toolkit for CoCs. All shelters and transitional housing providers developed protocols and safety procedures for screening, admissions, and prevention of covid in their settings. Early in the pandemic, the Governor declared a Shelter in Place mandate, thus restricting admissions/flow of persons into the shelters and other congregate settings. CoC member organizations kept abreast of Dept. of Public Health and Social Services (DPHSS) guidance and changes to protocols. As the lockdown eased, shelters continued strict protocols including screening assessments, temperature checks, covid-19 testing requirements, covid vaccinations, and safety measure including environmental measures such as sanitizing, PPE use. Transitional housing providers included isolation protocols prior to housing.

For unsheltered homeless, the CoC participated with Guam Homeland Security and the Governor of Guam to establish temporary emergency shelter for street homeless. To date, two such shelters have been opened in response to the pandemic and increased need for safe sheltering. Staff continued to conduct regular outreach to street homeless, providing items such as hand sanitizers, masks, along with the usual outreach assistance. Staff followed CDC protocols for homeless service providers such as use of masks, face shields, social distancing.

The University of Guam provided CoC member organizations access to an online COVID-Ready Caregiver training, which included basics such as covid-

19 transmission, symptoms, prevention of spread, PPE use, populations at risk, environmental controls.

<b>1D-2.</b>	<b>Improving Readiness for Future Public Health Emergencies.</b>	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC improved readiness for future public health emergencies.

**(limit 2,000 characters)**

On June 30, 2020, a little over 3 months since the start of the State of Emergency on Guam, the Governor convened the Interagency Council for Coordinating Homelessness Programs and established the Office of Homelessness Assistance and Poverty Prevention. One reason for this action was to address the risk of homeless individuals and families at risk of exposure to COVID-19 and other diseases, inclement weather, and victimization. This Council is chaired by the Lt. Governor and includes Cabinet members and the GHC. This Council provides the Guam Homeless Coalition with a powerful tool and venue for planning and action to occur at high levels of the local government. Through the Council, the GHC Strategic Planning Committee, and the GHC Board, we are able to improve readiness for future public health emergencies in addition to addressing the current pandemic. In terms of future readiness, key efforts include the establishment of two temporary emergency shelters for families and individuals, an improved system to access transportation services, an ID system for homeless, as well as improved communication with the Executive branch of government. The Gov. has made homelessness assistance and prevention one of the top priorities of this administration. Sustainable changes are occurring through system changes and greater focus on key issues surrounding homelessness. GHURA has led efforts to increase funding to homeless service providers for PPEs, training, as well as ensuring ongoing TA is available. GHURA ensures collaboration with Guam Homeland Security (GHS) and members of the GHC Board are also on GHS contact listing for updates. Service providers have strengthened their ability to respond to emergencies such as the covid-19 pandemic. Prior to this pandemic all service providers were prepared for disasters related to typhoons, but not as prepared for infectious diseases. Through the collaborations mentioned in, the GHC has increased its resiliency and preparedness.

<b>1D-3.</b>	<b>CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.</b>	
	NOFO Section VII.B.1.q	

Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:

<b>1.</b>	<b>safety measures;</b>
<b>2.</b>	<b>housing assistance;</b>
<b>3.</b>	<b>eviction prevention;</b>
<b>4.</b>	<b>healthcare supplies; and</b>

5.	sanitary supplies.
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**(limit 2,000 characters)**

1) GHURA, the Grantee for CoC and ESG CV funds hired additional staff to focus on the Cares Act funds and coordinated with CoC and ESG recipients. Applicants to ESG-CV competition were prioritized to the extent that they employed safety measures for staff through hazard pay and waived in-person case management requirements of participants. The proposals were evaluated with the assistance of CoC. The PHA determined the allocation of funds based on activities and number of persons to be assisted and performance of the subrecipient. GHURA worked with subrecipients to ensure that they were using the available waivers to address the safety of participants and staff and that their needs were met. 2)Guam prioritized Homelessness Prevention & Rapid Rehousing (HP/RRH) including street outreach in the 1st allocation. The 2nd allocation funded the operations of Temporary Emergency Shelter (TES) to ensure that street homeless have a safe place to stay due the surge in Covid 19 also with the challenges encountered to secure rental units. The CoC worked in consultation with the ESG recipient to adopt all the ESG-CV waivers in Notice CPD-21-08 that allowed recipients/ subrecipients to expend ESG-CV funds on personal protective equipment (PPE) and enhanced sanitary procedures in projects and facilities funded by ESG-CV. 3)The CoC coordinated with the PHA, the ESG recipient to partner with Public Defender Service Corp., to provide legal assistance to households facing eviction. The CoC also partnered with Dept. of Administration that administer the Emergency Rental Assistance to provide assistance to persons who are at risk of homelessness who don't meet the eligibility criteria. 4&5). The CoC members prior to the waivers have started to solicit donations for PPE's and local government provided sanitary supplies which were distributed to various organizations and shelter providers. The CoC used its own funds from fundraising efforts to purchase necessary supplies.

1D-4.	CoC Coordination with Mainstream Health.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:

- |    |  |
|----|--|
| 1. | decrease the spread of COVID-19; and   |
| 2. | ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks). |

**(limit 2,000 characters)**

The Dept. of Public Health and Social Services is a member of the CoC, the Guam Homeless Coalition (GHC) and the health care committee chair is a DPHSS Nurse Administrator. Through the pandemic, the GHC health care committee has strengthened the collaboration with DPHSS and directly coordinates COVID-19 efforts including vaccination efforts, testing, prevention and mitigation.

Early in the pandemic, testing for street homeless, as well as for those in shelters was offered by DPHSS and GHC outreach teams. Testing was conducted at several locations such as beaches and parks close to homeless encampments, with outreach teams making visits to encourage individuals to get tested. Gift bags with food items including face masks and hand sanitizers were provided to the homeless as incentives. DPHSS provided testing for free, with positive cases managed within 48 hours of testing. Those who tested

positive were isolated in hotels that are contracted by the local government with their consent. Accommodation including food and basic necessities were provided for free. Shelter testing has been ongoing with successful mitigation and prevention of spread overall.

A gap was recently noted as covid cases on Guam surged, with a need for increased DPHSS collaboration with the GHC to ensure shelter facilities are meeting safety guidelines, and safety measures are consistently implemented, as well as notification to homeless providers when conditions change and providers need guidance on changes in pandemic conditions. Action was taken to ensure GHC providers have adequate training, PPEs and ongoing guidance throughout the pandemic. This is ongoing and can the CoC is in collaboration with government to improve the process.

1D-5.	Communicating Information to Homeless Service Providers.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:	
1.	safety measures;
2.	changing local restrictions; and
3.	vaccine implementation.

**(limit 2,000 characters)**

The CoC has a robust communication network with Homeless Service Providers. Throughout the pandemic, the GHC Board and Strategic Planning Committee has been involved with Guam Homeland Security and the Dept. of Public Health and Social Services. Prior to the State of Emergency, Board members disseminated key information such as the Infectious Disease Toolkit for CoCs from the HUD Exchange in early March 2020. The HUD Exchange is a key means of communicating prevention and preparedness resources to our GHC membership.

The Strategic Planning Committee had been discussing preparedness before the State of Emergency, and when COVID-19 struck, many of the shelters already had plans in place. The GHC Officers/Board and the GHC Outreach team have an ongoing WhatsApp chat group through which the local pandemic information is shared. The Joint Information Center daily releases, Dept of Public Health advisories, and all Executive Orders relating to the pandemic are shared with the members on a daily basis (or more frequently depending on the pandemic conditions).

Additionally, with the institution of the Interagency Council on Homelessness, the GHC chair, health care subcommittee co-chair, and GHURA attend the monthly meetings. This council addresses issues surrounding homelessness on Guam, including COVID-19 prevention and preparation. This Council is led by the Lt. Governor of Guam, and key Cabinet members are in attendance. The Council is another venue for obtaining critical information related to the pandemic. The information is shared with GHC members through the GHC chair.

Through these communication methods, members are kept up to date on vaccination implementation, changing local restrictions, and safety measures. The Strategic Planning committee meets weekly, and the GHC meets monthly. Pandemic information and changes are shared at both these forums, which have high member participation throughout the pandemic.

1D-6.	<b>Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.</b>	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC identified eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.

**(limit 2,000 characters)**

The CoC Health Care committee/GHC Board collaborated with the Dept. of Public Health and Social Services to offer COVID-19 vaccinations to homeless individuals. Guam began providing COVID-19 vaccinations to health care workers and high-risk populations in January 2021, including homeless adults. Two outreaches, "Homeless Passport to Services" events were held in April. The events included homeless service providers, with the main focus being the COVID-19 vaccinations. The homeless community is aware of the annual "Passport to Services (P2S)" now on its 14th year. The P2S enhances direct assistance to the homeless and participation is traditionally high. To ensure homeless individuals were aware of the vaccination outreach and find those eligible, the GHC outreach teams did outreach to street homeless. COVID-19 vaccination information handouts in various languages were distributed to the homeless in the street, as well as in shelters in the several weeks leading to the event days. Individuals on the street, as well as in the shelters were provided transportation. Outreach teams went out to the street homeless on the day of the event as well. Public health nurses, University of Guam nursing students, and other health professionals provided COVID-19 vaccination screening, teaching, and immunization to homeless during events held on April 13 and 16, 2021. The April 16th event included other adult and childhood immunizations in addition to the COVID-19 vaccines. The J & J vaccines were used, with a few homeless opting for Moderna or Pfizer. In addition to the P2S events, shelters were also able to coordinate for on-site covid-19 vaccinations with either DPHSS or Guam Behavioral Health and Wellness to ensure vaccinations for those eligible. When the COVID-19 boosters were approved, the DPHSS provided on site boosters and first/second dose vaccinations to homeless shelters in November 2021. Planning is an ongoing process to ensure our homeless are vaccinated.

1D-7.	<b>Addressing Possible Increases in Domestic Violence.</b>	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC addressed possible increases in domestic violence calls for assistance due to requirements to stay at home, increased unemployment, etc. during the COVID-19 pandemic.

**(limit 2,000 characters)**

The Coc DV service agencies and sub-recipients addressed the increase in domestic violence calls for assistance during the COVID-19 pandemic by continuing to stay open and servicing victims partially from home. None of the DV service agencies completely closed during the pandemic. They used alternative protocols to communicate with clients taking COVID safety protocols

in mind. Victims continued to be sheltered, hotlines were still answered 24/7 and victims were served in other ways during this time. DV service agencies and organizations also cooperated with each other to be sure that client needs were met and continue to be met. The Emergency Solution Grant-Coronavirus also provided additional funds for sheltering victims, along with case management. This allowed the recipient of the Emergency Solution Grant-Coronavirus to shelter additional victims as well as being able to shelter them for a longer period of time. Guam agencies have cooperated in getting victims COVID tested so that they could enter shelters that required a negative test. Guam agencies and organizations have also shared COVID safety supplies so that DV clients can be served safely. Guam agencies and organizations have for the most part been exceptionally cooperative in working together to see that the sexual assault and domestic/family violence clients could continue to be served. This has allowed Guam to serve the additional DV clients that have sought shelter or other assistance since the Pandemic began.

1D-8.	Adjusting Centralized or Coordinated Entry System.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC adjusted its coordinated entry system to account for rapid changes related to the onset and continuation of the COVID-19 pandemic.

**(limit 2,000 characters)**

To account for the rapid changes related to the onset and continuation of the COVID-19 pandemic, the CoC modified CES Policies, Bed/Unit Inventory, and shelter intake procedures. The CoC continued to use the VI-SPDAT suite of triage tools for its CES to assess single adults, families, and transition age youth during the pandemic. The influx of federal pandemic funding increased emergency shelter capacity through creating the Global Dorm Homeless Shelter and the new Liheng Sinafo Temporary Emergency Shelter (TES). Homeless households staying in the Global Dorm Shelter and unsheltered homeless households are given priority. As recommended by the CDC, households with member(s) 65 years and older, and/or member(s) with underlying medical conditions who are at higher risk of contracting Covid-19 were to be given priority to available emergency shelter, RRH, and other Permanent Housing projects. Guam was allocated Emergency Housing Vouchers (EHV) through the American Rescue Act, which is being administered by GHURA and the CoC with 87 EHV. Existing emergency and transitional shelters reduced their bed inventory to deal with CDC requirements for congregate and non-congregate shelters. Through ESG-CV funding, the CoC added additional emergency hotel/motel vouchers for DV households through one VSP provider. In addition to the ESG-CV emergency shelter components, the CoC funded two homeless prevention and rapid rehousing projects, as well as a new street outreach project.. Intake continued for clients seeking homeless prevention, until local/national eviction moratorium were lifted. Projects modified their intake procedures by limiting in-person interviews and assessments, through conducting it over the phone to minimize exposure to staff and clients. Also, CoC projects had to adjust operational procedures to address client/staff infection prevention, isolation and sanitation of facilities.

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

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1E-1.	Announcement of 30-Day Local Competition Deadline–Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.a. and 2.g.	

1.	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC’s local competition.	09/29/2021
2.	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	09/29/2021

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria listed below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:
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1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Used data from a comparable database to score projects submitted by victim service providers.	Yes
5.	Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.	Yes
6.	Used a specific method for evaluating projects based on the CoC’s analysis of rapid returns to permanent housing.	Yes

1E-2a.	Project Review and Ranking Process–Addressing Severity of Needs and Vulnerabilities.	
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NOFO Section VII.B.2.d.
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Describe in the field below how your CoC reviewed, scored, and selected projects based on:
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1.	the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and
2.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

**(limit 2,000 characters)**

1. The Review and Ranking Committee (RRC) reviews information provided by applicants, HMIS, the CoC secretary, and ongoing monitoring by HUD and GHURA as the collaborative applicant in the identified areas. Consideration is given to HUD and CoC program priorities, mandates, and ongoing monitoring. Severity of needs and vulnerabilities considered were the “hard to serve” population which includes those who are literally homeless, those with disability and/or no income, and survivors of domestic and intimate partner violence. Additional points are given to those using the Housing First approach to ensure that those individuals with the greatest challenges or barriers are prioritized. Projects that serve the high needs populations such as those fleeing domestic violence or hard to place individuals receive extra points in ranking system. This practice includes reallocation of lowest performing projects to meet the gaps and needs within the CoC.

2. The RRC considered alignment of the proposed projects with CoC's vision and needs identified through the Gaps Analysis when scoring applications. The following components were considered in the Project Design category: project addressed one of the priority needs identified; applicant built a case for the need; & existing housing availability for this population. In the Relative Need category; applicants justified the need to focus on vulnerable populations such as Serious Mental Illness, unaccompanied youth, victims of domestic violence or people with substance use disorders; how the project will address specific needs; if the applicant identified outcomes & performance measures that were objective, measurable, tractable; and if the project met CoC benchmarks. One renewal project applicant was given consideration because of the island's demonstrated need for programs assisting domestic violence survivors.

1E-3.	Promoting Racial Equity in the Local Review and Ranking Process.	
	NOFO Section VII.B.2.e.	

Describe in the field below how your CoC:
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1.	obtained input and included persons of different races, particularly those over-represented in the local homelessness population, when determining the rating factors used to review project applications;
2.	included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process;
3.	rated and ranked projects based on the degree to which their program participants mirror the homeless population demographics (e.g., considers how a project promotes racial equity where individuals and families of different races are over-represented).

**(limit 2,000 characters)**

1. Data on the local homeless population shows an overrepresentation of Chamorro and Chuukese individuals. Several members of the Review and

Ranking Committee are of Chamorro descent. The committee chair reviewed the additional rating factors with her Chuukese staff to obtain her perspective on all rating factors particularly, those on racial equity. This staff is knowledgeable of the CoC mission and has conducted several homeless outreaches.

2. The Review and Ranking Committee is comprised of CoC members representing agencies and organizations that do not receive CoC funding. Ethnicities of members include Caucasian, Chamorro, Chinese, Filipino, and Japanese. An invitation to join the committee was extended to all CoC members during its regular meeting.

3. HMIS provided data to the Review and Ranking Committee to include homeless population demographics. The committee considered rating factors that focus on racial equity. Does the project show that people of different races or ethnicities receive homeless assistance or positive outcomes? Does the project show how it will identify and eliminate any barriers that may lead to racial or ethnic disparities to improve racial equity?

1E-4.	Reallocation—Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criterion below.	
	NOFO Section VII.B.2.f.	

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

**(limit 2,000 characters)**

1. The Review & Ranking Committee reviewed information in Project Performance, Experience & Organizational Commitment, Relative Need, Project Design & Effectiveness, & Financial Management; HUD & CoC program priorities, mandates, & ongoing monitoring. Severity of needs & vulnerabilities were considered for “hard to serve” population including the literally homeless & those with disability &/or no income. Additional points were given to those with a Housing First approach & those that serve high needs populations such as those fleeing domestic violence or hard to place individuals. Based on this process, projects were scored and ranked.

2. The Review & Ranking Committee identified a low-performing project & recommended to reallocate funds from a renewal project application. While the committee agrees that there is a need for supportive services for homeless persons with disabilities who are victims of domestic & sexual violence, the project did not meet current HUD & GHC thresholds. Specifically, the organization has not demonstrated effective use of federal funds including satisfactory drawdowns & performance for existing grants as evidenced by compliance with CoC homeless documentation & recordkeeping requirements, submission of updated written policies & procedures, regular drawdowns, timely resolution of monitoring findings, & timely submission of required reporting on existing grants.

3. An overview of the review & ranking process was provided to all applicants upon submission of their application. Ratings & recommendations of the committee were posted as a press release on the CoC website. Notice of results & recommendations were also transmitted electronically directly to all project applicants. An additional notice was given to the project applicant identified for reallocation to explain the reasoning of the committee.

<b>1E-4a.</b>	<b>Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.</b>	
	<b>NOFO Section VII.B.2.f.</b>	

<b>Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?</b>	Yes
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<b>1E-5.</b>	<b>Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.</b>	
	<b>NOFO Section VII.B.2.g.</b>	

<b>1.</b>	<b>Did your CoC reject or reduce any project application(s)?</b>	Yes
<b>2.</b>	<b>If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.</b>	11/01/2021

<b>1E-5a.</b>	<b>Projects Accepted–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.</b>	
	<b>NOFO Section VII.B.2.g.</b>	

<b>Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.</b>	11/01/2021
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<b>1E-6.</b>	<b>Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.</b>	
	<b>NOFO Section VII.B.2.g.</b>	

<b>Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website—which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected.</b>	11/12/2021
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## 2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

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- 24 CFR part 578

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

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

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

Enter the date your CoC submitted its 2021 HIC data into HDX.	05/14/2021
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2A-4.	HMIS Implementation—Comparable Database for DV.	
	NOFO Section VII.B.3.b.	

Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:

- |    |   |
|----|---|
| 1. | have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and             |
| 2. | submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead. |

**(limit 2,000 characters)**

1. Beginning in 2019, Catholic Social Service (CSS) has obtained the license for the use of Clarity HS from Bitfocus as the CoC's comparable database. There are three projects utilizing the comparable database including two CoC Joint TH/RRH projects and one ESG-CV funded emergency shelter project.
2. The DV comparable database basically mirrors the mainstream HMIS. System performance reports for the three projects generate de-identified data for the CoC.

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

Enter 2021 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	258	34	219	97.77%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	11	8	3	100.00%
4. Rapid Re-Housing (RRH) beds	56	11	45	100.00%
5. Permanent Supportive Housing	197	0	197	100.00%
6. Other Permanent Housing (OPH)	3	0	0	0.00%

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

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

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

**(limit 2,000 characters)**

1. HMIS bed coverage rate for the CoC is not below 84.99% for any project. Since the addition of the VA VASH data PSH coverage has improved significantly.
2. The US Vets Emergency Shelter didn't participate in the CoC's HMIS in the past. The project was subcontracted to Catholic Social Service (CSS). CSS that took over the management and operations of the emergency shelter for veterans will enter its clients information in HMIS. The Emergency shelter participation rate will increase to 100%.

<b>2A-5b.</b>	<b>Bed Coverage Rate in Comparable Databases.</b>	
	NOFO Section VII.B.3.c.	

Enter the percentage of beds covered in comparable databases in your CoC's geographic area.	36.00%
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2A-5b.1.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.	
	NOFO Section VII.B.3.c.	

If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below:

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

**(limit 2,000 characters)**

1. The bed coverage rate for the comparable database is 36%. Of the 53 domestic violence beds, only 19 are currently entered into the comparable database. The projects that are entering into the comparable database are CoC funded DV bonus Joint component TH RRH/PH projects that are required to enter into the database. The CoC will be adding an ESG-CV DV ES project into the system for the 2022 HIC because the organization started the program on September 2021. The CoC will meet with the DV providers to discuss entering of non-CoC funded projects into the comparable system. The CoC will discuss pros and cons of entering data into the system to get the DV providers to fully participate such as client case management and uniform reporting and better data quality. The CoC will explore any incentives that may be provided by the CoC to DV agencies that participate.

2. Catholic Social Service (CSS) and Victim Advocates Reaching Out (VARO) are already entering into the comparable database due to ESG and CoC funding requirements. The CoC will focus its efforts on getting CSS and VARO to utilize the comparable database for its remaining emergency shelter DV projects. Getting these two agencies to participate will improve the coverage rate to 86%.

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

Did your CoC submit LSA data to HUD in HDX 2.0 by January 15, 2021, 8 p.m. EST?	Yes
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## 2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

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- 24 CFR part 578

<b>2B-1.</b>	<b>Sheltered and Unsheltered PIT Count—Commitment for Calendar Year 2022</b>	
	<b>NOFO Section VII.B.4.b.</b>	

<b>Does your CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?</b>	Yes
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<b>2B-2.</b>	<b>Unsheltered Youth PIT Count—Commitment for Calendar Year 2022.</b>	
	<b>NOFO Section VII.B.4.b.</b>	

<b>Does your CoC commit to implementing an unsheltered youth PIT count in Calendar Year 2022 that includes consultation and participation from youth serving organizations and youth with lived experience?</b>	No
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## 2C. System Performance

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

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- 24 CFR part 578

<b>2C-1.</b>	<b>Reduction in the Number of First Time Homeless—Risk Factors.</b>	
	NOFO Section VII.B.5.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.

**(limit 2,000 characters)**

1. The CoC uses data from the HDX, HMIS annual progress reports, CES reports, and PIT count and outreach events. Demographics of persons becoming homeless for the first time and root causes leading to homelessness. Risk factors identified include large arrears in rental and utility payments, unstable and/or long-term unemployment, substance use disorders, untreated mental health conditions, and overcrowded housing arrangements. Although nuclear and extended households may try to address issues internally, there would be a trigger that would cause the hard decision to evict family members from their household.
2. Pre-COVID, all homeless prevention responses were directed at referrals received from the community when conflict is present within a household. Depending on the household situation, responses have included payment of rental and utility arrears using ESG funding and donations, and implementing diversion strategies such as using temporary housing through motel/hotel vouchers, rapid re-housing, or long-or short-term housing providing by relatives/friends until permanent placement can be found. Currently, additional resources available include assistance through the CARES Act funds such as , Emergency Rental Assistance, Emergency Voucher Program and other housing assistance as well as employment assistance.
3. The CoC's Strategic Planning and IT Committees is the responsible entity to reassess risk factors and emerging trends, monitor the effectiveness of current strategies, identify new solutions or adjust response actions based on HMIS quarterly report.

<b>2C-2.</b>	<b>Length of Time Homeless—Strategy to Reduce.</b>	
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NOFO Section VII.B.5.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. |

**(limit 2,000 characters)**

1. To eliminate barriers to enter housing assistance programs, our CoC adopts a Housing First approach to rapidly re-house people. The CoC actively engages in outreach to identify persons who are homeless and data collected from these are entered into the CES. Once entered into the CES, the clock starts for placement. The CES Coordinator and Navigator prioritizes follow up actions based on the VI-SPDAT score and demographics. Outreach and partner staff may initiate emergency sheltering concurrently will conducting leg work to get clients document ready during the various placements within the CoC. The VI-SPDAT tool is utilized to identify & prioritize individuals for housing assistance. Assessment is done prior to program participation. Chronic homeless individuals or families are prioritized for placement through RRH. Persons in the emergency shelter are assisted to enroll in mainstream services, secure appropriate ID and links to employment, training or education such as ESL for compact migrants who has limited English proficiency. Staff upon assessment assist households determined eligible for RRH helps persons locate housing. If a person has disability, referrals are done to appropriate programs that provide housing to persons with disabilities and the organization that did the referral provide case management and support services. The goal is rapid placement of households with long-term homelessness. We not only have linked shelters to ESG RRH programs but also have stressed CoC funded programs to practice the Housing First approach to improve housing access.

3. The Guam Homeless Coalition’s Strategic Planning Committee and GHURA, the collaborative applicant, are responsible for overseeing our CoC’s strategy to reduce the length of time individuals and families remain homeless.

2C-3. Exits to Permanent Housing Destinations/Retention of Permanent Housing.

NOFO Section VII.B.5.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.                  |

**(limit 2,000 characters)**

1. The CoC will increase the rate that homeless persons residing in emergency shelter (ES), transitional housing(TH), and rapid rehousing (RRH) exit to permanent housing destinations by providing case management to help families locate/secure housing and to address barriers to maintain housing. Homeless persons with disabilities who need longer support from mental health and substance abuse service providers will be referred to PSH programs. For persons on track to obtain the necessary resources to sustain housing on their

own, the CoC will refer to the ESG RRH. For those who lack the necessary resources to sustain housing on their own, the CoC will work towards placement in subsidized housing such as EHV, Section 8 or public housing. Persons will also be connected to mainstream services to include job training, job search, education services, and application for SSDI.

2. The CoC will increase the rate that homeless persons in permanent housing projects retain their permanent housing or exit to permanent housing destinations by ensuring that PSH participants continue to receive supportive services. Rapid response teams are deployed to address housing disruptions such as those who are experiencing relapses. Program staff also works closely with landlords to avert evictions. Projects work to eliminate barriers to housing stability by linking participants to job training/placement or application for SSDI. If termination is inevitable, projects will exhaust all options for permanent housing placement.

<b>2C-4.</b>	<b>Returns to Homelessness–CoC’s Strategy to Reduce Rate.</b>	
	NOFO Section VII.B.5.e.	

Describe in the field below:

<b>1.</b>	<b>how your CoC identifies individuals and families who return to homelessness;</b>
<b>2.</b>	<b>your CoC’s strategy to reduce the rate of additional returns to homelessness; and</b>
<b>3.</b>	<b>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.</b>

**(limit 2,000 characters)**

The CoC identifies individuals and families who return to homelessness through information captured at intake and at exit. Data captured at intake and exit is entered into the HMIS. HMIS generated reports like the System Performance Measures identifies persons who have returned to homelessness. A deeper dive into the client level data identifies prior program assistance. The CES Navigator makes contact with all persons entered into the CES which lead to further identification of persons who have returned to homelessness.

2) Our CoC’s strategy to reduce the rate of additional returns to homelessness involves several approaches. CES, ESG, and CoC program staff link participants to mainstream benefits or provide continued supportive services such as case management to maintain housing stability. ESG projects also offer money management courses to program participants to prepare for and maintain housing expenses. ESG HP funds also provide additional security to prevent homelessness. The CoC’s tenant based rental assistance program allows for clients to transfer to another unit if their current housing placement is no longer suitable. ESG-CV landlord incentives or 3 months of security deposit payments also add additional security and reassurance of landlords who accept referrals to house homeless clients.

3. The GHC’s Strategic Planning Committee and GHURA serve as the lead entities responsible for overseeing our CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.

<b>2C-5.</b>	<b>Increasing Employment Cash Income-Strategy.</b>	
	NOFO Section VII.B.5.f.	

	Describe in the field below:
1.	your CoC's strategy to increase employment income;
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.

**(limit 2,000 characters)**

The CoC reviews the System Performance Reports to assess the percent of participants who increased their income who remained in permanent housing, as well as those who exited programs. Cases showing increase in employment income is closely reviewed to assess characteristics of the household, as well as actual services provided. Methods leading to successful increase in employment income is discussed and shared with members of the CoC. The CoC does not deny admission to housing assistance programs under CoC-funded projects, ESG, or the EHV due to homeless persons not having employment income. The CoC has entered into an MOA with the Guam Regional Transit Authority who currently provides transportation to connect homeless clients to their place of employment, attend job training, or apply for work.

2. The CoC works closely with the Guam Dept. of Labor's American Job Center to help participants to identify their interests, assess their skills and abilities, advise them on in-demand jobs and potential training opportunities, employment plan development, career counseling, labor market and employer information, building a resume, and access to a resource room. Manelu's multi-lingual caseworkers also provide one to one case management and workshops to assist participants in obtaining a driver's license and other documentation to get back on their feet and offers work readiness training for those re-entering the workforce. Recognizing that some households require additional supports to maintain employment, participants are referred to the Dept. of Integrated Services for Individuals with Disabilities Vocational Rehabilitation Program to obtain job coaching support services.

3. The GHC's Strategic Planning Committee and GHURA serve as the lead entities responsible for overseeing our CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

2C-5a.	Increasing Employment Cash Income–Workforce Development–Education–Training.	
	NOFO Section VII.B.5.f.	

	Describe in the field below how your CoC:
1.	promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and
2.	is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants.

**(limit 2,000 characters)**

1. The CoC promoted partnerships between the Dept. of Labor (DOL), the American Job Center (AJC), CoC's nonprofit members, the University of Guam (UOG), and several private and government employers to provide homeless individuals with employment opportunities. The partnerships resulted in new apprenticeship and pre-apprenticeships being developed in health care,

hospitality and construction, workforce trainings and employer connections. 2. Training programs were established at the University of Guam in Caregiver and Nursing Assistant. A pre-apprenticeship curriculum to enable participants to learn skills for entry level employment in health care settings has been created; these courses began in July 2021. Displaced workers and unemployed persons were assisted to enter new workforce training programs through the American Job Center (AJC), and given priority for pre-apprenticeship and apprenticeship programs. The CoC additionally has promoted a partnership with DOL and one of the CoC's nonprofit members to connect migrants from the Freely Associated States, with work readiness workshops that are culturally and linguistically appropriate. The partnership will ensure that those experiencing language barriers receive the skills, case management and additional private partnerships provided by the nonprofit and the network of resources the DOL has. Workshops and services are being provided in the community and at shelters. The CoC conducts annual homeless outreach events, Passport to Services wherein private and public organizations participate. Pacific Human Resources (PHR) is one of the private employment organizations that partners with the CoC in assisting homeless clients with employment. Other partners include Flame Tree Freedom Center, ICANN and Jamaican Grill Inc. These private businesses provide employment opportunities to persons with disabilities such as janitorial and grounds maintenance. DOL/AJC keeps CoC members abreast of job openings and training services available.

<b>2C-5b.</b>	<b>Increasing Non-employment Cash Income.</b>	
	NOFO Section VII.B.5.f.	

Describe in the field below:	
1.	your CoC's strategy 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.

**(limit 2,000 characters)**

1. The initial action plan for unemployed or underemployed homeless is to apply for mainstream benefits, including TANF or General Assistance, SNAP and Medicaid, which provides monthly financial assistance for basic needs of food, cash for personal items and medical coverage. Unfortunately, cash benefit amounts remain fixed for the number of household members unless shelter and utility allowances are added. For individuals who may have a permanent disability or who are elderly over 65 years, mainstream cash assistance remains the only source of non-employment income if the person is not eligible for social security disability benefits or annuity. Most able-bodied adults will find ways to make 'fast cash' generally by selling aluminum cans, vegetables, or panhandling. In general, social workers or caseworkers initiate the application intake process for homeless individuals, and conduct the leg work to obtain the various documents needed to establish eligibility and amount of benefit, if eligible. Some organizations provide direct transportation services to the district social services office. Beginning in CY2021, a non-financial agreement was entered in to with the mass transit authority to provide bus identifications for the homeless who can then utilize regular and point-to-point transportation services using the mass transit system to access the social services department, Social

Security Administration, and child support office as applicable.  
3. GHURA's Planner and Catholic Social Service will be responsible for overseeing the CoC's strategy to increase non-employment income.

## 3A. Coordination with Housing and Healthcare Bonus Points

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

<b>3A-1.</b>	<b>New PH-PSH/PH-RRH Project—Leveraging Housing Resources.</b>	
	NOFO Section VII.B.6.a.	

Is your CoC applying for a new PSH or RRH project(s) that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
---	----

<b>3A-1a.</b>	<b>New PH-PSH/PH-RRH Project—Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.</b>	
	NOFO Section VII.B.6.a.	

Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).

1.	Private organizations	No
2.	State or local government	No
3.	Public Housing Agencies, including use of a set aside or limited preference	No
4.	Faith-based organizations	Yes
5.	Federal programs other than the CoC or ESG Programs	No

<b>3A-2.</b>	<b>New PSH/RRH Project—Leveraging Healthcare Resources.</b>	
	NOFO Section VII.B.6.b.	

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

<b>3A-2a.</b>	<b>Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.</b>	
	NOFO Section VII.B.6.b.	

<b>1.</b>	Did your CoC obtain a formal written agreement that includes: (a) the project name; (b) value of the commitment; and (c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)?	No
<b>2.</b>	Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider?	No

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

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

Project Name	Project Type	Rank Number	Leverage Type
This list contains no items			

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

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

<b>3B-1.</b>	<b>Rehabilitation/New Construction Costs—New Projects.</b>	
	NOFO Section VII.B.1.r.	

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

<b>3B-2.</b>	<b>Rehabilitation/New Construction Costs—New Projects.</b>	
	NOFO Section VII.B.1.s.	

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

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

**(limit 2,000 characters)**



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

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	Yes
--	-----

3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.C.	

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

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

**(limit 2,000 characters)**

1. The CoC has a Joint Transitional Housing – Permanent Housing/Rapid Rehousing program serving youth/young adults ages 16-24 including pregnant/parenting youth with up to three dependents ages 0-9 experiencing homelessness. Serving this population is of greater priority. Youth become at risk of engaging in anti-social and risky behaviors when they enter into homelessness, so the project’s overall goal is to facilitate life skills instructions and promote independent living and self-sufficiency among participants. Homelessness experienced in youth is correlated with adult experiences of homelessness, so it is cost effective to provide intervention as they are coming of age and need redirection and guidance to become self-sufficient.

2. CoC case managers work closely with the Guam Department of Education in providing services to runaway, homeless, and abused youth, and will continue these efforts in identifying individuals and families experiencing homelessness, and inform them of available services. The transitional housing component consists of supervised living with case management and supportive counseling, along with basic and advanced life skills instructions for up to 18 months. The

length of time from when an individual is identified as homeless to when they are placed in permanent housing generally takes 1-1.5 years, depending on availability of housing units. Participants will be able to stay in a safe and suitable environment while learning the skills needed to become a responsible, independent and contributing member of society. Participants will be allowed ample time to complete a High School diploma or equivalent, attain a secure source of income through job placement, entrepreneurship, or public welfare if the resident is unable to work before advancing into the permanent housing phase of the project and be afforded tenant-based rental assistance of up to 12 months. This will reduce the length of time individuals/families remain homeless.

## 4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

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

## 4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

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.

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).

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	CE Assessment Tool	11/16/2021
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1E-1. Local Competition Announcement	Yes	Local Competition...	11/16/2021
1E-2. Project Review and Selection Process	Yes	Project Review an...	11/16/2021
1E-5. Public Posting–Projects Rejected-Reduced	Yes	Public Posting-Pr...	11/16/2021
1E-5a. Public Posting–Projects Accepted	Yes	Public Posting-Pr...	11/16/2021
1E-6. Web Posting–CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No	Project List for ...	11/15/2021

## **Attachment Details**

**Document Description:** CE Assessment Tool

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Local Competition Announcement

## **Attachment Details**

**Document Description:** Project Review and Selection Process

## **Attachment Details**

**Document Description:** Public Posting-Projects Rejected-Reduced

## **Attachment Details**

**Document Description:** Public Posting-Project Accepted

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Project List for Other Federal Statutes

## Submission Summary

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

Page	Last Updated
1A. CoC Identification	10/14/2021
1B. Inclusive Structure	11/15/2021
1C. Coordination	11/16/2021
1C. Coordination continued	11/16/2021
1D. Addressing COVID-19	11/16/2021
1E. Project Review/Ranking	11/16/2021
2A. HMIS Implementation	11/15/2021
2B. Point-in-Time (PIT) Count	11/14/2021
2C. System Performance	11/16/2021
3A. Housing/Healthcare Bonus Points	11/16/2021
3B. Rehabilitation/New Construction Costs	11/16/2021

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<b>3C. Serving Homeless Under Other Federal Statutes</b>	11/15/2021
<b>4A. DV Bonus Application</b>	11/10/2021
<b>4B. Attachments Screen</b>	Please Complete
<b>Submission Summary</b>	No Input Required





## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

### Administration

<b>Interviewer's Name</b> _____	<b>Agency</b> _____	<input type="checkbox"/> Team <input type="checkbox"/> Staff <input type="checkbox"/> Volunteer
<b>Survey Date</b> DD/MM/YYYY ___/___/____	<b>Survey Time</b> ___ : ___ AM/PM	<b>Survey Location</b> _____

### Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only “Yes,” “No,” or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

### Basic Information

<b>PARENT 1</b>	<b>First Name</b> _____	<b>Nickname</b> _____	<b>Last Name</b> _____
	<b>In what language do you feel best able to express yourself?</b> _____		
	<b>Date of Birth</b> DD/MM/YYYY ___/___/____	<b>Age</b> _____	<b>Social Security Number</b> _____
<b>PARENT 2</b>	<input type="checkbox"/> No second parent currently part of the household		
	<b>First Name</b> _____	<b>Nickname</b> _____	<b>Last Name</b> _____
	<b>In what language do you feel best able to express yourself?</b> _____		
	<b>Date of Birth</b> DD/MM/YYYY ___/___/____	<b>Age</b> _____	<b>Social Security Number</b> _____
<b>IF EITHER HEAD OF HOUSEHOLD IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.</b>			<b>SCORE:</b> <div style="border: 1px solid white; width: 50px; height: 20px; margin: 0 auto;"></div>



## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

### Children

- How many children under the age of 18 are currently with you? \_\_\_\_\_  Refused
- How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed? \_\_\_\_\_  Refused
- IF HOUSEHOLD INCLUDES A FEMALE:* Is any member of the family currently pregnant?  Y  N  Refused
- Please provide a list of children's names and ages:

First Name	Last Name	Age	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<p><b>IF THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD AGED 11 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR FAMILY SIZE.</b></p> <p><b>IF THERE ARE TWO PARENTS WITH 3+ CHILDREN, AND/OR A CHILD AGED 6 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR FAMILY SIZE.</b></p>	<p><b>SCORE:</b></p> <input type="text"/>
---	---

### A. History of Housing and Homelessness

- Where do you and your family sleep most frequently? (check one)
  - Shelters
  - Transitional Housing
  - Safe Haven
  - Outdoors**
  - Other (specify):** \_\_\_\_\_
  - Refused

<p><b>IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.</b></p>	<p><b>SCORE:</b></p> <input type="text"/>
---	---

- How long has it been since you and your family lived in permanent stable housing? \_\_\_\_\_  Refused
- In the last three years, how many times have you and your family been homeless? \_\_\_\_\_  Refused

<p><b>IF THE FAMILY HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.</b></p>	<p><b>SCORE:</b></p> <input type="text"/>
--	---



## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

### B. Risks

8. In the past six months, how many times have you or anyone in your family...
- a) Received health care at an emergency department/room? \_\_\_\_\_  Refused
  - b) Taken an ambulance to the hospital? \_\_\_\_\_  Refused
  - c) Been hospitalized as an inpatient? \_\_\_\_\_  Refused
  - d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? \_\_\_\_\_  Refused
  - e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? \_\_\_\_\_  Refused
  - f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? \_\_\_\_\_  Refused

**IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.**

**SCORE:**

9. Have you or anyone in your family been attacked or beaten up since they've become homeless?  Y  N  Refused
10. Have you or anyone in your family threatened to or tried to harm themselves or anyone else in the last year?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.**

**SCORE:**

11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live?  Y  N  Refused

**IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.**

**SCORE:**

12. Does anybody force or trick you or anyone in your family to do things that you do not want to do?  Y  N  Refused
13. Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.**

**SCORE:**



## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

### C. Socialization & Daily Functioning

14. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money?  Y  N  Refused
15. Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?  Y  N  Refused

**IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 FOR MONEY MANAGEMENT.**

**SCORE:**

0

16. Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled?  Y  N  Refused

**IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.**

**SCORE:**

0

17. Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Y  N  Refused

**IF "NO," THEN SCORE 1 FOR SELF-CARE.**

**SCORE:**

0

18. Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted?  Y  N  Refused

**IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.**

**SCORE:**

0

### D. Wellness

19. Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family?  Y  N  Refused
20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Y  N  Refused
21. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you or anyone in your family?  Y  N  Refused
22. Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Y  N  Refused
23. When someone in your family is sick or not feeling well, does your family avoid getting medical help?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.**

**SCORE:**

0



## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past?  Y  N  Refused
25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE.

SCORE:

26. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern?  Y  N  Refused
- b) A past head injury?  Y  N  Refused
- c) A learning disability, developmental disability, or other impairment?  Y  N  Refused
27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH.

SCORE:

28. *IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH:* Does any single member of your household have a medical condition, mental health concerns, **and** experience with problematic substance use?  Y  N  N/A or Refused

IF "YES", SCORE 1 FOR TRI-MORBIDITY.

SCORE:

29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking?  Y  N  Refused
30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.

SCORE:

31. *YES OR NO:* Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced?  Y  N  Refused

IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.

SCORE:



## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

### E. Family Unit

32. Are there any children that have been removed from the family by a child protection service within the last 180 days?  Y  N  Refused
33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY LEGAL ISSUES.**

**SCORE:**

34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation?  Y  N  Refused
35. Has any child in the family experienced abuse or trauma in the last 180 days?  Y  N  Refused
36. *IF THERE ARE SCHOOL-AGED CHILDREN:* Do your children attend school more often than not each week?  Y  N  N/A or Refused

**IF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 36, SCORE 1 FOR NEEDS OF CHILDREN.**

**SCORE:**

37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that?  Y  N  Refused
38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY STABILITY.**

**SCORE:**

39. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that?  Y  N  Refused
40. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...
- a) 3 or more hours per day for children aged 13 or older?  Y  N  Refused
- b) 2 or more hours per day for children aged 12 or younger?  Y  N  Refused
41. *IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER:* Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that?  Y  N  N/A or Refused

**IF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 41, SCORE 1 FOR PARENTAL ENGAGEMENT.**

**SCORE:**



**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

FAMILIES

AMERICAN VERSION 2.0

### Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	0 /2	<b>Score: Recommendation</b> 0-3: no housing intervention 4-8: an assessment for Rapid Re-Housing 9+: an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	0 /2	
B. RISKS	0 /4	
C. SOCIALIZATION & DAILY FUNCTIONS	0 /4	
D. WELLNESS	0 /6	
E. FAMILY UNIT	0 /4	
<b>GRAND TOTAL:</b>	0 /22	

### Follow-Up Questions

<b>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</b>	place: _____ time: ____:____ or Night
<b>Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?</b>	phone: (____) _____ - _____ email: _____
<b>Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused



## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE YOUTH

AMERICAN VERSION 1.0

### Administration

<b>Interviewer's Name</b>	<b>Agency</b>	<input type="radio"/> Team <input type="radio"/> Staff <input type="radio"/> Volunteer
<b>Survey Date</b> <i>DD/MM/YYYY</i> ___/___/___	<b>Survey Time</b> ___ : ___	<b>Survey Location</b>

### Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

### Basic Information

<b>First Name</b>	<b>Nickname</b>	<b>Last Name</b>
In what language do you feel best able to express yourself? _____		
<b>Date of Birth</b> <i>DD/MM/YYYY</i> ___/___/___	<b>Age</b>	<b>Social Security Number</b>
		<b>Consent to participate</b> <input type="radio"/> Yes <input type="radio"/> No

IF THE PERSON IS 17 YEARS OF AGE OR LESS, THEN SCORE 1.

SCORE:

0





**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

SINGLE YOUTH

AMERICAN VERSION 1.0

**A. History of Housing and Homelessness**

1. Where do you sleep most frequently? (check one)

- Shelters
- Couch surfing
- Other (specify): \_\_\_\_\_
- Transitional Housing
- Outdoors
- Safe Haven
- Refused

<b>IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE Haven", THEN SCORE 1.</b>	<b>SCORE:</b>
	0

- 2. How long has it been since you lived in permanent stable housing? \_\_\_\_\_ Years  Refused
- 3. How long has it been since you lived in permanent stable housing? \_\_\_\_\_  Refused

<b>IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.</b>	<b>SCORE:</b>
	0

**B. Risks**

- 4. In the past six months, how many times have you...
  - a) Received health care at an emergency department/room? \_\_\_\_\_  Refused
  - b) Taken an ambulance to the hospital? \_\_\_\_\_  Refused
  - c) Been hospitalized as an inpatient? \_\_\_\_\_  Refused
  - d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? \_\_\_\_\_  Refused
  - e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? \_\_\_\_\_  Refused
  - f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? \_\_\_\_\_  Refused

<b>IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.</b>	<b>SCORE:</b>
	0

- 5. Have you been attacked or beaten up since you've become homeless?  Y  N  Refused
- 6. Have you threatened to or tried to harm yourself or anyone else in the last year?  Y  N  Refused

<b>IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.</b>	<b>SCORE:</b>
	0



**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

SINGLE YOUTH

AMERICAN VERSION 1.0

- 7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?  Y  N  Refused
- 8. Were you ever incarcerated when younger than age 18?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR LEGAL ISSUES.** **SCORE:**  
0

- 9. Does anybody force or trick you to do things that you do not want to do?  Y  N  Refused
- 10. Do you ever do things that may be considered to be risky like exchange sex for money, food, drugs, or a place to stay, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.** **SCORE:**  
0

### C. Socialization & Daily Functioning

- 11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?  Y  N  Refused
- 12. Do you get any money from the government, an inheritance, an allowance, working under the table, a regular job, or anything like that?  Y  N  Refused

**IF "YES" TO QUESTION 11 OR "NO" TO QUESTION 12, THEN SCORE 1 FOR MONEY MANAGEMENT.** **SCORE:**  
0

- 13. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?  Y  N  Refused

**IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.** **SCORE:**  
0

- 14. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Y  N  Refused

**IF "NO," THEN SCORE 1 FOR SELF-CARE.** **SCORE:**  
0



## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE YOUTH

AMERICAN VERSION 1.0

15. Is your current lack of stable housing...

- a) Because you ran away from your family home, a group home or a foster home?  Y  N  Refused
- b) Because of a difference in religious or cultural beliefs from your parents, guardians or caregivers?  Y  N  Refused
- c) Because your family or friends caused you to become homeless?  Y  N  Refused
- d) Because of conflicts around gender identity or sexual orientation?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.

SCORE:

0

- e) Because of violence at home between family members?  Y  N  Refused
- f) Because of an unhealthy or abusive relationship, either at home or elsewhere?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR ABUSE/TRAUMA.

SCORE:

0

### D. Wellness

- 16. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?  Y  N  Refused
- 17. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Y  N  Refused
- 18. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?  Y  N  Refused
- 19. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Y  N  Refused
- 20. When you are sick or not feeling well, do you avoid getting medical help?  Y  N  Refused
- 21. Are you currently pregnant, have you ever been pregnant, or have you ever gotten someone pregnant?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.

SCORE:

0



**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

SINGLE YOUTH

AMERICAN VERSION 1.0

- 22. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?  Y  N  Refused
- 23. Will drinking or drug use make it difficult for you to stay housed or afford your housing?  Y  N  Refused
- 24. If you've ever used marijuana, did you ever try it at age 12 or younger?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE. SCORE:

- 25. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
  - a) A mental health issue or concern?  Y  N  Refused
  - b) A past head injury?  Y  N  Refused
  - c) A learning disability, developmental disability, or other impairment?  Y  N  Refused
- 26. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH. SCORE:

IF THE RESPONENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY. SCORE:

- 27. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?  Y  N  Refused
- 28. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS. SCORE:

### Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	0 /1	<b>Score: Recommendation</b> 0-3: no housing intervention 4-7: an assessment for Rapid Re-Housing 8+: an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	0 /2	
B. RISKS	0 /4	
C. SOCIALIZATION & DAILY FUNCTIONS	0 /4	
D. WELLNESS	0 /6	
<b>GRAND TOTAL:</b>	0 /17	



**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

SINGLE YOUTH

AMERICAN VERSION 1.0

### Follow-Up Questions

<b>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</b>	place: _____
	time: ____:____ or Night
<b>Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?</b>	phone: (____) _____ - _____
	email: _____
<b>Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?</b>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Refused



## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.01

### Administration

<b>Interviewer's Name</b>	<b>Agency</b>	<input type="radio"/> Team <input type="radio"/> Staff <input type="radio"/> Volunteer
<b>Survey Date</b> <i>DD/MM/YYYY</i> ___/___/___	<b>Survey Time</b> ___ ___ ___	<b>Survey Location</b>

### Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

### Basic Information

<b>First Name</b>	<b>Nickname</b>	<b>Last Name</b>
In what language do you feel best able to express yourself? _____		
<b>Date of Birth</b> <i>DD/MM/YYYY</i> ___/___/___	<b>Age</b>	<b>Social Security Number</b>
		<b>Consent to participate</b> <input type="radio"/> Yes <input type="radio"/> No

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

SCORE:

0



## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.01

### A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)
- Shelters
  - Transitional Housing
  - Safe Haven
  - Outdoors**
  - Other (specify):**  
\_\_\_\_\_
  - Refused**

**IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.** **SCORE:**  
**0**

2. How long has it been since you lived in permanent stable housing? \_\_\_\_\_ Years  Refused
3. In the last three years, how many times have you been homeless? \_\_\_\_\_  Refused

**IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.** **SCORE:**  
**0**

### B. Risks

4. In the past six months, how many times have you...
- a) Received health care at an emergency department/room? \_\_\_\_\_  Refused
  - b) Taken an ambulance to the hospital? \_\_\_\_\_  Refused
  - c) Been hospitalized as an inpatient? \_\_\_\_\_  Refused
  - d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? \_\_\_\_\_  Refused
  - e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? \_\_\_\_\_  Refused
  - f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? \_\_\_\_\_  Refused

**IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.** **SCORE:**  
**0**

5. Have you been attacked or beaten up since you've become homeless?  Y  N  Refused
6. Have you threatened to or tried to harm yourself or anyone else in the last year?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.** **SCORE:**  
**0**



## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.01

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?  Y  N  Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.

SCORE:

0

8. Does anybody force or trick you to do things that you do not want to do?  Y  N  Refused
9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.

SCORE:

0

### C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?  Y  N  Refused
11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?  Y  N  Refused

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR MONEY MANAGEMENT.

SCORE:

0

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?  Y  N  Refused

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.

SCORE:

0

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Y  N  Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE.

SCORE:

0

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?  Y  N  Refused

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.

SCORE:

0





## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.01

### D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?  Y  N  Refused
16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Y  N  Refused
17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?  Y  N  Refused
18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Y  N  Refused
19. When you are sick or not feeling well, do you avoid getting help?  Y  N  Refused
20. *FOR FEMALE RESPONDENTS ONLY:* Are you currently pregnant?  Y  N  N/A or Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.

SCORE:

0

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?  Y  N  Refused
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE.

SCORE:

0

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern?  Y  N  Refused
- b) A past head injury?  Y  N  Refused
- c) A learning disability, developmental disability, or other impairment?  Y  N  Refused
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH.

SCORE:

0

IF THE RESPONENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY.

SCORE:

0



**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

SINGLE ADULTS

AMERICAN VERSION 2.01

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?  Y  N  Refused
26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.** **SCORE:**  
0

27. *YES OR NO:* Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?  Y  N  Refused

**IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.** **SCORE:**  
0

### Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	0 /1	<b>Score: Recommendation</b> 0-3: no housing intervention 4-7: an assessment for Rapid Re-Housing 8+: an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	0 /2	
B. RISKS	0 /4	
C. SOCIALIZATION & DAILY FUNCTIONS	0 /4	
D. WELLNESS	0 /6	
<b>GRAND TOTAL:</b>	0 /17	

### Follow-Up Questions

<b>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</b>	place: _____
	time: ____:____ or Night
<b>Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?</b>	phone: (____) _____ - _____
	email: _____
<b>Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?</b>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Refused



**GUAM HOMELESS COALITION**  
 Providing hope to our neighbors in need

HOME

ABOUT US

I NEED HELP

HOW YOU CAN HELP

DONATE

HEART BUT NO HOME



**FY 2021 Continuum of Care Homeless Assistance Grants**

HUD published the FY2021 Continuum of Care (CoC) Funding Notice for Homeless Assistance Grants on August 18, 2021. Approximately \$2.65 billion is available. Of this, \$102 million is available for Domestic Violence bonus projects. The Notice of Funding Opportunity for the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition (NOFO) has been posted on Grants.gov and is available on the Funding Opportunities page on HUD’s website. Additional resources are available on the Continuum of Care Program Competition page of HUD’s website. The CoC Consolidated Application, CoC Priority Listing, and Project Applications are available in e-snaps. Collaborative Applicants and Project Applicants are able to access the applications to review, update, and enter required information for the application process. Additional guidance is posted on the CoC Program Competition page of HUD’s website.

**Total Available Funding**

CoC Number and Name	PPRN	Estimated ARD	Tier 1	CoC Bonus	DV Bonus	CoC Planning
GU-500 – Guam CoC	\$1,821,723	\$1,351,683	\$1,351,683	\$91,086	\$273,258	\$54,652

**Annual Renewal Demand (ARD)** –The total amount for all projects eligible for renewal in the 2021 competition based on the HUD approved Grants Inventory Worksheet – **\$1,351,683.**

**CoC Planning Costs** – Eligible costs are related to the collaborative process for an application to HUD, evaluating the outcomes of projects, and participating in the jurisdiction's consolidated planning process. The total amount available for this year is **\$54,652**.

Funding for new projects may be created through the reallocation process, bonus funds, or a combination of reallocation and bonus funds. There is an amount allocated to each CoC for bonus projects that is equal to 5% of the Final Pro Rata Need. Currently, Guam has 7 projects funded under the CoC. There may also be reallocation funds available. Reallocation and bonus funds may be combined to fund new projects. All new project applications are included in the project tiering except Planning. These are the current 7 funded projects:

1. Homeless Management Information System (HMIS) – Shared human services database that allows authorized personnel at homeless shelters and social service providers to enter, track, and report on information concerning homeless clients. ARA is \$117,146.
2. Housing First Rental Assistance Program – Tenant based rental assistance program. ARA is \$554,034.
3. Y Jahame Permanent Housing Program – Permanent supportive housing for chronic homeless individuals and families. ARA is \$194,591.
4. Coordinated Entry System (CES) – Provides a process for conducting comprehensive entries of housing and services needs for individuals and families. ARA is \$53,021
5. Guma Manhoben PH-RRH – Expand the tenant based rental assistance for chronically homeless individuals and families. ARA is \$134,888.
6. DV Bonus (Gai Animas) – Assist and provide housing and support service for victims of domestic violence. ARA is \$187,729.
7. Guma Mami Bonus (Inayek Program) – Provide housing and support services to persons with disabilities who are victims of domestic violence. ARA is \$110,274.

### **Important HUD-Required Dates**

- Wednesday, **August 18, 2021** → The 2021 CoC Program NOFO is released.
- Thursday, **August 19, 2021** → The CoC Application, CoC Priority Listing, and Project Applications are available in e-snaps

- On or before Friday, **October 15, 2021** (31 days prior to submission deadline) → All project applications are required to be submitted to the CoC.
- On or before Monday, **November 1, 2021** (15 days prior to submission deadline) → All project applicants, who submitted their project application to the CoC by the CoC's established deadline, will be notified on whether their project application(s) will be accepted and ranked on the CoC Priority Listing, rejected, or reduced by the CoC.
- On or before Friday, **November 12, 2021** (4 days prior to submission deadline) → CoCs must post on their website (or a partner's website) all parts of the CoC Consolidated Application, including the CoC Application attachments and the Priority Listing, and notify community members and key stakeholders that the CoC Consolidated Application is available.

### **New Projects**

We are currently soliciting applications for new projects. We highly encourage the public to apply. If interested, please contact:

Amor Say, [amsay@ghura.org](mailto:amsay@ghura.org) or call 671.475.1406



## **GUAM HOMELESS COALITION**

### **POLICY AND PROCEDURE**

#### **REVIEW AND RANKING OF CONTINUUM OF CARE HOMELESS ASSISTANCE PROGRAMS**

**REFERENCE:** Notice of Funding Opportunity (NOFO) for the Continuum of Care (CoC) Homeless Assistance Program published annually by the U.S. Department of Housing and Urban Development (HUD)

**PURPOSE:** The purpose of this policy is to ensure that the Guam Homeless Coalition (GHC) conducts a transparent and objective process to review and rank all applications for renewal of existing projects and creation of new projects as required by the specified NOFO and to ensure the submission of such applications to HUD within 60-90 days after the NOFO release. The overall goal of the GHC is the elimination of homelessness on Guam as seen in the reduction in the number of homeless individuals and families identified in the Point-in-Time (PIT) sheltered and unsheltered counts and annual sheltered data within the CoC over time.

**POLICY:** As the local CoC, the GHC will conduct a review and ranking of all CoC Homeless Assistance Program project applications. Ranking of renewal projects must incorporate regularly collected data on project performance and effectiveness using established selection criteria and should reflect compliance with the established processes and priorities of the CoC. In order to best serve our community by providing effective projects and capturing the maximum funds available, housing projects will be ranked according to HUD's priorities as established in the NOFO, as well as according to local priorities.

**PROCESS:**

Following the release of the NOFO, a Request For Interest (RFI) will be issued by the Guam Housing and Urban Renewal Authority (GHURA) as the GHC Collaborative Applicant to gather relevant performance documentation from each renewal and new project applicant. Data obtained through the RFI process will be used during the review and ranking of applications.

The objectives of the CoC ranking process are to:

- Comply with all HUD requirements;
- Ensure that each project narrative is fully responsive to the question being asked and that it meets all the criteria for that question as required by the NOFO and that the data provided in various parts of the project application are consistent;
- Preserve funding for high performing projects that are operated in alignment with GHC initiatives, priorities, and other best practices;
- Shift investments from lower performing projects to new projects that help advance our community's goal of ending homelessness;
- Ensure that people of different races or ethnicities receive homeless assistance or positive outcomes by determining whether racial or ethnic disparities are present in projects as well as whether applicants have identified barriers that led to these disparities and have taken steps to eliminate these barriers to improve racial equity; and

## GHC Policy and Procedure: Review and Ranking of CoC Programs

- Review Youth Homeless Demonstration Program (YHDP) project applications for compliance with project eligibility, project quality, and if applicable, project renewal thresholds.

### Review Panel

The Collaborative Applicant, with support from the GHC Planning Committee, will convene an unbiased panel and will prepare final information for their review.

Panelists will review material provided and score applications using the established selection criteria. The panel will then meet to discuss their concerns, average the scores of all panelists, and arrive at a proposed final ranking.

### Priority Order Ranking

Projects will be funded by project type based on the priority order determined by the CoC. Within each group, projects will be scored using established selection criteria and placed in their ranked order by score. Project priority order will be as follows:

1. renewal Homeless Management Information System (HMIS) and Permanent Housing (PH) projects, including Permanent Supportive Housing (PSH) and Rapid Re-Housing (RRH)
2. new PH projects, including PSH and RRH
3. renewal transitional housing or support services only projects
4. any project application submitted by the CoC that was not included in the HUD-approved Grant Inventory Worksheet

### Scoring System

The scoring of applications is based on a points system. Points are earned based on the following criteria:

#### ❖ Current Programs

- Project Performance (McKinney-Vento Performance Based Selection Criteria)
  1. Reduction of the average and median length of time persons remain homelessness
  2. Reduction in the number of persons who are homeless
  3. Increase in the percent of adults who gain or increase employment or non-employment cash income over time
  4. *Only applicants who serve families with children and youth defined as homeless are required to complete the following measures:*
    - a. Reduction in the percent of persons defined as homeless under Category 3 of HUD's homeless definition who return to homelessness within 6 and 12 months
    - b. Reduction in the percent of persons defined as homeless under Category 3 of HUD's homeless definition who return to homelessness within 24
    - c. Increase in the percent of persons who exit to or retain permanent housing
  5. Successful placement from street outreach to emergency shelter, safe haven, transitional housing, or permanent housing destinations.
  6. Successful placement in or retention of permanent housing from emergency shelter, safe haven, transitional housing, or rapid re-housing projects
- Organizational Commitment
- Relative Need
- Project Design
- Financial Management

## GHC Policy and Procedure: Review and Ranking of CoC Programs

- ❖ New Programs
  - Organizational Commitment
  - Relative Need
  - Project Design
  - Readiness to Proceed
  - Financial Management
- ❖ HMIS
  - Project Performance
  - Organizational Commitment
  - Relative Need
  - Financial Management

New PH, RRH, and PSH projects (or renewing projects that have not been operational for a full year) will not have an APR. These projects will therefore receive 0 points for performance.

HMIS renewal applications will be exempt from the full RFI, but will be assessed for performance and spending in alignment with HUD requirements.

### **Project Tiers**

Once the rank order of projects has been determined, the CoC will have the opportunity to prioritize their projects locally by placing them in tiers based on the following financial thresholds:

- Tier 1 is 85% of the CoC Annual Renewal Demand (ARD) in the HUD-approved Grant Inventory Worksheet. Tier 1 projects will be funded by HUD provided they meet all threshold and project quality requirements.
- Tier 2 is the difference between Tier 1 and the final ARD plus any HUD-determined amounts for CoC Homeless Assistance Program (PH or RRH) bonus.

HMIS is a HUD-mandated requirement in order to receive CoC funding. The HMIS renewal will therefore be placed in Tier 1 without any reduction in funding pursuant to the existing Memorandum of Agreement (MOA) between the GHC Collaborative Applicant and the HMIS lead agency.

The overall score for new PH, RRH, and PSH projects (or renewing projects that have not been operational for a full year) will place them in the bottom of their respective groups. However, such applicants will still be placed in Tier 1.

Within the rank order established by the CoC, HUD will select projects from Tier 2 with any remaining available funds in the same priority order specified herein. Based on this, the Tier 2 projects will most likely include all transitional housing or support services only.

The GHC Executive Committee reserves the option of re-ordering the project list to place projects into Tier 2 to best position Guam to receive the maximum amount of funding.

### **Bonus Allocation of Funds**

In the event that Guam receives a bonus allocation of funds for eligible homeless assistance, then the GHC will accept applications for the creation of new project(s). All applications and their subsequent renewal thereafter will be reviewed and ranked according to the CoC policy and procedure described herein.



## **Re-Allocation**

The CoC may use funds taken in whole or in part from existing grants to create new projects through re-allocation. Once created, renewal of such projects will then be reviewed and ranked according to the CoC policy and procedure described herein. Two types of projects may be created:

- Permanent Supportive Housing (PSH) serving chronically homeless people
- Rapid Re-Housing (RRH) serving homeless families coming from streets or shelters (not transitional housing)

## **Ranking Exceptions**

HUD requires CoC to rank all projects except CoC Planning and United Funding Agency (UFA) costs. GHC does not apply for UFA costs. Instead, GHURA as the Collaborative Applicant will continue to apply for CoC Planning Costs.

## **Final Project Priority List and Notification to Applicants**

Once the rating and ranking processes for new and renewal projects are complete, the Collaborative Applicant will create a proposed Project Priority List for review and approval by the GHC Planning Committee and the GHC Executive Committee. This proposed list can include recommendations to adjust the placement of projects in Tier 2 in order to maximize the total funding award for Guam or strengthen the consolidated application. After the Project Priority List is approved, notice of the results will be sent to applicants.

## **Appeal Process**

Applicants may appeal any of the following decisions:

- Placement of project into Tier 2
- Reduction of renewal grant amount (i.e. renewal grant partially re-allocated to a new project)
- Elimination of renewal grant (i.e. entire grant re-allocated to a new project) if not previously notified that grant was to be re-allocated as a result of low performance.

Applicants placed in Tier 1 may not appeal their rank on the Project Priority List.

Appeals must be submitted in writing to the GHC Executive Committee. Appeals will be heard by an appeal panel made up of the non-conflicted members of the GHC Executive Committee who did not serve on the initial review panel. A Collaborative Applicant staff member and a review panel member may be present to inform the discussion. The decision of the appeal panel is final.

## **FORMS USED:**

1. Guam Homeless Coalition Selection Criteria for Continuum of Care Homeless Assistance Programs – Current Programs
2. Guam Homeless Coalition Selection Criteria for Continuum of Care Homeless Assistance Programs – New Programs
3. Guam Homeless Coalition Selection Criteria for Continuum of Care Homeless Assistance Programs – HMIS & Coordinated Entry

**GUAM HOMELESS COALITION SELECTION CRITERIA  
FOR CONTINUUM OF CARE HOMELESS ASSISTANCE PROGRAMS  
\* For Ranking of Renewal Programs \***

**Organization:** \_\_\_\_\_ **Project:** \_\_\_\_\_

**Reviewer:** \_\_\_\_\_ **Date Reviewed:** \_\_\_\_\_

<b>Project Performance</b>	<b>Possible Score</b>	<b>Project Score</b>
Reduction in the average and median length of time persons remain homeless	5	
Reduction in the number of persons who are homeless	5	
Increase in the percent of adults who gain or increase employment or non-employment case income over time	5	
Reduction in the percent of persons defined as homeless under Category 3 of HUD's homeless definition who return to homelessness within 6 to 12 months *	5	
Reduction in the percent of persons defined as homeless under Category 3 of HUD's homeless definition who return to homelessness within 24 months *	5	
Increase the percent of persons who exit to or retain permanent housing	5	
Successful placement from street outreach	5	
Successful placement in or retention of rapid rehousing or permanent housing	5	
Timely and accurate data entry into HMIS or if a victim service provider or legal service provider, entry in a comparable database and provision of de-identified information to the CoC	5	
<b>For Domestic Violence project applicants:</b> Ability to house survivors of domestic violence, dating violence, sexual assault, or stalking and meet safety outcomes	5	
<b>Project Performance of Programs that serve Homeless under Category 3</b>	<b>45</b>	
<b>Project Performance of Domestic Violence Programs</b>	<b>35</b>	
<b>Project Performance of All Other Programs</b>	<b>30</b>	
<b>Organizational Commitment</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the organization have knowledge of and experience with serving the homelessness population?	5	
Does the organization, its employees and partners (if applicable) have the necessary experience and knowledge to carry out the specific activities proposed?	5	
Does the organization participate in GHC activities and events such as the annual Point-In-Time (PIT) Count and Passport to Services?	5	
Does the organization attend regular GHC meeting?	5	
Does the organization participate in GHC subcommittees?	5	
<b>Organizational Commitment</b>	<b>25</b>	
<b>Relative Need</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project directly related to the critical needs of the homeless population?	5	
Does the organization explain how the project is consistent with the mission statement of the Continuum of Care?	5	
Is the project consistent with the Continuum of Care vision and the Gaps Analysis? • Does the project address one of the priority needs identified? • Does the applicant build a case for the need? • Is there any existing housing for this population? If so, is the need much greater than the current capacity?	5	
<b>Relative Need</b>	<b>15</b>	
<b>Project Design</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project narrative fully responsive to the question being asked? Does it meet all the criteria for that question?	5	
Is the data provided in various parts of the project application consistent?	5	

Is the target population clearly described? For example, a project that will serve homeless youth would define the age group to be served – homeless youth age 13 to 17.	5	
Are the type and scale of the housing or services proposed appropriate to the needs of the persons to be served?	5	
Does the project follow a Housing First approach that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions?	5	
Does the project show that people of different races or ethnicities receive homeless assistance or positive outcomes?	5	
Does the project show how it will identify and eliminate any barriers that may lead to racial or ethnic disparities to improve racial equity?	5	
Is the project designed to help participants achieve self-sufficiency and not just meet emergency needs?	5	
Are transportation and community amenities available and accessible?	5	
Is there adequate supervision of the population to be served?	5	
Is there adequate supervision of direct service staff?	5	
Does the project show how it will help to increase stability for the homeless population by accessing mainstream services?	5	
Does the project show how it will help to increase skills for the homeless population?	5	
Does the project show how participants will be helped to access permanent housing and achieve self-sufficiency?	5	
<b>Project Design</b>	<b>70</b>	
<b>Financial Management</b>		<b>Possible Score</b>
Does the application provide clear information that addresses sustainability and a budget that supports the project design?	5	<b>Project Score</b>
Do the project costs, including costs associated with operations, and administrations, reflect the norm for the type of structure of kind of activity?	5	
Is there a financial management system in place that is able to properly account for expenditure of federal funds?	5	
Does the application specify appropriate financial leverage and matching funds?	5	
Has the program been spending its current funds in a timely manner?	5	
Has the program been using its current funds appropriately?	5	
Does the organization submit all program information and reports in a timely manner?	5	
<b>Financial Management</b>	<b>35</b>	

**Comments:** \_\_\_\_\_

Ranking of Renewal Programs That Serve Homeless Under Category 3		Ranking of All Other Renewal Programs	
Project Performance (Max 45 pts)		Project Performance (Max 30 pts; Max 35 pts For DV Programs)	
Organizational Commitment (Max 25 pts)		Organizational Commitment (Max 25 pts)	
Relative Need (Max 15 pts)		Relative Need (Max 15 pts)	
Project Design (Max 60 pts)		Project Design (Max 60 pts)	
Financial Management (Max 35 pts)		Financial Management (Max 35 pts)	
<b>TOTAL PROJECT SCORE (Max 160 pts)</b>		<b>TOTAL PROJECT SCORE (Max 165 pts; Max 170 pts for DV Programs)</b>	
<b>FINAL AVERAGE (Total Project Score / 155)</b>		<b>FINAL AVERAGE (Total Project Score / 160) For DV Programs (Total Project Score / 165 pts)</b>	

**\*Category 3 as per HEARTH Act:** Families with children or unaccompanied youth who are unstably housed and likely to continue in that state. This category applies to families with children or unaccompanied youth (up to age 24) who have not had a lease or ownership interest in a housing unit in the last 60 or more days, have had two or more moves in the last 60 days, and who are likely to continue to be unstably housed because of disability or multiple barriers to employment.

**GUAM HOMELESS COALITION SELECTION CRITERIA  
FOR CONTINUUM OF CARE HOMELESS ASSISTANCE PROGRAMS  
\*For Ranking of New Programs\***

**Organization:** \_\_\_\_\_ **Project:** \_\_\_\_\_

**Reviewer:** \_\_\_\_\_ **Date Reviewed:** \_\_\_\_\_

<b>Organizational Commitment</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the organization have knowledge of and experience with serving the homelessness population?	5	
Does the organization, its employees and partners (if applicable) have the necessary experience and knowledge to carry out the specific activities proposed?	5	
Does the organization participate in GHC activities and events such as the annual Point-In-Time (PIT) Count and Passport to Services?	5	
Does the organization attend regular GHC meeting?	5	
Does the organization participate in GHC subcommittees?	5	
<b><i>For new Domestic Violence project applicants only:</i></b> What is the applicant's previous performance in serving survivors of domestic violence, dating violence, sexual assault, or stalking, and their ability to house survivors and meet safety outcomes?	5	
<b>Organizational Commitment of Domestic Violence Project Applicants</b>	<b>30</b>	
<b>Organizational Commitment of All Other Applicants</b>	<b>25</b>	
<b>Relative Need</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project directly related to the critical needs of the homeless population?	5	
Does the organization explain how the project is consistent with the mission statement of the Continuum of Care?	5	
Is the project consistent with the Continuum of Care vision and the Gaps Analysis? • Does the project address one of the priority needs identified? • Does the applicant build a case for the need? • Is there any existing housing for this population? If so, is the need much greater than the current capacity?	5	
<b>Relative Need</b>	<b>15</b>	
<b>Project Design – The proposal should explain the population that will be served and how it meets their needs.</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project narrative fully responsive to the question being asked? Does it meet all the criteria for that question?	5	
Is the target population clearly described? For example, a project that will serve homeless youth would define the age group to be served – homeless youth age 13 to 17.	5	
Are the type and scale of the housing or services proposed appropriate to the needs of the persons to be served?	5	
Does the project follow a Housing First approach that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions?	5	
Does the project show that people of different races or ethnicities receive homeless assistance or positive outcomes?	5	
Does the project show how it will identify and eliminate any barriers that may lead to racial or ethnic disparities to improve racial equity?	5	
Is the project designed to help participants achieve self-sufficiency and not just meet emergency needs?	5	
Are transportation and community amenities available and accessible?	5	

Is there adequate supervision of the population to be served?	5	
Is there adequate supervision of direct service staff?	5	
Does the project show how it will help to increase stability for the homeless population by accessing mainstream services?	5	
Does the project show how it will help to increase skills for the homeless population?	5	
Does the project show how participants will be helped to access permanent housing and achieve self-sufficiency?	5	
Does the project specify how it will ensure timely and accurate data entry into HMIS or if a victim service provider or legal service provider, entry in a comparable database and provision of de-identified information to the CoC?	5	
<b>Project Design</b>	<b>60</b>	
<b>Readiness to Proceed</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the organization have the essential staff with the required knowledge and experience to implement the program?	5	
Does the organization have an implementation plan that includes the position descriptions and a timeline to hire staff?	5	
Does the organization have site control of the property where the project will take place?	5	
Does the organization have the ability to provide sound programmatic and fiscal oversight?	5	
<b>Readiness to Proceed</b>	<b>20</b>	
<b>Financial Management</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the application provide clear information that addresses sustainability and a budget that supports the project design?	5	
Do the project costs, including costs associated with operations, and administrations, reflect the norm for the type of structure of kind of activity?	5	
Is there a financial management system in place that is able to properly account for expenditure of federal funds?	5	
Does the application specify appropriate financial leverage and matching funds?	5	
<b>Financial Management</b>	<b>20</b>	

**Comments:** \_\_\_\_\_

Ranking of New Programs	
Organizational Commitment (Max 25 pts; Max 30 pts for DV Project Applicants)	
Relative Need (Max 15 pts)	
Project Design (Max 60 pts)	
Readiness to Proceed (Max 20 pts)	
Financial Management (Max 20 pts)	
<b>TOTAL PROJECT SCORE (Max 130 pts)</b> For DV Applicants (Max 135 pts)	
<b>FINAL AVERAGE (Total Project Score / 130)</b> For DV Applicants (Total Project Score / 135)	

**GUAM HOMELESS COALITION SELECTION CRITERIA  
FOR CONTINUUM OF CARE HOMELESS ASSISTANCE PROGRAMS  
\* For Ranking of HMIS and Coordinated Entry\***

**Organization:** \_\_\_\_\_ **Project:** \_\_\_\_\_

**Reviewer:** \_\_\_\_\_ **Date Reviewed:** \_\_\_\_\_

<b>Project Performance</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project narrative fully responsive to the question being asked? Does it meet all the criteria for that question?	5	
Is the data provided in various parts of the project application consistent?	5	
Does the project maintain and report on universal and program-specific data elements?	5	
Does the project analyze metadata (information about the data itself)?	5	
Does the project ensure proper collection of data and maintenance of the database?	5	
Does the project periodically run and review audit reports to ensure appropriate privacy and data access policies are being followed by end users?	5	
Does the project provide timely and adequate training and assistance to end users?	5	
Does the organization submit all program information and reports in a timely manner	5	
Does the project meet the information needs of the community regarding homelessness?	5	
<b>Project Performance</b>	<b>45</b>	
<b>Organizational Commitment</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the organization, its employees and partners (if applicable) have the necessary experience and knowledge to carry out the specific activities proposed?	5	
Does the organization participate in GHC activities and events such as the annual Point-In-Time (PIT) Count and Passport to Services?	5	
Does the organization attend regular GHC meeting?	5	
Does the organization participate in GHC subcommittees?	5	
<b>Organizational Commitment</b>	<b>20</b>	
<b>Relative Need</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project directly related to meeting the information needs of the GHC service providers?	5	
Does the organization explain how the project is consistent with the mission statement of the Continuum of Care?	5	
<b>Relative Need</b>	<b>10</b>	
<b>Financial Management</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the application provide clear information that addresses sustainability and a budget that supports the project design?	5	
Do the project costs, including costs associated with operations, and administrations, reflect the norm for the type of structure of kind of activity?	5	
Is there a financial management system in place that is able to properly account for expenditure of federal funds?	5	
Does the application specify appropriate financial leverage and matching funds?	5	
Has the program been spending its current funds in a timely manner?	5	
Has the program been using its current funds appropriately?	5	
<b>Financial Management</b>	<b>30</b>	

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Ranking of HMIS and Coordinated Entry</b>	
Project Performance (Max 45 pts)	
Organizational Commitment (Max 20 pts)	
Relative Need (Max 10 pts)	
Financial Management (Max 30 pts)	
<b>TOTAL PROJECT SCORE (Max 105 pts)</b>	
<b>FINAL AVERAGE (Total Project Score / 105)</b>	

**GUAM HOMELESS COALITION SELECTION CRITERIA  
FOR CONTINUUM OF CARE HOMELESS ASSISTANCE PROGRAMS  
\* For Ranking of Renewal Programs \***

**Organization:** \_\_\_\_\_ **Project:** \_\_\_\_\_

**Reviewer:** \_\_\_\_\_ **Date Reviewed:** \_\_\_\_\_

<b>Project Performance</b>	<b>Possible Score</b>	<b>Project Score</b>
Reduction in the average and median length of time persons remain homeless	5	
Reduction in the number of persons who are homeless	5	
Increase in the percent of adults who gain or increase employment or non-employment case income over time	5	
Reduction in the percent of persons defined as homeless under Category 3 of HUD's homeless definition who return to homelessness within 6 to 12 months *	5	
Reduction in the percent of persons defined as homeless under Category 3 of HUD's homeless definition who return to homelessness within 24 months *	5	
Increase the percent of persons who exit to or retain permanent housing	5	
Successful placement from street outreach	5	
Successful placement in or retention of rapid rehousing or permanent housing	5	
Timely and accurate data entry into HMIS or if a victim service provider or legal service provider, entry in a comparable database and provision of de-identified information to the CoC	5	
<b>For Domestic Violence project applicants:</b> Ability to house survivors of domestic violence, dating violence, sexual assault, or stalking and meet safety outcomes	5	
<b>Project Performance of Programs that serve Homeless under Category 3</b>	<b>45</b>	
<b>Project Performance of Domestic Violence Programs</b>	<b>35</b>	
<b>Project Performance of All Other Programs</b>	<b>30</b>	
<b>Organizational Commitment</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the organization have knowledge of and experience with serving the homelessness population?	5	
Does the organization, its employees and partners (if applicable) have the necessary experience and knowledge to carry out the specific activities proposed?	5	
Does the organization participate in GHC activities and events such as the annual Point-In-Time (PIT) Count and Passport to Services?	5	
Does the organization attend regular GHC meeting?	5	
Does the organization participate in GHC subcommittees?	5	
<b>Organizational Commitment</b>	<b>25</b>	
<b>Relative Need</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project directly related to the critical needs of the homeless population?	5	
Does the organization explain how the project is consistent with the mission statement of the Continuum of Care?	5	
Is the project consistent with the Continuum of Care vision and the Gaps Analysis? • Does the project address one of the priority needs identified? • Does the applicant build a case for the need? • Is there any existing housing for this population? If so, is the need much greater than the current capacity?	5	
<b>Relative Need</b>	<b>15</b>	
<b>Project Design</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project narrative fully responsive to the question being asked? Does it meet all the criteria for that question?	5	
Is the data provided in various parts of the project application consistent?	5	



Is the target population clearly described? For example, a project that will serve homeless youth would define the age group to be served – homeless youth age 13 to 17.	5	
Are the type and scale of the housing or services proposed appropriate to the needs of the persons to be served?	5	
Does the project follow a Housing First approach that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions?	5	
Does the project show that people of different races or ethnicities receive homeless assistance or positive outcomes?	5	
Does the project show how it will identify and eliminate any barriers that may lead to racial or ethnic disparities to improve racial equity?	5	
Is the project designed to help participants achieve self-sufficiency and not just meet emergency needs?	5	
Are transportation and community amenities available and accessible?	5	
Is there adequate supervision of the population to be served?	5	
Is there adequate supervision of direct service staff?	5	
Does the project show how it will help to increase stability for the homeless population by accessing mainstream services?	5	
Does the project show how it will help to increase skills for the homeless population?	5	
Does the project show how participants will be helped to access permanent housing and achieve self-sufficiency?	5	
<b>Project Design</b>	<b>70</b>	
<b>Financial Management</b>		
	<b>Possible Score</b>	<b>Project Score</b>
Does the application provide clear information that addresses sustainability and a budget that supports the project design?	5	
Do the project costs, including costs associated with operations, and administrations, reflect the norm for the type of structure of kind of activity?	5	
Is there a financial management system in place that is able to properly account for expenditure of federal funds?	5	
Does the application specify appropriate financial leverage and matching funds?	5	
Has the program been spending its current funds in a timely manner?	5	
Has the program been using its current funds appropriately?	5	
Does the organization submit all program information and reports in a timely manner?	5	
<b>Financial Management</b>	<b>35</b>	

**Comments:** \_\_\_\_\_

Ranking of Renewal Programs That Serve Homeless Under Category 3		Ranking of All Other Renewal Programs	
Project Performance (Max 45 pts)		Project Performance (Max 30 pts; Max 35 pts For DV Programs)	
Organizational Commitment (Max 25 pts)		Organizational Commitment (Max 25 pts)	
Relative Need (Max 15 pts)		Relative Need (Max 15 pts)	
Project Design (Max 60 pts)		Project Design (Max 60 pts)	
Financial Management (Max 35 pts)		Financial Management (Max 35 pts)	
<b>TOTAL PROJECT SCORE (Max 160 pts)</b>		<b>TOTAL PROJECT SCORE (Max 165 pts; Max 170 pts for DV Programs)</b>	
<b>FINAL AVERAGE (Total Project Score / 155)</b>		<b>FINAL AVERAGE (Total Project Score / 160) For DV Programs (Total Project Score / 165 pts)</b>	

**\*Category 3 as per HEARTH Act:** Families with children or unaccompanied youth who are unstably housed and likely to continue in that state. This category applies to families with children or unaccompanied youth (up to age 24) who have not had a lease or ownership interest in a housing unit in the last 60 or more days, have had two or more moves in the last 60 days, and who are likely to continue to be unstably housed because of disability or multiple barriers to employment.

**GUAM HOMELESS COALITION SELECTION CRITERIA  
FOR CONTINUUM OF CARE HOMELESS ASSISTANCE PROGRAMS  
\*For Ranking of New Programs\***

**Organization:** \_\_\_\_\_ **Project:** \_\_\_\_\_

**Reviewer:** \_\_\_\_\_ **Date Reviewed:** \_\_\_\_\_

<b>Organizational Commitment</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the organization have knowledge of and experience with serving the homelessness population?	5	
Does the organization, its employees and partners (if applicable) have the necessary experience and knowledge to carry out the specific activities proposed?	5	
Does the organization participate in GHC activities and events such as the annual Point-In-Time (PIT) Count and Passport to Services?	5	
Does the organization attend regular GHC meeting?	5	
Does the organization participate in GHC subcommittees?	5	
<b><i>For new Domestic Violence project applicants only:</i></b> What is the applicant's previous performance in serving survivors of domestic violence, dating violence, sexual assault, or stalking, and their ability to house survivors and meet safety outcomes?	5	
<b>Organizational Commitment of Domestic Violence Project Applicants</b>	<b>30</b>	
<b>Organizational Commitment of All Other Applicants</b>	<b>25</b>	
<b>Relative Need</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project directly related to the critical needs of the homeless population?	5	
Does the organization explain how the project is consistent with the mission statement of the Continuum of Care?	5	
Is the project consistent with the Continuum of Care vision and the Gaps Analysis? • Does the project address one of the priority needs identified? • Does the applicant build a case for the need? • Is there any existing housing for this population? If so, is the need much greater than the current capacity?	5	
<b>Relative Need</b>	<b>15</b>	
<b>Project Design – The proposal should explain the population that will be served and how it meets their needs.</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project narrative fully responsive to the question being asked? Does it meet all the criteria for that question?	5	
Is the target population clearly described? For example, a project that will serve homeless youth would define the age group to be served – homeless youth age 13 to 17.	5	
Are the type and scale of the housing or services proposed appropriate to the needs of the persons to be served?	5	
Does the project follow a Housing First approach that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions?	5	
Does the project show that people of different races or ethnicities receive homeless assistance or positive outcomes?	5	
Does the project show how it will identify and eliminate any barriers that may lead to racial or ethnic disparities to improve racial equity?	5	
Is the project designed to help participants achieve self-sufficiency and not just meet emergency needs?	5	
Are transportation and community amenities available and accessible?	5	

Is there adequate supervision of the population to be served?	5	
Is there adequate supervision of direct service staff?	5	
Does the project show how it will help to increase stability for the homeless population by accessing mainstream services?	5	
Does the project show how it will help to increase skills for the homeless population?	5	
Does the project show how participants will be helped to access permanent housing and achieve self-sufficiency?	5	
Does the project specify how it will ensure timely and accurate data entry into HMIS or if a victim service provider or legal service provider, entry in a comparable database and provision of de-identified information to the CoC?	5	
<b>Project Design</b>	<b>60</b>	
<b>Readiness to Proceed</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the organization have the essential staff with the required knowledge and experience to implement the program?	5	
Does the organization have an implementation plan that includes the position descriptions and a timeline to hire staff?	5	
Does the organization have site control of the property where the project will take place?	5	
Does the organization have the ability to provide sound programmatic and fiscal oversight?	5	
<b>Readiness to Proceed</b>	<b>20</b>	
<b>Financial Management</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the application provide clear information that addresses sustainability and a budget that supports the project design?	5	
Do the project costs, including costs associated with operations, and administrations, reflect the norm for the type of structure of kind of activity?	5	
Is there a financial management system in place that is able to properly account for expenditure of federal funds?	5	
Does the application specify appropriate financial leverage and matching funds?	5	
<b>Financial Management</b>	<b>20</b>	

**Comments:** \_\_\_\_\_

Ranking of New Programs	
Organizational Commitment (Max 25 pts; Max 30 pts for DV Project Applicants)	
Relative Need (Max 15 pts)	
Project Design (Max 60 pts)	
Readiness to Proceed (Max 20 pts)	
Financial Management (Max 20 pts)	
TOTAL PROJECT SCORE (Max 130 pts) For DV Applicants (Max 135 pts)	
FINAL AVERAGE (Total Project Score / 130) For DV Applicants (Total Project Score / 135)	

**GUAM HOMELESS COALITION SELECTION CRITERIA  
FOR CONTINUUM OF CARE HOMELESS ASSISTANCE PROGRAMS  
\* For Ranking of HMIS and Coordinated Entry\***

**Organization:** \_\_\_\_\_ **Project:** \_\_\_\_\_

**Reviewer:** \_\_\_\_\_ **Date Reviewed:** \_\_\_\_\_

<b>Project Performance</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project narrative fully responsive to the question being asked? Does it meet all the criteria for that question?	5	
Is the data provided in various parts of the project application consistent?	5	
Does the project maintain and report on universal and program-specific data elements?	5	
Does the project analyze metadata (information about the data itself)?	5	
Does the project ensure proper collection of data and maintenance of the database?	5	
Does the project periodically run and review audit reports to ensure appropriate privacy and data access policies are being followed by end users?	5	
Does the project provide timely and adequate training and assistance to end users?	5	
Does the organization submit all program information and reports in a timely manner	5	
Does the project meet the information needs of the community regarding homelessness?	5	
<b>Project Performance</b>	<b>45</b>	
<b>Organizational Commitment</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the organization, its employees and partners (if applicable) have the necessary experience and knowledge to carry out the specific activities proposed?	5	
Does the organization participate in GHC activities and events such as the annual Point-In-Time (PIT) Count and Passport to Services?	5	
Does the organization attend regular GHC meeting?	5	
Does the organization participate in GHC subcommittees?	5	
<b>Organizational Commitment</b>	<b>20</b>	
<b>Relative Need</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project directly related to meeting the information needs of the GHC service providers?	5	
Does the organization explain how the project is consistent with the mission statement of the Continuum of Care?	5	
<b>Relative Need</b>	<b>10</b>	
<b>Financial Management</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the application provide clear information that addresses sustainability and a budget that supports the project design?	5	
Do the project costs, including costs associated with operations, and administrations, reflect the norm for the type of structure of kind of activity?	5	
Is there a financial management system in place that is able to properly account for expenditure of federal funds?	5	
Does the application specify appropriate financial leverage and matching funds?	5	
Has the program been spending its current funds in a timely manner?	5	
Has the program been using its current funds appropriately?	5	
<b>Financial Management</b>	<b>30</b>	

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Ranking of HMIS and Coordinated Entry</b>	
<b>Project Performance (Max 45 pts)</b>	
<b>Organizational Commitment (Max 20 pts)</b>	
<b>Relative Need (Max 10 pts)</b>	
<b>Financial Management (Max 30 pts)</b>	
<b>TOTAL PROJECT SCORE (Max 105 pts)</b>	
<b>FINAL AVERAGE (Total Project Score / 105)</b>	

**GUAM HOMELESS COALITION SELECTION CRITERIA  
FOR CONTINUUM OF CARE HOMELESS ASSISTANCE PROGRAMS  
\* For Ranking of Renewal Programs \***

**Organization:** \_\_\_\_\_ **Project:** \_\_\_\_\_

**Reviewer:** \_\_\_\_\_ **Date Reviewed:** \_\_\_\_\_

<b>Project Performance</b>	<b>Possible Score</b>	<b>Project Score</b>
Reduction in the average and median length of time persons remain homeless	5	
Reduction in the number of persons who are homeless	5	
Increase in the percent of adults who gain or increase employment or non-employment case income over time	5	
Reduction in the percent of persons defined as homeless under Category 3 of HUD's homeless definition who return to homelessness within 6 to 12 months *	5	
Reduction in the percent of persons defined as homeless under Category 3 of HUD's homeless definition who return to homelessness within 24 months *	5	
Increase the percent of persons who exit to or retain permanent housing	5	
Successful placement from street outreach	5	
Successful placement in or retention of rapid rehousing or permanent housing	5	
Timely and accurate data entry into HMIS or if a victim service provider or legal service provider, entry in a comparable database and provision of de-identified information to the CoC	5	
<b>For Domestic Violence project applicants:</b> Ability to house survivors of domestic violence, dating violence, sexual assault, or stalking and meet safety outcomes	5	
<b>Project Performance of Programs that serve Homeless under Category 3</b>	<b>45</b>	
<b>Project Performance of Domestic Violence Programs</b>	<b>35</b>	
<b>Project Performance of All Other Programs</b>	<b>30</b>	
<b>Organizational Commitment</b>	<b>Possible Score</b>	<b>Project Score</b>
Does the organization have knowledge of and experience with serving the homelessness population?	5	
Does the organization, its employees and partners (if applicable) have the necessary experience and knowledge to carry out the specific activities proposed?	5	
Does the organization participate in GHC activities and events such as the annual Point-In-Time (PIT) Count and Passport to Services?	5	
Does the organization attend regular GHC meeting?	5	
Does the organization participate in GHC subcommittees?	5	
<b>Organizational Commitment</b>	<b>25</b>	
<b>Relative Need</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project directly related to the critical needs of the homeless population?	5	
Does the organization explain how the project is consistent with the mission statement of the Continuum of Care?	5	
Is the project consistent with the Continuum of Care vision and the Gaps Analysis? • Does the project address one of the priority needs identified? • Does the applicant build a case for the need? • Is there any existing housing for this population? If so, is the need much greater than the current capacity?	5	
<b>Relative Need</b>	<b>15</b>	
<b>Project Design</b>	<b>Possible Score</b>	<b>Project Score</b>
Is the project narrative fully responsive to the question being asked? Does it meet all the criteria for that question?	5	
Is the data provided in various parts of the project application consistent?	5	

Is the target population clearly described? For example, a project that will serve homeless youth would define the age group to be served – homeless youth age 13 to 17.	5	
Are the type and scale of the housing or services proposed appropriate to the needs of the persons to be served?	5	
Does the project follow a Housing First approach that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions?	5	
Does the project show that people of different races or ethnicities receive homeless assistance or positive outcomes?	5	
Does the project show how it will identify and eliminate any barriers that may lead to racial or ethnic disparities to improve racial equity?	5	
Is the project designed to help participants achieve self-sufficiency and not just meet emergency needs?	5	
Are transportation and community amenities available and accessible?	5	
Is there adequate supervision of the population to be served?	5	
Is there adequate supervision of direct service staff?	5	
Does the project show how it will help to increase stability for the homeless population by accessing mainstream services?	5	
Does the project show how it will help to increase skills for the homeless population?	5	
Does the project show how participants will be helped to access permanent housing and achieve self-sufficiency?	5	
<b>Project Design</b>	<b>70</b>	
<b>Financial Management</b>		<b>Possible Score</b>
Does the application provide clear information that addresses sustainability and a budget that supports the project design?	5	<b>Project Score</b>
Do the project costs, including costs associated with operations, and administrations, reflect the norm for the type of structure of kind of activity?	5	
Is there a financial management system in place that is able to properly account for expenditure of federal funds?	5	
Does the application specify appropriate financial leverage and matching funds?	5	
Has the program been spending its current funds in a timely manner?	5	
Has the program been using its current funds appropriately?	5	
Does the organization submit all program information and reports in a timely manner?	5	
<b>Financial Management</b>	<b>35</b>	

**Comments:** \_\_\_\_\_

Ranking of Renewal Programs That Serve Homeless Under Category 3		Ranking of All Other Renewal Programs	
Project Performance (Max 45 pts)		Project Performance (Max 30 pts; Max 35 pts For DV Programs)	
Organizational Commitment (Max 25 pts)		Organizational Commitment (Max 25 pts)	
Relative Need (Max 15 pts)		Relative Need (Max 15 pts)	
Project Design (Max 60 pts)		Project Design (Max 70 pts)	
Financial Management (Max 35 pts)		Financial Management (Max 35 pts)	
<b>TOTAL PROJECT SCORE (Max 160 pts)</b>		<b>TOTAL PROJECT SCORE (Max 175 pts; Max 180 pts for DV Programs)</b>	
<b>FINAL AVERAGE (Total Project Score / 155)</b>		<b>FINAL AVERAGE (Total Project Score / 175) For DV Programs (Total Project Score / 180 pts)</b>	

**\*Category 3 as per HEARTH Act:** Families with children or unaccompanied youth who are unstably housed and likely to continue in that state. This category applies to families with children or unaccompanied youth (up to age 24) who have not had a lease or ownership interest in a housing unit in the last 60 or more days, have had two or more moves in the last 60 days, and who are likely to continue to be unstably housed because of disability or multiple barriers to employment.

November 1, 2021

**FOR IMMEDIATE RELEASE**

**Guam Homeless Coalition Announces the Results of Review and Ranking for the  
FY 2021 Continuum of Care (CoC) Program Competition**

The Guam Homeless Coalition (GHC) Review and Ranking Committee is pleased to announce the results of its review of all project applications submitted under the **FY2021 CoC Program Competition**.

The GHC Review and Ranking Committee is a subcommittee composed of members representing agencies and organizations that do not receive CoC funding. As part of the selection process, the GHC Review and Ranking Committee reviews information provided by applicants, HMIS, the GHC Secretary, and ongoing monitoring by HUD and GHURA as the collaborative applicant in the areas of Project Performance, Experience and Organizational Commitment, Relative Need, Project Design and Effectiveness, and Financial Management. Consideration is also given to HUD and CoC program priorities, mandates, and ongoing monitoring. Note that the final decision on selected project applicants and funding levels is determined by HUD.

Rank	Type	Program Name	Description	Award Amount	Final Project Score	RRC Recommendations
1	NEW	Anchor of Hope (First Church of God)	Permanent housing program for victims of domestic violence and sexual assault	\$201,360	76.77%	Approved at requested funding level under Reallocation and CoC Bonus

Rank	Type	Organization	Program Name	Award Amount	Final Project Score	RRC Recommendations
1	Renewal HMIS	The Salvation Army Guam	Homeless Management Information System (HMIS)	\$117,146	95.05%	Maintain current funding
2	Renewal	Catholic Social Services	Coordinated Entry System (CES)	\$53,021	89.33%	Maintain current funding
3	Renewal	GHURA	Housing First Rental Assistance Program	\$554,034	86.86%	Maintain current funding
4	Renewal	Sanctuary Inc.	Guma Manhoben	\$134,888	85.71%	Maintain current funding
5	Renewal	Catholic Social Services	Y Jahame	\$194,591	85.94%	Maintain current funding
6	Renewal	Catholic Social Services	Gai Animas	\$187,729	84.78%	Maintain current funding
7	Renewal	Guma Mami Inc.	Guma Mami Inayek	\$110,274	71.00%	Reallocate funds to new program(s)



**Renewal Program Description:**

1. *Homeless Management Information System (HMIS)* - Shared human services database that allows authorized personnel at homeless shelters and social service providers to enter, track, and report on information concerning homeless clients.
2. *Coordinated Entry System (CES)* - Provides a process for conducting comprehensive entries of housing and services needs for individuals and families.
3. *Housing First Rental Assistance Program* - Tenant based rental assistance program.
4. *Guma Manhoben (PH-RRH)* - Expand the tenant based rental assistance for chronically homeless individuals and families.
5. *Y Jahame Permanent Housing Program* - Permanent supportive housing for chronic homeless individuals and families.
6. *Gai Animas* - Assist and provide housing and support service for victims of domestic violence.

Funding Name	Description	Amount Awarded
FY 2021 CoC Planning Costs	Eligible costs are related to the collaborative process for an application to HUD, evaluating the outcomes of projects, and participating in the jurisdiction's consolidated planning process.	<b>\$54,652</b>

If you have any questions or concerns regarding these results and/or the review and ranking process, please email Angelina Lape at [aclape@gdoe.net](mailto:aclape@gdoe.net).

**\*\*\* END OF STATEMENT \*\*\***



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## Press Release – FY2021 CoC Review and Ranking Results for ALL Project Applications

The Guam Homeless Coalition (GHC) Review and Ranking Committee is pleased to announce the results of its review of all project applications submitted under the **FY2021 CoC Program Competition**.

November 1, 2021

**FOR IMMEDIATE RELEASE**

**Guam Homeless Coalition Announces the Results of Review and Ranking for the  
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The GHC Review and Ranking Committee is a subcommittee composed of members representing agencies and organizations that do not receive CoC funding. As part of the selection process, the GHC Review and Ranking Committee reviews information provided by applicants, HMIS, the GHC Secretary, and ongoing monitoring by HUD and GHURA as the collaborative applicant in the areas of Project Performance, Experience and Organizational Commitment, Relative Need, Project Design and Effectiveness, and Financial Management. Consideration is also given to HUD and CoC program priorities, mandates, and ongoing monitoring. Note that the final decision on selected project applicants and funding levels is determined by HUD.

Rank	Type	Program Name	Description	Award Amount	RRC Recommendations
1	NEW	Anchor of Hope (First Church of God)	Permanent housing program for victims of domestic violence and sexual assault	\$201,360	Approved at requested funding level under Reallocation and CoC Bonus

Rank	Type	Organization	Program Name	Award Amount	RRC Recommendations
1	Renewal HMIS	The Salvation Army Guam	Homeless Management Information System (HMIS)	\$117,146	Maintain current funding
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4	Renewal	Sanctuary Inc.	Guma Manhoben	\$134,888	Maintain current funding
5	Renewal	Catholic Social Services	Y Jahame	\$194,591	Maintain current funding
6	Renewal	Catholic Social Services	Gai Animas	\$187,729	Maintain current funding
7	Renewal	Guma Mami Inc.	Guma Mami Inayek	\$110,274	Reallocate funds to new program(s)

**Renewal Program Description:**

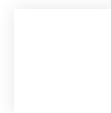
1. *Homeless Management Information System (HMIS)* - Shared human services database that allows authorized personnel at homeless shelters and social service providers to enter, track, and report on information concerning homeless clients.
2. *Coordinated Entry System (CES)* - Provides a process for conducting comprehensive entries of housing and services needs for individuals and families.
3. *Housing First Rental Assistance Program* - Tenant based rental assistance program.
4. *Guma Manhoben (PH-RRH)* - Expand the tenant based rental assistance for chronically homeless individuals and families.
5. *Y Jahame Permanent Housing Program* - Permanent supportive housing for chronic homeless individuals and families.
6. *Gai Animas* - Assist and provide housing and support service for victims of domestic violence.

Funding Name	Description	Amount Awarded
FY 2021 CoC Planning Costs	Eligible costs are related to the collaborative process for an application to HUD, evaluating the outcomes of projects, and participating in the jurisdiction's consolidated planning process.	<b>\$54,652</b>

If you have any questions or concerns regarding these results and/or the review and ranking process, please email Angelina Lape at [aclape@gdoe.net](mailto:aclape@gdoe.net).

**\*\*\* END OF STATEMENT \*\*\***

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Samantha Taitano  
Chairperson

Samuel Ilesugam  
Vice-Chairperson

*Vacant*  
Treasurer

*Vacant*  
Secretary

Diana Calvo  
Member-at-Large,  
Direct Service Provider

Angelina-Marie C. Lape  
Member-at-Large,  
Indirect Service Provider

Anthony Cruz  
Member-at-Large,  
Homeless Representative

Date: November 1, 2021

To: Samuel Ilesugam  
Director, Guma' Mami Inc.

From: Chairperson, GHC Review and Ranking Committee

Subject: Results of Review and Ranking  
FY 2021 Continuum of Care (CoC) Program Competition

To Whom It May Concern:

Thank you for submitting your application to the Guam Homeless Coalition (GHC) for the renewal of the **Guma Mami DV Bonus** as part of the FY 2021 CoC Program Competition.

The RRC is comprised of GHC members representing agencies and organizations that do not receive CoC funding. As part of the selection process, the RRC reviews information provided by applicants, HMIS, and the GHC Secretary in the areas of Project Performance, Experience and Organizational Commitment, Relative Need, Project Design and Effectiveness, and Financial Management. Consideration is also given to HUD and CoC program priorities and mandates. HUD makes the final determination on selected project applicants and funding levels.

**Please be advised that the RRC has recommended to reallocate funds from the Guma' Mami DV Bonus to a new program.** While the committee agrees that there is a need for supportive services for homeless persons with disabilities who are victims of domestic and sexual violence, your project does not meet current HUD and GHC thresholds. Specifically, your organization has not demonstrated effective use of federal funds including satisfactory drawdowns and performance for existing grants as evidenced by compliance with CoC homeless documentation and recordkeeping requirements, submission of updated written policies and procedures, regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.

We thank you for taking the time and effort to develop and submit your proposal. If you have any questions or concerns, please contact me via email at [aclape@gdoe.net](mailto:aclape@gdoe.net). Again, thank you for your interest and continued efforts to address homelessness on Guam.

Sincerely,

*Angelina - Marie C. Lape*  
ANGELINA-MARIE C. LAPE

Cc: Samantha Taitano, Chairperson, Guam Homeless Coalition  
Katherine Taitano, Chief Planner, GHURA  
Amor Say, Planner, GHURA



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## Press Release – FY2021 CoC Review and Ranking Results for ALL Project Applications

The Guam Homeless Coalition (GHC) Review and Ranking Committee is pleased to announce the results of its review of all project applications submitted under the **FY2021 CoC Program Competition**.

November 1, 2021

**FOR IMMEDIATE RELEASE**

**Guam Homeless Coalition Announces the Results of Review and Ranking for the  
FY 2021 Continuum of Care (CoC) Program Competition**

The Guam Homeless Coalition (GHC) Review and Ranking Committee is pleased to announce the results of its review of all project applications submitted under the **FY2021 CoC Program Competition**.

The GHC Review and Ranking Committee is a subcommittee composed of members representing agencies and organizations that do not receive CoC funding. As part of the selection process, the GHC Review and Ranking Committee reviews information provided by applicants, HMIS, the GHC Secretary, and ongoing monitoring by HUD and GHURA as the collaborative applicant in the areas of Project Performance, Experience and Organizational Commitment, Relative Need, Project Design and Effectiveness, and Financial Management. Consideration is also given to HUD and CoC program priorities, mandates, and ongoing monitoring. Note that the final decision on selected project applicants and funding levels is determined by HUD.

Rank	Type	Program Name	Description	Award Amount	RRC Recommendations
1	NEW	Anchor of Hope (First Church of God)	Permanent housing program for victims of domestic violence and sexual assault	\$201,360	Approved at requested funding level under Reallocation and CoC Bonus

Rank	Type	Organization	Program Name	Award Amount	RRC Recommendations
1	Renewal HMIS	The Salvation Army Guam	Homeless Management Information System (HMIS)	\$117,146	Maintain current funding
2	Renewal	Catholic Social Services	Coordinated Entry System (CES)	\$53,021	Maintain current funding
3	Renewal	GHURA	Housing First Rental Assistance Program	\$554,034	Maintain current funding
4	Renewal	Sanctuary Inc.	Guma Manhoben	\$134,888	Maintain current funding
5	Renewal	Catholic Social Services	Y Jahame	\$194,591	Maintain current funding
6	Renewal	Catholic Social Services	Gai Animas	\$187,729	Maintain current funding
7	Renewal	Guma Mami Inc.	Guma Mami Inayek	\$110,274	Reallocate funds to new program(s)



**Renewal Program Description:**

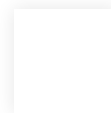
1. *Homeless Management Information System (HMIS)* - Shared human services database that allows authorized personnel at homeless shelters and social service providers to enter, track, and report on information concerning homeless clients.
2. *Coordinated Entry System (CES)* - Provides a process for conducting comprehensive entries of housing and services needs for individuals and families.
3. *Housing First Rental Assistance Program* - Tenant based rental assistance program.
4. *Guma Manhoben (PH-RRH)* - Expand the tenant based rental assistance for chronically homeless individuals and families.
5. *Y Jahame Permanent Housing Program* - Permanent supportive housing for chronic homeless individuals and families.
6. *Gai Animas* - Assist and provide housing and support service for victims of domestic violence.

Funding Name	Description	Amount Awarded
FY 2021 CoC Planning Costs	Eligible costs are related to the collaborative process for an application to HUD, evaluating the outcomes of projects, and participating in the jurisdiction's consolidated planning process.	<b>\$54,652</b>

If you have any questions or concerns regarding these results and/or the review and ranking process, please email Angelina Lape at [aclape@gdoe.net](mailto:aclape@gdoe.net).

**\*\*\* END OF STATEMENT \*\*\***

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<b>Rank</b>	<b>Type</b>	<b>Organization</b>	<b>Program Name</b>	<b>Award Amount</b>	<b>RRC Recommendations</b>
4	Renewal	Sanctuary, Inc.	Guma Manhoben	\$134,888	Maintain current funding