



GUAM HOUSING AND URBAN RENEWAL AUTHORITY

For Immediate Release

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FY2016 Continuum of Care Program Consolidated Application

Sinajaña, GU (August 30, 2016) – The Guam Housing and Urban Renewal Authority (GHURA) and the Guam Homeless Coalition (the Coalition) announce the consolidated application for approximately \$1.1 million of grant funds for the FY2016 Continuum of Care (CoC) program. Funds appropriated by the U.S. Dept. of Housing and Urban Development (HUD) will enable Guam to meet its CoC goals, particularly to promote community-wide commitment of ending homelessness; to provide funding for efforts by nonprofit organizations and government entities to quickly re-house the homeless while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by the homeless; and to optimize self-sufficiency among those experiencing homelessness. Guam is seeking funding for a total of six renewal projects, one new Rapid Re-Housing project created through permanent housing bonus funds, and one planning grant.

The Guam Homeless Coalition coordinates homeless programs, shelters and supportive services in Guam. The Coalition comprises of non-profit organizations, businesses, homeless or formerly homeless individuals and families, and local government agencies. GHURA is the Collaborative Applicant (CA) to collect and combine the required application information from all applicants and for all projects that the CoC has selected for funding. The CA is responsible for submitting the consolidated application on behalf of the CoC, oversees the CoC funds, and works closely with the Coalition, which includes the Catholic Social Services, The Salvation Army, Westcare Pacific Islands, Elim Pacific Ministries, Sanctuary, Inc., Guma Mami, University of Guam, Guam Behavioral Health and Wellness Center, Dept. of Labor, Dept. of Education, Dept. of Public Health and Social Services, and the U.S. Dept. of Veterans Affairs.

Guam's most recent Point-in-Time Count identified a total of 1,085 persons who were homeless. Ninety-three percent (90%) of those persons were unsheltered. Of those unsheltered, 88% were persons in households with adults and children. Through HUD grant funds, Coalition members and the Government of Guam continue its collaborative effort to support and service homeless families and individuals with the aim of ending homelessness on the island. Last reporting year, Guam utilized CoC funds to provide permanent supportive housing, transitional housing, and supportive services to 102 homeless persons.

For more information about GHURA or the ranking of the projects, visit www.ghura.org.

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Before Starting the CoC Application

The CoC Consolidated Application is made up of two parts: the CoC Application and the CoC Priority Listing, with all of the CoC's project applications either approved and ranked, or rejected. The Collaborative Applicant is responsible for submitting both the CoC Application and the CoC Priority Listing in order for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for:

- Reviewing the FY 2016 CoC Program Competition NOFA in its entirety for specific application and program requirements.

- Using the CoC Application Detailed Instructions while completing the application in e-snaps.

- Answering all questions in the CoC application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing this keep in mind:

- This year, CoCs will see that a few responses have been imported from the FY 2015 CoC Application.

- For some of the questions HUD has provided documents to assist Collaborative Applicants in completing responses.

- For other questions, the Collaborative Applicant must be aware of responses provided by project applications in their Project Applications.

- Some questions require the Collaborative Applicant to attach a document to receive credit. This will be identified in the question.

- All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions click [here](#).

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. From the list below, select those organizations and persons that participate in CoC meetings. Then select "Yes" or "No" to indicate if CoC meeting participants are voting members or if they sit on the CoC Board. Only select "Not Applicable" if the organization or person does not exist in the CoC's geographic area.

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board	Sits on CoC Board
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	No
Law Enforcement	Yes	No	No
Local Jail(s)	No	No	No
Hospital(s)	No	No	No
EMT/Crisis Response Team(s)	No	No	No
Mental Health Service Organizations	Yes	Yes	No
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	No	No	No
Public Housing Authorities	Yes	Yes	No
CoC Funded Youth Homeless Organizations	Yes	Yes	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	No
School Administrators/Homeless Liaisons	Yes	Yes	Yes
CoC Funded Victim Service Providers	No	No	No
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	Yes
Youth advocates	Yes	Yes	No
Agencies that serve survivors of human trafficking	Yes	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Institutions of Higher Education	Yes	Yes	Yes
Employment Agency	Yes	Yes	No
Interested Individuals/Church Groups			

Applicant must select Yes, No or Not Applicable for all of the listed organization/person categories in 1B-1.

1B-1a. Describe in detail how the CoC solicits and considers the full range of opinions from individuals or organizations with knowledge of homelessness or an interest in preventing and ending homelessness in the geographic area. Please provide two examples of organizations or individuals from the list in 1B-1 to answer this question.

Interested applicants are required to disclose in the application for membership: 1)the organization/person categories and 2)the reason for requesting membership to the Guam Homeless Coalition (GHC). The GHC draws upon the knowledge and expertise of all members of the GHC. Because of its position as the Collaborative Applicant and history of administering CoC funds, GHURA, the PHA, provides technical assistance to all members and committees, especially those who are CoC-funded. GHURA also takes lead and participates in various events such as the annual PIT count and community outreach.

1B-1b. List Runaway and Homeless Youth (RHY)-funded and other youth homeless assistance providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 20, 2016.	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 20, 2016.
Sanctuary, Incorporated	No	Yes	Yes
Guam Department of Education	No	Yes	Yes
Department of Youth Affairs	No		No
Guam Behavioral Health and Wellness Center/Ifa Maguon'ta	No		No
Guam Behavioral Health and Wellness Center/Rays of Hope	No		No
GBHWC Latte Treatment Program	No		
Child WElfare Services	No	Yes	No
Big Brothers Big Sisters of Guam	No	No	No

1B-1c. List the victim service providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

	Participated as a Voting Member in at least two CoC	Sat on CoC Board as active member or official at any point
FY2016 CoC Application	Page 4	08/30/2016

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Meetings between July 1, 2015 and June 30, 2016	between July 1, 2015 and June 30, 2016.
Catholic Social Service / Alee Shelter and ERH	Yes	Yes
Oasis Empowerment Center/ Animu' Project		
Victim Advocates Reaching Out		No
GBHWC Healing Hearts		
Guam Legal Services Corporation	Yes	Yes
Public Defender Corporation	No	No
Guam Police Department – Domestic Assault Response Team	No	No
Department of Law (Attorney General's Office)	No	No
DPHSS	Yes	No

1B-2. Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for new projects in 2016. (limit 1000 characters)

Guam's CoC, the Guam Homeless Coalition conducts regular monthly membership meetings and welcomes new members who provide services to individuals and families experiencing homelessness. During these meetings, interested entities share their project ideas and address any funding issues. GHURA, the CoC Collaborative Applicant, also conducts regular public hearings during the development of the Consolidated Plan and Annual Action Plan to discuss interested entities who seek funding through any of the CPD grants. GHURA has funded several homeless facilities, such as emergency, transitional and permanent housing projects using CPD funds. Some structures rehabilitated in prior years using CDBG and HOME funds have been identified as permanent supportive housing for homeless persons, especially those who are chronically homeless. Guam continues to identify ways to maximize the island's inventory of structures that can be rehabilitated to address the needs of the homeless.

1B-3. How often does the CoC invite new members to join the CoC through a publicly available invitation? Bi-Monthly

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. Does the CoC coordinate with Federal, State, Local, private and other entities serving homeless individuals and families and those at risk of homelessness in the planning, operation and funding of projects? Only select "Not Applicable" if the funding source does not exist within the CoC's geographic area.

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Not Applicable
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Not Applicable
Head Start Program	Yes
Housing and service programs funded through Federal, State and local government resources.	Yes

1C-2. The McKinney-Vento Act, requires CoC's to participate in the Consolidated Plan(s) (Con Plan(s)) for the geographic area served by the CoC. The CoC Program Interim rule at 24 CFR 578.7 (c) (4) requires the CoC to provide information required to complete the Con Plan(s) within the CoC's geographic area, and 24 CFR 91.100(a)(2)(i) and 24 CFR 91.110 (b)(2) requires the State and local Con Plan jurisdiction(s) consult with the CoC. The following chart asks for the information about CoC and Con Plan jurisdiction coordination, as well as CoC and ESG recipient coordination.

CoCs can use the CoCs and Consolidated Plan Jurisdiction Crosswalk to assist in answering this question.

	Number
Number of Con Plan jurisdictions with whom the CoC geography overlaps	1
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	1
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	1
How many of the Con Plan jurisdictions are also ESG recipients?	1
How many ESG recipients did the CoC participate with to make ESG funding decisions?	1
How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	1

1C-2a. Based on the responses provided in 1C-2, describe in greater detail how the CoC participates with the Consolidated Plan jurisdiction(s) located in the CoC's geographic area and include the frequency and type of interactions between the CoC and the Consolidated Plan jurisdiction(s). (limit 1000 characters)

The Guam Housing and Urban Renewal Authority (GHURA), also the CoC's Collaborative Applicant, is the responsible entity for developing and submitting the Consolidated Plan (ConPlan). Guam renewed its 5-Year ConPlan for Program Years 2015 - 2019. During the development of the ConPlan, GHURA consulted with the island's CoC to gather necessary data to establish priority needs and goals as it pertains to ending homelessness. GHURA collaborated with the CoC to gather the following data:

- Estimate # of homeless experiencing homeless each year
- Estimate # becoming homeless each year
- Estimate # exiting homelessness each year
- Estimate # of days persons experience homelessness
- Percent of persons by racial and ethnic groups who are sheltered or unsheltered
- Assessment of families with children and families of veterans in need of housing

GHURA continues consult with the CoC to prioritize CPD funds to achieve its goals and objectives through its Annual Action Plans.

1C-2b. Based on the response in 1C-2, describe how the CoC is working with ESG recipients to determine local ESG funding decisions and how the CoC assists in the development of performance standards and evaluation of outcomes for ESG-funded activities. (limit 1000 characters)

Guam consults with the CoC to determine the effective use of ESG funds. CoC-funded programs are designed to serve the needs of homeless and chronically homeless persons who have one or more disabilities. These populations normally require extensive amounts of support services as they struggle with addictions and/or mental illness. Given the design of CoC programs, homeless persons without disabling conditions are assisted through programs such as the ESG. For these reasons, Guam allocates at least 60% of ESG funds to support rapid re-housing activities for homeless persons. The remaining financial assistance funds are used for homeless prevention. Guam utilizes the HMIS reporting system to identify program performance and the utilization of ESG funds. Reports such as the Annual Performance Report (APR) and Consolidated Annual Performance Evaluation Report are utilized to review program accomplishments such as number of persons served, services provided, and duration of assistance.

1C-3. Describe how the CoC coordinates with victim service providers and non-victim service providers (CoC Program funded and non-CoC funded) to ensure that survivors of domestic violence are provided housing and services that provide and maintain safety and security. Responses must

address how the service providers ensure and maintain the safety and security of participants and how client choice is upheld. (limit 1000 characters)

Guam’s Coordinated Entry System (CES) supports a person-centered approach that incorporates participant choice such as location and type of housing, level of services, and other options that households can participate in making decisions. To address the physical and emotional safety of victims, the CES has identified separate access points. However, should a victim present themselves at a non-victim service provider, the participant should still be able to be assessed for services and have full access to available services. Victim service providers also provide training to non-victim providers to ensure victims are properly assisted. Providers ensure the safety and security of participants by allowing for safe and unmarked housing and must adhere to local and federal guidelines or best practices.

1C-4. List each of the Public Housing Agencies (PHAs) within the CoC's geographic area. If there are more than 5 PHAs within the CoC's geographic area, list the 5 largest PHAs. For each PHA, provide the percentage of new admissions that were homeless at the time of admission between July 1, 2015 and June 30, 2016 and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 7/1/15 to 6/30/16 who were homeless at entry	PHA has General or Limited Homeless Preference
Guam Housing and Urban Renewal Authority	1.00%	Yes-Public Housing

If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.

1C-5. Other than CoC, ESG, Housing Choice Voucher Programs and Public Housing, describe other subsidized or low-income housing opportunities that exist within the CoC that target persons experiencing homelessness. (limit 1000 characters)

The Supportive Services for Veteran Families (SSVF) is an available resource for homeless veteran households to receive temporary housing, case management, and other emergency assistance. Guam also renovated 5 abandoned units with Community Development Block Grant (CDBG) funds to be used as transitional housing for up to six months for families which are being managed by the Catholic Social Services with funding through the Dept. of

Public Health and Social Services. The Guam Housing Corporation, a government entity, also provides emergency shelter for at least 30 days. Sanctuary, Inc. provides emergency shelter for youth below age 18 who are under protective services. The U.S. Vets manages a 5-bed homeless shelter for adult male vets for 30 days. Low-income housing opportunities are available through the Low-Income Housing Tax Credit (LIHTC) which has injected over 400 affordable housing units. GHURA also manages 10 affordable rental units which were rehabbed with CDBG funds.

1C-6. Select the specific strategies implemented by the CoC to ensure that homelessness is not criminalized in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
Other:(limit 1000 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Select the system(s) of care within the CoC's geographic area for which there is a discharge policy in place that is mandated by the State, the CoC, or another entity for the following institutions? Check all that apply.

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1D-2. Select the system(s) of care within the CoC's geographic area with which the CoC actively coordinates with to ensure institutionalized persons that have resided in each system of care for longer than 90 days are not discharged into homelessness. Check all that apply.

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) that were not selected and explain how the CoC plans to coordinate with the institution(s) to ensure persons

**discharged are not discharged into homelessness.
(limit 1000 characters)**

Not applicable.

1E. Centralized or Coordinated Assessment (Coordinated Entry)

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

The CoC Program Interim Rule requires CoCs to establish a Centralized or Coordinated Assessment System which HUD refers to as the Coordinated Entry Process. Based on the recent Coordinated Entry Policy Brief, HUD's primary goals for the coordinated entry process are that assistance be allocated as effectively as possible and that it be easily accessible no matter where or how people present for assistance.

**1E-1. Explain how the CoC's coordinated entry process is designed to identify, engage, and assist homeless individuals and families that will ensure those who request or need assistance are connected to proper housing and services.
(limit 1000 characters)**

The Homeless Outreach Team is designed to identify households living on the streets. The CoC has developed a Whatsapp group for team members to easily refer homeless households who need assistance. It also allows for non-duplication of outreach so that the most applicable service provider is tasked to engage the homeless household. HMIS End Users are trained to utilize the VISPDAT assessment tool for homeless who lack resources to apply at the various access points under the Coordinated Entry System (CES). Each household is screened and provided a score based on the severity of need, placed on the community queue and are referred to the most appropriate housing placement. Upon entry into the CES, end-users must notify the most appropriate housing program of the potential applicant. The CES is also designed to minimize barriers by placing the responsibility of the intake worker to gather the necessary documentation for the homeless household.

1E-2. CoC Program and ESG Program funded projects are required to participate in the coordinated entry process, but there are many other organizations and individuals who may participate but are not required to do so. From the following list, for each type of organization or individual, select all of the applicable checkboxes that indicate how that organization or individual participates in the CoC's coordinated entry process. If there are other organizations or persons who participate but are not on this list, enter the information in the blank text box, click "Save" at the bottom of

the screen, and then select the applicable checkboxes.

Organization/Person Categories	Participate s in Ongoing Planning and Evaluation	Makes Referrals to the Coordinate d Entry Process	Receives Referrals from the Coordinate d Entry Process	Operates Access Point for Coordinate d Entry Process	Participate s in Case Conferenci ng	Does not Participate	Does not Exist
Local Government Staff/Officials	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CDBG/HOME/Entitlement Jurisdiction	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local Jail(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Hospital(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EMT/Crisis Response Team(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable Housing Developer(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Public Housing Authorities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Youth Homeless Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Administrators/Homeless Liaisons	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Victim Service Organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street Outreach Team(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homeless or Formerly Homeless Persons	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

At least one box must be checked for each row.

1F. Continuum of Care (CoC) Project Review, Ranking, and Selection

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1F-1. For all renewal project applications submitted in the FY 2016 CoC Program Competition complete the chart below regarding the CoC's review of the Annual Performance Report(s).

How many renewal project applications were submitted in the FY 2016 CoC Program Competition?	5
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	0
How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2016 CoC Program Competition?	5
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2016 CoC Competition?	100.00%

1F-2 - In the sections below, check the appropriate box(es) for each selection to indicate how project applications were reviewed and ranked for the FY 2016 CoC Program Competition. Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.

Performance outcomes from APR reports/HMIS:	
% permanent housing exit destinations	<input checked="" type="checkbox"/>
% increases in income	<input checked="" type="checkbox"/>
Monitoring criteria:	
Utilization rates	<input checked="" type="checkbox"/>
Drawdown rates	<input checked="" type="checkbox"/>
Frequency or Amount of Funds Recaptured by HUD	<input checked="" type="checkbox"/>
Need for specialized population services:	

Youth	<input checked="" type="checkbox"/>
Victims of Domestic Violence	<input checked="" type="checkbox"/>
Families with Children	<input checked="" type="checkbox"/>
Persons Experiencing Chronic Homelessness	<input checked="" type="checkbox"/>
Veterans	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1F-2a. Describe how the CoC considered the severity of needs and vulnerabilities of participants that are, or will be, served by the project applications when determining project application priority. (limit 1000 characters)

The CoC reviews the relative need for each renewal and new project. Each project is reviewed to determine if the project will address the critical needs of the community, if the project addresses one of the priority needs and if there are any existing housing or lack thereof for the population proposed. Guam's CES has identified the following severe service needs to be prioritized: 1)History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; 2)Significant health or behavioral health challenges or functional impairments which require a significant level of support in order to maintain permanent housing; 3)Vulnerability to illness or death; 4)Risk of continued homelessness; 5)The extent to which people, especially youth and children, elderly, and families are unsheltered; or 6)Vulnerability to victimization, including physical assault or engaging in trafficking or sex work.

1F-3. Describe how the CoC made the local competition review, ranking, and selection criteria publicly available, and identify the public medium(s) used and the date(s) of posting. Evidence of the public posting must be attached. (limit 750 characters)

The CoC Review and Ranking Committee held planning meetings to update the Policy and Procedure and revise the project evaluation forms. In prior reviews, the Committee utilized one standard form for all renewal programs. Evaluation forms were created for renewal PSH projects, New projects, and the HMIS. The Policy and Procedure and the evaluation forms were made available for CoC members to review and provide comment.

1F-4. On what date did the CoC and 08/30/2016

Collaborative Applicant publicly post all parts of the FY 2016 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached).

1F-5. Did the CoC use the reallocation process in the FY 2016 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.) No

1F-5a. If the CoC rejected project application(s), on what date did the CoC and Collaborative Applicant notify those project applicants that their project application was rejected? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.) 08/30/2016

1F-6. In the Annual Renewal Demand (ARD) is the CoC's FY 2016 CoC's FY 2016 Priority Listing equal to or less than the ARD on the final HUD-approved FY2016 GIW? Yes

1G. Continuum of Care (CoC) Addressing Project Capacity

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1G-1. Describe how the CoC monitors the performance of CoC Program recipients. (limit 1000 characters)

GHURA, as the designated Collaborative Applicant (CA), conducts desk reviews and on-site monitors of all CoC-funded programs. Desk reviews encompass the screening of payment requests and client documentation as it pertains to eligible activities according to federal regulations. On-site monitors are conducted mid-way through the program year by the CA's fiscal and planning staff. Client files and fiscal documentation are reviewed in greater detail resulting in a final report to the project sponsor of any findings or concerns. Project sponsors must respond with a plan of action to rectify such findings or concerns. The CoC also reviews HMIS APRs of programs to measure percent of clients that maintain or increase income and mainstream benefits and percent of clients that exit or remain in permanent housing. Furthermore, during monthly membership meetings, programs are required to report on their program status, updating members on their bed utilization rates.

1G-2. Did the Collaborative Applicant include accurately completed and appropriately signed form HUD-2991(s) for all project applications submitted on the CoC Priority Listing? Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Does the CoC have a Governance Charter that outlines the roles and responsibilities of the CoC and the HMIS Lead, either within the Charter itself or by reference to a separate document like an MOU/MOA? In all cases, the CoC's Governance Charter must be attached to receive credit, In addition, if applicable, any separate document, like an MOU/MOA, must also be attached to receive credit. Yes

2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or attached MOU/MOA. Page 8 of the CoC's Policies and Procedures

2A-2. Does the CoC have a HMIS Policies and Procedures Manual? If yes, in order to receive credit the HMIS Policies and Procedures Manual must be attached to the CoC Application. Yes

2A-3. Are there agreements in place that outline roles and responsibilities between the HMIS Lead and the Contributing HMIS Organization (CHOs)? Yes

2A-4. What is the name of the HMIS software Clarity Human Services

used by the CoC (e.g., ABC Software)?

2A-5. What is the name of the HMIS software vendor (e.g., ABC Systems)? Bitfocus, Inc.

2B. Homeless Management Information System (HMIS) Funding Sources

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. Select the HMIS implementation Single CoC coverage area:

*** 2B-2. In the charts below, enter the amount of funding from each funding source that contributes to the total HMIS budget for the CoC.**

2B-2.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	\$117,146
ESG	\$0
CDBG	\$28,790
HOME	\$0
HOPWA	\$0
Federal - HUD - Total Amount	\$145,936

2B-2.2 Funding Type: Other Federal

Funding Source	Funding
Department of Education	\$0
Department of Health and Human Services	\$0
Department of Labor	\$0
Department of Agriculture	\$0
Department of Veterans Affairs	\$0
Other Federal	\$0
Other Federal - Total Amount	\$0

2B-2.3 Funding Type: State and Local

Funding Source	Funding
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City	\$0
County	\$0
State	\$0
State and Local - Total Amount	\$0

2B-2.4 Funding Type: Private

Funding Source	Funding
Individual	\$0
Organization	\$0
Private - Total Amount	\$0

2B-2.5 Funding Type: Other

Funding Source	Funding
Participation Fees	\$7,200
Other - Total Amount	\$7,200

2B-2.6 Total Budget for Operating Year	\$153,136
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2C. Homeless Management Information System (HMIS) Bed Coverage

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Enter the date the CoC submitted the 2016 HIC data in HDX, (mm/dd/yyyy): 01/29/2016

2C-2. Per the 2016 Housing Inventory Count (HIC) Indicate the number of beds in the 2016 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells in that project type.

Project Type	Total Beds in 2016 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	125	41	79	94.05%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	21	0	21	100.00%
Rapid Re-Housing (RRH) beds	0	0	0	
Permanent Supportive Housing (PSH) beds	160	0	81	50.63%
Other Permanent Housing (OPH) beds	0	0	0	

2C-2a. If the bed coverage rate for any project type is below 85 percent, describe how the CoC plans to increase the bed coverage rate for each of these project types in the next 12 months. (limit 1000 characters)

Our Permanent Supportive Housing beds is below 85% because of the HUD-VASH beds. Although the Department of Veterans Affairs is a member of the CoC, the VA has chosen to utilize the HOMES case management software instead of the HMIS. Although not direct users of the HMIS, the VA does provide data during the annual Point-in-Time Count and Housing Inventory Chart (HIC).

2C-3. If any of the project types listed in question 2C-2 above have a coverage rate below 85 percent, and some or all of these rates can be attributed to beds covered by one of the following program types, please indicate that here by selecting all that apply from the list below.

VA Grant per diem (VA GPD):	
FY2016 CoC Application	Page 22 08/30/2016

	<input type="checkbox"/>
VASH:	<input checked="" type="checkbox"/>
Faith-Based projects/Rescue mission:	<input type="checkbox"/>
Youth focused projects:	<input type="checkbox"/>
Voucher beds (non-permanent housing):	<input type="checkbox"/>
HOPWA projects:	<input type="checkbox"/>
Not Applicable:	<input type="checkbox"/>

2C-4. How often does the CoC review or assess its HMIS bed coverage? Semi-Annually

2D. Homeless Management Information System (HMIS) Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2D-1. Indicate the percentage of unduplicated client records with null or missing values and the percentage of "Client Doesn't Know" or "Client Refused" within the last 10 days of January 2016.

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	1%	3%
3.3 Date of birth	0%	0%
3.4 Race	1%	0%
3.5 Ethnicity	1%	0%
3.6 Gender	0%	0%
3.7 Veteran status	8%	0%
3.8 Disabling condition	13%	1%
3.9 Residence prior to project entry	6%	0%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	0%	0%
3.15 Relationship to Head of Household	0%	0%
3.16 Client Location	0%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	0%	0%

2D-2. Identify which of the following reports your HMIS generates. Select all that apply:

CoC Annual Performance Report (APR):	<input checked="" type="checkbox"/>
ESG Consolidated Annual Performance and Evaluation Report (CAPER):	<input checked="" type="checkbox"/>
Annual Homeless Assessment Report (AHAR) table shells:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

None	<input type="checkbox"/>
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2D-3. If you submitted the 2016 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR?

10

2D-4. How frequently does the CoC review data quality in the HMIS?

Quarterly

2D-5. Select from the dropdown to indicate if standardized HMIS data quality reports are generated to review data quality at the CoC level, project level, or both.

Both Project and CoC

2D-6. From the following list of federal partner programs, select the ones that are currently using the CoC's HMIS.

VA Supportive Services for Veteran Families (SSVF):	<input checked="" type="checkbox"/>
VA Grant and Per Diem (GPD):	<input checked="" type="checkbox"/>
Runaway and Homeless Youth (RHY):	<input type="checkbox"/>
Projects for Assistance in Transition from Homelessness (PATH):	<input checked="" type="checkbox"/>
Emergency Solutions Grant	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

2D-6a. If any of the Federal partner programs listed in 2D-6 are not currently entering data in the CoC's HMIS and intend to begin entering data in the next 12 months, indicate the Federal partner program and the anticipated start date. (limit 750 characters)

Sanctuary, Incorporated, a CoC-funded projects sponsor, receives local RHY funds through the Department of Youth Affairs. Sanctuary has applied for federal RHY but has not received notification of approval. Their emergency

shelter is listed as a domestic violence shelter and thus does not utilize the HMIS. The Sanctuary, Inc., however, utilizes the HMIS to enter youth ages 18 - 24 who are served through their CoC-funded permanent housing program, the Forrester's Refuge program.

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

The data collected during the PIT count is vital for both CoC's and HUD. HUD needs accurate data to understand the context and nature of homelessness throughout the country, and to provide Congress and the Office of Management and Budget (OMB) with information regarding services provided, gaps in service, and performance. Accurate, high quality data is vital to inform Congress' funding decisions.

2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2016 sheltered PIT count? Yes

2E-2. Indicate the date of the most recent sheltered PIT count: (mm/dd/yyyy) 01/29/2016

2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2016, was an exception granted by HUD? Not Applicable

2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX: (mm/dd/yyyy) 05/02/2016

2F. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Methods

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2016 PIT count:

Complete Census Count:	<input checked="" type="checkbox"/>
Random sample and extrapolation:	<input type="checkbox"/>
Non-random sample and extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

2F-2. Indicate the methods used to gather and calculate subpopulation data for sheltered homeless persons:

HMIS:	<input checked="" type="checkbox"/>
HMIS plus extrapolation:	<input type="checkbox"/>
Interview of sheltered persons:	<input checked="" type="checkbox"/>
Sample of PIT interviews plus extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

2F-3. Provide a brief description of your CoC's sheltered PIT count methodology and describe why your CoC selected its sheltered PIT count methodology. (limit 1000 characters)

The survey forms were distributed to the shelter administrators. The administrators were responsible for ensuring all clients in their respective shelters were surveyed. The data collected from the surveys is compared with

the data from HMIS to confirm the accuracy of both the shelter count and HMIS data.

2F-4. Describe any change in methodology from your sheltered PIT count in 2015 to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to the implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the PIT count). (limit 1000 characters)

There were no changes to our methodology for our sheltered PIT count.

2F-5. Did your CoC change its provider coverage in the 2016 sheltered count? No

2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2016 sheltered count. (limit 750 characters)

Not applicable.

2G. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2G-1. Indicate the methods used to ensure the quality of the data collected during the sheltered PIT count:

Training:	<input checked="" type="checkbox"/>
Follow-up:	<input type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Non-HMIS de-duplication techniques:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2015 to 2016 that would change data quality, including changes to training volunteers and inclusion of any partner agencies in the sheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual sheltered PIT count methodology (e.g. change in sampling or extrapolation methods). (limit 1000 characters)

There were no changes in the way the Guam Homeless Coalition implemented our sheltered PIT Count.

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

HUD requires CoCs to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, HUD also strongly encourages CoCs to conduct the unsheltered PIT count annually at the same time that they conduct annual sheltered PIT counts. HUD required CoCs to conduct the last biennial PIT count during the last 10 days in January 2015.

2H-1. Did the CoC approve the final unsheltered PIT count methodology for the most recent unsheltered PIT count? Yes

2H-2. Indicate the date of the most recent unsheltered PIT count (mm/dd/yyyy): 01/29/2016

2H-2a. If the CoC conducted the unsheltered PIT count outside of the last 10 days of January 2016, or most recent count, was an exception granted by HUD? Not Applicable

2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy): 05/02/2016

2I. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count: Methods

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2I-1. Indicate the methods used to count unsheltered homeless persons during the 2016 or most recent PIT count:

Night of the count - complete census:	<input type="checkbox"/>
Night of the count - known locations:	<input checked="" type="checkbox"/>
Night of the count - random sample:	<input type="checkbox"/>
Service-based count:	<input type="checkbox"/>
HMIS:	<input type="checkbox"/>
	<input type="checkbox"/>

2I-2. Provide a brief description of your CoC's unsheltered PIT count methodology and describe why your CoC selected this unsheltered PIT count methodology. (limit 1000 characters)

The GHC members reviewed the site listing from the previous count, consulted with other stakeholders to add other sites and update the comprehensive listing of sites where unsheltered homeless persons were known to congregate. Site visits were made to many new sites prior to the day of the count to assist in count preparation. For the day of the count, teams were assigned specific sites to survey. The team leader assessed the area to ensure it meets the HUD definition of a place not meant for human habitation. Then the team interviews the individual, or if a family- normally the head of household is interviewed. Teams ask prior to interview, if they have been interviewed already. This prevents duplication. If a group of individuals is not part of a household, they are individually interviewed. In areas with more land area to cover, and more homeless families and individuals, additional teams were sent during the day to assist in the count and to ensure wider coverage of the island.

2I-3. Describe any change in methodology from your unsheltered PIT count in 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the count). (limit 1000 characters)

The survey tool was changed slightly. The questions were modified to determine chronic homelessness and more accurately capture the number of months the individual was homeless, and the total months for those with episodes of homelessness. This would help in determining accurately if the individual or family is chronically homeless following the HUD definition.

2I-4. Has the CoC taken extra measures to identify unaccompanied homeless youth in the PIT count? Yes

2I-4a. If the response in 2I-4 was "no" describe any extra measures that are being taken to identify youth and what the CoC is doing for homeless youth. (limit 1000 characters)

Not applicable.

2J. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count: Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2016 unsheltered PIT count:

Training:	<input checked="" type="checkbox"/>
"Blitz" count:	<input type="checkbox"/>
Unique identifier:	<input type="checkbox"/>
Survey questions:	<input checked="" type="checkbox"/>
Enumerator observation:	<input type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016 that would affect data quality. This includes changes to training volunteers and inclusion of any partner agencies in the unsheltered PIT count planning and implementation, if applicable. Do not include information on changes in actual methodology (e.g. change in sampling or extrapolation method). (limit 1000 characters)

Inclusion of a new organization, Big Brothers Big Sisters, provided translators during the day of the count. Additionally, a preliminary team was sent out weeks before the day of the count to locate new sites utilizing Google Maps GPS Tracker application.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. Performance Measure: Number of Persons Homeless - Point-in-Time Count.

*** 3A-1a. Change in PIT Counts of Sheltered and Unsheltered Homeless Persons**

Using the table below, indicate the number of persons who were homeless at a Point-in-Time (PIT) based on the 2015 and 2016 PIT counts as recorded in the Homelessness Data Exchange (HDX).

	2015 PIT (for unsheltered count, most recent year conducted)	2016 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1,280	1,085	-195
Emergency Shelter Total	73	105	32
Safe Haven Total	0	0	0
Transitional Housing Total	14	7	-7
Total Sheltered Count	87	112	25
Total Unsheltered Count	1,193	973	-220

3A-1b. Number of Sheltered Persons Homeless - HMIS.

Using HMIS data, enter the number of homeless persons who were served in a sheltered environment between October 1, 2014 and September 30, 2015 for each category provided.

	Between October 1, 2014 and September 30, 2015
Universe: Unduplicated Total sheltered homeless persons	582
Emergency Shelter Total	527
Safe Haven Total	0
Transitional Housing Total	55

3A-2. Performance Measure: First Time Homeless.

Describe the CoC's efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors of becoming homeless.

(limit 1000 characters)

After reviewing the ESG APR for Homeless Prevention services for the past two years, we find that persons who were at-risk for becoming homeless were more likely to be renting with no subsidy. Furthermore, on average at least 51% of the households had no income at time of program entry. For households who did have income, a majority, or 73% were earning \$1,000 or less in monthly income. According to the FMR, a two-bedroom unit will cost \$937. Even at the FMR rate, families are at a severe cost burden. Households who sought homeless prevention services were also family households. For the past two years, 91% were family households with 57% of households with children below the age of 18. Therefore, we find that households earning little to no income and who have children below the age of 18 are at a high cost burden and need programs such as the ESG and the new CoC Rapid Re-Housing program to assist in stabilizing their housing.

3A-3. Performance Measure: Length of Time Homeless.

Describe the CoC’s efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless.

(limit 1000 characters)

Guam's emergency shelter, the Guma San Jose, coordinates with the ESG project sponsor to move their program participants into permanent housing. Based on the APR for the past 2 years, 46% of participants were temporarily housed for 30 days or less. Fifty-two percent required the maximum stay of no more than 60 days. Only few, approximately 4%, exceeded the maximum allotted time for shelter. After reviewing the ESG APR for the past 2 years, we found that 24% of participants exited the ESG within 60 days, 34% needed at least 6 months of assistance, 40% needed 1 year of assistance in order to stabilize, and 12% went beyond the 1 year assistance. Individuals and families with the longest lengths of time being homeless who are identified as chronic homeless (CH) are referred to the Y Jahame Permanent Housing Program which serves exclusively CH persons. At least 95% of beds that are made available through turnover are prioritized for CH persons.

*** 3A-4. Performance Measure: Successful Permanent Housing Placement or Retention.**

In the next two questions, CoCs must indicate the success of its projects in placing persons from its projects into permanent housing.

3A-4a. Exits to Permanent Housing Destinations:

Fill in the chart to indicate the extent to which projects exit program participants into permanent housing (subsidized or non-subsidized) or the

retention of program participants in CoC Program-funded permanent supportive housing.

	Between October 1, 2014 and September 30, 2015
Universe: Persons in SSO, TH and PH-RRH who exited	43
Of the persons in the Universe above, how many of those exited to permanent destinations?	26
% Successful Exits	60.47%

3A-4b. Exit To or Retention Of Permanent Housing:
In the chart below, CoCs must indicate the number of persons who exited from any CoC funded permanent housing project, except rapid re-housing projects, to permanent housing destinations or retained their permanent housing between October 1, 2014 and September 31, 2015.

	Between October 1, 2014 and September 30, 2015
Universe: Persons in all PH projects except PH-RRH	107
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?	98
% Successful Retentions/Exits	91.59%

3A-5. Performance Measure: Returns to Homelessness: Describe the CoCs efforts to reduce the rate of individuals and families who return to homelessness. Specifically, describe strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness. (limit 1000 characters)

According to table 3A-4b, 92% of persons who entered the CoC's permanent housing projects exited into permanent housing situations. The CoC continues to track reasons for exits to homelessness such as violating program rules or incarceration. The CoC continues to work towards implementing a successful housing first model and ensuring participants are not exited for reasons such as failing to participate in support services, failure to make progress on a service plan, loss of income or failure to improve income, domestic violence, or any other activity not covered in the lease agreement. The CoC ensures that all individuals and families who exit to homelessness are assessed using the VISPDAT and placed back into the community queue for housing assistance. The CoC utilizes the HMIS to track the exits of all program participants and submits reports such as the APR to track the performance of each CoC program in securing successful exits of their program participants.

3A-6. Performance Measure: Job and Income Growth. Performance Measure: Job and Income Growth. Describe the CoC's specific strategies to assist CoC Program-funded projects to increase program participants' cash income from employment and non-

**employment non-cash sources.
(limit 1000 characters)**

CoC-program funded projects work with participants to identify goals related to job and income growth. These goals are identified according to the needs assessment and capabilities of the participant. Program staff identify possible impediments and work with participants to overcome these impediments such as obtaining a GED/diploma for those who lack the basic educational requirements. Participants are also assisted with higher education, if that goal has been identified in their service plan. Case management support would be provided at least monthly to gauge adjustment concerns, stress management, and budgeting. Milestones within the job arena will be identified to monitor the progress or success of the individual, and to revise or amend supports and reinforcement activities. The CoC has partnered with the DOL's National Emergency Grant Recovery Assistance program to assist homeless persons with employment paying participants \$10/hr while obtaining on-the-job training.

**3A-6a. Describe how the CoC is working with mainstream employment organizations to aid homeless individuals and families in increasing their income.
(limit 1000 characters)**

Guam's Dept. of Labor (DOL) and Division of Integrated Services for Individuals with Disabilities (DISID) are both active members of the CoC. Both Agencies have assessment process for individuals seeking employment services. Participants of some of the permanent supportive housing program are able to utilize paratransit service, a public transportation services but specifically for individuals with disabilities. This transportation services offers door to door services which works out for this population when seeking employment. Unfortunately, Guam continues to lack a reliable public transportation for individuals without disabilities. As a result this places an undue burden on some project sponsors to provide transportation. CoC continues to engage the transit authority to identify solutions to the existing transportation issues. The CoC Program funds 4 PH projects. All four projects coordinate with mainstream organizations.

**3A-7. What was the the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoC's unsheltered PIT count?
(limit 1000 characters)**

The Homeless Outreach Team, comprised of various entities and a formerly homeless individual, was created to conduct coordinated outreaches to individuals and families who are unsheltered. HMIS End Users who are also members of the outreach team are trained to utilize the VISPAT assessment tool to determine the severity needs of the homeless households. Members of the team coordinate so there is no duplication of services. The CoC uses the CES to identify and track persons who are unsheltered. The CoC also uses Whatsapp, a free mobile app, to quickly identify homeless families, especially youth and families. With consent from the homeless family, the team also sends photos of the homeless persons and their physical location. Households who are assessed as having the highest severity of needs are prioritized for PSH,

followed by ESG, TH, and ES, if beds are available.

3A-7a. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. disasters)? No

3A-7b. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. deserts, wilderness, etc.)? (limit 1000 characters)

Guam scouted all villages. There were no areas that were excluded.

3A-8. Enter the date the CoC submitted the system performance measure data into HDX. The System Performance Report generated by HDX must be attached. (mm/dd/yyyy) 07/24/2016

3A-8a. If the CoC was unable to submit their System Performance Measures data to HUD via the HDX by the deadline, explain why and describe what specific steps they are taking to ensure they meet the next HDX submission deadline for System Performance Measures data. (limit 1500 characters)

Not applicable. Guam submitted its System Performance Measures data to HUD via the HDX by the deadline.

3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

Objective 1: Ending Chronic Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

To end chronic homelessness by 2017, HUD encourages three areas of focus through the implementation of Notice CPD 14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status.

- 1. Targeting persons with the highest needs and longest histories of homelessness for existing and new permanent supportive housing;**
- 2. Prioritizing chronically homeless individuals, youth and families who have the longest histories of homelessness; and**
- 3. The highest needs for new and turnover units.**

3B-1.1. Compare the total number of chronically homeless persons, which includes persons in families, in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	153	55	-98
Sheltered Count of chronically homeless persons	0	0	0
Unsheltered Count of chronically homeless persons	153	55	-98

**3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, or no change in the overall TOTAL number of chronically homeless persons in the CoC, as well as the change in the unsheltered count, as reported in the PIT count in 2016 compared to 2015.
(limit 1000 characters)**

Guam did not serve any chronically homeless persons in any of its shelters. According to the table above, there was a 64% decrease in homeless persons. 74% of the decrease is attributed to a drop in chronic homeless families; while 44% represents a decrease in chronic homeless individuals. This can be attributed to the change the CoC's PIT count survey tool. The tool mirrored the Final Rule on the Chronic Homeless definition by incorporating a question on whether the episodes of homelessness totaled 12 months. The tool also ensured teams were identifying heads of households as meeting the disabling condition as in previous counts any adult in the household with a disability who met the length of homelessness identified the household as a chronic homeless family.

3B-1.2. Compare the total number of PSH beds (CoC Program and non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count, as compared to those identified on the 2015 Housing Inventory Count.

	2015	2016	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	78	52	-26

3B-1.2a. Explain the reason(s) for any increase, or no change in the total number of PSH beds (CoC program funded or non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count compared to those identified on the 2015 Housing Inventory Count. (limit 1000 characters)

According to Guam's 2016 HIC, the CoC experienced a 33% decrease in the number of beds prioritized for chronic homeless persons. The primary decrease is due to HUDVASH reporting that chronic homeless persons are not prioritized for voucher assistance. The CoC is working closely with the U.S. VA to accept chronic homeless veterans who enter into the Coordinated Entry System who are prioritized as having the most severe needs. The CoC also lost one PSH program which provided 4 beds and loss partial funding for a PSH program that is dedicated for chronic homeless persons. The dedicated chronic homeless bed program lost approximately 4 beds.

3B-1.3. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status? Yes

**3B-1.3a. If “Yes” was selected for question 2
3B-1.3, attach a copy of the CoC’s written standards or other evidence that clearly shows the incorporation of the Orders of Priority in Notice CPD 14-012 and indicate the page(s) for all documents where the Orders of Priority are found.**

3B-1.4. Is the CoC on track to meet the goal of ending chronic homelessness by 2017? Yes

This question will not be scored.

3B-1.4a. If the response to question 3B-1.4 was “Yes” what are the strategies that have been implemented by the CoC to maximize current resources to meet this goal? If “No” was selected, what resources or technical assistance will be implemented by the CoC to reach to goal of ending chronically homelessness by 2017? (limit 1000 characters)

Through the Homeless Outreach Team, chronic homeless families and individuals are responded to quicker and are immediately placed in the CES. Households with the highest severity needs are referred to the most applicable PSH program, preferably the island's Y Jahame Program which is the only program dedicated to serve exclusively chronic homeless persons. The CoC is also working closely with the island's GBHWC to provide disability certifications primarily for those with mental illness and/or substance abuse. The CoC is working closely with service providers such as the GBHWC to maximize efforts to conduct on-site assessment for evidence of possible mental illness. The challenges faced by organizations include the long wait for individuals to be seen by a psychiatrist/psychologist as only a few are available through the community mental health facility.

3B. Continuum of Care (CoC) Strategic Planning Objectives

3B. Continuum of Care (CoC) Strategic Planning Objectives

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

HUD will evaluate CoC's based on the extent to which they are making progress to achieve the goal of ending homelessness among households with children by 2020.

3B-2.1. What factors will the CoC use to prioritize households with children during the FY2016 Operating year? (Check all that apply).

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Number of previous homeless episodes:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Criminal History:	<input type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder):	<input type="checkbox"/>
Head of household has mental/physical disabilities:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

3B-2.2. Describe the CoC's strategies including concrete steps to rapidly rehouse every household with children within 30 days of those families becoming homeless. (limit 1000 characters)

The CoC prioritizes households with children who are unsheltered or those fleeing domestic violence followed by those living in emergency shelters or transitional housing. The CoC works closely with all families to prevent homelessness through the ESG homeless prevention program. Families who are homeless are immediately referred to the ESG Rapid Rehousing program through the CES. Families are recertified for continued assistance if it is determined that they can stabilize their housing.

3B-2.3. Compare the number of RRH units available to serve families from the 2015 and 2016 HIC.

	2015	2016	Difference
RRH units available to serve families in the HIC:	0	0	0

3B-2.4. How does the CoC ensure that emergency shelters, transitional housing, and permanent housing (PSH and RRH) providers within the CoC do not deny admission to or separate any family members from other members of their family based on age, sex, gender or disability when entering shelter or housing? (check all strategies that apply)

CoC policies and procedures prohibit involuntary family separation:	<input checked="" type="checkbox"/>
There is a method for clients to alert CoC when involuntarily separated:	<input type="checkbox"/>
CoC holds trainings on preventing involuntary family separation, at least once a year:	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

PIT Count of Homelessness Among Households With Children

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	974	858	-116
Sheltered Count of homeless households with children:	64	94	30

Unsheltered Count of homeless households with children:	910	764	-146
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3B-2.5a. Explain the reason(s) for any increase, or no change in the total number of homeless households with children in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)

Guam experienced a 47% increase in homeless households with children living in shelters and a 16% decrease in the unsheltered count. There were no changes to the methodology used to count those living in shelters. The reason for the increase is due to 30 additional beds added to Guam's inventory of transitional housing for homeless families. This past unsheltered count proved difficult for the CoC as new sites were included due to the recent passing of storms. Many homes constructed with wood and tin were destroyed leaving families living in tents. These areas are primarily concentrated in the northern part of the island which is heavily populated. Many unknown or unmarked streets surfaced which proved difficult for teams to complete.

3B-2.6. From the list below select the strategies to the CoC uses to address the unique needs of unaccompanied homeless youth including youth under age 18, and youth ages 18-24, including the following.

Human trafficking and other forms of exploitation?	Yes
LGBTQ youth homelessness?	Yes
Exits from foster care into homelessness?	Yes
Family reunification and community engagement?	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs?	No
Unaccompanied minors/youth below the age of 18?	Yes

3B-2.6a. Select all strategies that the CoC uses to address homeless youth trafficking and other forms of exploitation.

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	<input checked="" type="checkbox"/>
Increase housing and service options for youth fleeing or attempting to flee trafficking:	<input type="checkbox"/>
Specific sampling methodology for enumerating and characterizing local youth trafficking:	<input type="checkbox"/>
Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	<input type="checkbox"/>
Community awareness training concerning youth trafficking:	<input type="checkbox"/>
	<input type="checkbox"/>

N/A:	<input type="checkbox"/>
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3B-2.7. What factors will the CoC use to prioritize unaccompanied youth including youth under age 18, and youth ages 18-24 for housing and services during the FY 2016 operating year? (Check all that apply)

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Length of time homeless:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Lack of access to family and community support networks:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

3B-2.8. Using HMIS, compare all unaccompanied youth including youth under age 18, and youth ages 18-24 served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 (October 1, 2013-September 30, 2014) and FY 2015 (October 1, 2014 - September 30, 2015).

	FY 2014 (October 1, 2013 - September 30, 2014)	FY 2015 (October 1, 2014 - September 30, 2105)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	6	10	4

3B-2.8a. If the number of unaccompanied youth and children, and youth-headed households with children served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2015 is lower than FY 2014 explain why. (limit 1000 characters)

3B-2.9. Compare funding for youth homelessness in the CoC's geographic area in CY 2016 and CY 2017.

	Calendar Year 2016	Calendar Year 2017	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$130,385.00	\$130,385.00	\$0.00
CoC Program funding for youth homelessness dedicated projects:	\$130,385.00	\$130,385.00	\$0.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$0.00	\$0.00	\$0.00

3B-2.10. To what extent have youth services and educational representatives, and CoC representatives participated in each other's meetings between July 1, 2015 and June 30, 2016?

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	12
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	12
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	12

3B-2.10a. Based on the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local educational authorities and school districts. (limit 1000 characters)

All homeless youth are immediately registered into the appropriate school setting with the assistance of the Department of Education Superintendent's Office, youth's district school & assigned Legal Guardian. However, other services provided are working collaboratively with the school programs such as Special Education as a considered process to ensure proper educational standing for the youth. The Guam Dept. of Education (DOE) are also active members of the CoC and attend regular monthly meetings. Furthermore, members of DOE participate in the planning of the PIT count and serve as surveyors on the day of the count. DOE's Head Start program also conduct regular outreach to identify homeless families with age-eligible children. Eligible families are assisted with becoming active participants in the health, safety, social-emotional, and education needs of their children and adult family members.

3B-2.11. How does the CoC make sure that homeless individuals and families who become homeless are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow. (limit 2000 characters)

The agency will identify the assigned school in which the youth attended and work with the Legal Guardian to obtain school official documents. The process includes completing all required school documents such as: school registration

form, health & wellness documents, meetings with appropriate school officials (principal, counselor, teachers, i.e....) In this process the school will determine grade status, credit status, & appropriate grade level, as well as age appropriate to continue school. Furthermore, the DOE Head Start program conducts community outreach to identify homeless families with age-eligible children, inform them of their categorical eligibility for Head Start & then work with them in obtaining any needed services. A family assessment is conducted at the beginning of the year to prioritize the needs for services and support. Head Start then assists families to become more involved with the health, safety, social-emotional, and education needs of their children and adult family members.

**3B-2.12. Does the CoC or any HUD-funded projects within the CoC have any written agreements with a program that services infants, toddlers, and youth children, such as Head Start; Child Care and Development Fund; Healthy Start; Maternal, Infant, Early Childhood Home Visiting programs; Public Pre-K; and others?
(limit 1000 characters)**

3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

Objective 3: Ending Veterans Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

Opening Doors outlines the goal of ending Veteran homelessness by the end of 2016. The following questions focus on the various strategies that will aid communities in meeting this goal.

3B-3.1. Compare the total number of homeless Veterans in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	23	21	-2
Sheltered count of homeless veterans:	1	6	5
Unsheltered count of homeless veterans:	22	15	-7

3B-3.1a. Explain the reason(s) for any increase, or no change in the total number of homeless veterans in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)

Guam is close to its goal of ending veteran homelessness. Although we find that there is an increase in homeless vets living in temporary shelters, successfully engaging this hard to reach population is a big step towards permanent housing placement. Guam has also seen a 32% decrease in its unsheltered count of homeless veterans. VA service providers are active participants in the Homeless Outreach Team. Eligible vets are immediately referred to the HUDVASH or SSVF programs. All others are referred to CoC-funded programs or the ESG program.

3B-3.2. Describe how the CoC identifies, assesses, and refers homeless veterans who are eligible for Veterean's Affairs services and housing to appropriate reources such as HUD-VASH and SSVF. (limit 1000 characters)

All veterans are referred to the Veteran Affairs (VA) office on Guam. Those who are eligible for HUD-VASH are immediately assisted to obtain a voucher, if such voucher is available. Otherwise, the VA office refers the homeless vet to the SSVF program. The SSVF program assists eligible participants with short-term housing assistance and are assisted with obtaining other mainstreamresources while receiving temporary housing. For veterans who have not reached housing stability, the SSVF works in conjunction with other housing providers through the CoC, the ESG program, and other subsidized housing programs to identify permanent housing placement.

3B-3.3. Compare the total number of homeless Veterans in the CoC and the total number of unsheltered homeless Veterans in the CoC, as reported by the CoC for the 2016 PIT Count compared to the 2010 PIT Count (or 2009 if an unsheltered count was not conducted in 2010).

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2016	% Difference
Total PIT Count of sheltered and unsheltered homeless veterans:	27	21	-22.22%
Unsheltered Count of homeless veterans:	22	15	-31.82%

3B-3.4. Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2016. Yes

This question will not be scored.

3B-3.4a. If "Yes", what are the strategies being used to maximize your current resources to meet this goal? If "No" what resources or technical assistance would help you reach the goal of ending Veteran homelessness by the end of 2016? (limit 1000 characters)

Although they do not enter into the HMIS, the USVETS emergency shelter program provides 5 beds for homeless vets. Homeless vets from this shelter are referred to the HUDVASH and SSVF program. Homeless veterans identified through the CES are immediately referred to the HUDVASH program. Although GHURA manages the housing assistance payments, the VA is responsible for the referral and support services. Guam has in its inventory a total of 45 HUDVASH vouchers, a 10% increase from last year. For vets who do not meet the minimum requirements of the HUDVASH, programs such as the SSVF, the CoC, and ESG are made available.

4A. Accessing Mainstream Benefits

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Does the CoC systematically provide information to provider staff about mainstream benefits, including up-to-date resources on eligibility and program changes that can affect homeless clients? Yes

4A-2. Based on the CoC's FY 2016 new and renewal project applications, what percentage of projects have demonstrated they are assisting project participants to obtain mainstream benefits? This includes all of the following within each project: transportation assistance, use of a single application, annual follow-ups with participants, and SOAR-trained staff technical assistance to obtain SSI/SSDI?

FY 2016 Assistance with Mainstream Benefits

Total number of project applications in the FY 2016 competition (new and renewal):	5
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 2a, 2b and 2c on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	5
Percentage of renewal and new project applications in the FY 2016 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	100%

4A-3. List the organizations (public, private, non-profit and other) that you collaborate with to facilitate health insurance enrollment, (e.g., Medicaid, Medicare, Affordable Care Act options) for program participants. For each organization you partner with, detail the specific outcomes resulting from the partnership in the establishment of benefits. (limit 1000 characters)

Guam's Dept. of Public Health and Social Services (DPHSS) are active participants in regular monthly membership meetings. The University of Guam's (UOG) School of Nursing are active participants with the Dean of the School serving as the CoC Chair. Healthcare outreach is part of the Passport to Services annual outreach event and standalone healthcare outreach. All of Guam's CoC-funded programs assist their program participants to access mainstream benefits such as MIP, Medicaid, Welfare, SNAP, Medicare and SSDI.

4A-4. What are the primary ways the CoC ensures that program participants with health insurance are able to effectively utilize the healthcare benefits available to them?

Educational materials:	<input checked="" type="checkbox"/>
In-Person Trainings:	<input type="checkbox"/>
Transportation to medical appointments:	<input checked="" type="checkbox"/>
Annual Island Outreach Events	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not Applicable or None:	<input type="checkbox"/>

4B. Additional Policies

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4B-1. Based on the CoCs FY 2016 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH), and SSO (non-Coordinated Entry) projects in the CoC are low barrier?

FY 2016 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2016 competition (new and renewal):	5
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2016 competition:	5
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2016 competition that will be designated as "low barrier":	100%

4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2016 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

FY 2016 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2016 competition (new and renewal):	5
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2016 competition:	5
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2016 competition that will be designated as Housing First:	100%

4B-3. What has the CoC done to ensure awareness of and access to housing and supportive services within the CoC's geographic area to persons that could benefit from CoC-funded programs but are not currently participating in a CoC funded program? In particular, how does the CoC reach out to for persons that are least likely to request housing or services in the absence of special outreach?

Direct outreach and marketing:	<div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto; display: flex; align-items: center; justify-content: center;">X</div>
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Use of phone or internet-based services like 211:	<input checked="" type="checkbox"/>
Marketing in languages commonly spoken in the community:	<input type="checkbox"/>
Making physical and virtual locations accessible to those with disabilities:	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

4B-4. Compare the number of RRH units available to serve populations from the 2015 and 2016 HIC.

	2015	2016	Difference
RRH units available to serve all populations in the HIC:	0	0	0

4B-5. Are any new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

4B-6. If "Yes" in Questions 4B-5, then describe the activities that the project(s) will undertake to ensure that employment, training and other economic opportunities are directed to low or very low income persons to comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) and HUD's implementing rules at 24 CFR part 135? (limit 1000 characters)

Not applicable.

4B-7. Is the CoC requesting to designate one or more of its SSO or TH projects to serve families with children and youth defined as homeless under other Federal statutes? No

4B-7a. If "Yes", to question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons

defined as homeless in accordance with 24 CFR 578.89. Description must include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)

Not applicable.

4B-8. Has the project been affected by a major disaster, as declared by the President Obama under Title IV of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended (Public Law 93-288) in the 12 months prior to the opening of the FY 2016 CoC Program Competition? No

4B-8a. If "Yes" in Question 4B-8, describe the impact of the natural disaster on specific projects in the CoC and how this affected the CoC's ability to address homelessness and provide the necessary reporting to HUD. (limit 1500 characters)

Not applicable.

4B-9. Did the CoC or any of its CoC program recipients/subrecipients request technical assistance from HUD since the submission of the FY 2015 application? This response does not affect the scoring of this application. Yes

4B-9a. If "Yes" to Question 4B-9, check the box(es) for which technical assistance was requested.

This response does not affect the scoring of this application.

CoC Governance:	<input type="checkbox"/>
CoC Systems Performance Measurement:	<input checked="" type="checkbox"/>
Coordinated Entry:	<input checked="" type="checkbox"/>
Data reporting and data analysis:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>

Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	<input checked="" type="checkbox"/>
Maximizing the use of mainstream resources:	<input type="checkbox"/>
Retooling transitional housing:	<input type="checkbox"/>
Rapid re-housing:	<input type="checkbox"/>
Under-performing program recipient, subrecipient or project:	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

4B-9b. Indicate the type(s) of Technical Assistance that was provided, using the categories listed in 4B-9a, provide the month and year the CoC Program recipient or sub-recipient received the assistance and the value of the Technical Assistance to the CoC/recipient/sub recipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance
Coordinated Entry	03/16/2016	5
RHY and HMIS Data Collection	03/31/2016	5
System Performance Measures	06/09/2016	5
Ending Veteran Homeless	08/17/2016	5

4C. Attachments

Instructions:

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site:
<https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource>

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes		
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure (e.g. RFP)	Yes		
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes		
05. CoCs Process for Reallocating	Yes		
06. CoC's Governance Charter	Yes		
07. HMIS Policy and Procedures Manual	Yes		
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes		
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No		
11. CoC Written Standards for Order of Priority	No		
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes		
14. Other	No		
15. Other	No		

Attachment Details

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Submission Summary

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

Page	Last Updated
1A. Identification	08/12/2016
1B. CoC Engagement	08/19/2016
1C. Coordination	08/15/2016
FY2016 CoC Application	Page 61
	08/30/2016

1D. CoC Discharge Planning	08/15/2016
1E. Coordinated Assessment	08/15/2016
1F. Project Review	08/16/2016
1G. Addressing Project Capacity	08/15/2016
2A. HMIS Implementation	08/15/2016
2B. HMIS Funding Sources	08/15/2016
2C. HMIS Beds	08/15/2016
2D. HMIS Data Quality	08/15/2016
2E. Sheltered PIT	08/15/2016
2F. Sheltered Data - Methods	08/18/2016
2G. Sheltered Data - Quality	08/15/2016
2H. Unsheltered PIT	08/15/2016
2I. Unsheltered Data - Methods	08/19/2016
2J. Unsheltered Data - Quality	08/15/2016
3A. System Performance	08/30/2016
3B. Objective 1	08/30/2016
3B. Objective 2	08/17/2016
3B. Objective 3	08/15/2016
4A. Benefits	08/18/2016
4B. Additional Policies	08/16/2016
4C. Attachments	Please Complete
Submission Summary	No Input Required