

Before Starting the CoC Application

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

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

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

1. The FY 2026 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2026 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2026 CoC Program Competition on behalf of your CoC.

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

1A. Continuum of Care (CoC) Identification

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

1A-1. CoC Name and Number: CA-510 - Turlock, Modesto/Stanslaus County CoC

1A-2. Collaborative Applicant Name: Stanislaus County

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Stanislaus County

1B. Coordination and Engagement–Accountable Structure and Participation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

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- Frequently Asked Questions

1B-1.	Accountable Structure and Participation.	
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In the chart below for the period from June 1, 2025 to May 31, 2026:

1.	select 'Yes' or 'No' in the chart below if the entity listed participated in CoC meetings or select 'Nonexistent' if the entity does not exist in your CoC's geographic area, and
2.	enter the number of persons on the board for each category where you answered 'Yes' in the Participated in CoC Meetings column.

You must click Save at the bottom of the form before entering the number of persons for each category where you answered 'Yes'.

	Entity	Participated in CoC Meetings	Number of Board Members
1.	Affordable Housing Developer(s)	Yes	
2.	CDBG/HOME/ESG Entitlement Jurisdiction(s)	Yes	
3.	Certified Community Behavioral Health Clinic (CCBHC)	Yes	
4.	Community Mental Health Center (CMHC)	Yes	
5.	Disability Advocate(s)	Yes	
6.	Disability Service Organization(s)	Yes	
7.	Emergency Medical Services (EMS)/Crisis Response Team(s)	Yes	1
8.	Employment Assistance Program(s) (e.g., Local Workforce Development, American Job Center)	Yes	
9.	Faith-based Organization(s)	Yes	1
10.	Homeless or Formerly Homeless Person(s)	Yes	
11.	Hospital(s)	Yes	
12.	Other Primary Healthcare Provider(s) (e.g., Federally Qualified Health Center, Healthcare for the Homeless)	Yes	
13.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	No	
14.	Law Enforcement	Yes	
15.	Local Court Systems, Including Specialty Courts (e.g., Mental Health Court, Drug Court, Care Court)	Yes	
16.	Local Government Staff/Official(s)	Yes	3

17.	State Government Staff/Official(s)	No	
18.	State or Local Elected Public Official(s)	No	
19.	Local Jail(s)	No	
20.	Mental Health Service Organization(s)	Yes	
21.	Mental Illness Advocate(s)	Yes	1
22.	Organization(s) led by and serving people with disabilities	Yes	
23.	Other homeless subpopulation advocate(s)	Yes	1
24.	Other nonprofit homeless assistance provider(s)	Yes	
25.	Other social service provider(s)	Yes	1
26.	Public Housing Agencies	Yes	1
27.	Recovery Housing or Sober Living Provider(s)	Yes	
28.	School Administrators/Homeless Liaison(s)	Yes	1
29.	School District(s)	Yes	
30.	Street Outreach Team(s)	Yes	
31.	Substance Abuse Advocate(s)	Yes	
32.	Substance Abuse Service Organization(s)	Yes	
33.	Universities	No	
34.	Veteran Serving Organization(s)	Yes	1
35.	Agencies Serving Survivors of Human Trafficking	Yes	
36.	Victim Service Provider(s)	Yes	1
37.	Domestic Violence Advocate(s)	Yes	
38.	Other Victim Service Organization(s)	Yes	
39.	State Domestic Violence Coalition	No	
40.	State Sexual Assault Coalition	No	
41.	Youth Advocate(s)	Yes	
42.	Youth Homeless Organization(s)	Yes	
43.	Youth Service Provider(s)	Yes	1
44.	Other Homeless Assistance Provider(s)	Yes	3
45.	Local Business or Chamber of Commerce or a Member of a Business Improvement District	Yes	2
	Other: (limit 50 characters)		
46.	Community Member	Yes	1
47.			

1B-2.	Open Invitation for New Members.	
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Describe your CoC's transparent process (e.g., communicated to the public on the CoC's website) to invite new members to join the CoC at least annually.

(limit 2,500 characters)

The Stanislaus Community System of Care (CSOC) conducts an annual gaps analysis to assess whether its membership includes the sectors, expertise, and perspectives necessary to effectively address and end homelessness.

CSOC members identify individuals and organizations that may be a good fit for identified gaps and conduct targeted outreach. The Board also promotes membership opportunities through its county-wide listserv and the public forum component of its regular meetings. Community members are encouraged to nominate individuals or organizations they believe should be considered for CSOC membership through a nomination form. The CSOC plans to make this process more accessible by providing a QR code linking directly to the nomination form.

Each prospective member receives an individualized orientation to the CSOC, including an overview of its purpose, role, responsibilities, and membership expectations. This approach provides potential members with an opportunity to understand the Board and determine whether participation is an appropriate fit. To support transparency and broaden awareness of membership opportunities, the CSOC makes its membership application, nomination form, member expectations, and current roster publicly available on its website. To encourage ongoing participation and public engagement, the CSOC posts the dates and standing location of its 2026 meetings in Modesto, California, on its website, along with its bylaws, meeting agendas, minutes, and meeting presentations dating back to January 2024.

1B-3.	CoC's Strategy to Solicit and Consider Opinions on Preventing and Ending Homelessness.	
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Describe your CoC's transparent process (e.g., communicated to the public on the CoC's website) to solicit and consider opinions regarding the CoC's general performance, strategies, and priority setting process from a broad array of individuals and organizations that have knowledge of homelessness or an interest in preventing or ending homelessness in the CoC's geographic area.
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(limit 2,500 characters)

The StanCo CoC ensures a broad range of providers participate in & understand the CoC, its functions & the local funding competition.

SOLICITATION OF OPINIONS: Community members are encouraged to join committees to be included in CoC Policies & Procedures. Every CoC mtg has public comment & there is open discussion on agenda items. The CoC includes reps from City Govts; emergency shelters, Faith Leaders; Domestic Violence Shelter; Stanislaus Housing Auth; Veterans Affairs; Educators; Community Resident seats; & Senior Services Network, who bring decades of experience in homeless service sector & areas like youth, public safety, education, & elder advocacy.

STRATEGY: The Stanislaus Homeless Alliance (SHA) is focused on ending homelessness by aligning the CoC's & county's infrastructure for homeless response & prevention to MAXIMIZE STRATEGIC & FUNDING EFFICACY. The SHA is comprised of ELECTED OFFICIALS & CITY MGRS, BUSINESS & FAITH LEADERS who work to provide GUIDANCE & FEEDBACK on local strategies to reduce homelessness.

PRIORITY SETTING: The SHA was created to align public officials w/ private business partners to encourage MORE HOUSING DEVELOPMENT. Increasing affordable housing would allow ppl in TRANSITIONAL housing to move to PERMANENT homes, freeing up space in transitional hsg to move indivs from shelters into those placements.

PRIORITIES for the LOCAL COMPETITION: The CoC held a forum to SOLICIT PUBLIC OPINIONS in addition to reviewing local HMIS data about what should be prioritized in the Competition. Participants identified ELDERLY, ppl w/ DISABILITIES, FAMILIES w/ CHILDREN, UNSHELTERED/CHRONICALLY homeless, & DV SURVIVORS as PRIORITY SUBPOPULATIONS.

HMIS SYSTEM PERFORMANCE ACCURACY: The CoC ensures that its HMIS data is ACCURATE & UP-TO-DATE. Every month, the HMIS lead requires CoC-Funded Providers to review HMIS reports from the prior month and to submit any applicable corrections to their data. This practice encourages providers to MAINTAIN ACCURATE RECORDS, & doing so was also rewarded in this year's competition by including data quality & the submittal of these reports in the SCORING TOOL.

RANK & REVIEW PANEL: DIVERSE FEEDBACK from the public forum was INCORPORATED into the CoC SCORING TOOL. The CoC scored the applicants on OBJECTIVE PERFORMANCE METRICS (such as increase in employment income & bed utilization). Competition Panelists used the SCORING TOOL to make their Rank & Review decisions.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
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Describe your CoC's transparent process to accept and consider proposals from organizations that have not previously received CoC Program funding including faith-based organizations.

(limit 2,500 characters)

The CoC transparently advertised the FY26 CoC Program NOFO to the CoC's website, list serves, and through the public CSOC meetings (CoC Board) in late June/early July 2026. The CoC created a Solicitation for Proposals that was publicly posted, which described the funding opportunity and encouraged new applicants to apply, including faith-based organizations. The CoC held a New Applicant Information Session on June 18, 2026, via Zoom that was broadcast to all known organizations that help people experiencing homelessness.

The CoC also hosted a New Applicant Technical Assistance Workshop on July 8, 2026. Each workshop explained competition requirements, supplemental apps, & deadlines. All TA sessions had a Q&A section & recordings were shared via list-serve for anyone who did not attend.

Finally, the CoC held individual technical assistance sessions for new applicants to help answer specific questions they had regarding the funding competition and helped reduce barriers for them to apply as a new applicant. Every proposal that was received through the CoC's transparent and fair process was considered by the impartial Rank and Review Panel, which includes volunteers such as government and nonprofit staff, housing advocates, people with lived experience, and those representing specific subpopulations such as veterans. Panelists scored applicants with the CoC Board-approved tool. New proposals were scored on the same scoring system as renewal projects (114 points total). Proposals that scored high enough were accepted (in 2026, all proposals were accepted).

NEWLY FUNDED ORGANIZATIONS: Over 2025 and 2026, the CoC gathered a list of organizations interested in CoC funding and those who serve people experiencing homelessness but have not previously applied. The CoC did receive a proposal from an organization that has not previously received CoC Funding: Turning Point Community Program (TPCP). During the competition process and through the New Applicant Information Session and New Applicant TA Workshop, the CoC engaged with multiple organizations that have not previously received CoC funding, including: The Salvation Army, HAVEN, Family Promise of Modesto, Turlock Gospel Mission, MNJ Foundation, Stanislaus Homeless Advocacy and Resource Enterprise, BHRS, and ACE Street Medicine. The Salvation Army and Turlock Gospel Mission are faith-based organizations.

1B-5	Plan for Comprehensive Strategies for Reducing Homelessness.
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Describe how your CoC will incorporate comprehensive strategies for reducing homelessness, including interventions in 42 U.S.C. 11386b(d) and other targeted projects for specific subpopulations, by providing a plan to address a gap in the CoC's current homelessness system.

(limit 2,500 characters)

To FILL a previous OUTREACH GAP, the CoC started The Access Center single entry point to ASSESS, REFER & CONNECT ppl & FAMILIES to housing, treatment, shelter, food, other svcs connected to a low-barrier shelter w/nearly 400 beds.

ASSESSMENTS ID GAPS & allow CoC to prioritize svcs. County 211 system easy for ppl to connect w/svcs food access, physical & mental HEALTHCARE

FUNDING: CA Dept of Housing & Community Developmt Homeless Housing Assistance & Prevention Program (HHAP) allocated over \$4.8M in 2026 to CoC to address ENCAMPMENTS by moving ppl from streets to housing & PREVENT other encampments from establishing. CoC is also allocating HHAP resources toward homeless PREVENTION like EDUCATION & JOB TRAINING to encourage SELF-SUFFICIENCY.

The City of Modesto (COM) received CA-State Encampment Resolution Funding (ERF) that addresses encampments. COM & Stanislaus County applied for the most recent ERF grant and hopes to receive that funding in the next few months.

ACCOUNTABILITY: The Stanislaus Homelessness Alliance (SHA) a close CoC Partner, is comprised of Elected Officials and Faith & Business Leaders to exchange FEEDBACK, DATA & STRATEGY ideas to LEVERAGE public & private FUNDING, ADDRESS GAPS & identify STRATEGIES to end homelessness in the county. The CoC will set targeted TIMELINES & PERFMNCE MEASURES thru Strategic Plan Implementation in coordination w/SHA.

SUBPOPULATION FOCUS:

CoC PRIORITIES-ELDERLY ADULTS, UNSHELTERED, CHRONIC HOMELESS & DISABLED people bc high MEDICAL NEEDS+TRAUMA. Access via 211

WeCareTurlock is a CoC-funded perm housing project for CHRONIC HMLS, DISABLED ppl w/case mgmt & HEALTHCARE STABILIZATION support. WCT provides RAPID REHOUSING svcs; RENTAL & SEC DEPOSIT ASSISTANCE so eligible ppl can move into below FMR housing.

The County's Community Assessmt Response & Engagement CARE Team reaches CHRONIC HOMELES, HI-MED NEED ADULTS w/ADDICTION, DISABILITIES, MENTAL ILLNESS. Legal, Health & Housing Partners map indivual assets, ID FEEDBACK for better OUTCOMES & use ASSERTIVE OUTREACH to ALIGN SERVICES & INTERVENTIONS

Ensure ACCOUNTABILITY thru WARM HANDOFFS to assure services are rendered

PERFORMANCE DEMONSTRATED:

The CoC INCREASED EXITS to PERM Destintns 2025=16%, 2026=22.7%

507 out of 903 exits to perm destinations, 56% of placements, resulted in PERM EXITS w/NO ONGOING SUBSIDY.

The CoC PIT counts DECREASED by 295 people from 2025=2086 to

2026=1791

1B-5a Confirmation of Plan Coverage.

Select 'Yes' or 'No' in the chart below to indicate whether your narrative in question 1B-5 addresses the following aspects of your plan to address a gap in the CoC's current homelessness system.

1. Identifies the gap, using data or stakeholder feedback	Yes
2. The strategy to address the needs of all relevant subpopulations	Yes
3. Sets quantifiable performance measures	Yes
4. Identifies timelines for the completion of specific tasks	Yes
5. Identifies specific funding sources for planned activities	Yes
6. An individual or body responsible for overseeing implementation of specific strategies	Yes

1C. Coordination and Engagement

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

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- Frequently Asked Questions

1C-1.	Treatment and Recovery Services—On-site Substance Use Treatment Availability.	
	You must upload the List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment attachment to the 4A. Attachments Screen.	
	What percent of your TH/RRH/PSH projects have substance use treatment available on site?	36%

If you are a rural CoC, describe what substance use treatment is available in your CoC and how people you serve access those services.

(limit 2,500 characters)

N/A - Not a rural CoC

1C-1a. Treatment and Recovery Services—Outpatient Treatment for Mental Health and Substance Use Disorders.

Describe how your CoC partners with, or has projects that provide, outpatient treatment for mental health and substance use disorders with a range of appropriate levels of care, psychosocial interventions, medication management, suicide prevention, and recovery supports.

(limit 2,500 characters)

PEER SUPPORT helps build trust and connect people experiencing serious mental health or substance use challenges with treatment, recovery services, and housing support. The CoC FUNDS & PARTNERS w/providers who offer TREATMENT & interventions for MENTAL HEALTH & substance use disorder (SUD).

The CoC funds the Center for Human Services which provides youth, adolescent & adult SUD programming for ages 12-23, incl PEER SUPPORT thru weekly group meetings; relapse prevention; contingency management, communication & family relations help, socialization, and help finding community support.

Dignity Village Bridge Housing (DVBH) prioritizes ppl receiving SUD services and in recovery. DVBH offers 24hr Inpatient Treatment programs, incl Adult Residential Treatment; Residential Withdrawal management; Residential & Outpatient co-occurring treatment; Outpatient & Intensive Outpatient SUD services; Recovery & Aftercare services. DVBH also runs a Drop-In Center which serves as an entry point to SUD services, assists w/Medi-Cal apps and provides job search support & other community resources.

Turlock Gospel Mission (TGM), offers the Restoration Program, a year-long Bible-based program to help indivs navigate SUD recovery, engage in Vocational Training, & participate in Spiritual Development. Recovery here includes recovery from ADDICTION, DOMESTIC VIOLENCE, childhood ABUSE, co-dependency, overeating, and more. TGM provides HOUSING, Meals, CASE MGMT, Counseling, Discipleship, Education, Job training & PEER SUPPORT.

Stanislaus County Behavioral Health & Recovery Services (BHRS) provides a range of mental health interventions from CRISIS CARE to ongoing in- & outpatient SUD & mental health support. BHRS svcs vary based on a person's clinical needs & concerns. Crisis intervention may include placement, referrals to Inpatient Psychiatric Facilities for those having psychiatric emergencies. These services are intended to provide PSYCHIATRIC STABILIZATION, Clinical Assessment, Medication, & other interventions to REDUCE immediate RISK & support Ongoing Behavioral Health care svcs.

The local Crisis Line is available 24/7 to provide immediate support, assessment, & connection to care for mental health emergencies, SUICIDE IDEATION a/o SUBSTANCE USE CRISES.

1C-1b. Treatment and Recovery Services—Peer Support and Recovery Navigation.

Describe how your CoC partners with, or has projects that provide access to, peer recovery specialists or other forms of peer support and recovery navigation.

(limit 2,500 characters)

The CoC FUNDS the Center for Human Services (CHS) which provides youth, adolescent & adult SUD programming for ages 12-23, incl PEER SUPPORT thru weekly group meetings; relapse prevention; cognitive-behavioral training; contingency mgmt; communication & family relations help; socialization; & help finding community support. includes FORMERLY HOMELESS YOUTH on its Advisory Board who assist in carrying out the PIT.

The CoC partners with Turning Point Community Services GARDEN GATE RESPITE GGR program, a short-term crisis program that centers on PEER SUPPORT for those 18+ who are homeless, at-risk of homelessness & referred by behavioral health case mgrs or local POLICE. The GGR provides a homelike environment w/PEER SUPPORT, strength-building & linkage/referrals to services to meet identified needs.

The CoC also PARTNERS w/ Stanislaus County Behavioral Health & Rehabilitation Svcs (BHRS) to provide & coordinate comprehensive behavioral health svcs to support RECOVERY, STABILITY & overall wellness. Services are delivered by providers thruout the County & are organized to meet the needs of adults, children, youth & individuals experiencing Substance Use Disorders (SUDs). Treatment interventions include: Mental Health & SUD Assessments; PEER SUPPORTED INDIV, FAMILY & GROUP THERAPY; Medication & Psychiatric Care; Crisis Support & Urgent Care services; & SUD treatment & Recovery support.

Dignity Village Bridge Housing (DVBH) operates a Drop-In Center which serves as an entry point to SUD svcs, assists w/Medi-Cal apps and provides job search support & other community resources. The Center is STAFFED by VOLUNTEERS, many of whom are PEOPLE IN RECOVERY THEMSELVES, who also provide PEER MENTORING & PEER GROUP FACILITATION.

The CoC also partners w/the Community Assessment Response & Engagement (CARE) team, a team of First Responders, Clinicians, Homeless Svc Providers & when possible, PEERS w/LIVED EXPERIENCE. The team works with people whose health, safety, or involvement with the justice system calls for a coordinated response.

The Community Health & Assistance Team (CHAT) uses Outreach Specialists trained to respond to certain 911 calls for nonviolent incidents. This team consists of PEOPLE w/LIVED EXPERIENCE of HOMELESSNESS & staff from Stanislaus Co social services & non-profits who work w/Modesto Police to provide homeless people w/immediate SUPPORT, INTERVENTION & CONNECTION to SVCS.

1C-1c. Treatment and Recovery Services—Connecting Individuals Experiencing Serious Mental Illness with the Services Necessary to Promote Stability.

Describe how your CoC identifies individuals experiencing Serious Mental Illness and connects them with the services necessary to promote stability, such as Assertive Community Treatment teams and other models that combine intensive care coordination and assertive outreach with comprehensive treatment.

(limit 2,500 characters)

The CoC PARTNERS with the Community Assessment Response &Engagement The Community Assessment Response &Engagement CARE team, a cross-sector, cross-agency team that INCLUDES 1ST RESPONDERS, HEALTH PROFESSIONALS &HOMELESS SVC PROVIDERS works w/individuals w/High-Risk Health &Safety Behaviors; Vagrancy-Related Criminal Activity; Severe &Persistent Mental Illness challenges; &Substance Use Disorders.

The CARE Team does DAILY ASSERTIVE OUTREACH in known areas where unhoused people congregate to IDENTIFY& CONNECT indivs to APPROPRIATE CARE& RESOURCES. The team aims to build trusting relationships, implement coordinated individualized intervention plans, &connect individuals directly to services. These outreach teams include:1st Responders (POLICE,Paramedic); Mental Health Clinician; Public Health Nurse; Probation Officer; Case Mgr; & Social Worker to build rapport &provide ppl with initial ASSESSMENTS to make WARM HANDOFFS, where the team can ENSURE the referred person ACTUALLY ENGAGES w/the service PROVIDER. The team attempts to CONNECT those w/HIGHEST NEEDS &RESPOND to CRISES so indivs do not “fall through the cracks.” Additionally, DISTRICT ATTORNEYS, Public Defenders& PROBATION OFFICERS coordinate homeless clients’ pending criminal cases &integrate individual intervention plans into case resolutions.

The MODESTO POLICE DEPT’s (MPD) Community Health &Assistance Team (CHAT) uses trained Outreach Specialists to respond to certain calls from the 911 communications center for mental health crises &non-criminal, nonviolent incidents. This team consists of staff from Stanislaus Co social services & non-profits who work closely w/MPD’s Homeless Engagement &Response Team focuses on providing immediate support, intervention &connection to svcs of homeless people. CHAT also has reserved beds at a low-barrier shelter to place folks in the middle of the night.

The CoC-FUNDED Turning Point Community Programs offers GARDEN GATE RESPITE (GGR) short-term crisis shelter w/PEER SUPPORT &linkages to community resources. Svcs available to ppl 18+ who are homeless, atrisk of homelsns, &have known/suspected mental illness. Referrals made thru behavioral health case mgmt, Stanislaus POLICE.

1C-1d. Treatment and Recovery Services—Coordination with Providers in Connection with Drug or Other Specialty Courts.

Identify at least one partnership the CoC has with a provider or entity providing services in connection with Drug Courts and other specialty courts serving individuals with mental and substance use disorders, Assisted Outpatient Treatment (AOT) programs, and inpatient civil commitment.

(limit 500 characters)

CoC Partner the Community Assessmt Response& Engagemt Team brings 20+ agencies together to provide a multidisciplinary approach for the complex needs of StanCo's unsheltered population. The team conducts ASSERTIVE OUTREACH to ID& CONNECT indivs to Services. When a person has a pending Criminal Case, District Attny&Public Defender partners may utilize Drug, Mental Health & Veteran Courts to leverage DIVERSION Programs w/ MANDATED TREATMENT+ terms like Job Training, Education& more.

Describe how your CoC coordinates with the provider or entity identified above to support housing stability and movement towards independence, including by leveraging court orders.

(limit 2,500 characters)

The County Public Defender's Office CLIENT ADVOCACY arm provides WRAP-AROUND SUPPORT to clients, incl those involved in DRUG COURT, other specialty courts.

The County's Behavioral Health & Rehabilitative Services (BHRS) Housing Support Services Program provides an array of support services for those facing barriers: low incomes, RE-ENTRY from CRIMINAL JUSTICE, severe MENTAL ILLNESS, SUBSTANCE ABUSE, &other disabling conditions. The program offers affordable housing &support services designed to help individuals &families use housing as a platform for wellness &recovery after period of homelessness, HOSPITALIZATION or INCARCERATION. The goal of Housing Support Services is to assist individuals in OBTAINING EMPLOYMENT, INDEPENDENT LIVING SKILLS, RECOVERY &INCREASED SELF SUFFICIENCY.

BHRS Employment Support Services provides SUPPORTED EMPLOYMENT to individuals w/PSYCHIATRIC DISABILITIES who are working towards Employment and Housing Goals. The program provides an OPPORTUNITY for individuals w/severe mental health disabilities to WORK in the community. These individuals may require ongoing support on or off the job in order to obtain and retain competitive employment within their communities. The goal of Employment Support Services is to provide individuals that have limited job skills a/o have been out of the job market for an extended amount of time, the NECESSARY SUPPORT to MAINTAIN competitive EMPLOYMENT.

1C-1e. Treatment and Recovery Services—Partnership with Local Crisis System of Care.

Identify at least one partnership the CoC has with the local crisis system of care including 988 and crisis contact centers, mobile crisis and outreach services, and crisis stabilization services.

(limit 500 characters)

StanCo Crisis intervention includes placement+referrals to INPATIENT PSYCHE FACILITIES that provide STABILIZATION, MEDICATION SUPPORT& INTENSIVE TRTMT for ppl experiencing acute psychiatric emergencies to REDUCE RISK &support transition to ongoing behavioral health care and community-based services.

Another PARTNER 4crisis intervention=CRISIS HOTLINE available 24/7 to provide immediate support, assessmt, &connection to care for MENTAL HEALTH EMERGENCIES, SUICIDE IDEATION or SUBSTANCE U

1C-1f.	Treatment and Recovery Services—Availability of Units for Persons Reporting Chronic Substance Use.	
	You must upload the List of CoC Program Projects and the Number of Units that require Substance Abuse Treatment attachment to the 4A. Attachments Screen.	

Identify the number of CoC Program-funded units that require program participant engagement in substance abuse treatment services as a condition of continued participation in the program in accordance with 24 CFR 578.75.	0
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1C-1g.	Treatment and Recovery Services—24/7 Access to Detox, Residential, or Inpatient Treatment.	
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Is there 24/7 access to detox, residential, and inpatient behavioral health treatment within the geographic area of your CoC?	Yes
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1C-1h. Treatment and Recovery Services—Formal Partnership with Behavioral and Mental Health Facilities.

Identify at least one formal partnership the CoC has with a Certified Community Behavioral Health Clinic (CCBHC), Community Mental Health Center (CMHC), SAMHSA Projects for Assistance in Transition from Homelessness (PATH) provider, Grants for the Benefit of Homeless Individuals (GBHI) provider, or a similar facility if none of the above are located in the geographic area.

(limit 500 characters)

The CoC's has a MOU w/long-time partner Stanislaus County Behavioral Health & Recovery Services (BHRS) which, while not a CCBHC, delivers similar county-wide comprehensive care. BHRS Outreach & Substance Use Disorder Treatment Teams staff the CoC Access Center, the main entry point for Homeless Response System. BHRS is active on the CoC board; coordinates referrals & housing placements for people experiencing homelessness who need behavioral health services; & funds many Access Center programs.

1C-1i. Treatment and Recovery Services—Sober Housing Availability.

Identify at least one new or existing CoC Program-funded project that operates sober housing in accordance with 24 CFR 578.93(b)(5).

(limit 500 characters)

n/a

1C-1j. Treatment and Recovery Services—Warm Hand-Offs to Stable Housing Providers.

Describe how your CoC coordinates with the programs named in questions 1C-1a through 1C-1i to facilitate warm hand-offs to stable housing providers and prevent entry into homelessness.

(limit 2,500 characters)

The CoC PARTNERS w/Modesto POLICE Dept (MPD)'s Community Assessment Response &Engagement (CARE) team, a cross-agency team helping indivs dealing with High-Risk Behaviors; Vagrancy-Related Criminal Behavior; Severe & Persistent Mental Illness challenges; &Substance Use Disorders (SUD). CARE Outreach teams, comprised of 1st Responders; Clinicians; Probation Officers & Case Managers conducts ASSERTIVE OUTREACH in areas unhoused people congregate, BUILD TRUST, IMPLEMT individualized ACTION PLANS, & DIRECTLY CONNECT people to services. When a direct connection is not possible, CARE makes WARM HANDOFFS, to ensure that the individual who is referred to services ACTUALLY ENGAGES w/the service provider.

Dignity Village Bridge Housing (DVBH) prioritizes ppl receiving SUD services &in recovery. DVBH offers 24hr Inpatient & Outpatient Treatment programs, incl Residential Treatment; Withdrawal Mgmt; & other SUD services. DVBH also partners w/County Behavioral Health &Rehabilitative Svcs to facilitate SMOOTH TRANSITIONS to Recovery &Aftercare svcs to Housing. DVBH also runs a Drop-In Center which serves as an entry point to SUD svcs; benefits assistance; EMPLOYMENT navigation& other community resources.

The Community Health & Assistce Team (CHAT) uses trained Outreach Specialists to respond to 911 calls for mental health crises &non-violent incidents. The Team consists of full-time staff who work closely with Stanislaus County social services, non-profit orgs and the Modesto Police Department. Homeless Outreach Specialists work closely with the police department's Homeless Engagement and Response Team (HEART) which focuses on providing immediate support, intervention and connection to services of people experiencing homelessness.

The CoC-FUNDED program of Turning Point Community Programs offers the GARDEN GATE RESPITE (GGR) a short-term crisis shelter, w/peer support &linkages to support community members in need. Svcs are available to ppl ages 18+ that are homeless a/o at risk of homelsns, &that have a known or suspected mental illness. Referrals are made through BHRS county case management, or Stanislaus County POLICE. GGR aims to provide a homelike environment where guests are offered PEER SUPPORT, STRENGTH BUILDING & linkage to services to meet identified needs.

1C-2.	Supportive Services Investment.	
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	Number
1. Enter your CoC's FY 2026 Annual Renewal Demand (ARD).	\$4,739,730
2. Of projects your CoC proposed to be funded in the FY 2026 CoC Program Competition, enter the total amount of funding for the supportive services budget line items.	\$1,249,148
3. Percent of your CoC's FY 2026 ARD (from element 1 above) that is supportive services funding (from element 2 above).	26%
4. Enter the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services for the projects included in your CoC's FY 2026 ARD.	\$1,184,933
5. Percent of your CoC's FY 2026 ARD (from element 1 above) that is the supportive services funding in proposed projects (from element 2 above) plus the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services (from element 4 above).	51%

1C-3.	Participation Requirements for Supportive Services.	
	You must upload the Language from Project Supportive Service Agreements attachment to the 4A. Attachments Screen.	
	What percent of your housing projects (TH, PH-PSH, PH-RRH, and Joint projects) require program participants to take part in supportive services (e.g. case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h)?	75.00%

1C-4. Consulting with ESG Recipients.

Describe how your CoC has and will continue to consult with ESG recipients in the planning and allocation of ESG funds.

(limit 2,500 characters)

The StanCo CoC consults with Emergency Solutions Grants (ESG) recipients throughout the planning & allocation of ESG funds. Stanislaus County is the CoC Collaborative Applicant & Stanislaus County Planning and Community Development Department is the entity responsible for administering ESG funds.

ESG funding opportunities are administered through a fair and open process. ESG recipients are active CoC members and participate in CoC meetings, committees, and planning discussions. Through these roles, recipients provide input on community needs, service gaps, program performance, funding priorities, and the effective use of ESG resources. Their direct experience operating emergency shelter, street outreach, homelessness prevention, rapid rehousing, and related services informs the CoC's planning and funding decisions.

The StanCo CoC also gathers feedback through publicly noticed meetings, community forums, & the Stanislaus Housing Alliance, a group of elected officials, business leaders, and concerned residents around the county untied in their efforts to end homelessness.

The StanCo CoC will continue consulting ESG recipients before and during future funding processes. The County will bring proposed priorities and funding strategies to CoC meetings, seek input from current and prospective recipients, consider community feedback and performance data, and communicate final decisions through the CoC's public processes. This coordinated structure will help ensure that ESG investments complement CoC Program funding, address identified gaps and support the community's broader strategy for preventing and ending homelessness.

1C-4a. Coordination with Emergency Shelter Providers.

Describe how your CoC coordinates with shelter providers to connect individuals and families with CoC assistance.

(limit 2,500 characters)

The CoC created a Shelter Working Group made up of Shelter Providers, Funders & Residents which identifies best practices for the area's low-barrier shelter using State HHAP dollars. The CoC also coordinates with shelter providers through Coordinated Entry, shared planning, and direct referrals to CoC-funded housing and services. Shelter providers, The Salvation Army and Modesto Gospel Mission, who sit on the CoC board help identify system gaps, establish priorities, & facilitate moving indivs from emergency shelter to stable housing.

In an effort to fill a previous gap, the StanCo CoC established The Access Center, a single, physical entry point to ASSESS, REFER & CONNECT individuals & FAMILIES to housing, mental & physical healthcare, substance abuse treatment, emergency shelter, food access, and other necessary support services. Outreach specialists at the Access Center conduct individualized/familial ASSESSMENTS to ensure that people have access to the various services they need. The Assessment process allows the CoC to PRIORITIZE RESOURCES for the most in need and those most likely to succeed with the appropriate support.

CoC-funded Center for Human Services (CHS) specializes in serving YOUTH & YOUNG ADULTS who are/at risk of experiencing homelessness. CHS, which also serves on the CoC Board, runs a Youth Navigation Center that provides SHELTER, HOUSING NAVIGATION & DROP-IN SVCS to youth ages 13-24. CHS runs Hutton House a TEMPORARY EMERGENCY SHELTER for TEENS ages 13-17 & their families which offers OVERNIGHT & DROP-IN services to youth who have RUNAWAY from home; are EXPERIENCING HOMELESSNESS; a/o are in CRISIS. CHS also runs a 24-bed minimal barrier EMERGENCY SHELTER for young ppl ages 18-24. CHS prioritizes SELF SUFFICIENCY so a young person exiting their programs may have attained SOBRIETY, GAINED EMPLOYMENT, a/o attained their GED or another EDUCATIONAL MILESTONE.

Modesto Gospel Mission (MGM) an EMERGENT SHELTER PARTNER offers many services for residents incl: a DAYTIME PROGRAM protecting ppl from inclement weather; & activities like ADULT EDUCATION, Bible study, nutrition classes & ID card access; & a SOBERING CENTER for people struggling w/addiction to STABILIZE. MGM also provides meals, access to laundry+showers & intensive case mgmt to assist moves to longer-term housing & SELF SUFFICIENCY.

1C-5. Data Sharing to Inform the Homelessness Response System.

Describe how your CoC has or will share PIT, HIC, HMIS, and System Performance data with state and local government as permitted by law in order to inform the homelessness response system.

(limit 2,500 characters)

The StanCo CoC utilizes ClientTrack by CaseWorthy as its web-based case mgmt system & uses it for client mgmt, reporting & sharing information on svcs provided. All identifying data is considered Protected Personal Information (PPI). The CoC complies w/ federal and state laws to protect PPI & exercises care over how such data may be used or shared.

HOW DATA ARE LAWFULLY USED & SHARED W/LOCAL GOVTS

Data are shared ONLY AS PERMITTED BY LAW & applicable PRIVACY, consent, & HMIS SECURITY requirements. Public reports & presentations use aggregate or de-identified info to protect participant privacy.

Local jurisdictions help plan & conduct the PIT Count & Housing Inventory Count HIC and later publicly release their results. The CoC SHARES PIT, HIC, HMIS & SPM data w/ Stanislaus County, the Stanislaus Housing Alliance SHA & cities in the CoC's geographic area and submits required PIT, HIC, HMIS & System Performance data to HUD & CA's Homeless Data Integration System which allow State & Local governments to understand homelessns TRENDS, ID service GAPS & coordinate FUNDING & POLICY decisions.

An important partner is the STANISLAUS HOUSING ALLIANCE (SHA) comprised of elected officials, business & faith leaders from across the County who are committed to comprehensively address homelessness by leveraging resources, funding & manpower.

The CoC also shares aggregate HMIS & perfmnce data thru publicly noticed CoC mtgs, committee presentations, system assessments, funding processes, & reports to local govmts. Partners use the data to guide STREET OUTREACH, SHELTER (RE)DESIGN, ENCAMPMENT RESPONSE, FUNDING priorities, & the development of various responsive resources, such as behavioral health and recovery treatment options.

The CoC & SHA use these data to evaluate housing placements, returns to homelessness, length of time homeless, income growth, shelter and housing utilization, outreach outcomes, and gaps affecting specific populations, which influence the year's CoC competition scoring tools & priorities, WHICH THEY DID THIS YEAR.

The StanCo Community Services Agency (CSA) serves as the Collaborative Applicant, HMIS Lead Agency & System Admin. In 2026, the CSA REVIEWED & REVISED an UPDATED PRIVACY PLAN to ensure that PPI is protected & only shared under limited circumstances.

1C-5a. Using Other Data Sources Alongside HMIS to Improve Care.

Describe how your CoC utilizes other data sources alongside HMIS to improve care (e.g., health care utilization and claims data, electronic health care record data; admission, discharge, and transfer data; and law enforcement and corrections system data).

(limit 2,500 characters)

The StanCo CoC uses healthcare, corrections, law enforcement, outreach and relationships w/local partners for insight alongside HIM data to identify needs, coordinate care, and connect people to housing. Partners share information only as permitted by law & applicable privacy, consent & data security requirements.

UTILIZING HEALTH CARE DATA: The CoC uploads HMIS data through the Secure File Transfer Protocol (SFTP) to Health Net and Health Plan of San Joaquin & also added each managed care plans (MCP) to the HMIS intake form so both the MCPs and local partners can track which clients have which health plan. This facilitates coordination between MCPs and the homeless response system partners, such as The Salvation Army, Modesto Gospel Mission and CoC-funded projects Center for Human Services & Turning Point Community Programs to identify patients who may be experiencing homelessness. Partners can then conduct PROACTIVE OUTREACH, HOUSING NAVIGATION, RECUPERATIVE CARE & enrollment in ENHANCED CARE MANAGEMENT and other CalAIM services.

Additionally, the CoC participates in monthly meetings between local hospital, MCPs and homeless response system representatives to discuss strategies to meet the medical needs of the unhoused and at-risk of becoming unhoused population in the County.

UTILIZING LAW ENFORCEMENT DATA: The MODESTO POLICE DEPT's (MPD) CARE Team does ASSERTIVE OUTREACH to IDENTIFY& CONNECT indivs to CARE& RESOURCES. The team aims to build trusting relationships, implement coordinated individualized intervention plans &connect indivs directly to services. These outreach teams include:1st Responders (POLICE,Paramedic); Clinicians; Probation Officers &Case Mgrs build rapport &perform ASSESSMENTS to make WARM HANDOFFS where the team can ENSURE the referred person ACTUALLY ENGAGES w/the service PROVIDER. When a person has a pending criminal case DISTRICT ATTORNEYS &Public Defenders integrate indiv action plans into case resolutions.

The MPD Community Health &Assistance Team (CHAT) uses trained Outreach Specialists to respond to certain 911 calls for MENTAL HEALTH CRISES &nonviolent incidents. This team consists of staff from Stanislaus Co social services & non-profits who work closely w/MPD's Homeless Engagement &Response Team to provide immediate support, intervention &connection to svcs.

1C-6. Employment and Workforce Development Partnership.

Identify at least one partnership the CoC has with employment and workforce development programs and organizations such as the Local Workforce Development Board, State Workforce Agency, American Job Center (also known as One-Stop Career Centers), registered apprenticeship program, community and technical college, union training program, adult education provider, or State Vocational Rehabilitation agency.

(limit 2,500 characters)

The CoC has an MOU with the Workforce Development Board to coordinate employment and training opportunities. CoC Partners including Community Impact Central Valley, Modesto Gospel Mission, Stanislaus County Social Services, Modesto Junior College, and local school districts offer Project VOLT welding training, LVN and home health credentials, résumé and computer skills, budgeting, and cooking classes. Some also offer spiritual guidance and social activities that support SELF SUFFICIENCY.

1C-7. Street Outreach—Cooperation with First Responders and Law Enforcement.

Describe in the field below how your CoC's street outreach projects (including co-response) cooperate with first responders and law enforcement to increase positive interactions in order to increase housing and service engagement and promote use of CoC services.

(limit 2,500 characters)

STANCO COC REGULARLY PARTNERS W/LAW ENFORCEMENT+ 1ST RESPONDERS

The CoC PARTNERS with the Community Assessment Response & Engagement CARE team, a cross-sector, cross-agency, multi-disciplinary team helping individuals dealing with High-Risk Health & Safety Behaviors; Vagrancy-Related Criminal Behavior; Severe & Persistent Mental Illness challenges; & Substance Use Disorders.

The CARE Team conducts DAILY ASSERTIVE OUTREACH in areas where unhoused individuals are known to congregate. The team aims to build trusting relationships, implement coordinated individualized intervention plans, & connect individuals directly to services. These outreach teams, comprised of First Responders (POLICE, Firefighter, Paramedic); a Mental Health Clinician; a Public Health Nurse; a PROBATION OFFICER; a Case Manager; and a Social Worker.

The team builds rapport & provide individuals with initial ASSESSMENTS to make WARM HANDOFFS, where the team ensures that the individual who is referred to services actually engages w/the service provider. The team attempts to connect with those most in need & respond to crisis situations so people do not “fall through the cracks.” Where a person experiencing homelessness has been charged with a crime, other CARE Team members such as DISTRICT ATTORNEYS, Public Defenders & PROBATION OFFICERS coordinate participants’ pending criminal cases to integrate a defendant’s individual intervention plans into case resolutions.

The Modesto Police Department has ANOTHER proactive outreach program called the Community Health and Assistance Team (CHAT). This program uses trained Outreach Specialists to respond to qualifying 911 calls, received through the 911 communications center, for MENTAL HEALTH CRISES and similar non-criminal, non-violent incidents. The CHAT Team consists of full-time staff who work closely with Stanislaus County social services, non-profit organizations and the MODESTO POLICE DEPARTMENT. Homeless Outreach Specialists work closely with the police department’s Homeless Engagement and Response Team (HEART) which focuses on providing immediate support, intervention and connection to services of people experiencing homelessness.

1C-8. Family or Support Network Reunification.

Describe how your CoC, or your recipients, assist with family or support-network reunification efforts for individuals experiencing homelessness or living in CoC Program-funded housing (e.g., case management, travel costs, arrangement of assistance in another geographic area).

(limit 2,500 characters)

The StanCo CoC and its recipients use case management, diversion, and housing navigation to help facilitate family and community reintegration when reunification is safe, appropriate, and chosen by the participant. Staff explore options for social-connectedness during outreach, Coordinated Entry assessment, shelter intake, and ongoing case management.

Through a CoC-wide prevention tool and diversion strategies, case managers help participants identify relatives, friends, former caregivers, or other supportive people who may be able to offer permanent or temporary housing, transportation, financial assistance, or emotional support. With the participant's consent, staff contact the identified person, confirm their willingness to assist, discuss the participant's needs, and assess whether the proposed arrangement is safe and sustainable.

When reunification involves another city, county, or state, staff coordinate with the receiving household and local service providers before travel. This may include confirming the destination, identifying housing and service resources, transferring necessary documents, arranging appointments, and planning for continued behavioral health, recovery, medical, benefits, or case management services. With flex funding is available, recipients may also help with bus, train, or other travel costs.

Diversion conversations identify support-network solutions that may prevent a person from entering shelter or remaining homeless. Staff may address barriers through mediation, housing problem-solving, benefits assistance, document replacement, and connections to flexible financial assistance when available. For participants in CoC-funded housing, case managers can also help rebuild supportive relationships that strengthen housing stability and reduce isolation.

Providers serving families, youth, and survivors of domestic violence tailor reunification efforts to each participant's circumstances. Staff consider child safety, custody requirements, confidentiality, and the risk of violence, trafficking, exploitation, or other harm.

1C-9	Partnering with Public Housing Agencies—Agreement to Enable Transition to HUD Assisted Housing.		
	Does your CoC have an agreement with at least one public housing agency to enable participants to transition from Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing to HUD assisted housing?	Yes	

1C-10. Protecting Public Safety—Cooperation with Law Enforcement.

You must upload the Evidence of Coordination and Non-Interference with Local Efforts to Advance Protecting Public Safety attachment to the 4A. Attachments Screen.

Describe how your CoC cooperates and does not interfere with or impede local efforts to advance the objectives below, and assists first responders in providing services to homeless individuals.

(limit 2,500 characters)

The StanCo CoC considers Law enforcement & other first responders as major stakeholders in the homeless response system and works to COOPERATE with & proactively ASSIST Law enforcement & first responders in their efforts to advance public safety objectives.

COMPLIANCE W/ SORNA: StanCo CoC's & HMIS data-sharing protocols operate in accordance with applicable federal and state law, including SORNA. The CoC does not interfere with law enforcement's registry obligations & structures its intake & housing placements w/TRANSPARENCY & ACCOUNTABILITY to adhere to necessary registry-related info sharing between agencies.

CLEARING CAMPS by FACILITATING TREATMENT: StanCo CoC ADVANCES PUBLIC SAFETY OBJECTIVES thru its PARTNERSHIP w/the MODESTO POLICE DEPT. who coordinates w/the homeless response system to connect unsheltered people in supportive services. The Community Assessment Response & Engagement (CARE) team is a cross-agency, multi-sector team focusing on ppl engaging in HIGH-RISK Health & Safety Behaviors; Criminal Behavior; a/o who have Persistent Mental Illness & SUBSTANCE USE DISORDERS.

COLLABORATION BTWN COC & POLICE: The CoC works closely with law enforcement to ensure that encampment resolution efforts are carried out with the highest levels of Public Safety. The CARE Team is comprised of 1st RESPONDERS; Clinicians; PROBATION Officers & Case Managers who conduct ASSERTIVE OUTREACH in emcampments. The team determines whether anyone: is a DANGER to themselves/others or requires MENTAL HEALTH, SUBSTANCE ABUSE INTERVENTIONS. The team implements individual intervention plans & DIRECTLY CONNECTS ppl to services w/WARM HANDOFFS.

When a homeless person is charged with a crime CARE Team liaisons from DISTRICT ATTORNEY, Public Defenders Offices coordinate to integrate the defendant's individual action plans into case resolutions.

MODESTO COMMUNITY HEALTH & ASSISTANCE TEAM (CHAT)- The Modesto Police have a proactive outreach program called the CHAT which uses Outreach Specialists to respond to certain 911 calls for MENTAL HEALTH CRISES & non-violent incidents. The CHAT Team consists of staff from County social svcs & non-profit orgs & work w/the Police Dept's Homeless Engagement & Response Team (HEART) which focuses on providing immediate support, intervention and connection to services of people experiencing homelessness.

1C-10a. Protecting Public Safety—Plan to Quickly Clear Tents and Encampments.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to quickly clear tents and encampments on public property and connect individuals who are camping in public with appropriate services and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

LOCAL ORDINANCE BANS PUBLIC CAMPING

City of Modesto Ordinance § 4-12.703 makes it unlawful and a public nuisance to camp, occupy camp facilities or use camp paraphernalia on any public property or on private property without the owner's consent. Even with consent, overnight camping on residential land by friends or family is capped at five consecutive nights.

LEVERAGING MODESTO'S CAMP2HOME PROGRAM: The Camp2Home Program works w/the Modesto POLICE DEPARTMENT's Community Health and Assistance Team (CHAT). The CHAT Team includes trained Outreach Specialists equipped to respond to certain 911 calls for MENTAL HEALTH CRISES and similar NON-CRIMINAL, NON-VIOLENT incidents. These Outreach Specialists work closely with the POLICE DEPARTMENT's Homeless Engagement and Response Team (HEART) which focuses on providing IMMEDIATE SUPPORT, INTERVENTION & CONNECTION to services of ppl experiencing homelessness.

LEVERAGING STATE FUNDING FOR MULTI-YEAR PLAN TO CLEAR ENCAMPMENTS

The City of Modesto has ramped up its anti-camping enforcement and sweep operations. The City of Modesto has been awarded \$5.7M from California's Encampment Resolution Funding Grant to help resolve critical encampment concerns & help individuals experiencing homelessness TRANSITION TO SHELTER w/clear PATHWAYS TO PERMANENT HOUSING.

This funding will help ENHANCE the SAFETY & WELLNESS of individuals in encampments thru community partnerships & initiatives providing essential services to facilitate transitions from the streets to housing. Specifically, the grant will provide: Homeless Outreach thru the CHAT; Shelter Assistance & Bridge Housing in partnership with the Salvation Army & MODESTO GOSPEL MISSION; HOUSING SUBSIDIES from The City of Modesto to encampment residents to ease financial burdens.

QUANTITATIVE DATA SHOW STANCO COC'S STRATEGIES ARE WORKING

The 2026 PIT Count identified 1,791 people experiencing homelessness in Stanislaus County w/62% residing in a sheltered setting. The number of unsheltered individuals FELL BY 28%. The overall homeless population declined from 2025 to 2026, the proportion of sheltered individuals increased by 8% points from 54% in 2025. Last year SHELTER CAPACITY EXPANDED w/40 beds added in Shelter & Transitional Housing.

1C-10b. Protecting Public Safety—Current Status of Tents and Encampments.

Describe the current status of tents and encampments in the CoC's geographic area.

(limit 2,500 characters)

The current status of tents and encampments across the StanCo CoC region reflects a period of aggressive enforcement following state & local policy shifts in 2025+2026. The County REDUCED the # of ppl residing in encampments by 100.

STATE FUNDING FOR MULTI-YEAR PLAN TO CLEAR ENCAMPMENTS
Following the U.S. Supreme Court's ruling in *Grants Pass v. Johnson*, which allowed cities to ban public camping outright, the City of Modesto has ramped up its ANTI-CAMPING ENFORCEMENT & SWEEP OPERATIONS. Backed by \$5.7M in state Encampment Resolution Funding, the city initiated TARGETED MULTI-YEAR PLANS TO CLEAR HIGH-PRIORITY AREAS, such as the major encampments along Yosemite Boulevard.

The City hopes to use this funding to help resolve critical encampment concerns & help individuals experiencing homelessness TRANSITION TO SHELTER w/clear PATHWAYS TO PERMANENT HOUSING by ENHANCING the SAFETY & WELLNESS of individuals in encampments by providing essential services to those experiencing homelessness.

Interim housing will be provided in collaboration with the MODESTO GOSPEL MISSION for the ongoing operational costs for bridge housing and support services. The City will also utilize this funding to provide HOUSING SUBSIDIES. This will help reduce the financial burden for individuals in encampments as they transition into permanent housing.

CAMP2HOME WORKS TO CLEAR ENCAMPMENTS
The State Encampment Resolution Grant will provide homeless outreach through the MODESTO POLICE DEPT's Community Health and Assistance Team (CHAT) & shelter assistance in partnership with the SALVATION ARMY. Additionally, the Camp2Home Program, which works closely with Stanislaus County Social Services, non-profit organizations and the MODESTO POLICE DEPARTMENT responds to qualifying 911 calls for MENTAL HEALTH CRISES and similar NON-CRIMINAL, NON-VIOLENT incidents. Homeless Outreach Specialists work closely with the POLICE DEPARTMENT's Homeless Engagement and Response Team (HEART) which focuses on providing IMMEDIATE SUPPORT, INTERVENTION & CONNECTION to services of ppl experiencing homelessness.

Data Show Positive Results: The 2026 HDX Report's SPM Measure 7a.1 shows Street Outreach (SO) POSITIVE EXIT RATE=60.85%, 235 ppl exiting SO w/134 to Temp/Inst't'l Destinations & 9 to Perm ones. 2026 PIT Count of Unsheltered people= 687, down from 2025 Unsheltered PIT Count= 950, a REDUCTION of 28%=263 people. SHELTER CAPACITY also EXPANDED w/40 added beds in Emergency Shelter and TH projects.

1C-10c. Protecting Public Safety—Plan to Decrease the Public Use of Illicit Drugs.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to decrease the public use of illicit drugs and quickly connect individuals who are using illicit drug in public with appropriate services and/or law enforcement and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

ORDINANCE BANNING ENCAMPMENTS AIMS TO REDUCE PUBLIC DRUG USE

Modesto Code of Ordinance § 4-12.703 makes it unlawful and a public nuisance to camp, occupy camp facilities or use camp paraphernalia on any public property or on private property without the owner's consent. Even with consent, overnight camping on residential land by friends or family is capped at five consecutive nights.

STANCO COC PARTNERS W/LAW ENFORCEMENT TO CONNECT PEOPLE TO DRUG+ ALCOHOL TREATMENT

The CoC PARTNERS with the Community Assessment Response & Engagement CARE team, a cross-sector, cross-agency, multi-disciplinary team helping individuals dealing with High-Risk Health & Safety Behaviors; Vagrancy-Related Criminal Behavior; Severe & Persistent Mental Illness challenges; & Substance Use Disorders.

The CARE Team conducts DAILY ASSERTIVE OUTREACH in areas where unhoused individuals are known to congregate. The team aims to build trusting relationships, implement coordinated individualized intervention plans, & connect individuals directly to services. These outreach teams, comprised of First Responders (POLICE, Firefighter, Paramedic); a Mental Health Clinician; a Public Health Nurse; a PROBATION OFFICER; a Case Manager; and a Social Worker.

The team builds rapport & provide individuals with initial ASSESSMENTS to make WARM HANDOFFS, where the team ENSURES that the individual who is referred to services ACTUALLY ENGAGES w/SERVICE providers. The team has partnered w/ providers to MINIMIZE WAIT TIMES & EXPEDITE TREATMENT PLACEMENTS wherever possible. Where a person experiencing homelessness has been charged with a crime, other CARE Team members such as DISTRICT ATTORNEYS, Public Defenders & PROBATION OFFICERS coordinate participants' pending criminal cases to integrate a defendant's individual intervention plans into case resolutions, such as DRUG COURT, DIVERSION, & MANDATED SUBSTANCE ABUSE TREATMENT.

Dignity Village Bridge Housing (DVBH) operates a Drop-In Center which serves as an entry point to SUD svcs, assists w/Medi-Cal apps and provides job search support & other community resources. The Center is STAFFED by VOLUNTEERS, many of whom are PEOPLE IN RECOVERY THEMSELVES, who also provide PEER MENTORING & PEER GROUP FACILITATION.

1C-10d. Protecting Public Safety—Current Status of Overdoses and Illicit Drug Use in Public Spaces.

Describe the current status of overdoses and illicit drug use in public spaces in the CoC's geographic area.

(limit 2,500 characters)

Stanislaus County has made progress in reducing opioid overdose deaths. The County Health Services Agency's 2025 Public Health Report (p. 15) shows the age-adjusted opioid overdose death rate fell from 31 per 100,000 residents in 2024 to 20 in 2025. The rate remains above California's 2025 rate of 13, so overdose prevention and connection to treatment remain priorities across the StanCo CoC's geographic area. Fentanyl caused a record 138 local overdose deaths in 2023 (Modesto Bee, May 2024). The Stanislaus County Opioid Safety Coalition works to improve local overdose data and provides naloxone guidance to residents, and the County has considered a pilot for paramedics to administer buprenorphine after an overdose and connect patients to continuing care.

Providers regularly encounter illicit drug use in public spaces when working with unsheltered residents. People under the influence outdoors can be taken advantage of or placed in physical danger. Modesto Gospel Mission, a model emergency shelter partner, operates a sobering center that gives unsheltered people a safe place to stabilize, with food, hygiene supplies, showers, laundry, and possibly a bed for the night. Guests are encouraged to join the Mission's New Life recovery program. The Mission's day program also offers daytime shelter, adult education, nutrition classes, and DMV waivers for ID cards.

The CoC funds programs and partnerships that prioritize substance use treatment, reflecting its focus on recovery-oriented treatment, public safety, and transparent cross-system coordination. Turning Point Community Services operates a CoC-funded emergency shelter and Garden Gate Respite, a short-term crisis center for people experiencing mental health or substance use crises. After stabilizing and engaging in outpatient treatment, clients can be referred to CoC-funded transitional or permanent housing. The CoC also funds the Center for Human Services (CHS), which serves youth and young adults experiencing or at risk of homelessness. CHS provides substance use disorder programming for ages 12-23, including weekly peer support groups, relapse prevention, cognitive-behavioral training, contingency management, and family relationship support.

CHS receives referrals from Child Protective Services and the juvenile justice system and gives young people skills, resources, and information toward self-sufficiency. Those leaving CHS may have attained sobriety, gained employment, or earned a GED.

1C-10e. Protecting Public Safety—Standards to Address Danger to Self or Others.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to utilize standards that address homeless individuals who are a danger to themselves or others (e.g., involuntary commitment) and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

COOPERATION W/LAW ENFORCEMENT, DECREASING DRUG USE BY FACILITATING TREATMENT

StanCoCoC ADVANCES PUBLIC SAFETY OBJECTIVES thru its PARTNERSHIP w/the MODESTO POLICE DEPT. The Community Assessment Response &Engagement (CARE) team is a cross-agency, multi-sector team focusing on those engaging in High-Risk Health & Safety Behaviors; Vagrancy-Related Criminal Behavior; a/o who have Persistent Mental Illness &Substance Use Disorders.

The CARE Team is comprised of 1st RESPONDERS; Clinicians PROBATION OFFICERS & Case Managers conducts DAILY ASSERTIVE OUTREACH in ENCAMPMENTS. The team works to ASSESS individuals to DETERMINE WHETHER they are DANGERS to themselves/others; require MENTAL HEALTH,SUBSTANCE ABUSE INTERVENTIONS. The team then implements individualized intervention plans &DIRECTLY CONNECTS ppl to services by thru the use of WARM HANDOFFS to ENSURE the individual ACTUALLY ENGAGES w/services. The CARE Team has also partnered w/providers to dramatically decrease wait times& EXPEDITE PLACEMENTS to get individuals OFF THE STREETS.

For homeless people been charged with a crime, the CARE Team's DISTRICT ATTORNEY &Public Defender Liaisons coordinate on criminal cases to integrate a defendant's individual intervention plans into their case resolutions.

CHAT team: Often, when quality-of-life calls related to homelessness are made, they are handled by sworn police officers who try to provide resource education, and opportunities for emergency shelter, and conduct enforcement when necessary. However, due to the complexity of these calls, sworn officers are often removed from active law enforcement service for significant lengths of time while dealing with these calls, especially when individuals are willing to accept services and need assistance with connecting to social services.¿ Modesto's Community Health &Assistance Team (CHAT)¿engages unsheltered individuals &provides IMMEDIATE SUPPORT, INTERVENTION & CONNECTIONS to social svcs, shelters, &housing programs.

Turning Point Community Programs offers the GARDEN GATE RESPITE (GGR) a short-term crisis shelter, w/linkages to support community members in need. Svcs are available to individuals ages 18+ that are homeless &that have a known or suspected mental illness. Referrals are made through by Behavioral Health Dept or local POLICE. The GGR provides a homelike environment where guests are offered PEER SUPPORT, STRENGTH BUILDING & linkage to services to meet identified needs.

1C-10f. Protecting Public Safety—Share Information in Accordance with SORNA.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to comprehensively share information, including location information, in accordance with the Sex Offender Registry and Notification Act (SORNA) and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

California's Sex Offender Registration Act (Penal Code § 290) and Megan's Law (§ 290.46) require registered sex offenders to report to local law enforcement. Importantly, under 290.011, any person “who is living as a transient” is required to register with the chief of police or police department within 5 days of release, and to re-register every 30-days by updating everywhere that they sleep, eat, work, frequent and engage in leisure activities. This is far more frequently than the annual requirement for housed registrants and ensures public safety and compliance.

The County Sheriff's Office and Police Department must maintain this registry and are the Stanislaus County CoC's primary law enforcement information-sharing partners on SORNA compliance. This frequent-update requirement gives the CoC and law enforcement a recurring, built-in touchpoint to verify location and coordinate housing options for this population, and the CoC's HMIS intake protocols are structured to flag registrant status so it is factored appropriately into housing type and placement decisions consistent with SORNA.

Several factors complicate consistent information sharing and housing placement. State law does not require CA Dept. of Corrections to provide housing for homeless sex offenders, and residency restrictions (historically under Jessica's Law) have pushed many registrants into transient status—registrants classified as "transient" statewide jumped from 88 to 1,986 after Jessica's Law took effect—directly increasing the unsheltered registrant population the CoC must serve.

The nature of recurring registration is taxing for the registrants and providers to maintain. One way to combat this challenge is through training, and the StanCo CoC will work to (re-)train provider and outreach staff on sex offender registrant housing eligibility rules to avoid unlawful placements.

1C-11. Outreach Strategy.

Describe your CoC's strategy to outreach to all individuals and families experiencing homelessness across your geographic area.

(limit 2,500 characters)

The StanCo CoC utilizes many INNOVATIVE METHODS to reach families experiencing homelessness in its geographic area.

COUNTY BEHAVIORAL HEALTH SVCS' (BHRS) STREET OUTREACH TEAM BHRS STREET OUTREACH incl youth+social svc orgs, Disability Resource Agency for Independent Living, County benefits officers, and Vet Reps to offer MOBILE SCREENING for services; access MENTAL HEALTH+SUD TREATMENT; &provides WARM HANDOFFS to partners. Street outreach team members participate in the CoC to ensure identification of all persons experiencing unsheltered homelessness in the county.

McKINNEY-VENTO SCHOOL LIASONS CONNECT UNCONNECTED FAMILIES TO RESOURCES

CoC partner, the Stanislaus School District plays an important role in IDENTIFYING families NOT YET ENGAGED by the CoC, as families experiencing housing insecurity may not self-report as homeless, a/o are not aware of available resources. Mckinney-Vento (MV) Liaisons AT EVERY SCHOOL allows for ACCURATE identification of homeless children &their parents, and DIRECT CONNECTIONS to resources.

CoC-affiliated youth service providers like Center for Human Services also use their direct relationships w/MV Liaisons to provide resources when a youth is identified as homeless.

ACCESS CENTER OFFERS ONE-STOP SHOP FOR HOMELESS FAMILIES

The Access Center is a single, physical entry point to ASSESS, REFER &CONNECT indivs &FAMILIES to housing, healthcare, treatment, shelter, food, &other support services. Access Center workers conduct indiv/familial ASSESSMENTS to ensure access to the various services needed. This process allows the CoC to PRIORITIZE RESOURCES for the most needy &those most likely to succeed with appropriate support.

SPECIALIZED TEAMS MOVE PPL FROM ENCAMPMENTS TO SHELTER STANCO COC PARTNERS W/LAW ENFORCEMENT FOR PROACTIVE OUTREACH

The Community Assessmt Response &Engagemt CARE team helps unsheltered indivs &families by conducting DAILY ASSERTIVE OUTREACH in areas where unhoused ppl are known to congregate. They can identify when adults are unable to care for children in their care; assess youth for phys &mental health needs; &make referrals as needed. The team also makes WARM HANDOFFS to ENSURE that the referred person ENGAGES w/SERVICE providers.

The 1st component of the Camp2Home Program is outreach, where specialists IDENTIFY &BUILD RELATIONSHIPS w/ppl experiencing homelns to offer support, intervention &connection to shelter &housing support.

1C-12.	Collaboration Related to Children and Youth—Written Agreements with Early Childhood Services Providers.	
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Select 'Yes' or 'No' in the chart below to indicate whether your CoC or HUD-funded projects in the CoC have written agreements with the listed providers of educational supports and services for children ages 0-5:

		Written Agreement
1.	Child Care (including Child Care and Development Fund)	No
2.	Early Childhood Providers	Yes
3.	Early Head Start	Yes
4.	Home Visiting Program (including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	Yes
5.	Head Start	Yes
6.	Healthy Start	No
7.	Public Pre-K	Yes
8.	Tribal Home Visiting Program	No
	Other (limit 150 characters)	
9.	WIC,SCOE, Child Dev, Children's Crisis, Child Development,	Yes

1C-12a.	Collaboration Related to Children and Youth—Formal Partnerships with Schools and Youth Education Providers.	
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Select 'Yes' or 'No' in the chart below to indicate the youth education providers your CoC has a formal partnership with:

1.	McKinney-Vento Liaison(s) (including State Education Agency (SEA) or Local Education Agency (LEA))	Yes
2.	School District(s)	Yes
3.	General Education Development (GED) Program(s)	Yes
4.	Community College(s)	Yes
5.	Technical College(s)	No
6.	Other Post-Secondary Education Provider(s)	Yes

1C-12b.Collaboration Related to Children and Youth—Informing Individuals and Families who Become Homeless about Eligibility for Educational Services.

Describe your CoC's written policies and procedures to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 characters)

StanCo CoC POLICY to INFORM FAMILIES of EDUCATIONAL SVCS: Based on federal law, the CoC's Written Standards require all homeless service organizations to coordinate with McKinney-Vento liaisons and assist liaisons when a family is homeless or at risk of homelessness. Program staff inform homeless clients with at least one adult and one child of their eligibility for, and RIGHT TO RECEIVE EDUCATIONAL SERVICES.

CoC PROJECTS COORDINATE W/ HOMELESS STUDENTS & EDUCATIONAL GOALS: CoC-funded youth providers' policies and procedures support homeless youth with plans to stay current on schoolwork and to inform all clients of education rights under the law. Staff assist youth to return to school, enroll in independent study, and obtain information on GED courses. Staff also work to remove barriers for youth to enroll in/attend schools and contact the County Office of Education Coordinator for assistance when school issues cannot be resolved directly with the school's homeless liaison.

McKINNEY-VENTO SCHOOL LIASONS CONNECT HOMELESS FAMILIES to RESOURCES

CoC partner, the Stanislaus School District plays an important role in IDENTIFYING families NOT YET ENGAGED by the CoC, as families experiencing housing insecurity may not self-report as homeless, a/o are not aware of available resources. The proximity of McKinney-Vento (MV) Liaisons AT EVERY SCHOOL SITE in the Stanislaus County School District promotes ACCURATE identification of homeless children & their parents which facilitates transitions away from homelessness as soon as possible.

Teachers and other TRUSTED school officials COORDINATE w/ McKinney-Vento (MV) Liaisons to ensure that families are CONNECTED TO SERVICES including shelter beds, health care, economic assistance, workforce training and other services to PROMOTE SELF SUFFICIENCY.

CoC-affiliated youth service providers like Center for Human Services also use their DIRECT RELATIONSHIPS McKinney-Vento (MV) Liaisons to provide resources when a youth is identified as homeless. Further coordination is assured by the CoC board's RESERVATION of a SEAT for COMMUNITY EDUCATION REPRESENTATIVE. The STANISLAUS COUNTY OFFICE OF EDUCATION participates in CoC meetings and the planning process, informing policy and sharing resources with service organizations and the community. This year, one of the local competition's judge panel included the STANISLAUS COUNTY OFFICE OF EDUCATION CoC representative.

1C-12c. Collaboration Related to Children and Youth—Coordination with Foster Care or Child Welfare Services.

Describe how your CoC coordinates with foster care or child welfare services to assist youth transitioning from public systems of care.

(limit 2,500 characters)

The CoC has dedicated partners to support to youth transitioning from foster care & child welfare services.

ASPIRANET Provide TRANSITIONAL-AGED YOUTH (TAY) w/SUPPORT+SKILLS for SELF-SUFFICIENCY: When a young person ages out of foster care, Aspiranet's TAY program goes into effect. Many foster kids lack skills to ensure they thrive as adults. Aspiranet helps former foster youth successfully transition into independence. Program participants receive a Furnished Apartment; ongoing EMPLOYMENT & EDUCATION assistance; & general GUIDANCE on next steps.

In June 2026, ASPIRANET, opened its Hope Forward Transitional Aged Youth (TAY) Independence Program, which in addition to above provides outpatient BEHAVIORAL HEALTH services, INDEPENDENT LIVING SKILLS programming & other wellness resources. The program's goal is to help vulnerable youth & young adults move toward Successful Independent Adulthood w/a focus on DEVELOPING SOCIAL-EMOTIONAL SKILLS & exploring CAREER PATHWAYS. Youth will work on improving social interactions & SELF-DISCIPLINE, while learning how to ADDRESS their underlying BEHAVIORAL HEALTH CONDITIONS.

BEHAVIORAL HEALTH & RECOVERY SVCS SUPPORTS TAY: The PATHWAYS to WELL-BEING (PWB) program offers ASSESSMT, TREATMT & SUPPORTIVE SVCs to children & youth involved w/the Child Welfare system. This includes services for YOUNG ADULTS ages 18-21 who have remained in the foster care system voluntarily to receive support in transitioning to independence. Services vary based on INDIVIDUAL NEEDS & may include individual & family COUNSELING, Case Management, INTENSIVE CARE Coordination, Rehabilitation HOME-BASED Services, MEDICATION support, & CRISIS INTERVENTION.

BEHAVIORAL HEALTH & RECOVERY SVCS CHILDREN'S MOBILE ASSESSMT TEAM provides ASSESSMTs to Medi-Cal beneficiaries who requested mental health svcs, a/o have BEEN REFERRED BY CHILD WELFARE, Probation, Education, Health Services Agency or Community Based Organizations requesting MENTAL HEALTH SVCs. The assessment is completed by Mental Health Clinicians to determine the LEVEL of mental health services NEEDED to ADDRESS their CURRENT SYMPTOMS & IMPAIRMENTS.

1C-12d. Collaboration Related to Children and Youth—Coordination with Runaway and Homeless Youth (RHY)-funded Providers.

Describe how your CoC coordinates with RHY-funded providers including Street Outreach Programs, Basic Center Programs, Transitional Living Programs, and Maternity Group Homes where such providers exist.

(limit 2,500 characters)

CoC-funded Center for Human Services (CHS) specializes in youth homelssns & offers a wide array of programming for RHY. Youth Navigation Center provides SHELTER, housing navigation & drop-in services to young people between 13-24, experiencing crisis, housing instability a/o homelessness.

Hutton House is a TEMPORARY EMERGENCY SHELTER for TEENS ages 13-17 & their families. It is available 24/7 & offers both OVERNIGHT & DROP-IN services to youth who have RUNAWAY from home; are EXPERIENCING HOMELSNS; a/o are in CRISIS.

CHS also runs a 24-bed facility that provides EMERGENCY SHELTER for young ppl ages 18-24 experiencing or at-risk of homelessness. Young people can access shelter with minimal barriers; partners, pets, and possessions are welcome.

Telecare Drop In Center (Ages 18-25) provides facilitated groups, PEER SUPPORT groups, 1-1 emotional support, referrals to RESOURCES, COMPUTER ACCESS, Recreational activities & field trips.

CHS' TRANSITIONAL HSG program offers linkages to counseling svcs, LIFE SKILLS training, HSG NAVIGATION svcs & more. A particular TRANSITIONAL HSG project Thompson Place serves PARENTING YOUTH experiencing homelessness. Residents receive IN-DEPTH CASE MGMT from CHS.

Housing Case Management: For youth in PERMANENT HSG to BUILD SKILLS & SUPPORT SYSTEMS to remain housed. Svcs incl LIFE SKILLS training, EMPLOYMENT & EDUCATION services, resource LINKAGES, & more.

Landlord Engagement: CHS works to build landlord relationships thruout the County to increase housing options for youth.

Permanent Housing: CHS runs 2 housing complexes, which incl a mix of furnished studio, 1bdm & 2bdm apartments for transitional aged youth w/individual leases per bedroom. Youth are matched w/a roommate & share a living space. Youth lease holders are provided w/housing case mgmt svcs.

ASPIRANET PROVIDES TAY w/SUPPORT, SKILLS FOR SELF SUFFICIENCY

When a young person ages out of foster care, Aspiranet's Transitional Aged Youth (TAY) helps former foster kids make the transition from care to independence. TAY are provided w/a furnished apartment; ongoing EMPLOYMENT & EDUCATION assistance; help w/RESUME BUILDING & GUIDANCE on their path forward. Youth will work to improve RESPONSIBILITY & SELF-DISCIPLINE while learning how to manage & ADDRESS their BEHAVIORAL HEALTH.

1C-13. Collaboration Related to Families with Children—TH or RRH Project Dedicated to Serving Families with Children.

Identify at least one Rapid Rehousing (RRH) or Transitional Housing (TH) project in the CoC that primarily or exclusively serves families with children experiencing homelessness in accordance with 24 CFR 578.93(b).

(limit 500 characters)

The StanCFamily Promise of Greater Modesto (FPGM), a long-time partner of the CoC, operates a Rapid Re-Housing program that exclusively serves Families with Minor Children experiencing homelessness. FPGM provides intensive case mgmt w/families to assist them in attaining their housing, employment & education goals.

Another CoC Partner, Stanislaus County Community Services Agency CalWORKs Housing Support Program RRH also exclusively serves CalWORKs Families w/Children experiencing homelessne

1C-13a. Collaboration Related to Families with Children—Supportive Services to Improve Income to Pay Rent.

Describe how the project(s) identified in 1C-13 provides supportive services focused on improving incomes to pay rent, such as workforce development, job training, or registered apprenticeship programs.

(limit 2,500 characters)

The Stanislaus County Community Services Agency (CSA); CalWORKs Housing Support Program (HSP); & Family Promise of Greater Modesto (FPGM) RRH, combine housing provision w/services that help parents RAISE THEIR INCOMES so they can pay rent and MAINTAIN HOUSING on their own.

CalWORKs HSP uses an RRH model to help homeless CalWORKs families obtain and keep Permanent Housing. Every HSP household is a CalWORKs family, accessing CSA's Welfare-to-Work Employment Services while they are being housed.

Welfare-to-Work Case Managers build each parent's plan around Employment Goals; help find & keep their employment through ENROLLMENT in JOB TRAINING & EDUCATION programs; Job Readiness classes on resumes & interviewing; and up to 6 months of paid or unpaid WORK EXPERIENCE at a job site through the Community Services Program. CalWORKs also COVERS Childcare & Transportation & provides work CLOTHING so parents can attend work, school, or training with confidence.

The Center for Human Services (CHS, which also happens to run a CoC-funded project) delivers part of Job Readiness work above for the County thru a 3-week Job Readiness program & Community Service Placements that put parents in part- or full-time positions with Actual Employers while helping them Resolve Barriers to employment such as Substance Use, Domestic Violence & Homelessness.

CSA also connects to Stanislaus County Workforce Development and the Employment Development Department (EDD). Workforce Development's six America's Job Centers offer Career Assessment, Individual Employment Plans, Career Counseling, Staff-assisted Job Search, High School Diploma attainment assistance & up to \$10,000 in Training through eligible providers: EDD, the Department of Rehabilitation & Yosemite Community College District ONSITE.

FPGM serves families with minor children & provides intensive case management focused on Education, Employment, and Housing Goals, helping parents pursue jobs and vocational training alongside their housing search so families can TRANSITION to SELF-SUFFICIENCY.

Because RRH assistance is Time-Limited both projects focus on INCREASING HOUSEHOLD INCOME through Wages, Training, and Benefits . CalWORKs continues to support parents after they start working, allowing families to Combine Wages and Aid while their EARNINGS GROW.

1C-13b. Collaboration Related to Families with Children—Leveraging Funding from Mainstream Family Service Systems.

Describe how the project(s) identified in 1C-13 leverages funding from mainstream family service systems, such as Temporary Assistance for Needy Families (TANF).

(limit 2,500 characters)

The StanCo CoC's Family RRH project identified in 1C-13, the Stanislaus County Community Services Agency (CSA) CalWORKs Housing Support Program (HSP), is Funded Directly through the Mainstream Family Services System. CalWORKs is California's TANF program & HSP is a CalWORKs program administered by CSA, the same county agency that administers CalWORKs Cash Aid, Employment Services & Childcare. As a result, a family's housing assistance and mainstream benefits are coordinated through one agency.

HSP uses CalWORKs funding to pay for Rental Assistance, Security Deposits, Utility payments, moving costs, and hotel/motel stays while families search for housing, along w/HOUSING NAVIGATION, Case Management, legal services referrals & Credit Repair. HSP families also draw on other TANF-funded CalWORKs resources that stretch housing dollars further. For example, CalWORKs Temporary Homeless Assistance pays for up to 16 days of temporary shelter each year.

CalWORKs Permanent Homeless Assistance covers Security Deposits & last month's rent, or up to 2 months of Back Rent to prevent eviction. CalWORKs cash aid provides monthly income toward Rent, and Welfare-to-Work pays for Childcare, Transportation, Work Clothing & Job Training so parents can INCREASE their EARNINGS. Through CSA's Welfare-to-Work program, Center for Human Services also provides a 3-week Job Readiness program and Community Service Placements with local employers for parents receiving CalWORKs cash aid.

CSA has used HSP funding to leverage other public housing resources to much success. For example, in winter 2018-19, CSA committed \$125,000 in CalWORKs HSP funds to lease units from the Housing Authority of the County of Stanislaus for 19 HSP families, with property management by the Stanislaus County Affordable Housing Corporation and wraparound services from partners including Behavioral Health and Recovery Services and Community Housing and Shelter Services. Families received referrals and employment services while they searched for permanent housing, and 19 of the 23 (82%) families placed moved into permanent housing.

By combining TANF-funded rental assistance with CalWORKs cash aid, homeless assistance, childcare, and employment services, HSP helps families move quickly into permanent housing and build the income they need to keep it.

1C-13c. Collaboration Related to Families with Children—Combining Housing Assistance with Parental Support.

Describe how the project(s) identified in 1C-13 combines housing assistance with childcare, parenting support, pregnancy-related and child healthcare, and education.

(limit 2,500 characters)

The StanCo CoC's family RRH projects identified in 1C-13, the Stanislaus County Community Services Agency (CSA) CalWORKs Housing Support Program (HSP) and Family Promise of Greater Modesto (FPGM) RRH, COMBINE Housing Assistance with Childcare, Parenting Support, Health Care, and Education.

Childcare: While HSP provides rental assistance and housing case management, its CalWORKs parents can use StanWORKs Childcare, which helps pay for childcare while they work or attend approved Welfare-to-Work education and training. Parents choose a childcare center, family childcare home, or license-exempt provider, and care transfers to Choices for Children for up to 24 months after CalWORKs ends so families do not lose childcare as their income grows. FPGM case managers also help families arrange childcare as needed.

Parenting Support and Pregnancy-Related & Child Healthcare: HSP can serve pregnant parents, since CalWORKs eligibility begins in the last trimester of pregnancy for a person with no other children. Pregnant and Parenting Teens in CalWORKs families take part in Cal-Learn, where County Public Health nurses and community health workers provide In-Home Case Management on Prenatal and Child Healthcare, Family Planning, Parenting, and finishing high school.

Families with a newborn or a pregnant parent can also be connected to Healthy Families Stanislaus, a free Public Health home-visiting program whose nurses, community health workers, and social workers provide Prenatal and Postnatal Care guidance, Child Development Monitoring, Parenting Education, and access to health care through the child's third year of age. FPGM case managers help parents obtain physical and behavioral health care as needed.

Education: FPGM's intensive case management centers on education, employment, and housing goals. The Stanislaus County Office of Education (SCOE) refers families experiencing homelessness to FPGM for housing, and SCOE and the McKinney-Vento Liaison assigned to every school site help children enroll immediately, stay in their school of origin with transportation, and receive academic support.

For parents, Welfare-to-Work enrolls them in Education and Training programs, and Cal-Learn helps teen parents earn a high school diploma. Delivered alongside rental assistance and case management, these supports help parents keep children in school, meet health needs, and keep the childcare they need to work and stay housed.

1C-14. Collaboration with Veteran Serving Organizations—Partnership with the U.S. Department of Veterans Affairs or Veteran Serving Organization.

Identify at least one partnership the CoC has with the Department of Veterans Affairs or other Veteran Serving Organizations.

(limit 500 characters)

The StanCo CoC coordinates with the Stanislaus County Veterans Services Office, whose employees are trained & accredited by the U.S. & CA Depts of Veterans Affairs to assist veterans, their dependents, & surviving family members obtain benefits. Additionally, a representative from the Federal Dept of Veterans Affairs sits on the CoC Board & was also a panelist who judged the local competition.

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1C-14a	Collaboration with Veteran Serving Organizations.	
	Select 'Yes' or 'No' in the chart below to indicate whether the partnership(s) identified in 1C-14 does the following:	

1.	Refers veterans identified by the CoC to VA or other Veteran Serving Organizations for assistance?	Yes
2.	Coordinates the provision of emergency shelter, supportive services, and housing for veterans?	Yes
3.	Ensures access to a full spectrum of employment and career pathway opportunities?	Yes
4.	Shares data with the Department of Veterans Affairs as appropriate?	Yes
5.	Identifies service gaps for veterans?	Yes
6.	Fills service gaps for veterans?	Yes

1C-15. Collaboration with Organizations who Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.

Identify at least one partnership your CoC has with victim service providers, state domestic violence coalitions, state sexual assault coalitions, anti-trafficking service providers or other organizations who help provide shelter, housing, and services to individuals and families of persons experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking.

(limit 500 characters)

Healthy Alternatives to Violent Environments (HAVEN) is the only dedicated provider of supportive services & advocacy for survivors of DOMESTIC VIOLENCE, SEXUAL ASSAULT & HUMAN TRAFFICKING in Stanislaus County and is a long-time CoC partner. HAVEN operates an EMERGENCY SHELTER; provides MEDICAL/POLICE ACCOMPANIMENT to victims; staffs a 24-hr crisis HOTLINE; assists w/ safety planning & RESTRAINING ORDER applications; & offers PEER COUNSELING, all while advocating to end the cycle of abuse.

1C-16. Collaboration with Justice System Re-entry Partners.

Identify at least one partnership your CoC has to prevent homelessness among people transitioning from prisons, jails, or court-ordered programs.

(limit 500 characters)

The Stanislaus County Public Defender's Office (PD), a long-time CoC Partner, runs a RE-ENTRY program called The Hub which assists individuals upon their RELEASE from INSTITUTIONAL settings. They provide HOUSING SUPPORT; Case mgmt; help obtaining IDs & other documents; Reentry NAVIGATION; and General Problem-solving. The Hub also offers onsite EMPLOYMENT ASSISTANCE; MENTAL HEALTH support; & classes like Anger Management; Maintaining Healthy Relationships; & Lifelong Literacy.

1C-17. Collaboration with Partners to Address High Utilizers of Healthcare Systems.

Identify at least one partnership or project your CoC has to provide specialized supportive services for homeless individuals with a high level of medical needs.

(limit 500 characters)

Modesto gospel mission (MGM) works with hospitals & managed care plans to provide a discharge plan for individuals who lack stable housing and are recuperating from an emergent, chronic, or acute physical condition, a/o certain behavioral health conditions. MGM also offers wrap-around support including case management; health navigation; wound care; medication management; diabetic care; spiritual guidance; and where applicable, substance abuse & mental health treatment.

1C-18. Collaboration with Partners to Address the Needs of Aging and Elderly Individuals Experiencing Homelessness.

Identify at least one partnership or project your CoC has to serve aging and elderly individuals experiencing homelessness, such as with a provider of residential care, assisted living, or medical respite services.

(limit 500 characters)

The CoC partners with the Stanislaus County Area Agency on Aging to connect older adults experiencing homelessness with aging services and housing resources. The agency has historically attended CoC meetings and served as a referral partner for CoC and homeless service providers, helping them identify and respond to older adults' care and support needs.

1C-19. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Project that Prioritizes Individuals Experiencing Chronic Homelessness.

Identify at least one Rapid Rehousing (RRH) or Permanent Supportive Housing (PSH) project that prioritizes individuals experiencing chronic homelessness.

(limit 500 characters)

The CoC funds 6 PERM SUPPORTIVE HSG projects serving people experiencing CHRONIC Homelessness: WeCare Turlock; Community Impact Central Valley (CICV)'s HALO Programs I, III & V; and CHSS's PSH #1, #2. Each program serves people who face major barriers to attaining housing like physical health conditions, mental health concerns, substance use disorders, limited income & long histories of homelessness. They also provide onsite supportive services to help their residents move toward self-sufficiency.

1C-19a. Permanent Supportive Housing for Chronically Homeless Individuals and Families—On-site Behavioral Healthcare.

Describe how the project(s) identified in 1C-19 provides on-site behavioral healthcare.

(limit 2,500 characters)

WeCare Turlock: PSH is specifically designed to serve individuals who may not be successful in traditional housing settings without ongoing support. Through stable housing, INDIVIDUALIZED CASE MGMT; CONNECTIONS to physical & BEHAVIORAL health services; assistance accessing benefits utility support, food, & other community-based services, WeCare helps participants maintain their housing and IMPROVE their overall QUALITY OF LIFE. Many participants have experienced long-term homelessness & require a higher level of support to remain stably housed. By PRIORITIZING those w/the GREATEST NEEDS, WeCare's PSH Program REDUCES BARRIERS to housing, PREVENTS RETURNS to homelessness, & PROMOTES long-term housing retention & SELF-SUFFICIENCY.

Community Impact Central Valley (CICV)'s HALO Programs I, III & V has a COMPREHENSIVE RANGE of supportive services designed to assist participants in obtaining & MAINTAINING stable housing, INCREASING STABILITY & ADDRESSING INDIVIDUAL BARRIERS to self-sufficiency. Supportive services include, CASE MANAGEMENT; referrals to BEHAVIORAL HEALTH & SUBSTANCE USE TREATMENT; HOUSING NAVIGATION; benefits advocacy; & coordination w/other community agencies & service providers. The participant's need for supportive services is determined through an INDIVIDUALIZED, PARTICIPANT-CENTERED ASSESSMENT at intake and throughout their program participation. Service needs and participation are documented in each participant's file.

1C-19b. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Assesses Need for Higher Level of Care.

Describe how the project(s) identified in 1C-19 has a policy for assessing program participant need for higher level of care (i.e., assisted living, residential treatment).

(limit 2,500 characters)

Community Impact Central Valley (CICV)'s HALO Programs I, III & V has a COMPREHENSIVE RANGE of supportive services designed to assist participants in obtaining & MAINTAINING stable housing, INCREASING STABILITY & ADDRESSING INDIVIDUAL BARRIERS to self-sufficiency. Supportive services include, CASE MANAGEMENT; referrals to BEHAVIORAL HEALTH & SUBSTANCE USE TREATMENT; HOUSING NAVIGATION; benefits advocacy; & coordination w/other community agencies & service providers. The participant's need for supportive services is determined through an INDIVIDUALIZED, PARTICIPANT-CENTERED ASSESSMENT at intake and throughout their program participation. Service needs and participation are documented in each participant's file.

WeCare Turlock: PSH is specifically designed to serve individuals who may not be successful in traditional housing settings without ongoing support. Through stable housing, INDIVIDUALIZED CASE MGMT; CONNECTIONS to physical & BEHAVIORAL health services; assistance accessing benefits utility support, food, & other community-based services, WeCare helps participants maintain their housing and IMPROVE their overall QUALITY OF LIFE. Many participants have experienced long-term homelessness & require a higher level of support to remain stably housed. By PRIORITIZING those w/the GREATEST NEEDS, WeCare's PSH Program REDUCES BARRIERS to housing, PREVENTS RETURNS to homelessness, & PROMOTES long-term housing retention & SELF-SUFFICIENCY.

ENHANCED CARE MANAGEMENT (ECM) is a whole-person, interdisciplinary approach to care that addresses the clinical and non-clinical needs of Members with the most complex medical and social needs. ECM provides systematic coordination of services and comprehensive care management that is community-based, interdisciplinary, high touch and person centered. ECM coordinates all care for Members who receive it, including across the physical and behavioral health delivery systems.

1C-19c. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Assesses Readiness for Moving On.

Describe how the project(s) identified in 1C-19 has a policy for assessing program participant readiness for moving on to unsubsidized or other permanent housing.

(limit 2,500 characters)

Community Impact Central Valley (CICV)'s HALO Programs I, III & V has a COMPREHENSIVE RANGE of supportive services designed to assist participants in obtaining & MAINTAINING stable housing, INCREASING STABILITY & ADDRESSING INDIVIDUAL BARRIERS to self-sufficiency. Supportive services include, CASE MANAGEMENT; referrals to BEHAVIORAL HEALTH & SUBSTANCE USE TREATMENT; HOUSING NAVIGATION; benefits advocacy; & coordination w/other community agencies & service providers. The participant's need for supportive services is determined through an INDIVIDUALIZED, PARTICIPANT-CENTERED ASSESSMENT at intake and throughout their program participation. Service needs and participation are documented in each participant's file.

WeCare Turlock: PSH is specifically designed to serve individuals who may not be successful in traditional housing settings without ongoing support. Through stable housing, INDIVIDUALIZED CASE MGMT; CONNECTIONS to physical & BEHAVIORAL health services; assistance accessing benefits utility support, food, & other community-based services, WeCare helps participants maintain their housing and IMPROVE their overall QUALITY OF LIFE. Many participants have experienced long-term homelessness & require a higher level of support to remain stably housed. By PRIORITIZING those w/the GREATEST NEEDS, WeCare's PSH Program REDUCES BARRIERS to housing, PREVENTS RETURNS to homelessness, & PROMOTES long-term housing retention & SELF-SUFFICIENCY.

Community Impact Central Valley's (CICV) permanent supportive housing (PSH) project uses a standard moving-on protocol to assess whether participants are ready to transition to unsubsidized housing or another permanent housing option. During routine case management, staff review each participant's housing stability, income and benefits, ability to manage rent and other housing costs, and the supports they would need after leaving PSH. Staff discuss moving on with participants as an option based on their goals and circumstances.

When a participant is interested and ready, CICV helps identify housing they can afford and obtain other assistance, such as a housing voucher, to support the transition. CICV also serves many veterans and helps them access available veterans' benefits and housing resources when those supports can make moving on possible. Staff work with participants to secure the next housing option and coordinate the transition so they can maintain stable housing.

1D. Project Capacity, Review, and Ranking–Local Competition

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- Frequently Asked Questions

1D-1.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question along with the required attachment as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
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You must upload the Local Competition Scoring Tool attachment to the 4A. Attachments Screen.

Select 'Yes' or 'No' in the chart below to indicate how your CoC reviewed, rated, and ranked project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 50 percent of the total available points were based on objective criteria to review, rate, and rank project applications.	Yes
3.	At least 25 percent of the total available points were based on system performance measures to review, select and rate project applications.	Yes
4.	Considered returns to homelessness in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes
5.	Considered employment income in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes
6.	Considered supportive service participation requirements in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes

1D-2.	New Proposals.	
	Does your CoC invite new proposals from entities that have not previously received funding, if such eligible entities exist?	Yes

1D-2a.	Web Posting of CoC-Approved Consolidated Application Before the CoC Program Competition Application Submission Deadline.	
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	Enter the date your CoC posted all parts of the CoC-approved Consolidated Application on the CoC's website or partner's website—which included: 1. the CoC Application, and 2. Project Priority Listings.	09/30/2026
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1D-2b.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on the Website.	
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	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/30/2026
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1D-2c.	Local Competition Selection Results for All Projects.	
	You must upload the Local Competition Selection Results attachment to the 4A. Attachments Screen.	

	Does your attachment include: 1. Project Names, 2. Project Scores, 3. Project Rank, 4. Project Status—Accepted, Rejected, Reduced Reallocated, Fully Reallocated, 5. Amount Requested from HUD, and 6. Reallocated Funds +/-.	Yes
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1D-2d.	Projects Rejected/Reduced—Notification Outside of e-snaps.	
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1.	Did your CoC reject or reduce any project application(s) submitted for funding during its local competition?	No
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1D-2e.	Projects Accepted—Notification Outside of e-snaps.	
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	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	08/06/2026
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1D-3.	Reallocation—Reviewing Performance of Existing Projects.	
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	Describe:
1.	your CoC's reallocation process to reallocate from lower performing projects to create new high performing projects, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed,
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year,
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

1. The COC'S REALLOCATION PROCESS reallocates from lower performing projects to create new high performing projects. The CoC begins the NOFO season by gathering qualitative and quantitative data from the community and HMIS to determine funding priorities (including info gathered from annual grantee monitoring activities). These funding priorities along with performance data are used to decide if any projects are identified for reallocation. During the scoring process, Rank and Review members may recommend reallocations based on the quality of applications received and the number of applicants. Finally, the CoC Board may also request projects be reallocated. Grantees may also choose to voluntarily reallocate.

The CoC's REALLOCATION POLICY in the NOFO Policy states the following: The CoC may reallocate funds from non-, under-performing projects for: Repeatedly leaving grant funds undrawn & for High-Priority Local Needs that align w/HUD priorities. Realloctn takes funds from existing renewal projects to create new projects. Projects that have not Fully Drawn Down their grants may be considered Underperforming. The Project Review Panel may also make reallocation suggestions. Projects that don't meet local & HUD policy or priority goals may be Reallocated.

The CSoC and collaborative applicant will provide guidance on the priorities of HUD and the CoC. The Project Review Panel may make reallocation suggestions based on the policy goals of the CoC and HUD. Projects which no longer meet the priority goals of the CoC, or the policy priorities of HUD, may be subject to reallocation.

2. This year the StanCo CoC identified 4 PSH projects to reallocate due to shifted HUD priorities & the CoC's inability to fund all renewal PH projects: CICV Halo 14(7), CICV Hope Housing, CICV New Halo Vet & CICV RCC Vet. These projects were identified due to the funded organization's (CICV) confidence in their ability to move on current participants into other Permanent Housing. CICV chose to transition two of its grants into a new TH project, allowing them extra time to move on the current PSH participants.

3. 2026 REALLOCATIONS

The CoC Board and Rank & Review Panel moved forward with the decision to reallocate the 4 PSH projects mentioned in Element 2.

4. NA

1D-3a.	Reallocation Between FY 2021 and FY 2026.	
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	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2021 and FY 2026?	Yes
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2A. Homeless Management Information System (HMIS) and System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

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

	Enter the name of the HMIS Vendor your CoC is currently using.(limit 75 characters)	ClientTrack by Caseworthy
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Single CoC
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2A-3.	PIT Count—Methodology Change.	
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	Describe:
1.	any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2025 and 2026, if applicable, and
2.	how the changes affected your CoC's PIT count results.

(limit 2,500 characters)

n/a

2A-4. Reduce Encampments—Actions to Reduce Encampments.

Describe in the field below the actions your CoC took to reduce the number of encampments or the number of people residing in encampments during your evaluation period.

(limit 2,500 characters)

Reporting period: 10/01/24 - 09/30/25

CoC Took Notable Steps During Reporting Period to Reduce Encampments: The Stanislaus CoC took a MULTI-PRONGED approach to tackle the encampment problem in its geographic area in FY25. They rallied a COALITION of Municipal & State Government partners to join forces w/ local NonProfit orgs, Homeless Service Providers & Experts in arenas like Healthcare, Behavioral Health & Housing to develop a COMPREHENSIVE plan to REDUCE ENCAMPMENTS in the County. These steps included: Identification of individuals; Assessment of their Needs; Referrals & Connections to specialized Resources; and Housing Navigation & Linkages.

ID & TRIAGE: Advocates identified 4 local zones where encampments were visible & performed INDIVIDUALIZED ASSESSMENTS w/encampment residents to CONNECT them to SUPPORT SERVICES.

CoC Utilizes Local Experts to Address Causes of Homelessness - OUTREACH conducted by: 1) Modesto Police Dept's (MPD) Community Assessment Response & Engagement (CARE) team trained to help w/High-Risk Safety Behaviors; Criminal Behavior; Mental Illness challenges; & Alcohol+Substance Use Disorders (ASUD); 2) Community Health & Assistance Team (CHAT)= Social Svcs, Non-profit Staff & MPD officers.

BEHAVIORAL HEALTH INTERVENTIONS: Each resident received interventions w/an emphasis on STABILIZATION. La Familia Counseling Center, County Behavioral Health & Rehabilitation Svcs (BHRS), the CHAT, CARE Team provide Enhanced Care Mgmt, whole-person approach that addresses Complex Medical & Social needs.

HOUSING NAVIGATION: All were assessed for: Emergency Shelter, Bridge Housing, Transitional Housing, Rapid Rehousing & Permanent Supportive Housing w/residents matched by individual acuity, eligibility & housing readiness.

Data Show Positive Results: The 2026 HDX Report's SPM Measure 7a.1 shows Street Outreach (SO) POSITIVE EXIT RATE=60.85%, 235 ppl exiting SO w/134 to Temp/Inst't'l Destinations & 9 to Perm ones. 2026 PIT Count of Unsheltered people= 687, down from 2025 Unsheltered PIT Count= 950, a REDUCTION of 263 people.

ASUD TREATMENT: ASUD Interventions may include Detox; Residential Recovery Svcs; Individual+Group Counseling; Peer Support; Behav Health support; & Medication Support.

The CoC Expanded Investment in Homelessness Prevention thru Targeted Financial Assistance, Prevention-Focused Case Mgmt & Coordinated Discharge Planning esp for ppl exiting jails, prisons, hospitals & behav health facilities, & used HMIS to track.

2A-4a.	Reduce Encampments—Number of Encampments.	
1.	Enter the estimated number of encampments in the beginning of your evaluation period.	10
FY2026 CoC Application	Page 50	09/30/2026

2. Enter the reduction in the number of encampments during your evaluation period.
--

10

2A-4b. Reduce Encampments—Number of People in Encampments.
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1. Enter the estimated number of people in encampments in the beginning of your evaluation period.
--

400

2. Enter the reduction in the number of people in encampments during your evaluation period.
--

100

2A-4c. Reduce Encampments—Plans to Reduce Encampments.
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If there has been no reduction in encampments or persons in encampments in your CoC, describe the plans your CoC has to participate in efforts to reduce these numbers.

(limit 2,500 characters)

Not Applicable

2A-5. Reducing the Number of First Time Homeless—CoC's Plan.

Describe your CoC's plan to decrease the number of individuals and families becoming homeless for the first time.

(limit 2,500 characters)

The CoC has a multi-pronged plan to DECREASE the number of individuals & families experiencing homeless for the first time.

Plan to Reduce 1st Time Homelnsns: Service providers & coordinated entry data have identified RISK FACTORS to a person becoming homeless for the first time. These risk factors include:

Domestic Violence (DV) in the home;

Alcohol & Substance Abuse;

Divorce & Separation;

Job Loss;

Aging; &

Insufficient Affordable Housing Stock.

Using PREVENTION & DIVERSION: The CoC has received homeless Prevention & Diversion funding thru the CA Dept. of Housing & Community Development's Homeless Housing Assistance and Prevention Program (HHAP), a State-funded program aimed at REDUCING HMLSNS across CA.

The CoC will IDENTIFY indivs & families AT RISK of homelnsns via The Access Center (TAC), a hub for ppl at-risk of homelnsns that offers Conflict Mediation, Transportation & ADVOCACY referrals for Fair Housing & Tenant's Rights matters to Keep People Housed. TAC also provides access to EMPLOYMENT services & Adult Education to empower indivs toward SELF SUFFICIENCY; connections to Food Pantries & CalWORKS for eligible families thru the housing support program.

DV Interventions: The Local Domestic Violence Victim Services Provider, HAVEN (Healthy Alternatives to Violent Environments) participates in coordinated entry (CE) to facilitate connections to their services. HAVEN offers indiv & group peer therapy and connections to BHRS mental health support. The Family Justice Center assists with Safety Planning, Restraining Order support, and access to Adult & Child Counseling.

Alcohol/Drug Use Intervention: StanCo DRUG COURT handles Treatmt-Mandated Felonies where clients submit to PLEA AGREEMENTs w/Mandatory DRUG/ALCOHOL Treatment, Testing & COUNSELING terms. The Courts utilize Legal Diversion, a process where a defendant's charges are Dismissed upon Completion of Treatment and other terms. The County runs a series of Specialty Courts, including MENTAL HEALTH, VETERAN and Civil Commitment Courts that provide similar DIVERSION processes in exchange for mandated mental health and other terms like employment, training & community service.

ASSERTIVE OUTREACH specialists from the Community Assessmt Response & Engagement (CARE) team that brings together first responders, clinicians, & homeless service providers works to ADDRESS the ROOT CAUSES of homelnsns for ppl whose health, safety & circumstances requires a coordinated response

2A-6. Reducing Length of Time Homeless—CoC's Plan.

Describe your CoC's plan to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

The CoC has identified 4 STRATEGIES to reduce the length of time homeless in Stanislaus County.

1. The CoC will utilize HMIS data & the CES to IDENTIFY individuals & families with the LONGEST LENGTHS of time homeless & will PRIORITIZE them for housing support. By identifying households with the GREATEST BARRIERS to attaining housing stability, as well those who are CHRONICALLY homeless, the CoC can REDUCE its average & median lengths of time homeless by CONNECTING THESE INDIVS & FAMILIES FIRST to permanent supportive housing and other housing resources.

2. The CoC will INCREASE CASE MANAGEMENT in EMERGENCY SHELTER settings to support those entering the system with an emphasis on exploring various housing pathways. By focusing on HOUSING NAVIGATION, case managers will prioritize screening for individualized housing options, including: Bridge Housing, Transitional Housing, Rapid Rehousing, Veterans Housing, Family Reunification, Rental Assistance Programs & Permanent Supportive Housing, w/residents matched to certain options based on individual acuity, eligibility & housing readiness.

3. The CoC will also STRENGTHEN ties from unsheltered OUTREACH PROGRAMS to the Coordinated Entry System (CES). The CoC has ensured that more unsheltered individuals are assessed & prioritized through Coordinated Entry by engaging the assistance of ASSERTIVE OUTREACH specialists from the Community Assessment Response & Engagement (CARE) team, a cross-agency team that brings together first responders, health professionals, homeless service providers, and peers w/lived experience. The CARE team works to ADDRESS the ROOT CAUSES of homelessness for ppl whose health, safety & circumstances requires a coordinated response.

4. The CoC will also leverage the work of the Stanislaus Housing Alliance (SHA) to INCREASE available AFFORDABLE HOUSING stock to move households into stable and permanent housing. The SHA is comprised of ELECTED OFFICIALS & CITY MGRS, Concerned RESIDENTS, BUSINESS & FAITH LEADERS who work to provide GUIDANCE & FEEDBACK on local strategies & policies to reduce homelessness. The SHA was created to ALIGN Public Officials w/Private Business Partners to ENCOURAGE an INCREASE in Affordable Housing, recognizing that such development would allow ppl living in Transitional housing to move to Permanent homes, which would in turn free up space in Transitional housing to move individuals from Emergency Shelters to those transitional placements.

2A-7. Successful Permanent Housing Placement—Exits to Unsubsidized Housing.

Based on HMIS data, what percent of program participants exited from TH/RRH/PSH collectively to unsubsidized housing?

61.00%

Describe how you calculated the data for this response.**(limit 2,500 characters)**

The HMIS lead took 903 as the total number of persons in ES-EE, ES-NbN, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing from the HDX report.

To respond to this question, the Lead ran a report in HMIS to count people exited from TH, RRH, and PSH only, to any of the following response options for HMIS Data Element 3.12 (Exit Destination):

Staying or living with family, permanent tenure;
 Staying or living with friends, permanent tenure;
 Rental by client, no ongoing housing subsidy; and
 Owned by client, no ongoing housing subsidy.

The HMIS Lead then filtered out the exit destinations from that number to include non-subsidized housing, which are:

- a) Rental by Client, no ongoing housing subsidy;
- b) Staying with family, permanent tenure; and
- c) staying with friends, permanent tenure.

The total number of participants in the situations a, b & c is 830.

The HMIS lead then filtered the 830 total to delineate which programs each person exited. The totals of that filter are as follows:

TH (85)
 RRH (421)
 PSH no disability (0)
 PSH disability required (1)

The total number of participants from TH/RRH/PSH to unsubsidized housing is 507. So the percent of program participants exited from TH/RRH/PSH collectively to unsubsidized housing is 507/830, which is 61%

2A-8.	Housing Inventory Count (HIC) and Point-in-Time (PIT) Count Date.	
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	Enter the date your CoC conducted its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count.	01/28/2026
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2A-8a.	HIC and PIT Count Data—HDX 2.0 Submission Date.	
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	Did your CoC submit its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count data in HDX 2.0 by April 30, 2026, 8:00 p.m. EDT?	Yes
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2A-8b.	Longitudinal System Analysis (LSA) Data—HDX 2.0 Submission Date.	
	You must upload your CoC's FY 2026 HDX Competition Report to the 4A. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 16, 2026, 11:59 p.m. EST?	Yes
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2A-8c.	System Performance Measures (SPM) Data—HDX 2.0 Submission Date.	
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	Did your CoC submit its FY 2025 System Performance Measures data in HDX 2.0 by March 4, 2026, 8:00 p.m. EDT?	Yes
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2A-9.	HMIS and Comparable Database Participation—Bed Coverage Rate.	
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Using the FY 2026 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds	Adjusted Total Year-Round, Current VSP Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
1. Emergency Shelter (ES) beds	987	30	957	94.10%
2. Safe Haven (SH) beds	0	0	0	0.00%
3. Transitional Housing (TH) beds	316	3	291	91.22%
4. Rapid Re-Housing (RRH) beds	176	0	176	100.00%
5. Permanent Supportive Housing (PSH) beds	743	0	435	58.55%
6. Other Permanent Housing (OPH) beds	105	0	105	100.00%

2A-9a.	Partial Credit for Bed Coverage Rates of 84.99 Percent or Lower for Any Project Type in Question 2A-9.	
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For each project type with a bed coverage rate that is 84.99 percent or lower in question 2A-9, describe:

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

(limit 2,500 characters)

1. The low HMIS PSH beds is a result of the number of VASH vouchers in the community. With the restrictions of the VA in collecting additional data from those with VASH clients - and with the required data elements - it has been challenging. Over the next 12 months, the CoC is partnering with the VA to have a more accurate Veteran Status datapoint. The CoC is continuing to work with the HUD-VASH representative to further improve the HMIS coverage rate. This includes providing HMIS training to VA staff and looking into potential solutions to reduce the data entry burden, such as using the HUD-VASH HOMES HMIS Translator Tool.

2. To implement these steps, the CoC will first schedule a meeting with the VA to discuss the importance of accurate and comprehensive HMIS data. Then, the CoC and VA will problem solve on potential solutions, such as using the HOMES HMIS Translator Tool or providing ongoing HMIS training for VA staff. The CoC and VA will continue to monitor bed coverage rates over the 12 months and meet frequently to review progress.

3A. Policy Initiatives

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- Frequently Asked Questions

3A-1.	Supporting Activities within an Opportunity Zone.	
	You must upload the HUD-2996 Certification for Opportunity Zone Preference Points attachment to the 4A. Attachments Screen.	

1.	Will the proposed activities/projects occur within Opportunity Zone Census Tracts?	Yes
2.	Do you expect to use at least 50% of the proposed activities/projects in Opportunity Zones Census Tracts?	Yes

3A-2	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.
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Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?

No

4A. Attachments Screen For All Application Questions

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.		
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.		
3.	We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.		
4.	Attachments must match the questions they are associated with.		
5.	Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.		
6.	If you cannot read the attachment, it is likely we cannot read it either.		
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).		
	. We must be able to read everything you want us to consider in any attachment.		
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.		
8.	Only use the 'Other' attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.		
Document Type	Required?	Document Description	Date Attached
01. 1C-1. List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment	Yes	1C-1. List of TH...	09/30/2026
02. 1C-1f. List of CoC Program Projects and Number of Units that require Substance Abuse Treatment	Yes	1C-1f. List of Co...	09/25/2026
03. 1C-3. Language from Project Supportive Service Agreements	Yes	1C-3. Language fr...	09/28/2026
04. 1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety	Yes	1C-10. Evidence o...	09/25/2026
05. 1D-1. Local Competition Scoring Tool	Yes	1D-1. Local Compe...	09/25/2026

06. 1D-2c. Local Competition Selection Results	Yes	1D-2c. Local Comp...	09/25/2026
07. 2A-8b. FY 2026 HDX Competition Report	Yes	2A-8b. FY 2026 HD...	09/25/2026
08. 3A-1. HUD-2996 Certification for Opportunity Zone Preference Points	No	3A-1. HUD-2996 Ce...	09/30/2026
09. 3A-2a. Project List for Other Federal Statutes	No		
10. 3A-DP. Your CoC's Policy or Statement to Advance Recovery	No	3A-DP. Your CoC's...	09/25/2026
11. Other	No		

Attachment Details

Document Description: 1C-1. List of TH-RRH-PSH Projects and Treatment Providers with On-Site Substance Use Treatment

Attachment Details

Document Description: 1C-1f. List of CoC Program Projects and Number of Units that require Substance Abuse Treatment

Attachment Details

Document Description: 1C-3. Language from Project Supportive Service Agreements

Attachment Details

Document Description: 1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety

Attachment Details

Document Description: 1D-1. Local Competition Scoring Tool

Attachment Details

Document Description: 1D-2c. Local Competition Selection Results

Attachment Details

Document Description: 2A-8b. FY 2026 HDX Competition Report

Attachment Details

Document Description: 3A-1. HUD-2996 Certification for Opportunity
Zone Preference Points

Attachment Details

Document Description:

Attachment Details

Document Description: 3A-DP. Your CoC's Policy or Statement to
Advance Recovery

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/28/2026
1B. Coordination and Engagement–Accountable Structure and Participation	09/30/2026
1C. Coordination and Engagement	09/30/2026
1D. Project Review/Ranking	09/29/2026
2A. HMIS Implementation	09/29/2026
3A. Policy Initiatives	09/29/2026
4A. Attachments Screen	09/30/2026
Submission Summary	No Input Required

1C-1. List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment

Project Name	Agency Name	Component	On-site Substance Use Treatment (Y/N)
Pathways - Support Services Only	Center for Human Services (CHS)	TH	Y
Pathways - Support Services Only Expansion	Center for Human Services (CHS)	TH	Y
PSH Renewal	We Care Turlock	PSH	Y
Permanent Supportive Housing for Families with Children #1	Community Housing and Shelter Services	PSH	N
Permanent Supportive Housing for Families with Children #2	Community Housing and Shelter Services	PSH	N

FY 2026-Halo I	Community Impact Central Valley (CICV)	PSH	N
FY 2026-Halo Homes (3)	Community Impact Central Valley (CICV)	PSH	N
FY 2026-Halo Apartments (5)	Community Impact Central Valley (CICV)	PSH	N
Transition TH FY2026	Community Impact Central Valley (CICV)	TH	N
SHOP FY2026	Community Impact Central Valley (CICV)	TH	N
Permanent Housing #1 Renewal 2026	Stanislaus County Affordable Housing Corp (Stanco)	PSH	N
Support. Housing Outreach Project Renewal 2026	Stanislaus County Affordable Housing Corp (Stanco)	PSH	N
FY2026 SPC 5 Miller Pointe Project Renewal	Stanislaus Regional Housing Authority	PSH	Y
FY2026 SPC 1-4,6,7,8 Renewal	Stanislaus Regional	PSH	Y

	Housing Authority		
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1C-1. List of CoC Program Projects and Number of Units that Require Substance Abuse Treatment

1C-3. Language from Project Supportive Service Agreements

This is the list of housing projects in CA-510 that will require supportive services for FY26 funding cycle (project names reflect e-snaps names). Seventy-five percent (75%) of projects in the CoC will require supportive services. See page 2 for contract/occupancy agreement language.

Project Name	Agency Name	Component	Require Supportive Services?
Pathways - Support Services Only	Center for Human Services (CHS)	TH	Y
Pathways - Support Services Only Expansion	Center for Human Services (CHS)	TH	Y
PSH Renewal	We Care Turlock	PSH	N
Permanent Supportive Housing for Families with Children #1	Community Housing and Shelter Services	PSH	N
Permanent Supportive Housing for Families with Children #2	Community Housing and Shelter Services	PSH	N
FY 2026-Halo I	Community Impact Central Valley (CICV)	PSH	Y
FY 2026-Halo Homes (3)	Community Impact Central Valley (CICV)	PSH	Y

FY 2026-Halo Apartments (5)	Community Impact Central Valley (CICV)	PSH	Y
Transition TH FY2026	Community Impact Central Valley (CICV)	TH	Y
SHOP FY2026	Community Impact Central Valley (CICV)	TH	Y
Permanent Housing #1 Renewal 2026	Stanislaus County Affordable Housing Corp (Stanco)	PSH	N
Support. Housing Outreach Project Renewal 2026	Stanislaus County Affordable Housing Corp (Stanco)	PSH	N
FY2026 SPC 5 Miller Pointe Project Renewal	Stanislaus Regional Housing Authority	PSH	Y
FY2026 SPC 1-4,6,7,8 Renewal	Stanislaus Regional Housing Authority	PSH	Y

CA-510 Contract/Occupancy Agreement Language for Requiring Supportive Services

Supportive Services Requirement

This program **requires you to participate in services** aligned with your individualized services plan.

You agree to:

- Participate in services consistent with your individualized services plan, which may include: _____
- Attend scheduled appointments or groups, unless you have an excused reason.
- Communicate with program staff if you are struggling to attend or stay engaged in services

Important things to know:

- Participation is required, not perfection. Challenges with service participation do not automatically mean you will lose housing.
- The focus is on safety, engagement, and progress over time.
- Treatment plans should be trauma-informed and culturally responsive.
- Reasonable accommodations will be made for disabilities, health needs, or access barriers.

The Individualized Service Plan can be found in the client file.

This agreement is intended to support housing stability while encouraging engagement in supportive services and/or substance use treatment. It should be used alongside local laws and program policies. Note that each program may alter the agreement language to align with their program's specific requirements.

1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety

Attached are the Stanislaus Community Response Guidelines for Individuals Experiencing Homelessness, which describe the CoC's policies for advancing public safety specifically regarding clearing tents and encampments, decreasing the public use of illicit drugs, and utilizing standards to address danger to self or others.

STANISLAUS COMMUNITY RESPONSE GUIDELINES FOR INDIVIDUALS EXPERIENCING HOMELESSNESS

AUTHORITY

The Stanislaus Community Response Guidelines for Individuals Experiencing Homelessness (SCRG) was developed to address outreach to and removal of significant encampments of individuals experiencing homelessness within our community. For the benefit of the health, well-being and survival of individuals experiencing homelessness throughout Stanislaus County, the SCRG was developed to inform and assist regional, county and city jurisdictions with response protocols for encampments of individuals experiencing homelessness. It is recommended local agencies support and authorize their respective chief administrative executives (Chief Executive Officers, City Managers, Regional Directors, etc.) to implement the SCRG.

BACKGROUND

Individuals experiencing homelessness continue to produce encampments in Stanislaus County due to a variety of challenges. Quite often, individuals experiencing homelessness suffer from physical disabilities, mental health conditions, medical illnesses, substance abuse issues and emotional scars associated with trauma. Due to these conditions, it sometimes requires multiple attempts before an individual experiencing homelessness will accept assistance. At times, encampments may present an imminent threat to the health and well-being of the community at-large. Despite improved communication and collaboration between public safety and housing & homeless services providers, addressing these challenges continues to be time, labor and resource intensive. The development of a coordinated and consistent process to address encampments of individuals experiencing homelessness will significantly increase the probability of successful outcomes for the individuals, responding staff and the community.

PURPOSE

The purpose of the SCRG is to develop a standard process for identifying and responding to significant encampments of individuals experiencing homelessness that require a multi-agency approach. The procedures set forth in this document are intended to facilitate outreach to encampments of individuals experiencing homelessness and connect them to shelter, housing and support services. The SCRG serves as a general response to encampments of individuals experiencing homelessness and is not intended to impede the general work duties of local law enforcement. Law enforcement will take into consideration Public Health recommendations and federal/state guidelines when responding to homeless encampments during times of crisis and state of emergencies. (See APPENDIX A, which will be updated from time to time, as necessary.)

The deployment of a multi-agency response would be utilized in the following situations:

1. Significant Encampment - Gathering of ten (10) or more individuals experiencing homelessness where one or more of the following conditions exist:
 - a. Gathering on a regular basis;
 - b. Constructing temporary or other forms of shelter and/or dwellings;
 - c. Collecting, storing or have abandoned personal and/or other types of property;

- d. Camping in an area which would appear to a reasonable person to be a place not meant for human habitation; and
 - e. Gathering in unlawful locations such as within the public right-of-way, parks, county facilities, and state and federal jurisdiction lines.
2. Immediate Hazard - A Significant Encampment where individuals experiencing homelessness are at risk of serious injury or death, beyond that caused by increasing exposure to the elements, and include, but are not limited to:
- a. Adjacent to highways, railways, waterways, roadways and driving lanes;
 - b. Criminal activity beyond illegal substance abuse;
 - c. Difficult to extend emergency services to the site;
 - d. Imminent work scheduled at the site for which an encampment will pose an obstruction;
 - e. Damage to the natural environment of environmentally critical areas;
 - f. Substantial quantities of garbage, debris or waste; and
 - g. Proximity of individuals experiencing homelessness to uses of special concern including schools, youth-serving community centers or facilities for the elderly.

PROCEDURES

The following procedures should be implemented when a multi-agency approach is warranted in response to the discovery of a significant homeless encampment.

1. Identification of Immediate Hazards. A multi-agency response is warranted if an immediate hazard to a Significant Encampment must be addressed. Public safety and homeless outreach staff (Assessment Team) will be deployed to assess the risk of serious injury or death, mitigate the hazard and offer resources and services to encampment inhabitants. If a Significant Encampment must be removed to mitigate the hazard, it shall be done in consultation with the Assessment Team, local stakeholders, and services agencies. All conditions which pose the hazard should be documented with photographs.
2. Criteria to Remove an Encampment. Significant Encampments will be removed to mitigate hazards. It is recommended public safety and responding agencies coordinate with the Access Center Outreach and Engagement Team prior to the removal of an encampment.

The following criteria shall be applied to determine if, and when, the Assessment Team recommends the removal of a Significant Encampment:

- a. Safety
 - i. Objective hazards to occupants of an encampment such as proximity to moving vehicles and steep slopes
 - ii. Multiple service calls to emergency responders, including all law enforcement, due to unsafe/criminal activity
 - iii. Difficulty extending emergency services to the site due to unsafe conditions such as location or density of the encampment itself
 - iv. Fire hazards, including potential and actual fire activity

b. Health

- i. High potential for exposure or transmission of disease or viruses
- ii. Excessive quantities of garbage, trash, or debris
- iii. Uncontrolled presence of needles, human waste, or other hazardous material
- iv. Vector hazards (e.g. rats)
- v. Other active health hazards to occupants or to the surrounding neighborhood

c. Location

- i. The proximity of the encampment to community resources including but not limited to schools, health centers, senior centers, etc.
- ii. Location identified as an unauthorized area to camp by local ordinance
- iii. Obstruction of public access as required by law, e.g. blocking a sidewalk, alley
- iv. Imminent work scheduled at the site for which the encampment will pose an obstruction
- v. Damage to environmentally critical areas
- vi. Neighborhood impacts
- vii. Length of time the encampment has been present at a location
- viii. Damage to public infrastructure

d. Size

- i. The size of the encampment is having a disproportionate impact on its surrounding neighborhood
- ii. The size of the encampment is creating unsafe conditions for the occupants

Once the immediate hazard criteria are met, the Assessment Team will meet with the appropriate staff from the affected agencies to determine next steps and whether to schedule outreach and abatement (cleanup of garbage and debris) at the encampment.

3. Lead Agency

The lead agency will be jurisdiction in which the encampment is located.

The lead agency will contact the Community Services Agency – Housing and Homeless Division to coordinate the outreach effort to convene the response which will be determined by the location of the encampment. Partner agencies include, but are not limited to:

- a. Abatement personnel of local municipalities
- b. Local law enforcement and other public safety personnel (e.g. police, fire code enforcement)
- c. California Department of Transportation
- d. Union Pacific Railroad
- e. Modesto Irrigation District
- f. Turlock Irrigation District
- g. Stanislaus County Department of Environmental Resources, Code Enforcement (alleys, County facilities, and other public spaces)

4. Outreach and Engagement Team

- a. Requests for outreach efforts that require multi-agency coordination/collaboration should be made to csoc@stancounty.com. Participating local jurisdictions and agencies are encouraged to designate a single point of contact to make such requests.
- b. The Access Center Outreach and Engagement Team will need a minimum of one week prior to abatement notice posting to coordinate adequate staff coverage.
- c. In coordination with local law enforcement, the Outreach and Engagement Team will visit the identified site as soon as practical to find and offer alternative housing and/or services to any individuals experiencing homelessness.
- d. All individuals experiencing homelessness will be provided with resource materials (see APPENDIX B) and personal hygiene kits and will be encouraged to engage with the Access Center for additional information on housing and support services.
- e. Notification will be provided in languages other than English whenever possible. Disability advocates will be engaged to address the needs of people with qualified disabilities such as low vision/blind, deaf/hearing impaired, illiterate and those with cognitive and/or behavioral disabilities.
- f. Following engagement, a member of the Outreach and Engagement Team will provide a summary of outreach and engagement efforts to the Community Services Agency – Housing and Homeless Division by sending an email to csoc@stancounty.com

5. Notice to Vacate

Generally, local law enforcement will post a 72-hour notice to vacate in English and Spanish to encampment inhabitants outlining intention to clean up garbage and debris. The 72-hour notice allows for inhabitants to retrieve any of their personal belongings. It will be left to the discretion of the local law enforcement if there are situations in which a 72-hour notice will not be provided. See APPENDIX C.

6. Removal of Garbage and Debris Procedure

Upon expiration of the Notice to Vacate, abatement workers may proceed with removal of the encampment using the following procedure:

- a. Local law enforcement will create a safe work environment and maintain public safety for all.
- b. A field review of the encampment will take place and photographs will be taken to document the condition and extent of area covered by the encampment pre- and post-removal of garbage and debris.
- c. Staff shall keep a record of the date and time of removal.
- d. If any items of value are identified such as ID/Social Security cards, or tax and medical records and collected they will be stored at a facility identified by the lead removal agency for a minimum of 60 days prior to disposal.
- e. A “Notice of Collected Property” (see APPENDIX D) shall be posted where the original “Notice to Vacate” was previously posted and will contain a retrieval phone number. Possessions are to be released to persons who can identify them in accordance with lead removal agency policy.

- f. Any weapons, illegal drugs, or contraband found will be turned over to local law enforcement.
- g. Abatement workers assigned to encampment duty shall take appropriate safety precautions regarding hazardous waste materials.

7. Preventing Re-Establishment of Encampments

Local jurisdictions are encouraged to take steps to limit and discourage the re-establishment of encampments once they have been removed. Activities may include, but are not limited to:

- a. Posting signs displaying messages such as “No Camping” or “No Trespassing” and include the telephone number for the appropriate jurisdiction to which questions should be addressed
- b. Providing routine patrol of the area to prevent the reformation of an encampment. The routine patrol to be provided by the local law enforcement agency.

8. Applicable Locations

The SCRG is designed to direct the activities of the local jurisdictions when responding to individuals experiencing homelessness. See APPENDIX E for a list of local jurisdictions and agencies that have adopted use of the SCRG.

APPENDIX A
Public Health COVID-19 Guidance

Protecting Health and Well-being of People in Encampments During an Infectious Disease Outbreak

March 26, 2020



Providing Safer Options and Meaningful Choices to People Who are Unsheltered

People who are unsheltered, including those living in encampments during public health emergencies, such as the COVID-19 outbreak, need targeted support to avoid becoming sick and to continue receiving life-sustaining supplies like food and water. Adequately providing safe environments and reducing risks of infections may not be fully achievable in many outdoor settings. Therefore, Continuums of Care (CoCs) should work in close consultation with their local/state public health agencies and their local/state emergency management offices to develop the strongest possible approaches to protect the health and well-being of people who are currently unsheltered. Such strategies are vitally important both to better protect the people who are unsheltered themselves, many of whom have underlying health conditions and are therefore at higher risk of becoming very sick or of dying, but also to reduce community spread of infections, to help “flatten the curve” of infections, and to support the capacity of local health care systems to meet local needs.

This information should in no way be read as indicating that communities should be “sweeping” people who are unsheltered into indoor spaces, facilities, or institutions.

Do not clear encampments during community spread of COVID-19 unless you have real-time access to individual rooms or units for ALL households in the encampment and a clear plan to safely transport those households. Clearing encampments without these measures in place causes people to disperse throughout the community and break connections with service providers, increasing the potential for infectious disease spread.

Protecting the Health of People Who Remain Unsheltered

The following guidance focuses on steps that should be taken to better protect the health and well-being of people who will remain unsheltered during the COVID-19 outbreak, either because their community is not able to provide an adequate supply of alternative safe living arrangements or because the individual has determined that remaining unsheltered is their safer alternative.

Continuums of Care (CoCs) should confirm the status and contingency plans for outreach services that will be necessary to support the strategies and activities described below. Outreach services must also be adequately equipped and trained to protect their own health as well as the people that are enduring unsheltered homelessness.

Sanitation and Safety: Sanitation and social isolation practices are important to limit the spread of infection among people living in encampments and other spaces not meant for human habitation.

- Encourage people staying in encampments to set up their tents/sleeping quarters with at least 12 feet x 12 feet of space per individual. (Note: It will be especially important to offer alternative living arrangement options for people in encampments in which such spacing protocols cannot be achieved.)

During community spread of COVID-19, encampments may be the most immediate reasonable alternative to congregate shelters.

- Coordinate with public health and emergency management officials to ensure that an [encampment cleaning schedule](#) is implemented. Appropriate cleaning and disinfecting measures to support the health of encampment residents may assist in reducing the risk for infection.
- Ensure nearby restroom facilities have functional water taps, are stocked with hand hygiene materials (soap, drying materials) and bath tissue, and remain open to people experiencing homelessness 24 hours per day – and these facilities must be regularly cleaned and sanitized.
- Public facilities may be closed for an extended period of time or may not be accessible to encampment residents. If toilets or handwashing facilities are not available nearby, provide access to portable latrines with handwashing facilities for encampments of more than 10 people. Pursue options for mobile hand washing stations and portable latrines through public health or local offices of emergency management. All of these facilities must be cleaned and sanitized at least once daily.
- Provide hand sanitizer and other hygiene products to encampment residents on a regular basis.
- Communicate about practices that help people stay safer like washing hands, covering coughs, maintaining distance.
- In coordination with local healthcare providers and public health, establish a set protocol for reporting symptoms and coordinating medical care when concerned about an encampment resident's health.
- Engage encampment residents from 6 feet away and explain the reason for the precaution.
- Street Outreach staff should wash hands thoroughly before, during, and after visiting an encampment. Review the Centers for Disease Control and Prevention's protocols for homeless services outreach staff outlined here: [Interim Guidance for Responding to Coronavirus Disease 2019 \(COVID-19\) among People Experiencing Unsheltered Homelessness](#)

Access to food and water: CoCs should ensure that an organization is identified to deliver these life-sustaining commodities. Local non-profits and voluntary organizations may be limiting volunteer options during this time of increased risk. Once aware that encampment residents have lost reliable sources of food and water, CoCs should immediately alert local or state offices of emergency management to ensure residents have restored access to these vital resources.

Service Coordination: During this time of enhanced risk and reduced service delivery, consider documenting an outreach schedule that includes local emergency response officials. Clear articulation of which entity is delivering what commodity at what location is important to ensure no gaps emerge.

- Reach out to partners for support: Engage street medicine teams, Healthcare for the Homeless agencies, public health agencies, law enforcement partners.
- Consider offering opportunities for unsheltered individuals to be tested for COVID-19 when field tests become available. A symptom screening tool may assist in making that decision. An example of a symptom screening tool is posted on the HUD Exchange here:
 - [COVID-19 Client Triage Tool: Atlanta, GA CoC Example](#)

Related Resources

[Preventing and Managing the Spread of Infectious Disease within Encampments](#) (Department of Housing and Urban Development)

Ask A Question

Submit questions to the [Ask A Question \(AAQ\) portal](#). In Step 2 of the question submission process, select “CoC: Continuum of Care Program” from the “My question is related to” drop down list and write “Health Preparedness and Response” in the subject line.

This resource is prepared by TA providers and intended to help recipients and subrecipients understand the ESG Program Interim Rule. Always refer to the program regulations to ensure compliance with program requirements. The contents of this document, except when based on statutory or regulatory authority or law, do not have the force and effect of law and are not meant to bind the public in any way. This document is intended only to provide clarity to the public regarding existing requirements under the law or agency policies.

For most up-to-date guidelines on COVID-19, please visit <http://schsa.org/publichealth/pages/corona-virus/>
For local information, please call (209) 558-7535

APPENDIX B
Resource Flyers (Access Center)

*Through dignity and respect,
empowering people at-risk or experiencing
homelessness toward a hopeful and independent life.*



**Visit the
Access Center**
For help with these services:

Centralized Homelessness
Outreach and Engagement

Housing Assessments and Navigation

Homelessness Support
Services Referrals

Homeless Court
Outreach & Navigation



*Are you currently
homeless and
need help now?*

You have options...

Call the Access Center for personal, no-fee assistance with housing and other services.
Monday - Friday, 8am-5pm
(209) 272-8800

Dial 211 from any phone in Stanislaus County for free, 24/7 assistance to the thousands of vital services available to you or call **1(877)211-7826**

The Access Center is located at 912 D Street in Modesto.

The Access Center is part of Stanislaus County's efforts to serve individuals at risk or currently experiencing homelessness. The Access Center provides a physical entry point with multiple co-located partners to centralize connections to housing, treatment services, and benefits and help to navigate the wide range of services that are available throughout the county.

The Access Center has a unique "meet you where you are" strategy to remove barriers, build trust, and establish relationships with 'individuals who are homeless in our county. Through daily engagement, the Access Center's trained and compassionate staff facilitate and link individuals with the appropriate supportive services to help them escape homelessness.



(209) 272-8800

The effort is not about the building, it's truly about **partnership, collaboration, & the willingness to serve and build hopefulness.**



Visit the
Access Center

912 D Street
Modesto, CA 95354

Call Us
(209) 272-8800



The Access Center is made possible through the collaborative efforts of ten sectors of the community in alignment with Focus on Prevention.



Sponsored by the
Stanislaus County
Board of Supervisors

Access Center
Stanislaus County

APPENDIX C
72-Hour Notice to Vacate

NOTICE TO VACATE

DEBRIS REMOVAL

DATE AND TIME OF POSTING:

10:00 AM, October 15, 2019

LOCATION:

ALLEY BETWEEN BUTTE AVE & COLUSA AVE

BETWEEN EURKEA ST & CROWS LANDING RD

THE COUNTY HAS DEEMED THIS SITE UNINHABITABLE AND ALL PERSONS ARE DIRECTED TO VACATE THIS SITE AND REMOVE ANY PERSONAL BELONGINGS.

CLEANUP AT THIS SITE WILL BEGIN

AT: 10:00 AM

DATE: FRIDAY, OCTOBER 18, 2019

ANY PROPERTY LEFT AT THIS SITE AT THE TIME OF CLEANUP MAY BE REMOVED FROM THE SITE AND DISCARDED OR STORED BY THE COUNTY.

**IF YOU HAVE ANY QUESTIONS AND/OR CONCERNS, PLEASE CALL
CODE ENFORCEMENT AT 209-525-6700**

APPENDIX D
Notice of Collected Property



Modesto Police Department
600 10th Street
Modesto, CA 95354

APPENDIX D

Galen Carroll, Chief of Police

Property Receipt

Owner/Finder: _____

Case #: _____

Date: _____

SAFEKEEPING

- ☐ Property belonging to you has been submitted for temporary safekeeping and must be claimed within 60 days. Property not claimed within 60 days will be disposed of. Photo identification is required for all property to be released.

Options for the retrieval of Safekeeping Property:

- If you are unable to claim your property within 60 days, you may authorize in writing another person to pick it up for you. Your representative will be required to present photo identification at the time the property is being released.
- If you are incarcerated, you must notify the Evidence/Property Unit in writing to hold the property. Items will not be held for longer than an additional 10 months (2080.10 CCP).

FOUND

- ☐ Finder You are eligible to claim found property if it has not been claimed prior to 90 days. Prior to 90 days after finding the property, you must notify the Evidence/Property Unit in writing if you would like to claim the property. The property will be held for 30 more days (120 in total) for you to retrieve the property. If the property is not claimed within this time the property will be auctioned or disposed of. Photo identification is required for all property to be released.

SAFEKEEPING FIREARMS

- ☐ All firearms taken by the Modesto Police Department must be released pursuant to 33850 PC. Unregistered assault weapons will not be returned per 30900(b)(1) PC. Contact the Evidence/Property Unit for firearm retrieval instructions.

EVIDENCE

- ☐ You will be notified by mail to claim items that have been retained as evidence. Once notifications have been sent, you will have 30 days to claim your property.

Description of Property/Comments:

Proof of ownership is required for property release.

Owner/Finder Signature _____

Date _____

Officer Signature/IBM # _____

Date _____

Modesto Police Department- Property & Evidence (209) 572-9601

1124 F Street

Modesto CA 95354

Property is released on Tuesday or Thursday from 9:00am – 2:00pm or by appointment.

APPENDIX E
Participating Local Jurisdictions and Agencies

This Protocol has been signed by the parties or their duly authorized representatives to become effective as of the date signed.

Our signatures below signify our commitment to the SCRG Protocol.


Jody Hayes (Jun 24, 2021 16:55 PDT)

Jody Hayes, Chief Executive Officer
County of Stanislaus

Jun 24, 2021

Date



Joseph Lopez
City of Modesto

May 10, 2021

Date



Tom Westbrook
City of Ceres

Apr 14, 2021

Date



Mary Mayhew
City of Hughson

Mar 9, 2021

Date

Todd James

Digitally signed by Todd James
Date: 2020.12.03 09:29:46
-08'00'

Todd James, Deputy County Counsel
County of Stanislaus

Date

NA

Dan Madden
City of Turlock

Date


Sean Scully (Mar 24, 2021 10:45 PDT)

Sean Scully
City of Riverbank

Mar 24, 2021

Date


Ken Irwin (Feb 9, 2021 13:35 PST)

Ken Irwin
City of Patterson

Feb 9, 2021

Date

Michael E Holland

Michael E Holland (Sep 17, 2021 10:05 PDT)

Michael Holland

City of Newman

Sep 17, 2021

Date

Michael Pitcock

Michael Pitcock (Mar 29, 2021 11:26 PDT)

Michael Pitcock

City of Waterford

Mar 29, 2021

Date

Date

Date

Bryan Whitemyer

Bryan Whitemyer (Aug 31, 2021 08:22 PDT)

Brian Whitemyer

City of Oakdale

Aug 31, 2021

Date

Date

Date

Date

1D-1. Local Competition Scoring Tool

- Pages 2 – 5:
 - CA-510 FY26 CoC NOFO Renewal Project Scoring Tool
- Pages 6 – 10:
 - CA-510 FY26 CoC NOFO New TH Project Scoring Tool
- Pages 11 – 13:
 - CA-510 FY26 CoC NOFO New SSO Project Scoring Tool
- Pages 14 – 17:
 - CA-510 FY26 CoC NOFO New SO Project Scoring Tool
- Pages 17 – 22:
 - Example of scored renewal project: Permanent Supportive Housing Families with Children #1

CA-510 FY26 CoC NOFO Renewal Project Scoring Tool

Performance Evaluation Criteria	Description	Benchmark	Maximum Points
A. PERFORMANCE OUTCOMES: Outcomes that contribute to system performance measures, specifically if the project has been performing satisfactorily and effectively addressing the need(s) for which it was designed. Keep in mind that outcomes will naturally be lower for populations with more severe needs, like those with mental and/or substance use issues or those experiencing chronic homelessness. All objective scores from the APR and other data sources are rounded to the nearest whole number.			
A1. Exits to Housing / Housing Retention (System Performance Measure)	PSH - Percentage of all living participants who remain in PSH or exited to a positive housing destination	> or equal to 95% = 10 points 90 - 94.9% = 8 points 85 - 89.9% = 6 points 80 - 84.9% = 4 points 75 - 79.9% = 2 points <75% = 0 points	10
	TH - Percentage of all participants who exited to a positive housing destination	> or equal to 80% = 10 points 75 - 79.9% = 8 points 70 - 74.9% = 6 points 65 - 69.9% = 4 points 60 - 64.9% = 2 points <60% = 0 points	
A2. Returns to Homelessness (System Performance Measure)	Percentage of all participants who returned to homelessness within 24 months after exiting to a positive housing destination	< or equal to 15% = 20 points 15.1 - 20% = 16 points 20.1 - 25% = 12 points 25.1 - 30% = 8 points 30.1 - 35% = 4 points >35% = 0 points	20
A3. Employment Income (System Performance Measure)	Percentage of adult participants who gained or increased employment income	> or equal to 40% = 10 points 30 - 39.9% = 8 points 20 - 29.9% = 6 points 10 - 19.9% = 4 points 5 - 9.9% = 2 points <5% = 0 points	10

A4. Non-Cash Benefits that Increase Non-Cash Income (System Performance Measure)	Percentage of adult participants who receive non-employment income from any source, based on last annual assessment for stayers and based on exit for leavers	> or equal to 50% = 5 points 40 - 49.9% = 4 points 30 - 39.9% = 3 points 20 - 29.9% = 2 points 10 - 19.9% = 1 points <10% = 0 points	5
B. COMMUNITY OUTCOMES: Objective outcomes that contribute to the community success of the homelessness system as a whole. Is the project's work consistent with community needs and does it consider the severity of the needs and vulnerabilities experienced by program participants in their provision of services? All objective scores from the APR and other data sources are rounded to the nearest whole number.			
B1. Utilization Rates	The percentage of units that were utilized over the FY23 grant year	> or equal to 95% = 23 points 90 - 94.9% = 20 points 85 - 89.9% = 16 points 80 - 84.9% = 12 points 75 - 79.9% = 8 points 70 - 74.9% = 4 points <70% = 0 points	23
B2. Supportive Service Participation Requirements	Describe if your project requires program participants to take part in supportive services (i.e., case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h) by providing direct language from supportive service agreements (contract, occupancy agreement, or equivalent)	Full points if project has supportive service participation requirements	2

B3. Serving Priority Populations	Demonstrate the project serves a priority population. According to NOFO policy, priority populations include: disabled, families, older adults, and DV survivors	The project must indicate in their FY24 esnaps application that they have a preference for serving at least one of these populations in addition to serving at least half of that subpopulation in the FY23 grant period. 5 points will be awarded to projects that serve a special population, but less than half of the households from FY23 were in that subpopulation. If there is more than one priority population, those households will be added together to compare against the total households.	10
B4. Lived Experience Decision Making / Feedback Process	Demonstrate a process to incorporate client feedback into program design and improvement and involving people with lived experience in decision making processes	1 point for incorporating client feedback 1 point for including PWLE in decisionmaking	2
C. HMIS DATA. All objective scores from the APR and other data sources are rounded to the nearest whole number.			
C1. Complete Data	Percentage of HMIS Universal Data Elements that are incomplete	< or equal to 5% = 1 point >5% = 0 points	1
C2. Exits to Known Destinations	Percentage of participants who exit to unknown destinations as recorded in HMIS	< or equal to 5% = 1 point >5% = 0 points	1

C3. Data Quality Reports	Number of monthly data quality reports submitted for calendar year 2025 (out of 11 required reports)	11 months = 2 points 10 months = 1 point < or equal to 9 months = 0 points	2
D. AGENCY CAPACITY: Measures agency's capacity to operate CoC Program funding based on grant management (D1 and D2) and organizational capacity (D3 and D4). All objective scores from the APR and other data sources are rounded to the nearest whole number.			
D1. Quarterly Grant Spending	Does the agency draw funds quarterly for the current renewal project?	Each quarter of the year = 1 point; remove points for each quarter funds were not drawn	4
D2. Grant Spenddown	What percentage of funds were spent down in FY23?	100% = 19 points 95 - 99.9% = 16 points 90 - 94.9% = 13 points 85 - 89.9% = 10 points 80 - 84.9% = 7 points 75 - 79.9% = 4 points <75% = 0 points	19
D3. Timely Submission of APR	Did the agency submit the FY23 APR on time?	Submitted on time = Full points Did not submit on time = 0 points	2.5
D4. Unresolved HUD Monitoring / OIG Audit Findings	Does the agency have any unresolved HUD monitoring or OIG audit finding(s) concerning any previous grant term related to the renewal project?	No = Full points Yes = 0 points (partial points considered if there is a plan in place to resolve)	2.5
		Total points	114

CA-510 FY26 CoC NOFO New TH Project Scoring Tool

Performance Evaluation Criteria	Description	Benchmark	Maximum Points
A. HUD REQUIREMENTS: Requirements as outlined in the FY26 NOFO			
A1. Prior Experience with Program Design	The applicant has prior experience operating transitional housing or other projects that have successfully helped homeless individuals and families exit homelessness within 24 months or has a plan in place to ensure homeless individuals and families will exit homelessness within 24 months	Applicant has detailed and realistic plan to operate transitional housing within HUD's guidelines. Only applicants who can demonstrate experience operating TH within these guidelines will receive full points.	2.5
A2. Reduce Returns to Homelessness (System Performance Measure)	The applicant has previously operated or currently operates transitional housing or another homelessness project, or has a plan in place to ensure, that less than 20% of participants who exit to permanent housing destinations will return to homelessness up to 24 months after that exit	Applicant has detailed and realistic plan that <20% of clients return to homelessness after 24 months of exiting to permanent housing destinations. Partial points may be awarded.	20
A3. Employment Income (System Performance Measure)	The applicant has previously operated or currently operates transitional housing or another homelessness project, or has a plan in place to	Applicant has detailed and realistic plan to ensure at least 50% of participants exit with	10

	ensure, that at least 50% of participants exit with employment income as reflected in HMIS or another data system used by the applicant	employment income. Partial points may be awarded.	
A4. Positive Exits	The applicant has previously operated or currently operates transitional housing or another homelessness project, or has a plan in place to ensure, that at least 50% of participants exit to a positive housing destination within 24 months as reflected in HMIS or another data system used by the applicant	Applicant has detailed and realistic plan to ensure at least 50% of participants exit to positive housing destinations. Partial points may be awarded.	2.5
A5. Mainstream Resources / Non-Cash Benefits to Increase Non-Cash Income (System Performance Measure)	The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP	For full points, e-snaps application must indicate a breadth of resources that will be available to participants and plan to connect. Partial points may be awarded.	5
A6. Supportive Service Participation Requirements	Demonstrate that the project requires program participants to take part in supportive services (i.e., case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h) by providing direct language from supportive service agreements (contract, occupancy agreement, or equivalent). Note that this is a threshold requirement and	Adequate supportive services + adequate service agreement language = 20 points Adequate supportive services + inadequate agreement = 15 points Inadequate supportive services	20

	your application will be rejected if you do not meet the requirements. Demonstrate that the project will provide and/or partner with other organizations to provide eligible supportive services that are necessary to assist program participants to obtain and maintain housing.	+ adequate agreement = 10 points Inadequate supportive services + inadequate agreement = <5 points (discretion of R&R)	
A7. Individualized Services and Service Plans	Applicant has demonstrated that they will provide individualized services for all participants (except those exempt as described in the NOFO) that will result in at least 20 hours per week and will create service plans for each participant that include which services are provided, when and how often, by whom, participant goals, strategies, and target dates to focus on improved health and wellness, housing stability, and increased employment income leading to financial stability and self-sufficiency. The 20 hours per week of engagement services, activities, or employment is for all program participants. This is a threshold requirement and your application will be rejected if you do not meet the requirements.	To receive full points, the described service plan with at least 20 hours per week of services must demonstrate individualized planning with participant choice and include the requirements as described.	5

A8. Treatment and Recovery	Describe any on-site substance use services that will be provided for program participants. If the project is designed as sober housing as described by HUD in the NOFO, the applicant must details the project design, including any agreements the participants must abide by as it pertains to using substances while in housing and how the program will handle relapses.	A sober housing project that is designed to assist program participants in maintaining sobriety while avoiding unnecessary exits to homelessness will receive 5 points. A project that has on-site substance use services and describes the associated treatment provider(s) will receive 5 points. Partial points may be awarded.	5
B. COMMUNITY OUTCOMES: Objective outcomes that contribute to the community success of the homelessness system as a whole. Will the project address community needs and does it consider the severity of the needs and vulnerabilities experienced by program participants in their provision of services?			
B1. Bed/Unit Utilization	Demonstrate how the project will maintain high bed/unit utilization rates (over 90%)	Applicant has detailed and realistic plan to maintain >90% bed utilization. Partial points may be awarded.	20
B2. Lived Experience Decision Making / Feedback Process	Demonstrate a process to incorporate client feedback into program design and improvement and involving people with lived experience in decision making processes	1 point for incorporating client feedback 1 point for including PWLE in decisionmaking	2

B3. Serving Priority Populations	Demonstrate the project plans to serves a priority population. According to NOFO policy, priority populations include: disabled, families, older adults, and DV survivors	The project must indicate in the project application that this population is a priority in addition to explaining how many households they anticipate serving that meet that subpopulation, which must be at least half.	5
C. AGENCY CAPACITY: Measures agency's capacity to operate CoC Program funding.			
C1. Grant Management Experience	What experience does this agency have with spending federal grant dollars?	Agencies with experience fully spending grant funds will receive full points. Partial points may be awarded.	10
C2. Organizational Capacity	Does the agency have the financial and organizational systems in place to successfully manage this grant? Does the agency have any unresolved HUD monitoring or OIG audit finding(s)?	Agencies with exceptional systems and no unresolved findings will receive full points. Partial points may be awarded.	2
C3. HMIS Data Quality	Does the agency have the capacity to follow the HMIS policies and procedures, including timely and comprehensive data entry, confidentiality, and data quality?	Agencies who grasp the complexity of HMIS data entry and have a plan in place to comply will be awarded full points. Partial points may be awarded.	5
		Total points	114

CA-510 FY26 CoC NOFO New SSO Project Scoring Tool

Performance Evaluation Criteria	Description	Benchmark	Maximum Points
A. HUD REQUIREMENTS: Requirements as outlined in the FY26 NOFO			
A1. Necessity of Project	The Supportive Services project is necessary to assist people in exiting homelessness, addressing barriers to stable housing (e.g., substance use disorder, unemployment, childcare, etc.) and increasing self-sufficiency and the Recipient will conduct an annual assessment of the service needs of the program participants.	Applicants who demonstrate the necessity of the project, adequately describe barriers to stable housing and self-sufficiency, and explain their process for conducting annual assessments will receive full points. Partial points may be awarded.	3
A2. Providing Supportive Services to Eligible Program Participant	The proposed project has a strategy for providing supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services.	Applicants who demonstrate a detailed and realistic strategy with the eligible and target populations as described will receive full points. Partial points may be awarded.	5
A3. Mainstream Resources / Non-Cash Benefits to Increase Non-Cash Income (System Performance Measure)	The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP	For full points, application must indicate a breadth of resources that will be available to participants and plan to connect. Partial points may be awarded.	9

A4. Exits to Emergency Shelter, Transitional Housing, or Permanent Housing (System Performance Measure)	The proposed project has a strategy for ensuring participants exit to ES, TH, or PH as opposed to exiting to unsheltered homelessness.	For full points, applicant must demonstrate knowledge of successful case management and exit planning strategies	13
A5. Employment Income (System Performance Measure)	The proposed project has a strategy for increasing employment income for participants to increase self-sufficiency	For full points, applicant must demonstrate detailed and realistic plan and include outcome metrics	23
B. COMMUNITY OUTCOMES: Objective outcomes that contribute to the community success of the homelessness system as a whole. Will the project address community needs and does it consider the severity of the needs and vulnerabilities experienced by program participants in their provision of services?			
B1. Number of Households Served and Cost per Household	The number of people served is realistic and will benefit the community. Demonstrate the average cost per household served for the project is reasonable. 2 CFR 200.404.	Full points will be awarded to projects that have a reasonable cost per household according to HUD guidance and that plan to serve an impactful number of households that experience homelessness. Partial points may be awarded.	23
B2. Lived Experience Decision Making / Feedback Process	Demonstrate a process to incorporate client feedback into program design and improvement and involving people with lived experience in decision making processes	1 point for incorporating client feedback 1 point for including PWLE in decision-making	2

B3. Serving Priority Populations	Demonstrate the project plans to serves a priority population. According to NOFO policy, priority populations include: disabled, families, older adults, and DV survivors	The project must indicate in the project application that this population is a priority in addition to explaining how many households they anticipate serving that meet that subpopulation, which must be at least half.	5
C. AGENCY CAPACITY: Measures agency's capacity to operate CoC Program funding.			
C1. Grant Management Experience	What experience does this agency have with spending federal grant dollars?	Agencies with experience fully spending grant funds will receive full points. Partial points may be awarded.	13
C2. Organizational Capacity	Does the agency have the financial and organizational systems in place to successfully manage this grant? Does the agency have any unresolved HUD monitoring or OIG audit finding(s)?	Agencies with exceptional systems and no unresolved findings will receive full points. Partial points may be awarded.	5
C3. HMIS Data Quality	Does the agency have the capacity to follow the HMIS policies and procedures, including timely and comprehensive data entry, confidentiality, and data quality?	Agencies who grasp the complexity of HMIS data entry and have a plan in place to comply will be awarded full points. Partial points may be awarded.	13
		Total points	114

CA-510 FY26 CoC NOFO New SO Project Scoring Tool

Performance Evaluation Criteria	Description	Benchmark	Maximum Points
A. HUD REQUIREMENTS: Requirements as outlined in the FY26 NOFO			
A1. Street Outreach Activities and Successful Exits from Homelessness (System Performance Measure)	The applicant has experience providing outreach services, or a plan for providing outreach services, consistent with the activity description of 24 CFR 578.53(e)(13) and has a plan for or has demonstrated effectiveness at helping people successfully exit from places not meant for human habitation to emergency shelter, treatment programs, transitional housing or permanent housing programs.	Applicants with experience who demonstrate a detailed and realistic strategy will receive full points. For full points, applicant must demonstrate knowledge of successful case management and exit planning strategies. Partial points may be awarded.	20
A2. Mainstream Resources / Non-Cash Benefits to Increase Non-Cash Income (System Performance Measure)	The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP	For full points, e-snaps application must indicate a breadth of resources that will be available to participants and plan to connect. Partial points may be awarded.	6
A3. Employment Income (System Performance Measure)	The proposed project has a strategy for increasing employment income for participants to increase self-sufficiency	For full points, applicant must demonstrate detailed and realistic plan and include outcome metrics	10

A4. Partnering with Law Enforcement	Demonstrate that the applicant has a history of, or a plan for, partnering with first responders and law enforcement to engage people living in places not meant for human habitation to access emergency shelter, treatment programs, reunification with family, transitional housing or independent living. The applicant must cooperate and not interfere or impede with the enforcement of local laws such as public camping and public drug use laws.	For full points, applicant must demonstrate history and include a detailed plan that meets the requirements. Partial points may be awarded.	20
A5. Providing Supportive Services to Eligible Program Participants	The proposed project has a strategy for providing supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services.	Applicants who demonstrate a detailed and realistic strategy with the eligible and target populations as described will receive full points. Partial points may be awarded.	7
B. COMMUNITY OUTCOMES: Objective outcomes that contribute to the community success of the homelessness system as a whole. Will the project address community needs and does it consider the severity of the needs and vulnerabilities experienced by program participants in their provision of services?			
B1. Number of Households Served and Cost per Household	The number of people served is realistic and will benefit the community. Demonstrate the average cost per household served for the project is reasonable. 2 CFR 200.404.	Full points will be awarded to projects that have a reasonable cost per household according to HUD guidance and that plan to serve an impactful number of households that	20

		experience homelessness. Partial points may be awarded.	
B2. Lived Experience Decision Making / Feedback Process	Demonstrate a process to incorporate client feedback into program design and improvement and involving people with lived experience in decision making processes	1 point for incorporating client feedback 1 point for including PWLE in decisionmaking	2
B3. Serving Priority Populations	Demonstrate the project plans to serves a priority population. According to NOFO policy, priority populations include: disabled, families, older adults, and DV survivors	The project must indicate in the project application that this population is a priority in addition to explaining how many households they anticipate serving that meet that subpopulation, which must be at least half.	6
C. AGENCY CAPACITY: Measures agency's capacity to operate CoC Program funding.			
C1. Grant Management Experience	What experience does this agency have with spending federal grant dollars?	Agencies with experience fully spending grant funds will receive full points. Partial points may be awarded.	10
C2. Organizational Capacity	Does the agency have the financial and organizational systems in place to successfully manage this grant? Does the agency have	Agencies with exceptional systems and no unresolved findings will	3

	any unresolved HUD monitoring or OIG audit finding(s)?	receive full points. Partial points may be awarded.	
C3. HMIS Data Quality	Does the agency have the capacity to follow the HMIS policies and procedures, including timely and comprehensive data entry, confidentiality, and data quality?	Agencies who grasp the complexity of HMIS data entry and have a plan in place to comply will be awarded full points. Partial points may be awarded.	10
		Total points	114

Renewal PSH Rubric – Permanent Supportive Housing Families with Children #1

Performance Evaluation Criteria	Description	Benchmark	Project Score based on Objective Data	Points Awarded by Review Committee	Maximum Points
A1. Exits to Housing / Housing Retention (System Performance Measure)	PSH - Percentage of all living participants who remain in PSH or exited to a positive housing destination	> or equal to 95% = 10 points 90 - 94.9% = 8 points 85 - 89.9% = 6 points 80 - 84.9% = 4 points 75 - 79.9% = 2 points <75% = 0 points	100%	10	10
	TH - Percentage of all participants who exited to a	> or equal to 80% = 10 points 75 - 79.9% = 8 points			

	positive housing destination	70 - 74.9% = 6 points 65 - 69.9% = 4 points 60 - 64.9% = 2 points <60% = 0 points			
A2. Returns to Homelessness (System Performance Measure)	Percentage of all participants who returned to homelessness within 24 months after exiting to a positive housing destination	< or equal to 15% = 20 points 15.1 - 20% = 16 points 20.1 - 25% = 12 points 25.1 - 30% = 8 points 30.1 - 35% = 4 points >35% = 0 points	0%	20	20
A3. Employment Income (System Performance Measure)	Percentage of adult participants who gained or increased employment income	> or equal to 40% = 10 points 30 - 39.9% = 8 points 20 - 29.9% = 6 points 10 - 19.9% = 4 points 5 - 9.9% = 2 points <5% = 0 points	0%	0	10
A4. Non-Cash Benefits that Increase Non-Cash Income (System Performance Measure)	Percentage of adult participants who receive non-employment income from any source, based on last annual assessment for stayers and based on exit for leavers	> or equal to 50% = 5 points 40 - 49.9% = 4 points 30 - 39.9% = 3 points 20 - 29.9% = 2 points 10 - 19.9% = 1 point <10% = 0 points	100%	5	5

B1. Utilization Rates	The percentage of units that were utilized over the FY23 grant year	> or equal to 95% = 23 points 90 - 94.9% = 20 points 85 - 89.9% = 16 points 80 - 84.9% = 12 points 75 - 79.9% = 8 points 70 - 74.9% = 4 points <70% = 0 points	100%	23	23
B2. Supportive Service Participation Requirements	Describe if your project requires program participants to take part in supportive services (i.e., case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h) by providing direct language from supportive service agreements (contract, occupancy agreement, or equivalent)	Full points if project has supportive service participation requirements	N/A - Scored by Panel	0	2
B3. Serving Priority Populations	Demonstrate the project serves a priority population. According to	The project must indicate in their FY24 esnaps application that they have a preference for	Family is a priority population and project served 4 / 4	10	10

	NOFO policy, priority populations include: disabled, families, older adults, and DV survivors	serving at least one of these populations in addition to serving at least half of that subpopulation in the FY23 grant period. 5 points will be awarded to projects that serve a special population, but less than half of the households from FY23 were in that subpopulation. If there is more than one priority population, those households will be added together to compare against the total households.	households with families		
B4. Lived Experience Decision Making / Feedback Process	Demonstrate a process to incorporate client feedback into program design and improvement and involving people with lived experience in decision making processes	1 point for incorporating client feedback 1 point for including PWLE in decisionmaking	N/A - Scored by Panel	1	2
C1. Complete Data	Percentage of HMIS Universal Data Elements that are incomplete	< or equal to 5% = 1 point >5% = 0 points	0%	1	1
C2. Exits to Known Destinations	Percentage of participants who exit to unknown	< or equal to 5% = 1 point >5% = 0 points	0%	1	1

	destinations as recorded in HMIS				
C3. Data Quality Reports	Number of monthly data quality reports submitted for calendar year 2025 (out of 11 required reports)	11 months = 2 points 10 months = 1 point < or equal to 9 months = 0 points	11 months	2	2
D1. Quarterly Grant Spending	Does the agency draw funds quarterly for the current renewal project?	Each quarter of the year = 1 point; remove points for each quarter funds were not drawn	Q1 = Drew 12% funds Q2 = Drew 34% funds Q3 = Drew 61% funds Q4 = Drew 87% funds	4	4
D2. Grant Spenddown	What percentage of funds were spent down in FY23?	100% = 19 points 95 - 99.9% = 16 points 90 - 94.9% = 13 points 85 - 89.9% = 10 points 80 - 84.9% = 7 points 75 - 79.9% = 4 points <75% = 0 points	94%	13	19
D3. Timely Submission of APR	Did the agency submit the FY23 APR on time?	Submitted on time = Full points Did not submit on time = 0 points	APR due 10/29/2025 Submitted on 9/17/2025	2.5	2.5
D4. Unresolved HUD Monitoring / OIG Audit Findings	Does the agency have any unresolved HUD monitoring or OIG audit finding(s)	No = Full points Yes = 0 points (partial points considered if there is a plan in place to resolve)	N/A - Scored by Panel	2.5	2.5

	concerning any previous grant term related to the renewal project?				
			Total points	95	114

1D-1. Local Competition Scoring Tool

- Pages 2 – 5:
 - CA-510 FY26 CoC NOFO Renewal Project Scoring Tool
- Pages 6 – 10:
 - CA-510 FY26 CoC NOFO New TH Project Scoring Tool
- Pages 11 – 13:
 - CA-510 FY26 CoC NOFO New SSO Project Scoring Tool
- Pages 14 – 17:
 - CA-510 FY26 CoC NOFO New SO Project Scoring Tool
- Pages 17 – 22:
 - Example of scored renewal project: Permanent Supportive Housing Families with Children #1

CA-510 FY26 CoC NOFO Renewal Project Scoring Tool

Performance Evaluation Criteria	Description	Benchmark	Maximum Points
A. PERFORMANCE OUTCOMES: Outcomes that contribute to system performance measures, specifically if the project has been performing satisfactorily and effectively addressing the need(s) for which it was designed. Keep in mind that outcomes will naturally be lower for populations with more severe needs, like those with mental and/or substance use issues or those experiencing chronic homelessness. All objective scores from the APR and other data sources are rounded to the nearest whole number.			
A1. Exits to Housing / Housing Retention (System Performance Measure)	PSH - Percentage of all living participants who remain in PSH or exited to a positive housing destination	> or equal to 95% = 10 points 90 - 94.9% = 8 points 85 - 89.9% = 6 points 80 - 84.9% = 4 points 75 - 79.9% = 2 points <75% = 0 points	10
	TH - Percentage of all participants who exited to a positive housing destination	> or equal to 80% = 10 points 75 - 79.9% = 8 points 70 - 74.9% = 6 points 65 - 69.9% = 4 points 60 - 64.9% = 2 points <60% = 0 points	
A2. Returns to Homelessness (System Performance Measure)	Percentage of all participants who returned to homelessness within 24 months after exiting to a positive housing destination	< or equal to 15% = 20 points 15.1 - 20% = 16 points 20.1 - 25% = 12 points 25.1 - 30% = 8 points 30.1 - 35% = 4 points >35% = 0 points	20
A3. Employment Income (System Performance Measure)	Percentage of adult participants who gained or increased employment income	> or equal to 40% = 10 points 30 - 39.9% = 8 points 20 - 29.9% = 6 points 10 - 19.9% = 4 points 5 - 9.9% = 2 points <5% = 0 points	10

A4. Non-Cash Benefits that Increase Non-Cash Income (System Performance Measure)	Percentage of adult participants who receive non-employment income from any source, based on last annual assessment for stayers and based on exit for leavers	> or equal to 50% = 5 points 40 - 49.9% = 4 points 30 - 39.9% = 3 points 20 - 29.9% = 2 points 10 - 19.9% = 1 points <10% = 0 points	5
B. COMMUNITY OUTCOMES: Objective outcomes that contribute to the community success of the homelessness system as a whole. Is the project's work consistent with community needs and does it consider the severity of the needs and vulnerabilities experienced by program participants in their provision of services? All objective scores from the APR and other data sources are rounded to the nearest whole number.			
B1. Utilization Rates	The percentage of units that were utilized over the FY23 grant year	> or equal to 95% = 23 points 90 - 94.9% = 20 points 85 - 89.9% = 16 points 80 - 84.9% = 12 points 75 - 79.9% = 8 points 70 - 74.9% = 4 points <70% = 0 points	23
B2. Supportive Service Participation Requirements	Describe if your project requires program participants to take part in supportive services (i.e., case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h) by providing direct language from supportive service agreements (contract, occupancy agreement, or equivalent)	Full points if project has supportive service participation requirements	2

B3. Serving Priority Populations	Demonstrate the project serves a priority population. According to NOFO policy, priority populations include: disabled, families, older adults, and DV survivors	The project must indicate in their FY24 esnaps application that they have a preference for serving at least one of these populations in addition to serving at least half of that subpopulation in the FY23 grant period. 5 points will be awarded to projects that serve a special population, but less than half of the households from FY23 were in that subpopulation. If there is more than one priority population, those households will be added together to compare against the total households.	10
B4. Lived Experience Decision Making / Feedback Process	Demonstrate a process to incorporate client feedback into program design and improvement and involving people with lived experience in decision making processes	1 point for incorporating client feedback 1 point for including PWLE in decisionmaking	2
C. HMIS DATA. All objective scores from the APR and other data sources are rounded to the nearest whole number.			
C1. Complete Data	Percentage of HMIS Universal Data Elements that are incomplete	< or equal to 5% = 1 point >5% = 0 points	1
C2. Exits to Known Destinations	Percentage of participants who exit to unknown destinations as recorded in HMIS	< or equal to 5% = 1 point >5% = 0 points	1

C3. Data Quality Reports	Number of monthly data quality reports submitted for calendar year 2025 (out of 11 required reports)	11 months = 2 points 10 months = 1 point < or equal to 9 months = 0 points	2
D. AGENCY CAPACITY: Measures agency's capacity to operate CoC Program funding based on grant management (D1 and D2) and organizational capacity (D3 and D4). All objective scores from the APR and other data sources are rounded to the nearest whole number.			
D1. Quarterly Grant Spending	Does the agency draw funds quarterly for the current renewal project?	Each quarter of the year = 1 point; remove points for each quarter funds were not drawn	4
D2. Grant Spenddown	What percentage of funds were spent down in FY23?	100% = 19 points 95 - 99.9% = 16 points 90 - 94.9% = 13 points 85 - 89.9% = 10 points 80 - 84.9% = 7 points 75 - 79.9% = 4 points <75% = 0 points	19
D3. Timely Submission of APR	Did the agency submit the FY23 APR on time?	Submitted on time = Full points Did not submit on time = 0 points	2.5
D4. Unresolved HUD Monitoring / OIG Audit Findings	Does the agency have any unresolved HUD monitoring or OIG audit finding(s) concerning any previous grant term related to the renewal project?	No = Full points Yes = 0 points (partial points considered if there is a plan in place to resolve)	2.5
		Total points	114

CA-510 FY26 CoC NOFO New TH Project Scoring Tool

Performance Evaluation Criteria	Description	Benchmark	Maximum Points
A. HUD REQUIREMENTS: Requirements as outlined in the FY26 NOFO			
A1. Prior Experience with Program Design	The applicant has prior experience operating transitional housing or other projects that have successfully helped homeless individuals and families exit homelessness within 24 months or has a plan in place to ensure homeless individuals and families will exit homelessness within 24 months	Applicant has detailed and realistic plan to operate transitional housing within HUD's guidelines. Only applicants who can demonstrate experience operating TH within these guidelines will receive full points.	2.5
A2. Reduce Returns to Homelessness (System Performance Measure)	The applicant has previously operated or currently operates transitional housing or another homelessness project, or has a plan in place to ensure, that less than 20% of participants who exit to permanent housing destinations will return to homelessness up to 24 months after that exit	Applicant has detailed and realistic plan that <20% of clients return to homelessness after 24 months of exiting to permanent housing destinations. Partial points may be awarded.	20
A3. Employment Income (System Performance Measure)	The applicant has previously operated or currently operates transitional housing or another homelessness project, or has a plan in place to	Applicant has detailed and realistic plan to ensure at least 50% of participants exit with	10

	ensure, that at least 50% of participants exit with employment income as reflected in HMIS or another data system used by the applicant	employment income. Partial points may be awarded.	
A4. Positive Exits	The applicant has previously operated or currently operates transitional housing or another homelessness project, or has a plan in place to ensure, that at least 50% of participants exit to a positive housing destination within 24 months as reflected in HMIS or another data system used by the applicant	Applicant has detailed and realistic plan to ensure at least 50% of participants exit to positive housing destinations. Partial points may be awarded.	2.5
A5. Mainstream Resources / Non-Cash Benefits to Increase Non-Cash Income (System Performance Measure)	The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP	For full points, e-snaps application must indicate a breadth of resources that will be available to participants and plan to connect. Partial points may be awarded.	5
A6. Supportive Service Participation Requirements	Demonstrate that the project requires program participants to take part in supportive services (i.e., case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h) by providing direct language from supportive service agreements (contract, occupancy agreement, or equivalent). Note that this is a threshold requirement and	Adequate supportive services + adequate service agreement language = 20 points Adequate supportive services + inadequate agreement = 15 points Inadequate supportive services	20

	your application will be rejected if you do not meet the requirements. Demonstrate that the project will provide and/or partner with other organizations to provide eligible supportive services that are necessary to assist program participants to obtain and maintain housing.	+ adequate agreement = 10 points Inadequate supportive services + inadequate agreement = <5 points (discretion of R&R)	
A7. Individualized Services and Service Plans	Applicant has demonstrated that they will provide individualized services for all participants (except those exempt as described in the NOFO) that will result in at least 20 hours per week and will create service plans for each participant that include which services are provided, when and how often, by whom, participant goals, strategies, and target dates to focus on improved health and wellness, housing stability, and increased employment income leading to financial stability and self-sufficiency. The 20 hours per week of engagement services, activities, or employment is for all program participants. This is a threshold requirement and your application will be rejected if you do not meet the requirements.	To receive full points, the described service plan with at least 20 hours per week of services must demonstrate individualized planning with participant choice and include the requirements as described.	5

A8. Treatment and Recovery	Describe any on-site substance use services that will be provided for program participants. If the project is designed as sober housing as described by HUD in the NOFO, the applicant must details the project design, including any agreements the participants must abide by as it pertains to using substances while in housing and how the program will handle relapses.	A sober housing project that is designed to assist program participants in maintaining sobriety while avoiding unnecessary exits to homelessness will receive 5 points. A project that has on-site substance use services and describes the associated treatment provider(s) will receive 5 points. Partial points may be awarded.	5
B. COMMUNITY OUTCOMES: Objective outcomes that contribute to the community success of the homelessness system as a whole. Will the project address community needs and does it consider the severity of the needs and vulnerabilities experienced by program participants in their provision of services?			
B1. Bed/Unit Utilization	Demonstrate how the project will maintain high bed/unit utilization rates (over 90%)	Applicant has detailed and realistic plan to maintain >90% bed utilization. Partial points may be awarded.	20
B2. Lived Experience Decision Making / Feedback Process	Demonstrate a process to incorporate client feedback into program design and improvement and involving people with lived experience in decision making processes	1 point for incorporating client feedback 1 point for including PWLE in decisionmaking	2

B3. Serving Priority Populations	Demonstrate the project plans to serves a priority population. According to NOFO policy, priority populations include: disabled, families, older adults, and DV survivors	The project must indicate in the project application that this population is a priority in addition to explaining how many households they anticipate serving that meet that subpopulation, which must be at least half.	5
C. AGENCY CAPACITY: Measures agency's capacity to operate CoC Program funding.			
C1. Grant Management Experience	What experience does this agency have with spending federal grant dollars?	Agencies with experience fully spending grant funds will receive full points. Partial points may be awarded.	10
C2. Organizational Capacity	Does the agency have the financial and organizational systems in place to successfully manage this grant? Does the agency have any unresolved HUD monitoring or OIG audit finding(s)?	Agencies with exceptional systems and no unresolved findings will receive full points. Partial points may be awarded.	2
C3. HMIS Data Quality	Does the agency have the capacity to follow the HMIS policies and procedures, including timely and comprehensive data entry, confidentiality, and data quality?	Agencies who grasp the complexity of HMIS data entry and have a plan in place to comply will be awarded full points. Partial points may be awarded.	5
		Total points	114

CA-510 FY26 CoC NOFO New SSO Project Scoring Tool

Performance Evaluation Criteria	Description	Benchmark	Maximum Points
A. HUD REQUIREMENTS: Requirements as outlined in the FY26 NOFO			
A1. Necessity of Project	The Supportive Services project is necessary to assist people in exiting homelessness, addressing barriers to stable housing (e.g., substance use disorder, unemployment, childcare, etc.) and increasing self-sufficiency and the Recipient will conduct an annual assessment of the service needs of the program participants.	Applicants who demonstrate the necessity of the project, adequately describe barriers to stable housing and self-sufficiency, and explain their process for conducting annual assessments will receive full points. Partial points may be awarded.	3
A2. Providing Supportive Services to Eligible Program Participant	The proposed project has a strategy for providing supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services.	Applicants who demonstrate a detailed and realistic strategy with the eligible and target populations as described will receive full points. Partial points may be awarded.	5
A3. Mainstream Resources / Non-Cash Benefits to Increase Non-Cash Income (System Performance Measure)	The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP	For full points, application must indicate a breadth of resources that will be available to participants and plan to connect. Partial points may be awarded.	9

A4. Exits to Emergency Shelter, Transitional Housing, or Permanent Housing (System Performance Measure)	The proposed project has a strategy for ensuring participants exit to ES, TH, or PH as opposed to exiting to unsheltered homelessness.	For full points, applicant must demonstrate knowledge of successful case management and exit planning strategies	13
A5. Employment Income (System Performance Measure)	The proposed project has a strategy for increasing employment income for participants to increase self-sufficiency	For full points, applicant must demonstrate detailed and realistic plan and include outcome metrics	23
B. COMMUNITY OUTCOMES: Objective outcomes that contribute to the community success of the homelessness system as a whole. Will the project address community needs and does it consider the severity of the needs and vulnerabilities experienced by program participants in their provision of services?			
B1. Number of Households Served and Cost per Household	The number of people served is realistic and will benefit the community. Demonstrate the average cost per household served for the project is reasonable. 2 CFR 200.404.	Full points will be awarded to projects that have a reasonable cost per household according to HUD guidance and that plan to serve an impactful number of households that experience homelessness. Partial points may be awarded.	23
B2. Lived Experience Decision Making / Feedback Process	Demonstrate a process to incorporate client feedback into program design and improvement and involving people with lived experience in decision making processes	1 point for incorporating client feedback 1 point for including PWLE in decision-making	2

B3. Serving Priority Populations	Demonstrate the project plans to serves a priority population. According to NOFO policy, priority populations include: disabled, families, older adults, and DV survivors	The project must indicate in the project application that this population is a priority in addition to explaining how many households they anticipate serving that meet that subpopulation, which must be at least half.	5
C. AGENCY CAPACITY: Measures agency's capacity to operate CoC Program funding.			
C1. Grant Management Experience	What experience does this agency have with spending federal grant dollars?	Agencies with experience fully spending grant funds will receive full points. Partial points may be awarded.	13
C2. Organizational Capacity	Does the agency have the financial and organizational systems in place to successfully manage this grant? Does the agency have any unresolved HUD monitoring or OIG audit finding(s)?	Agencies with exceptional systems and no unresolved findings will receive full points. Partial points may be awarded.	5
C3. HMIS Data Quality	Does the agency have the capacity to follow the HMIS policies and procedures, including timely and comprehensive data entry, confidentiality, and data quality?	Agencies who grasp the complexity of HMIS data entry and have a plan in place to comply will be awarded full points. Partial points may be awarded.	13
		Total points	114

CA-510 FY26 CoC NOFO New SO Project Scoring Tool

Performance Evaluation Criteria	Description	Benchmark	Maximum Points
A. HUD REQUIREMENTS: Requirements as outlined in the FY26 NOFO			
A1. Street Outreach Activities and Successful Exits from Homelessness (System Performance Measure)	The applicant has experience providing outreach services, or a plan for providing outreach services, consistent with the activity description of 24 CFR 578.53(e)(13) and has a plan for or has demonstrated effectiveness at helping people successfully exit from places not meant for human habitation to emergency shelter, treatment programs, transitional housing or permanent housing programs.	Applicants with experience who demonstrate a detailed and realistic strategy will receive full points. For full points, applicant must demonstrate knowledge of successful case management and exit planning strategies. Partial points may be awarded.	20
A2. Mainstream Resources / Non-Cash Benefits to Increase Non-Cash Income (System Performance Measure)	The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP	For full points, e-snaps application must indicate a breadth of resources that will be available to participants and plan to connect. Partial points may be awarded.	6
A3. Employment Income (System Performance Measure)	The proposed project has a strategy for increasing employment income for participants to increase self-sufficiency	For full points, applicant must demonstrate detailed and realistic plan and include outcome metrics	10

A4. Partnering with Law Enforcement	Demonstrate that the applicant has a history of, or a plan for, partnering with first responders and law enforcement to engage people living in places not meant for human habitation to access emergency shelter, treatment programs, reunification with family, transitional housing or independent living. The applicant must cooperate and not interfere or impede with the enforcement of local laws such as public camping and public drug use laws.	For full points, applicant must demonstrate history and include a detailed plan that meets the requirements. Partial points may be awarded.	20
A5. Providing Supportive Services to Eligible Program Participants	The proposed project has a strategy for providing supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services.	Applicants who demonstrate a detailed and realistic strategy with the eligible and target populations as described will receive full points. Partial points may be awarded.	7
B. COMMUNITY OUTCOMES: Objective outcomes that contribute to the community success of the homelessness system as a whole. Will the project address community needs and does it consider the severity of the needs and vulnerabilities experienced by program participants in their provision of services?			
B1. Number of Households Served and Cost per Household	The number of people served is realistic and will benefit the community. Demonstrate the average cost per household served for the project is reasonable. 2 CFR 200.404.	Full points will be awarded to projects that have a reasonable cost per household according to HUD guidance and that plan to serve an impactful number of households that	20

		experience homelessness. Partial points may be awarded.	
B2. Lived Experience Decision Making / Feedback Process	Demonstrate a process to incorporate client feedback into program design and improvement and involving people with lived experience in decision making processes	1 point for incorporating client feedback 1 point for including PWLE in decisionmaking	2
B3. Serving Priority Populations	Demonstrate the project plans to serves a priority population. According to NOFO policy, priority populations include: disabled, families, older adults, and DV survivors	The project must indicate in the project application that this population is a priority in addition to explaining how many households they anticipate serving that meet that subpopulation, which must be at least half.	6
C. AGENCY CAPACITY: Measures agency's capacity to operate CoC Program funding.			
C1. Grant Management Experience	What experience does this agency have with spending federal grant dollars?	Agencies with experience fully spending grant funds will receive full points. Partial points may be awarded.	10
C2. Organizational Capacity	Does the agency have the financial and organizational systems in place to successfully manage this grant? Does the agency have	Agencies with exceptional systems and no unresolved findings will	3

	any unresolved HUD monitoring or OIG audit finding(s)?	receive full points. Partial points may be awarded.	
C3. HMIS Data Quality	Does the agency have the capacity to follow the HMIS policies and procedures, including timely and comprehensive data entry, confidentiality, and data quality?	Agencies who grasp the complexity of HMIS data entry and have a plan in place to comply will be awarded full points. Partial points may be awarded.	10
		Total points	114

Renewal PSH Rubric – Permanent Supportive Housing Families with Children #1

Performance Evaluation Criteria	Description	Benchmark	Project Score based on Objective Data	Points Awarded by Review Committee	Maximum Points
A1. Exits to Housing / Housing Retention (System Performance Measure)	PSH - Percentage of all living participants who remain in PSH or exited to a positive housing destination	> or equal to 95% = 10 points 90 - 94.9% = 8 points 85 - 89.9% = 6 points 80 - 84.9% = 4 points 75 - 79.9% = 2 points <75% = 0 points	100%	10	10
	TH - Percentage of all participants who exited to a	> or equal to 80% = 10 points 75 - 79.9% = 8 points			

	positive housing destination	70 - 74.9% = 6 points 65 - 69.9% = 4 points 60 - 64.9% = 2 points <60% = 0 points			
A2. Returns to Homelessness (System Performance Measure)	Percentage of all participants who returned to homelessness within 24 months after exiting to a positive housing destination	< or equal to 15% = 20 points 15.1 - 20% = 16 points 20.1 - 25% = 12 points 25.1 - 30% = 8 points 30.1 - 35% = 4 points >35% = 0 points	0%	20	20
A3. Employment Income (System Performance Measure)	Percentage of adult participants who gained or increased employment income	> or equal to 40% = 10 points 30 - 39.9% = 8 points 20 - 29.9% = 6 points 10 - 19.9% = 4 points 5 - 9.9% = 2 points <5% = 0 points	0%	0	10
A4. Non-Cash Benefits that Increase Non-Cash Income (System Performance Measure)	Percentage of adult participants who receive non-employment income from any source, based on last annual assessment for stayers and based on exit for leavers	> or equal to 50% = 5 points 40 - 49.9% = 4 points 30 - 39.9% = 3 points 20 - 29.9% = 2 points 10 - 19.9% = 1 point <10% = 0 points	100%	5	5

B1. Utilization Rates	The percentage of units that were utilized over the FY23 grant year	> or equal to 95% = 23 points 90 - 94.9% = 20 points 85 - 89.9% = 16 points 80 - 84.9% = 12 points 75 - 79.9% = 8 points 70 - 74.9% = 4 points <70% = 0 points	100%	23	23
B2. Supportive Service Participation Requirements	Describe if your project requires program participants to take part in supportive services (i.e., case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h) by providing direct language from supportive service agreements (contract, occupancy agreement, or equivalent)	Full points if project has supportive service participation requirements	N/A - Scored by Panel	0	2
B3. Serving Priority Populations	Demonstrate the project serves a priority population. According to	The project must indicate in their FY24 esnaps application that they have a preference for	Family is a priority population and project served 4 / 4	10	10

	NOFO policy, priority populations include: disabled, families, older adults, and DV survivors	serving at least one of these populations in addition to serving at least half of that subpopulation in the FY23 grant period. 5 points will be awarded to projects that serve a special population, but less than half of the households from FY23 were in that subpopulation. If there is more than one priority population, those households will be added together to compare against the total households.	households with families		
B4. Lived Experience Decision Making / Feedback Process	Demonstrate a process to incorporate client feedback into program design and improvement and involving people with lived experience in decision making processes	1 point for incorporating client feedback 1 point for including PWLE in decisionmaking	N/A - Scored by Panel	1	2
C1. Complete Data	Percentage of HMIS Universal Data Elements that are incomplete	< or equal to 5% = 1 point >5% = 0 points	0%	1	1
C2. Exits to Known Destinations	Percentage of participants who exit to unknown	< or equal to 5% = 1 point >5% = 0 points	0%	1	1

	destinations as recorded in HMIS				
C3. Data Quality Reports	Number of monthly data quality reports submitted for calendar year 2025 (out of 11 required reports)	11 months = 2 points 10 months = 1 point < or equal to 9 months = 0 points	11 months	2	2
D1. Quarterly Grant Spending	Does the agency draw funds quarterly for the current renewal project?	Each quarter of the year = 1 point; remove points for each quarter funds were not drawn	Q1 = Drew 12% funds Q2 = Drew 34% funds Q3 = Drew 61% funds Q4 = Drew 87% funds	4	4
D2. Grant Spenddown	What percentage of funds were spent down in FY23?	100% = 19 points 95 - 99.9% = 16 points 90 - 94.9% = 13 points 85 - 89.9% = 10 points 80 - 84.9% = 7 points 75 - 79.9% = 4 points <75% = 0 points	94%	13	19
D3. Timely Submission of APR	Did the agency submit the FY23 APR on time?	Submitted on time = Full points Did not submit on time = 0 points	APR due 10/29/2025 Submitted on 9/17/2025	2.5	2.5
D4. Unresolved HUD Monitoring / OIG Audit Findings	Does the agency have any unresolved HUD monitoring or OIG audit finding(s)	No = Full points Yes = 0 points (partial points considered if there is a plan in place to resolve)	N/A - Scored by Panel	2.5	2.5

	concerning any previous grant term related to the renewal project?				
			Total points	95	114

2026 HDX Competition Report

This workbook contains summary information about your CoC's data as it was entered into the HDX for your use as part of the 2026 Competition.

To Print this Workbook:

This document has been configured as printable with preset print areas of relevant sections. To print it, go to "File", then "Print", then select "Print Entire Workbook" or "Print Active Sheets" depending on your needs.

To Save This Workbook as a PDF:

Click the "File" Tab, then click "Save As" or "Save a Copy", then click "Browse" or "More Options" then select "PDF", click "Options", select "Entire Workbook", press "OK", and click "Save". These instructions may differ depending on your version of Microsoft Excel.

On Accessibility, Navigability, and Printability:

This workbook attempts to maximize accessibility, navigability, printability, and ease of use. Merged cells have been avoided. All tables and text boxes have been given names. Extraneous rows and columns outside printed ranges have been hidden.

For Questions:

If you have questions, please reach out to HUD via the "Ask a Question" page, <https://www.hudexchange.info/program-support/my-question/> and choose "HDX" as the topic.

2025 HDX Competition Report

2026 Competition Report - Summary

CA-510 - Turlock, Modesto/Stanislaus County CoC

HDX Data Submission Participation Information

Government FY and HDX Module Abbreviation	Met Module Deadline*	Data From	Data Collection Period in HDX
2025 LSA	Yes	Government FY 2025 (10/1/24 - 9/30/25).	November 2025 to January 2026
2025 SPM	Yes	Government FY 2025 (10/1/24 - 9/30/25).**	February 2026 to March 2026
2026 HIC	Yes	Government FY 2026. Exact HIC and PIT dates vary by CoC. For most CoCs, it was within the last 10 days of January, 2026.	March 2026 to April 2026
2026 PIT	Yes	Government FY 2026. Exact HIC and PIT dates vary by CoC. For most CoCs, it was within the last 10 days of January, 2026.	March 2026 to April 2026

- 1) FY = Fiscal Year
- 2) *This considers all extensions where they were provided.
- 3) **"Met Deadline" in this context refers to FY25 SPM submissions. Resubmissions from FY24 (10/1/2023 - 9/30/2024) were also accepted during the data collection period, but the previous year's submission is voluntary.

2025 HDX Competition Report

2026 Competition Report - LSA Summary & Usability Status

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

LSA Usability Status 2025

Category	EST AO	EST AC	EST CO	RRH AO	RRH AC	RRH CO	PSH AO	PSH AC*	PSH CO
Fully Usable	☒	☒	☒	☒	☒	☒	☒	N/A	☒
Partially Usable								N/A	
Not Usable								N/A	

Glossary: EST = Emergency Shelter, Save Haven, & Transitional Housing; RRH = Rapid Re-housing; PSH = Permanent Supportive Housing; AO = Persons in Households without Children; AC = Persons in Households with at least one Adult and one Child; CO=Persons in Households with only Children
*Usability was not determined for PSH-AC due to built-in conflicts between HOMES and HMIS. As

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than the look back stop date or client's date of birth, whichever is later.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.

Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client’s entry, exit, and bed night dates strictly as entered in the HMIS system.

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, and SH	4,697	91.6	28.0
1.2 Persons in ES-EE, ES-NbN, SH, and TH	4,985	111.8	38.0

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

b. This measure is based on data element 3.917

This measure includes data from each client’s Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client’s entry date, effectively extending the client’s entry date backward in time. This “adjusted entry date” is then used in the calculations just as if it were the client’s actual entry date.

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, SH, and PH (prior to “housing move in”)	4,984	920.2	168.0
1.2 Persons in ES-EE, ES-NbN, SH, TH, and PH (prior to “housing move in”)	5,264	993.6	188.0

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanslaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 2: Returns to Homelessness for Persons who Exit to Permanent Housing (PH) Destinations

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons Exited to a PH Destination (2 Yrs Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
Metric	Count	Count	% of Returns	Count	% of Returns	Count	% of Returns	Count	% of Returns
Exit was from SO	19	1	5.3%	2	10.5%	1	5.3%	4	21.1%
Exit was from ES	362	28	7.7%	17	4.7%	33	9.1%	78	21.6%
Exit was from TH	102	4	3.9%	5	4.9%	2	2.0%	11	10.8%
Exit was from SH	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from PH	220	8	3.6%	6	2.7%	20	9.1%	34	15.5%
TOTAL Returns to Homelessness	703	41	5.8%	30	4.3%	56	8.0%	127	18.1%

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanslaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

Please refer to PIT section for relevant data.

Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

Metric	Value
Universe: Unduplicated Total sheltered homeless persons	4,986
Emergency Shelter Total	4,702
Safe Haven Total	0
Transitional Housing Total	594

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

This measure is divided into six tables capturing employment and non-employment income changes for system leavers and stayers. The project types reported in these metrics are the same for each metric, but the type of income and universe of clients differs. In addition, the projects reported within these tables are limited to CoC-funded projects.

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	225
Number of adults with increased earned income	21
Percentage of adults who increased earned income	9.3%

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	225
Number of adults with increased non-employment cash income	128
Percentage of adults who increased non-employment cash income	56.9%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	225
Number of adults with increased total income	140
Percentage of adults who increased total income	62.2%

Metric 4.4 – Change in earned income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	104
Number of adults who exited with increased earned income	9
Percentage of adults who increased earned income	8.7%

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Metric 4.5 – Change in non-employment cash income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	104
Number of adults who exited with increased non-employment cash income	36
Percentage of adults who increased non-employment cash income	34.6%

Metric 4.6 – Change in total income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	104
Number of adults who exited with increased total income	43
Percentage of adults who increased total income	41.4%

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 5: Number of Persons who Become Homeless for the First Time

This measures the number of people entering the homeless system through ES, SH, or TH (Metric 5.1) or ES, SH, TH, or PH (Metric 5.2) and determines whether they have any prior enrollments in the HMIS over the past two years. Those with no prior enrollments are considered to be experiencing homelessness for the first time.

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

Metric	Value
Universe: Person with entries into ES-EE, ES-NbN, SH or TH during the reporting period.	4,508
Of persons above, count those who were in ES-EE, ES-NbN, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1,724
Of persons above, count those who did not have entries in ES-EE, ES-NbN, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	2,784

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

Metric	Value
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	4,928
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1,852
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	3,076

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD’s Homeless Definition in CoC Program-funded Projects

Measure 6 is not applicable to CoCs in this reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

This measures positive movement out of the homeless system and is divided into three tables: movement off the streets from Street Outreach (Metric 7a.1); movement into permanent housing situations from ES, SH, TH, and RRH (Metric 7b.1); and retention or exits to permanent housing situations from PH (other than PH-RRH).

Metric 7a.1 – Change in SO exits to temp. destinations, some institutional destinations, and permanent housing destinations

Metric	Value
Universe: Persons who exit Street Outreach	235
Of persons above, those who exited to temporary & some institutional destinations	134
Of the persons above, those who exited to permanent housing destinations	9
% Successful exits	60.9%

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Metric 7b.1 – Change in ES, SH, TH, and PH-RRH exits to permanent housing destinations

Metric	Value
Universe: Persons in ES-EE, ES-NbN, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	3,985
Of the persons above, those who exited to permanent housing destinations	903
% Successful exits	22.7%

Metric 7b.2 – Change in PH exits to permanent housing destinations or retention of permanent housing

Metric	Value
Universe: Persons in all PH projects except PH-RRH who exited after moving into housing, or who moved into housing and remained in the PH project	607
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	568
% Successful exits/retention	93.6%

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-510 - Turlock, Modesto/Stanislaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

System Performance Measures Data Quality

Data coverage and quality will allow HUD to better interpret your SPM submissions.

Metric	All ES, SH	All TH	All PSH, OPH	All RRH	All Street Outreach
Unduplicated Persons Served (HMIS)	4,711	596	741	1,505	250
Total Leavers (HMIS)	3,863	393	109	1,035	200
Destination of Don't Know, Refused, or Missing (HMIS)	185	0	1	105	4
Destination Error Rate (Calculated)	4.8%	0.0%	0.9%	10.1%	2.0%

2025 HDX Competition Report

2026 Competition Report - SPM Notes

CA-510 - Turlock, Modesto/Stanslaus County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Notes For Each SPM Measure

Measure		Notes
Measure 1	No notes.	
Measure 2	No notes.	
Measure 3	No notes.	
Measure 4	No notes.	
Measure 5	No notes.	
Measure 6	No Notes. Measure 6 was not applicable to CoCs in this reporting period.	
Measure 7	No notes.	
Data Quality	Over the past year, we have prioritized improving the quality of our community data and leveraging EVA for better insights. Within our shelter programs, we introduced a new question for returning clients: "Where did you go or stay after your last visit?" This enhancement helps us capture information on clients who do not return the following day, addressing a key gap in our data. As a	

2025 HDX Competition Report

2026 Competition Report - HIC Summary

CA-510 - Turlock, Modesto/Stanslaus County CoC

For HIC conducted in January/February of 2026

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current Non-VSP Beds in HMIS or Comparable Database	Total Year-Round, Current, Non-VSP Beds	Removed From Denominator: OPH EHV [†] Beds or Beds Affected by Natural Disaster*	Adjusted*** Total Year-Round, Current, Non-VSP Beds	Adjusted*** HMIS Bed Coverage Rate for Year-Round, Current Beds
ES	1,017	927	987	0	987	93.9%
SH	0	0	0	0	0	NA
TH	319	288	316	0	316	91.1%
RRH	176	176	176	0	176	100.0%
PSH	743	435	743	0	743	58.5%
OPH	385	105	385	280	105	100.0%
Total	2,640	1,931	2,607	280	2,327	83.0%

2025 HDX Competition Report

2026 Competition Report

CA-510 - Turlock, Modesto/Sta

For HIC conducted in January/

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current, VSP Beds in an HMIS-Comparable Database	Total Year-Round, Current, VSP Beds	Removed From Denominator: OPH EHV [†] Beds or Beds Affected by Natural Disaster ^{**}	Adjusted ^{***} Total Year-Round Current, VSP Beds	HMIS Comparable Bed Coverage Rate for VSP Beds
ES	1,017	30	30	0	30	100.00%
SH	0	0	0	0	0	NA
TH	319	3	3	0	3	100.00%
RRH	176	0	0	0	0	NA
PSH	743	0	0	0	0	NA
OPH	385	0	0	0	0	NA
Total	2,640	33	33	0	33	100.00%

2025 HDX Competition Report

2026 Competition Report

CA-510 - Turlock, Modesto/Sta

For HIC conducted in January/

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS-Comparable Database	Adjusted*** Total Year-Round, Current, Non-VSP and VSP Beds	HMIS and Comparable Database Coverage Rate
ES	1,017	957	1,017	94.10%
SH	0	0	0	NA
TH	319	291	319	91.22%
RRH	176	176	176	100.00%
PSH	743	435	743	58.55%
OPH	385	105	105	100.00%
Total	2,640	1,964	2,360	83.22%

2025 HDX Competition Report

2026 Competition Report - HIC Summary

CA-510 - Turlock, Modesto/Stanslaus County CoC

For HIC conducted in January/February of 2026

1) † EHV = Emergency Housing Voucher

2) *This column includes Current, Year-Round, Natural Disaster beds not associated with a VSP that are not HMIS-participating. For OPH Beds, this includes beds that are Current, Non-HMIS, and EHV-funded.

3) **This column includes Current, Year-Round, Natural Disaster beds associated with a VSP that are not HMIS-participating or HMIS-comparable database participating. For OPH Beds, this includes beds that are Current, VSP, Non-HMIS, and EHV-funded.

4) ***Adjusted bed counts exclude non-HMIS participating OPH EHV Beds and Beds Affected by Natural Disaster

5) Data included in these tables reflect what was entered into HDX 2.0.

6) In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

7) In the HIC, "Current" beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

8) For historical data: Aggregated data from CoCs that merged are not displayed if HIC data were created separately - that is, only data from the CoC into which the merge occurred are displayed. Additional reports can be requested via AAQ for any CoCs that have been subsumed into other CoCs.

2025 HDX Competition Report

2026 Competition Report - PIT Summary

CA-510 - Turlock, Modesto/Stanislaus County CoC

For PIT conducted in January/February of 2026

Submission Information

Date of PIT Count	Received HUD Waiver
1/28/2026	Not Applicable

Total Population PIT Count Data

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Emergency Shelter Total	880	927	906
Safe Haven Total	0	0	0
Transitional Housing Total	192	209	198
Total Sheltered Count	1,072	1,136	1,104
Total Unsheltered Count	980	950	687
Total Sheltered and Unsheltered Count*	2,052	2,086	1,791

1) *Data included in this table reflect what was entered into HDX 2.0. This may differ from what was included in federal reports if the PIT count type was sheltered only.

2) Aggregated data from CoCs that merged is not displayed if PIT data were entered separately - that is, only data from the CoC into which the merge occurred are displayed. Additional reports can be requested via AAQ for any CoCs that have been subsumed into other CoCs.

Total People Experiencing Chronic Homelessness

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Total Sheltered Count	282	266	295
Total Unsheltered Count	272	360	237
Total	554	626	532

3A-DP. CA-510's CoC Policy or Statement to Advance Recovery

Attached is an excerpt from the CA-510 CoC's FY26 NOFO Policy, which includes their policy to advance recovery. This was approved by the CoC Board on June 23, 2026.

Stanislaus County Continuum of Care

HUD CONTINUUM OF CARE PROGRAM

**2026 Program Evaluation
Scoring Policies**

LOCAL COMPETITION INFORMATION

Pages 4 – 5:

All projects:

1. All project applicants must certify to the following in their application: The project applicant will not operate drug injection sites or "safe consumption sites" in violation of 21 U.S.C. 856(a):
 - a. (1), knowingly permit the use or distribution of illicit drugs on property under their control in violation of 21 U.S.C. 856(a); or
 - b. (2), knowingly distribute drug paraphernalia in violation of 21 U.S.C. 863. This is consistent with the objectives outlined in Section III.B above and is consistent with the requirements of 2 CFR 200.300(a). This certification is not a requirement that program participants must be sober in order to receive assistance, participate in treatment in order to receive assistance, or be evicted or exited from assistance for a first-time violation of a drug-related program policy or lease requirement.
2. All project applicants must certify to the following in their application: CoC Harm Reduction/Safe Consumption Sites Policy:

CA-510 FY26 CoC NOFO Policy

- a. (1) Prohibits CoC-funded housing projects from operating drug injection sites or "safe consumption sites," knowingly distributing drug paraphernalia on or off property under their control, knowingly permitting the use or distribution of illicit drugs on property under their control, or conducting any of these activities under the pretext of "harm reduction;"
- b. (2) CoC-funded housing projects determined by the CoC to be in violation of the above will be placed on a performance improvement plan and must report updates on compliance with the policy to the CSOC until the stipulations in the policy are met;
- c. (3) The CoC encourages the provision of substance use disorder treatment and recovery housing within or outside of the CoC; and
- d. (4) The CoC does not restrict or prohibit CoC-funded housing projects that require program participants to be sober or to participate in treatment as a condition of assistance in accordance with 24 CFR 578.

3A-1. HUD-2996 Certification for Opportunity Zone Preference Points

The proposed projects encompass 61% of total FY 2026 CoC funding requested for the following Census tracts (names are e-snaps project names):

Census Tract	Agency Name	E-snaps Project Name
06099001400	Community Housing and Shelter Services (CHSS)	Permanent Supportive Housing for Families with Children #1
	Community Housing and Shelter Services (CHSS)	Permanent Supportive Housing for Families with Children #2
	Community Impact Central Valley (CICV)	SHOP FY2026
06099001800	Community Impact Central Valley (CICV)	FY 2026-Halo I
	Community Impact Central Valley (CICV)	FY 2026-Halo Homes (3)
	Community Impact Central Valley (CICV)	FY 2026-Halo Apartments (5)
	Stanislaus County Housing Affordable Housing Corp (Stanco)	Permanent Housing #1 Renewal 2026
	Stanislaus County Housing Affordable Housing Corp (Stanco)	Supportive Housing Outreach Project Renewal 2026
	Turning Point Community Programs (TPCP)	Housing Assessment Team
06099003803	We Care Turlock	PSH Renewal

Public Reporting Burden Statement: This collection of information is estimated to average 0.20 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of the requested information. Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to: U.S. Department of Housing and Urban Development, Office of the Chief Data Officer, R, 451 7th St SW, Room 8210, Washington, DC 20410-5000. Do not send completed forms to this address. This Agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid OMB control number. This Agency is authorized to collect this information under Section 102 of the Department of Housing and Urban Development Reform Act of 1989. The information you provide will enable this Agency to carry out its responsibilities under this Act and ensure greater accountability and integrity in the provision of certain types of assistance administered by this Agency. The information collected via this form is required to obtain the benefit sought in the grant program. Failure to provide any required information may delay the processing of your application and may result in sanctions and penalties including the administrative and civil money penalties specified under 24 CFR §4.38. This information will not be held confidential and may be made available to the public in accordance with the Freedom of Information Act (5 U.S.C. §552). The information collected via this form is not retrieved by a personal identifier, therefore it does not meet the threshold for a Privacy Act Statement.

Type or clearly print the following information.

****Warning:** *Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties (18 U.S.C §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(1)(iii)).*

Applicant Organization • CSA Stanislaus County (CA-510 CoC) on behalf of Center for Human Services (CHS), Community Impact Central Valley (CICV), Stanislaus County Affordable Housing Corp (STANCO), Turning Point Community Programs (TPCP), and We Care Turlock

Assistance Listing number and Federal Program name to which the Applicant is applying:

Include the funding opportunity number and name exactly as it appears in the applicable funding opportunity announcement (example: 14.896, Family Self-Sufficiency Program).

14.267, FY 2026 Continuum of Care Competition and Youth Homelessness Demonstration Program Grants NOFO

Opportunity Zone Census Tract(s), which the proposed activities/projects will benefit:

Include below the full 11-digit census tract number (example: 06067001101). Designated Opportunity Zone Census Tracts can be found at: <https://opportunityzones.hud.gov/resources>. Select the "CDFI Fund Opportunity Zones Resources" link and then select the "List of designated Qualified Opportunity Zones."

06099001400 (CHS PSH for Families 1 and 2; CICV SHOP TH); 06099001800 (CICV Halo 1, CICV Halo 3, CICV Halo 5, CICV Transition TH; Stanco PSH and Stanco Supp. Outreach PSH; TPCP HAT SSO); 06099003803 (We Care Turlock PSH)

The application meets which of the following criteria (please select one):

- ☒ The proposed activities/projects will occur solely within the Opportunity Zone Census Tract(s) listed above.
☐ The proposed activities/projects will occur within the Opportunity Zone Census Tract(s) listed above and other communities.
☐ The proposed activities/projects will occur outside Opportunity Zone Census Tracts, but substantial and direct benefits will accrue within the Opportunity Zone Census Tracts listed above.

Note: Projects which substantially and directly benefit Opportunity Zone Census Tracts, but which do not consist of activities delivered within Opportunity Zone Census Tracts may be considered for competitive preference. If applicable, the respective Federal Agency will clearly define "substantially and directly" in the relevant funding announcement.

Estimated Funding Allocations

Estimate a percentage of the total dollar amount of federal funding awarded that would result in a direct benefit within the Opportunity Zone Census Tracts listed above:

- ☐ 76% - 100%
☒ 51% - 75%
☐ 26% - 50%
☐ 11% - 25%
☐ 1%- 10%

Provide a narrative explaining and/or reference the section in the application that explains how the project will support public and private investment in urban and economically distressed areas, specifically qualified Opportunity Zones (300-word limit):

Example: "The Main Street project described in this application will stimulate economic opportunity and mobility, encourage entrepreneurship, expand quality educational opportunities, and promote workforce development for those families residing within the XYZ Opportunity Zone."

The projects listed above (61% of total FY26 CoC funds requested) will benefit people experiencing homelessness by providing rent (PSH and TH only) and supportive services (all projects) to assist households in obtaining self-sufficiency within the identified above census tract opportunity zones.

Check the following boxes that accurately reflect the nature or purpose of the proposed project:

- | | |
|---|---|
| ☐ Access to Capital | ☐ Workforce Development |
| ☐ Asset Building | ☐ Low Income Housing Tax Credit (LIHTC) or other rent restricted housing |
| ☐ Business Assistance | ☐ Market rate housing |
| ☐ Community Capacity Building | ☐ Industrial development |
| ☐ Economic Development | ☐ Commercial or retail development |
| ☐ Education | ☐ Other business development |
| ☒ Healthy Food Access | ☐ "Above ground" infrastructure — streets, sidewalks, lighting |
| ☒ Health | ☐ "Below ground" infrastructure — water, sewer, gas, electric |
| ☒ Housing | ☐ Schools or other educational facilities |
| ☒ Human Services and Family Support | ☐ Hospitals or other health care facilities |
| ☐ Community Infrastructure | |
| ☒ Public Safety | |

Certification of Authorized Representative for the Applicant:

****Under penalty of perjury, I certify on behalf of the Applicant that**

- (1) all information provided on this form is true, complete, and accurate, and
- (2) the Applicant will notify the Agency immediately upon learning of any change in the information provided on this form, and
- (3) I am authorized to speak for the Applicant regarding all information provided on this form.

Prefix: _____ First Name: Christine Middle Initial: _____ Last Name: Huber Suffix: _____

Title: Director Organization: Stanislaus County Community Services Ag

Signature:  Date: 09/24/2026
Christine Huber (Sep 24, 2026 09:27:46 PDT)