

New York State Balance of State Plan for Serving Individuals and Families Experiencing Homelessness with Severe Service Needs

The New York State Balance of State Continuum of Care (CoC) seeks funds under the Special Notice of Funding Opportunity (NOFO) Rural Set Aside to implement and expand programming designed to specifically address individuals and families with severe service needs who are experiencing homelessness. The applications contained herein ensure that geographic areas previously underserved are targeted with services tailored to meet the needs of unsheltered homeless persons with complex service needs. Increased street outreach efforts over the past several years and conversations with persons with lived experience have uncovered additional areas in the CoC where unsheltered individuals are seeking refuge. Such places include remote rural woodlands, porches of abandoned dwellings, and vacant buildings. In addition, warming centers that operate during periods in which temperatures drop below 32 degrees (Code Blue) have successfully saved lives while also signaling a need for greater services in the CoC.

This proposal will address the complexity of service needs of the target population with robust staffing and a Housing First model. Targeted individuals in the proposed projects have long histories of being disenfranchised and have no foundational support system. Building trust through numerous engagement efforts and creating permanent housing solutions will reduce unsheltered homelessness and assist with meeting unaddressed medical and behavioral health conditions. Partnering with healthcare organizations, as discussed later in the application, is an essential component of the proposal.

Housing First is the cornerstone of this initiative. Creating immediate access to permanent housing will require strategic outreach and continuous landlord recruitment efforts in this difficult housing market. This proposal will establish a landlord liaison for communities. The liaison will continuously recruit landlords, seek strategic housing partners, and look to repair relationships that have been strained by the pandemic. Additionally, leveraging Housing Choice and Stability Vouchers will not only create housing stability for the tenants, but will also create reliable rental income for landlords.

The groundwork for this application has been paved in part by State Code Blue funding, Emergency Solutions Grant Coronavirus (ESG CV) funding and Emergency Housing Vouchers. This application seeks to expand and enhance effective approaches that have been cobbled together through the patchwork of seasonal and time limited opportunities. Without additional funds sought under this application, further addressing rural homelessness in the CoC will not be possible.

The CoC covers eight non-contiguous counties: Cattaraugus, Clinton, Fulton, Herkimer, Montgomery, Putnam, Schoharie, and Sullivan. The CoC was created in 2018 to cover five counties in New York State that did not belong to a CoC and were therefore excluded from receiving federal funding for homeless services. The three additional counties joined the CoC in 2019. The lack of CoC coverage exacerbated a decades-long lack of service infrastructure for these rural counties. Only six of the eight counties are eligible to be included in the rural

application and five of the six counties are covered by the project applications submitted under the Special NOFO.

The five counties covered under the Special NOFO project applications are Cattaraugus, Fulton, Montgomery, Schoharie and Sullivan. The five counties, and the neighborhoods contained within them, are some of the most disadvantaged in the state and in the country when it comes to income, education, employment, and housing quality. According to the 2016–2020 American Community Survey (ACS) 5-Year Estimates, the average percentage of people living below the poverty line within the five counties is 14.9% compared to the New York State (NYS) average of 13.6% and the U.S. average of 12.8%. This indicates on average, the five counties have roughly 10% more residents living under the poverty line compared to NYS as a whole and roughly 16% more residents living under the poverty line compared to the U.S. average. This is also the case with per capita income where, on average, the five counties have a per capita income of \$29,765 compared to the NYS average of \$40,898 and the U.S. average of \$35,384 annually. The five-county average is roughly 73% of the NYS per capita income average and 84% of the U.S. per capita income average. Furthermore, the median income for the five counties is \$54,373 whereas the NYS median income is \$71,117 and the U.S. median income is \$64,994. This reveals the five-county median household income is only 76% of the NYS average and 84% of the U.S. average.

Education level is a major indicator of poverty. On average, 21% of people in the five counties attained a bachelor's degree. This is lower than the NYS average of 37.5% and U.S. average of 32.9%. People in NYS are 1.75 times more likely to attain their bachelor's degree and people in the U.S., as a whole, are 1.54 times more likely to attain their bachelor's degree than residents from the five counties. Education is seen as a common indicator of per capita income and as an extension, median household income.

Rent is increasing across the nation and identifying affordable units has become difficult for individuals and families attempting to move. The average rent per month for the five counties is \$721 leaving, on average, 46% of renters overburdened. Roughly 22% of households in the five covered counties are below the extremely-low-income level based on the calculation for a three person household. In the five counties covered in this application, there is an average of 21 affordable apartment properties, 960 low-income apartments, and 984 total housing units with rental assistance. This leads to more competition for families or individuals to find affordable housing as costs continue to rise and wages remain stagnant.

The Area Deprivation Index (ADI), ranks neighborhoods by socioeconomic disadvantage in a region of interest (e.g. at the state or national level) and includes factors for the domains of income, education, employment, and housing quality. The ADI indicates that the five counties have serious income, education, employment, and housing challenges. It can be used to inform health delivery and policy, especially for the most disadvantaged neighborhood groups. The ADI scale is from 1 to 10 when comparing the location to the state level and then scales from 1 to 100 when comparing the location to the country as a whole. The numeric value of 1 indicates the least disadvantaged block groups with 10 being the most disadvantaged block groups for state level and 100 being the most disadvantaged block groups in the country. Most of the blocks, or

neighborhoods within the five counties score between 8-10 on the ADI within the state comparison and typically score anywhere between 70 and 95 at the country comparison.

In addition to the systemic disadvantages outlined above, the counties in the CoC historically lack funding and/or service infrastructure to support the needs of households experiencing homelessness due to long-term disconnectedness from state and federal funding opportunities.

1. Leveraging Housing Resources

a. Development of new units and creation of housing opportunities

The CoC is working with the state's housing agency, New York State Homes and Community Renewal (HCR), to increase the number of permanent housing units available to individuals and families experiencing homelessness. The projects proposed by the CoC will contain unprecedented leveraging to ensure the sustainability of the programs and the stability of the individuals and families enrolled in the programs. HCR has prioritized Rapid Rehousing program participants for 64 Housing Choice Vouchers (HCV) to the counties covered by the Special NOFO to be distributed through the Coordinated Entry (CE) process. The Rapid Rehousing (RRH) participants assisted through this Special NOFO funding will have an unparalleled opportunity for a long-term housing subsidy, effectively ensuring that they will never become homeless again. The CoC will build on the success of the collaboration with HCR for the EHV program to ensure that at least 50% of RRH program participants are able to transition to an HCV.

In addition to the HCV leveraging, there is a leveraging opportunity with the New York State Rental Supplement Program (RSP), a state funded and locally administered rental assistance program. The CoC expects that on top of the program participants that will transition to a HCV, 25% will transition to RSP, resulting in over 75% of the participants having guaranteed access to a long-term housing subsidy. Having options for households that have exhausted their time on RRH will increase the likelihood of positive housing outcomes and ensure program success. Without these permanent housing options for program participants, many will continue to struggle to sustain their housing. In addition to the increased likelihood for success the leveraged vouchers will provide, they will also allow CoC funded projects to serve more people over time by freeing up RRH rental assistance dollars. As evidenced by the attached commitment letter, HCR has also committed to developing a prioritization plan for a potential allocation from HUD of Housing Stability Vouchers and has committed to leveraging such vouchers as they become available. The number of Housing Stability Vouchers that will be leveraged is still unknown, but those that are provided can also be accessed by the RRH program participants. Letters of commitment from HCR and local Social Services Districts (districts) are attached.

b. Landlord Recruitment

Over the past three years, the CoC has developed innovative strategies to recruit landlords across the rural areas. Because the CoC's coverage area is rural, the landlord community is very small. The CoC has often found that when a client is evicted, word travels quickly, effectively making it impossible for program participants with complex service needs to rent an apartment, regardless of any available incentive. The CoC focuses on the development of new landlord connections to ensure continued access to rental units for program participants.

Currently funded RRH project staff conducted outreach to multi-family rental property owners with a history of renting to households experiencing homelessness. The outreach led to a commitment by the RRH project staff to provide a rental subsidy to tenants if/when the property owner bought additional multi-family housing. This landlord incentive strategy has been successful and has led to permanent housing placement for several families in the CoC. Word of the successful partnership has traveled and now landlords are reaching out to RRH case managers requesting similar relationships. The Special NOFO project applicants will expand on this strategy by having dedicated staff committed to growing the CoC's housing resources.

Efforts also will include furthering relationships with a local Land Bank to increase housing opportunities. The Land Bank purchases distressed properties, rehabilitates them, and places them back on the market so low-income families can achieve home ownership. The CoC's strategy with the Land Bank is to encourage Land Bank purchases of multi-family housing, rehabilitate properties and then sell to a landlord who has made a commitment to using the property to house individuals and families experiencing homelessness. This strategy has had initial success which has resulted in the purchase of a three-family building, and the Land Bank is in discussions to purchase more. Should the Special NOFO project applications be funded, the landlord liaison staff hired will work with the Land Bank to engage and identify buildings that may potentially expand housing options for homeless households.

The CoC has learned that many landlords are willing to work with its member organizations. Landlords are familiar with these organizations, and understand the need to have consistent tenancy and ongoing communication. The skill set required for a case manager and a landlord liaison are different. Historically the CoC funded case manager is required to wear many hats, including the development of housing opportunities. Allowing case managers to solely focus on the housing stability of people with complex needs is consistent with the CoC's desire to keep valuable staff that can develop relationships with program participants and stabilize them in permanent housing. Having a dedicated landlord liaison, as proposed in Cattaraugus Community Action's (CCA), Interfaith for the

Partnership for the Homeless' (IPH), and Action Toward Independence's (ATI) applications will allow for real time access to vacancy listings, prioritize landlord relationships, and provide the means for ongoing communication.

Once the landlord liaison positions are filled, it is expected that they will meet with each other monthly to discuss successes, challenges, and best practices for landlord recruitment. The CoC will use HMIS to track how long program participants stay in the units being cultivated to assess the success of the CoC's landlord recruitment strategy.

2. Leveraging Healthcare Resources

The CoC is proposing that RRH projects funded under this Special NOFO utilize healthcare resources to assist individuals and families experiencing homelessness. As demonstrated by the attached written commitments from local health care organizations, the value of the leveraged services to individuals and families experiencing homelessness equals more than 50% of the funding being requested. Because the CoC covers several non-contiguous counties, leveraged healthcare will be provided by several different organizations. The Alliance for Positive Health, a multi-county HIV/AIDS service organization, will provide HIV testing and counseling for eligible households enrolled in IPH's proposed FMS RRH program in Fulton, Montgomery and Schoharie Counties. The Mental Health Association will offer behavioral health services for eligible households enrolled in IPH's FMS RRH program in Fulton and Montgomery Counties, The Family Counseling Center will offer clinical behavioral health services for eligible households in Fulton, Montgomery and Schoharie Counties, while the Schoharie County Council on Alcoholism and Substance Abuse will provide substance use counseling for any eligible IPH RRH households in Schoharie County. Rehabilitation Support Services (RSS) will provide mental and behavioral health services and Catholic Charities of Orange, Sullivan and Ulster will make substance use services available for any eligible household enrolled in Sullivan County's RRH program. Cattaraugus County's proposed HUD CoC RRH program has a multitude of leveraged healthcare resources, including healthcare provided by the local Federal Qualified Health Center – Universal Primary Care. Mental health, substance use, behavioral and physical health services will be provided via the Cattaraugus County Department of Community Services. Project eligibility for program participants in the RRH projects will be based on CoC program fair housing requirements and will not be restricted by the health care service provider.

3. CoC's Current Strategy to Identify, Shelter, and House Individuals and Families Experiencing Unsheltered Homelessness.

a. Current Street Outreach Strategy

The CoC has adopted several strategies over the past three years to reach people who are experiencing unsheltered homelessness and who are systemically disadvantaged. Enhanced street outreach is one such strategy. The CoC regularly engages individuals and families experiencing unsheltered homelessness in the locations where they reside and connects them to low-barrier shelter, temporary housing, or permanent housing if available and appropriate.

New York State's Code Blue regulation (18 NYCRR § 304.1) supported an expansion of coordinated street outreach activities within counties. The Code Blue regulation requires each district to develop and implement a plan to provide shelter for people who are experiencing homelessness when temperatures fall below 32 degrees to ensure the safety of unsheltered individuals and families. Leveraging funds that accompany Code Blue plans, the CoC has partnered with districts to expand efforts to reach those that are living unsheltered during winter months.

Another strategy the CoC has successfully adopted is engaging law enforcement and community service providers to reach those who are living in unsheltered locations to bring them into a non-congregate shelter or a warming center. Not only has this strategy protected unsheltered persons, but also has changed the culture as to how law enforcement engages with unsheltered individuals.

Finally, all street outreach efforts are culturally appropriate and utilize multilingual staff or staff that have access to translation services. The CoC recruits staff that are culturally diverse and are representative of the service population. Language is not a barrier to engaging unsheltered persons.

Through a time-limited pilot program, outreach was expanded and is now conducted each evening by the street outreach teams and at least twice a day, morning and night, by law enforcement. However, the pilot is nearing completion and without funds awarded under this proposal, the needs of the rural unsheltered population will go unmet. The CoC also has a dedicated youth outreach team that conducts daily evening outreach to places where youth are known to congregate. The youth street outreach teams do in-reach with local schools, engaging the McKinney-Vento liaisons to be sure that all youth who may be living unsheltered are contacted and effort is made to bring them into housing.

In the past few years, the expanded street outreach teams have assisted over one hundred individuals across the CoC that would otherwise not have been located and brought into housing. The teams successfully paired outreach services with Coordinated Entry which led to placement into permanent housing.

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

The CoC has a limited number of shelters throughout the eight counties, many of which serve only survivors of domestic violence. The CoC primarily relies on hotels/motels to provide immediate access to low-barrier temporary housing for individuals and families experiencing homelessness. Since temporary housing placement is facilitated by the local department of social services (district), many unsheltered individuals/families are often hesitant to seek assistance due to the distrust of governmental agencies.

During cold winter months, the CoC utilizes non-congregate shelter opportunities supported with State Code Blue funds regardless of public assistance (PA) eligibility, which is normally a requirement when seeking hotel or motel placement. On days when temperatures fall below 32 degrees, individuals and families who are found to be homeless are offered non-congregate shelter (hotels/motels) placement immediately and without having to apply to for public assistance. The removal of arduous eligibility requirements has allowed the CoC to identify a great number of people who are in need of housing and potentially eligible for RRH but may otherwise fall through the cracks due to a hesitancy to engage with the social services districts.

To further protect unsheltered individuals and families from the cold of the winter, the CoC has developed warming centers in all counties covered under this application. The warming center staff are experienced and trained in working with people who have complex and severe service needs. A typical warming center offers people a place to sleep, a shower, a meal, access to computers, information on how they can access mainstream benefits, and a place where they can feel safe. Once a person is engaged with the warming center and develops a trusting relationship with staff, housing assistance is more likely to be accepted.

Warming centers continue to evolve. The CoC has expanded services offered to bring more support to the guests, including enlisting mainstream benefit providers, SOAR application assistance, mental health providers and substance use disorder treatment. The CoC has learned that even though non-congregate sheltering is a valuable tool for getting people indoors, it is harder for staff to build a relationship with someone who is in a hotel room. To combat isolation and to continue engagement efforts, staff perform outreach to program participants in hotel rooms used as non-congregate shelter.

Placement into non-congregate shelter and warming centers is culturally appropriate. The CoC ensures that families are not separated based on gender identity, projects hire multilingual staff and staff are representative of the service population. This proposal will provide year-round access to rapid rehousing for persons who have been identified through street outreach and warming centers.

The past three years have highlighted that unsheltered persons are more likely to engage in services if they have a trusting relationship with providers. Essential to developing trusting relationships with unsheltered individuals and families is dedicated staff time, meaning well-staffed programs with significantly reduced caseloads which allow staff to identify and navigate solutions to the myriad complex needs of the target population. Outreach and warming center staff must be non-judgmental and trauma informed, and ongoing training to this approach must be provided.

The culture of the funded agencies support the well-being of the program staff. The pandemic has challenged many employers with maintaining/retaining staff. Agencies and programs serving individuals and families with complex service needs suffer the same challenges which are compounded by a history of lower wages. To attract staff that will embrace establishing long-term relationships with persons with complex service needs, appropriate compensation and full support to avoid burnout is necessary.

The expanded outreach and warming centers are seasonal due to the nature of the funds to support the activities, Code Blue. As a result, many of the CoC efforts to develop the necessary relationships and services with individuals and families are conditioned on severe weather. Further exacerbating efforts is the very rural composition of the communities proposed to be served by this application.

The CoC seeks funds under the Special NOFO to build on the services and strategies that have been developed over the past several years primarily for winter months. Special NOFO funds will allow for year-round programming with the enhancement of rapid rehousing subsidy dollars. The CoC utilizes HMIS to track the success of these strategies and will continue to do so to ensure that the strategies are based on outcomes data and performance.

- c. Current Strategy to Provide Immediate Access to Low Barrier Permanent Housing for Individuals and Families Experiencing Unsheltered Homelessness.

The CoC has been highly successful in using a Housing First approach to providing low-barrier and culturally appropriate access to permanent housing to individuals and families who have histories of unsheltered homelessness. The

expansion of street outreach implemented over the past three years has allowed project staff to identify locations where people experiencing unsheltered homelessness may be staying and begin to form a relationship with them. Getting a person to come into housing from outside takes consistent effort. Street outreach staff not only need to offer assistance to those living outside, but also follow through with any offers made so that trust can be developed between the person experiencing homelessness and the provider.

The CoC trains project staff to understand that Rapid Rehousing is a Housing First intervention, which allows a person in any stage of readiness to access permanent housing. The CoC elected to apply for RRH under this Special NOFO as it is best able to quickly house individuals and families who are experiencing homelessness without preconditions or requirements that may be difficult for a person to achieve.

The CoC expects that many Rapid Rehousing program participants will not have documentation of their disability or a history of engagement with providers. Obtaining disabling condition documentation can be intimidating and overly burdensome thus creating a barrier to permanent housing program participation. SSI/SSDI Outreach, Access, and Recovery (SOAR) trained staff assist with eliminating documentation barriers. In order to best serve individuals and families with complex service needs, the proposals submitted under this application are designed to be service rich, providing an array of services by staff who are singularly focused on a certain aspect of achieving housing stability. The CoC is proposing to have a low case management to program participant ratio. Since case managers are serving individuals and families with complex service needs, it is imperative that caseloads are kept low to ensure client-centered care can truly be achieved. Program staff will be trained in trauma-informed care, client-centered practices, and will be paid adequately to ensure low staff turnover. High turnover in the homeless services field can cause disruption in services, low trust among program participants and a decrease in positive housing outcomes. Reducing incidences of staff burnout due to high caseloads and turnover due to non-competitive wages is imperative to maintaining consistent staffing and relationships.

The CoC's application to the Special NOFO is a compilation of learned experiences and successes achieved through a patchwork of seasonal funding and time limited opportunities. Funding this application will significantly impact the CoCs ability to make lasting systemic changes and assist individuals and families, many with years of unsheltered homelessness. ESG-CV and EHV are time limited opportunities which the CoC greatly benefited from. The CoC will build on the relationships and connections created by these programs to provide CoC-

funded RRH services with quick transitions into the newly identified HCV, RSP and Stability Vouchers.

The CoC's experience with the EHV program provides a framework to undertake the proposed programs. The CoC made over 300 referrals for EHV vouchers. Roughly 180 vouchers were issued for people who were homeless and in non-congregate shelter, had accessed the warming center or who were living in a place not meant for human habitation. The CoC will use the proposed landlord liaisons to ensure that participants can be moved quickly from unsheltered locations directly into permanent housing. Maintaining staff with a focus on the expansion of community-based housing opportunities will result in real time housing options, minimize disruption to service delivery and decrease staff turnover due to burnout. Landlord liaisons will be able to develop relationships within the private housing market, maintain a housing inventory and inspect available units. Additionally, liaisons will work with the project case managers and participate in Coordinated Entry (CE) case conferencing meetings to make available housing options known. When the CoC has a housing opportunity that is tenant ready, the program participant will be able to quickly move into that apartment. Landlord liaisons will decrease the length of time it takes for someone to enter housing, increase their likelihood of success by removing the barriers presented by housing search and placement, and improve the CoC's system performance measures.

4. Updating the CoCs strategy to Identify, Shelter, and House Individuals Experiencing Unsheltered Homelessness with Data and performance.

N/A -applying for Rural Set-Aside Only

5. Identify and Prioritize Households Experiencing or with Histories of Unsheltered Homelessness.

The CoC currently identifies households experiencing or with histories of unsheltered homelessness through a variety of ways and partnerships, including outreach efforts, warming centers, soup kitchens, food pantries, law enforcement, and emergency rooms. The CoC has a no-wrong-door-approach to CE. Though only service organizations have access to HMIS, any entity that may come in contact with those who are living in an unsheltered location understands how to refer someone to CE.

Individuals and families who are currently unsheltered and have histories of unsheltered homelessness will be prioritized for programs funded under the Special NOFO. The CoC has a strategy to ensure that anyone who is currently unsheltered is prioritized for housing in the CE system. In addition to the VI-

SPDAT score, individuals and families are also selected by taking current housing situations into account. Anyone who is unsheltered is prioritized due to their location of homelessness.

There are no barriers to getting on the CE list. Many different types of organizations including street outreach, warming center, districts, rapid rehousing, veterans' organizations, SOAR case management, PHA and RSP staff contribute to CE case conferencing meetings that are held at least monthly. By collaborating closely, all agencies who touch the local homeless system are able to focus on how best to assist each person and ensure that they receive quick access and adequate support in permanent housing.

The CoC will use the Special NOFO funding to target those living outdoors using expanded services and operations beyond those temporarily funded and provide the much-needed rapid rehousing subsidies. Those living in an unsheltered location or who have a history of unsheltered homelessness often present with complex service needs, so it is essential that staff are trauma informed and culturally appropriate. The goal of the programs funded by the special NOFO is to expand outreach and engagement, provide rapid rehousing subsidies and to have an inventory of tenant-ready apartments for program participants.

Case management and street outreach staff work very closely with the social services district, the entity responsible for determining public assistance eligibility. Often, those who are living outdoors were sanctioned from receiving such benefits years ago and no longer think they are eligible for public assistance. Staff work with the district to try to clear up any sanctions that may be lingering so the person can receive public assistance, Medicaid and/or assistance from the Supplemental Nutrition Assistance Program.

All program participants will have access to SOAR case management that is either funded by the Special NOFO or available through a partnership in the community. Access to income is essential to ensuring that once the episode of homelessness has ended, the household can remain in permanent housing. The combination of guaranteed income and a housing subsidy either with HCV, RSP or a Stability Voucher will further ensure that clients do not reenter homelessness once housed. The CoC will track the success of these programs using HMIS and System Performance Measures. The CoC has worked with the HMIS administrator to make custom reports for the RRH programs that track the length of time between acceptance into RRH and placement into a unit. This helps to determine if adequate case management is provided for housing search and placement and whether additional supports may be needed.

The CoC is taking additional steps to ensure unsheltered persons or those with histories of unsheltered homelessness are able to access housing and other resources in the community through increased access to identification, providing housing navigation services and providing access to health care and other supportive services. Specifically, case management and street outreach staff will assist unsheltered persons or those with histories of unsheltered homelessness with taking the necessary steps toward replacing identification documents. Case management staff will also assist with housing navigation and access to healthcare services that may or may not be leveraged for the Special NOFO. There are no barriers to accessing to the proposed RRH program.

Through the aforementioned approaches, interventions, services, and tracking, the CoC is confident that unsheltered homelessness will be dramatically reduced. Moving to year-round interventions, providing rapid rehousing, leveraging permanent housing subsidies, partnering with healthcare organizations, and having trauma informed care can only result in even more positive outcomes than the CoC currently experiences with the patchwork of seasonal and time-limited funding presently available.

6. Involving Individuals with Lived Experience of Homelessness in Decision Making.

Individuals and families experiencing homelessness in the CoC, particularly those who have had episodes of unsheltered homelessness, are meaningfully and intentionally integrated into the CoC decision-making structure. The CoC's Lived Experience Advisory Board (LEAB) has been instrumental in the design of the projects submitted under this NOFO. Members of the LEAB attended the planning sessions for each project. LEAB members offered suggestions and input during the planning process, and also provided comment on the proposed Special NOFO projects. Recommendations on changes to policy and program design were incorporated in all the submitted project applications. The LEAB has provided letters of support on behalf of all project applications. In addition, according to a recent survey of CoC membership, 21% of the total membership reports having lived homelessness experience, showing that, whether as a member of LEAB or not, input has been given on program design and CoC policies from those who have lived experience. Each CoC Committee also has LEAB representation, ensuring input on all CoC subject areas. The chair of the LEAB is a voting member of the Steering Committee and helps guide recruitment strategies and LEAB goals. The LEAB chair attended county specific CoC meetings to speak about the LEAB in an effort to recruit more members. LEAB membership was offered to agencies represented at the CoC meeting and their program participants. The LEAB membership includes those who were living in an unsheltered location, others who have been enrolled in a CoC program, either RRH or PSH, and current RRH program participants and provider

staff who have experience with a variety of factors contributing to homelessness including substance use, mental health and domestic violence. As the LEAB expands, the CoC will work to ensure that it is representative of the service population, encouraging membership from BIPOC and LGBTQ+ communities. A letter of support is attached from the LEAB indicating their support for the projects proposed in this Special NOFO.

7. Supporting Underserved Communities and Supporting Equitable Community Development

Rural homelessness looks very different than urban homelessness. Often it is a family that is doubled or tripled up in substandard housing, an individual or family living in a camper on someone else's property, an individual or family living in a car or an abandoned building or someone who is living in a trailer park with no running water or electricity. These households do not self-identify as homeless and may not recognize their eligibility for housing programs. This population has not been served by the homeless system at the same rate as they experience homelessness.

The CoC supports and serves underserved communities in its geographic area and offers equitable housing interventions to address their needs. The majority of the area covered by the CoC did not belong to a CoC until 2018. Services to address the needs of individuals and families experiencing homelessness have been woefully lacking. The primary source of assistance in the previously uncovered counties was the county social services district and domestic violence shelter.

Until the Balance of State Continuum of Care (CoC) was formed, there was no opportunity for these counties to apply for federal funding and there was a general lack of awareness of available state funding to assist individuals and families experiencing homelessness. The assistance local social services districts were able to provide was limited to a hotel placement if families could meet all requirements for public assistance, and potential rental assistance that is well below (25%) fair market rent. The lack of permanent housing placement options for individuals and families who are trying to exit homelessness created an unbreakable cycle of unsustainable housing. Though the CoC was formed in 2018, no funding for previously uncovered counties had been awarded for PSH or RRH through the CoC NOFO competition until DV bonus funding was awarded in 2022. These programs are only just beginning and have not yet enrolled any program participants.

The availability of ESG-CV has made housing options possible in places where there previously had been none. With ESG-CV funding, the CoC designed strategies to serve areas and persons historically underserved. The majority of the CoC is rural in nature. The CoC has conducted outreach targeting specific locations and using information obtained from people with lived experience to

add new locations to the targeted outreach strategy. This effort resulted in newly identified areas that unsheltered individuals and families were residing. Locations included remote areas, porches and abandoned buildings.

For example, outreach staff went directly to a mobile housing community where the CoC had heard that residents were living in substandard conditions with no running water, lack of electricity and/or inadequate sewage drainage. Outreach staff went door to door to identify homes that were not fit for human habitation and asked the residents what kind of service needs they had and targeted them for RRH and case management if eligible. In another instance, street outreach staff found a man with severe service needs who had untended wounds that were covered in maggots. This gentleman was quickly engaged with primary health services through one of the CoC's leveraged healthcare organizations, moved to non-congregate shelter and is now enrolled in RRH and working with program staff to find an apartment. This gentleman also has an EHV, ensuring he will remain housed regardless of income. Often word travels quickly about available services and potential program participants begin to present themselves to program staff. Program staff use information gathered from talking to people they engage through street outreach to find additional people living in an unsheltered location. This word of mouth led program staff to a group of people who had been living on the porch of an abandoned building for years. All individuals living on the porch have been transitioned to permanent housing with RRH, several now have an EHV and one client is serving on the LEAB. Outreach to abandoned buildings has led street outreach staff to locate a community of people who had been living in these buildings, disconnected from services, for ten years. Two of the gentlemen who lived as roommates in an abandoned building are now housed together in an SRO program. They received their keys and moved in together, proud of their new place.

The CoC continuously pursues housing opportunities and solutions based on identified needs and gaps in services, much like the programming proposed in this application. Foundational to expansion and support for new programming is equitable community development. The steering committee considers current social and economic conditions influencing the homeless services system. Persons with lived experience and recipients of services greatly influence new programs and areas of focus. As evidenced in the application, proposals requesting funds have sought critical feedback from persons existing programs will serve into the design and implementation of expanded and enhanced programming. The target locations for ongoing outreach, services, and housing opportunities have all taken shape from lived experience. The very nature of seeking funds to bring services and subsidies to underserved rural areas within the CoC begins to balance equity and create a sense of community.

The seasonal success of outreach and engagement strategy over the past three years has demonstrated that not only are services desperately needed in these rural communities, but that staff are in tune to the needs of clients living unsheltered in rural areas.