

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: NY-600 - New York City CoC

1A-2. Collaborative Applicant Name: New York City Department of Homeless Services

1A-3. CoC Designation: CA

1A-4. HMIS Lead: New York City Department of Homeless Services

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:

- 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

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	1
2.	CDBG/HOME/ESG Entitlement Jurisdiction(s)	Yes	1
3.	Certified Community Behavioral Health Clinic (CCBHC)	Yes	0
4.	Community Mental Health Center (CMHC)	Yes	0
5.	Disability Advocate(s)	Yes	1
6.	Disability Service Organization(s)	Yes	0
7.	Emergency Medical Services (EMS)/Crisis Response Team(s)	Yes	0
8.	Employment Assistance Program(s) (e.g., Local Workforce Development, American Job Center)	Yes	0
9.	Faith-based Organization(s)	Yes	0
10.	Homeless or Formerly Homeless Person(s)	Yes	4
11.	Hospital(s)	Yes	0
12.	Other Primary Healthcare Provider(s) (e.g., Federally Qualified Health Center, Healthcare for the Homeless)	Yes	0
13.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	No	
14.	Law Enforcement	Yes	0
15.	Local Court Systems, Including Specialty Courts (e.g., Mental Health Court, Drug Court, Care Court)	Yes	0
16.	Local Government Staff/Official(s)	Yes	4

17.	State Government Staff/Official(s)	Yes	0
18.	State or Local Elected Public Official(s)	Yes	0
19.	Local Jail(s)	Yes	0
20.	Mental Health Service Organization(s)	Yes	1
21.	Mental Illness Advocate(s)	Yes	1
22.	Organization(s) led by and serving people with disabilities	Yes	0
23.	Other homeless subpopulation advocate(s)	Yes	1
24.	Other nonprofit homeless assistance provider(s)	Yes	4
25.	Other social service provider(s)	Yes	4
26.	Public Housing Agencies	Yes	1
27.	Recovery Housing or Sober Living Provider(s)	Yes	0
28.	School Administrators/Homeless Liaison(s)	Yes	0
29.	School District(s)	Yes	0
30.	Street Outreach Team(s)	Yes	2
31.	Substance Abuse Advocate(s)	Yes	1
32.	Substance Abuse Service Organization(s)	Yes	1
33.	Universities	Yes	0
34.	Veteran Serving Organization(s)	Yes	0
35.	Agencies Serving Survivors of Human Trafficking	Yes	1
36.	Victim Service Provider(s)	Yes	1
37.	Domestic Violence Advocate(s)	Yes	1
38.	Other Victim Service Organization(s)	Yes	0
39.	State Domestic Violence Coalition	Yes	0
40.	State Sexual Assault Coalition	Yes	0
41.	Youth Advocate(s)	Yes	2
42.	Youth Homeless Organization(s)	Yes	1
43.	Youth Service Provider(s)	Yes	4
44.	Other Homeless Assistance Provider(s)	Yes	4
45.	Local Business or Chamber of Commerce or a Member of a Business Improvement District	Yes	0
	Other: (limit 50 characters)		
46.			
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 NYC CoC maintains an open and accessible process for individuals and organizations to join the CoC throughout the year. Rather than limiting membership to a single annual enrollment period, individuals and organizations interested in becoming involved are invited to register for the CoC mailing list, which serves as a low-barrier entry point to participation.

Through the mailing list, members receive regular communications about CoC activities, public meetings, funding opportunities, policy and program updates, and training and technical assistance opportunities.

This approach allows the CoC to cultivate and expand its membership throughout the year. Stakeholders are continuously provided opportunities to learn more about the CoC, local priorities, and ways to engage before determining the level of involvement that is most appropriate for them. This creates a pathway for individuals and organizations to move from initial engagement (communications and public meetings) to deeper participation in committees, subcommittees, and workgroups, and future CoC applicants and grantees.

This process allows the CoC to cultivate a broader, more informed, and increasingly engaged membership base that actively contributes to the CoC's local impact.

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 NYC CoC maintains a transparent and inclusive process for soliciting and considering input on the CoC's performance, strategies, and priority-setting through its representative Steering Committee, Advisory Council, and network of committees, subcommittees, and workgroups. Opportunities for participation in these groups are communicated throughout the year and are made available on the CoC's website and local social media platforms.

The CoC is governed by a representative Steering Committee made up of key stakeholders, including persons with lived experience of homelessness, nonprofit and community-based organizations, coalitions, and local government entities. This representative structure provides diverse perspectives and expertise to inform the CoC's annual strategic direction, define system performance measures, and identify new/innovative approaches for preventing and ending homelessness.

The CoC also maintains an Advisory Council that brings systemwide expertise on homelessness to the strategic planning and priority-setting process. The Council identifies emerging needs and provides guidance on the strategic direction of the CoC, drawing on knowledge of federal, state, and local policies and their impacts on housing and human services in NYC.

Additionally, to allow for a broader array of participation, the CoC is supported by committees, subcommittees, and workgroups composed of representatives from across the Continuum. These groups provide ongoing forums to solicit stakeholder perspectives, examine emerging needs, and develop recommendations that inform CoC policies and priorities. Their work is reflected in policy advancements, and annual system and program planning for the Continuum.

Together, these structures provide multiple avenues for stakeholders to meaningfully participate in and inform the CoC's planning and decision-making processes.

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 NYC CoC maintains a transparent, open, and accessible process for organizations that have not previously received CoC Program funding, including faith-based organizations. Throughout the year, the CoC actively cultivates new members and potential applicants through public meetings, public trainings, information sessions, and other engagement opportunities throughout the year. These activities provide prospective applicants with opportunities to learn about the CoC Program, understand local priorities and requirements, ask questions, and determine whether pursuing CoC funding or broader participation in the CoC network aligns with their organizational needs and capacity.

Recognizing that the federal CoC NOFO timeline can create a compressed period for developing competitive applications, the CoC has adopted an Early Local Competition strategy. Through this process, prospective applicants, including organizations that have not previously received CoC funding, are identified and solicited well in advance of the federal NOFO release. This allows organizations additional time to understand the CoC process, develop a project concept, receive technical assistance (TA), and assess whether the proposed project is sustainable and in alignment with the needs of the NYC homelessness response system.

When the NOFO is released, the CoC provides additional guidance and TA to ensure that all eligible applicants have a meaningful opportunity to submit complete and competitive applications. The CoC reviews proposed projects against federal requirements and locally established priorities and works to ensure that key community needs and priorities are reflected in the competition.

The CoC also takes specific steps to reach faith-based organizations. In partnership with the NYC Office of Faith-Based and Community Partnerships, the CoC disseminates information about CoC funding opportunities and the local competition to faith-based providers and community organizations. Opportunities are further promoted through the CoC's coalition partners and established communication networks to broaden outreach and ensure that organizations that may not have previously participated in the CoC funding process are aware of the opportunity and have access to the information needed to participate.

As a result of this work, proposals from organizations that have not previously received CoC Program funding were received.

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)

The NYC CoC has identified workforce development as a strategic priority for reducing homelessness, including returns to homelessness after housing placement. This service gap was identified through an exploratory initiative conducted by the CoC from Nov 2025 to May 2026 with Enterprise Community Partners. The project relied on stakeholder feedback from 15 groups, including nonprofit grantees, government agencies, and local workforce providers, regarding employment service integration with housing programs. Stakeholders emphasized the need for supportive services, including for job retention, to ensure employment success for all subpopulations served, the value of co-locating workforce and housing staff and services, the opportunities created by hiring lived experts as peers, and the need for employer relationships in developing hiring pipelines.

Bridging siloed workforce and housing sectors will involve continued collaboration to identify opportunities to better serve participants using CoC supportive services funds and NYC's existing workforce development infrastructure. The next phase of this strategy will convene City agencies and non-profit stakeholders from key components of this system in a Workforce Development Workgroup (WDW). The WDW will target challenges to achieving and maintaining self-sufficiency among formerly homeless individuals and families in CoC-funded housing programs. Planning and recruitment for the WDW is currently underway, and the group is expected to convene in early 2027. Insights from the WDW will inform ongoing activities by the CoC Community Engagement Team. These activities will include sharing actionable insights for strengthening grantee in-house workforce programs and referral relationships. Planning efforts led by City agencies are also underway to enhance workforce development services and job opportunities for formerly homeless households in City-funded housing programs.

Community engagement activities and the WDW will be funded through the Planning Grant, while grantees will be advised in leveraging CoC Supportive Services funds for workforce-centered services. City tax levy dollars will fund enhanced workforce development programming for City-funded housing participants.

Performance will be measured annually through HMIS, including changes from the FFY26 earned-income baselines, employment obtained during enrollment, average earned income, permanent unsubsidized housing exits, and returns to homelessness.

1B-5a	Confirmation of Plan Coverage.
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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

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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?	27%

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

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)

The NYC CoC partners with City and State agencies, healthcare systems, and community providers to connect people experiencing homelessness to outpatient mental health and substance use treatment and recovery services. Key partners include NYC Health + Hospitals (H+H), NYC Department of Health and Mental Hygiene (DOHMH), NYS Office of Addiction Services and Supports (OASAS), NYS Office of Mental Health (OMH), hospitals, and community treatment providers. At the NYC Department of Homeless Services (DHS), client care coordinators and case managers conduct comprehensive psychosocial assessments to identify needs and connect clients to appropriate care. More than three-quarters of shelter programs report formal partnerships with off-site health services providers for primary care and behavioral health services. In 2023, DHS obtained a \$13 million CoC grant from HUD to provide enhanced medical and care coordination for New Yorkers experiencing unsheltered homelessness. The Enhanced Services program launched in May 2025, in partnership with H+H, with the goal of providing care to clients with health, mental health, and substance use needs. Enhanced Services has two models: on-site care through the H+H mobile van at select mental health shelters and streets sites, and dedicated care coordinators for shelter and streets clients at H+H safety net and re-entry clinics.

OASAS-funded substance use treatment staff work through five organizations in 25 shelters with the highest numbers of drug/alcohol incidents, providing engagement, assessment, treatment navigation, onsite services, and linkage to outpatient and higher levels of care, including medications for addiction treatment. Nurse and Navigator teams in five shelters provide clinical care and navigation, while DHS's HUD-funded Enhanced Services partnership with H+H brings mobile healthcare services including behavioral health treatment directly to shelters.

DHS Family and Adult Complex Care programs provide intensive care coordination for clients with complex medical, behavioral health, substance use, disability-related, and social service needs. These programs coordinate linkage to outpatient mental health care, psychiatric services, medication management, and mobile programs including Shelter Partnered Assertive Community Treatment (SPACT), and several Critical Time Intervention (CTI) programs. These programs served more than 500 clients with complex needs in 2025.

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 NYC CoC integrates peer support and recovery navigation into Department of Homeless Services (DHS) emergency shelter services through partnerships with the NYC Department of Health and Mental Hygiene (DOHMH), NYS Office of Addiction Services and Supports (OASAS), and community providers. DOHMH AmeriCorps Peer Corps members work in 12 shelters, providing lived-experience-based overdose prevention services. DHS-partnered OASAS-funded substance use staff work through five organizations in 25 shelters with high numbers of drug/alcohol incidents, engaging residents and connecting them to treatment, recovery, healthcare, and community supports.

Through DHS, the CoC also operates a community health work program staffed by people with lived experience (peers) or deep knowledge of substance use, mental health, criminal justice and homelessness. Staff provide systemwide outreach following non-fatal overdoses and targeted in-person services in shelters with high rates of overdose and substance use-related incidents. Services include individualized risk-reduction counseling and safety planning, care coordination, case conferencing, and supported linkage to substance use treatment, medications for addiction treatment, mental health and medical care, housing, employment, and other health and social services. From January–July 2026, this program served 810 unique clients through 1,074 service encounters, conducted 424 case conferences, and coordinated 449 referrals. Staff also facilitate low-barrier “Let’s Talk” groups that engage clients around recovery, wellness, self-care, community, and personal growth; 58 groups reached 434 participants during this period. DHS is working with DOHMH to strengthen and sustain this workforce through a Community Health Worker (CHW) approach.

DHS became a NYS certified overdose prevention program in 2017, and provides systemwide outreach following non-fatal overdoses, risk-reduction counseling, safety planning, care coordination, and supported linkage to substance use treatment, medications for addiction treatment, mental health and medical care, vocational support, and other services. From 2023–2025, 2,373 high-risk clients received direct services and 817 received coordinated referrals, and has and has seen a 61% reduction in overdose death in the last 3 fiscal years.

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 NYC CoC and NYC Department of Homeless Services (DHS) use multiple pathways to identify people experiencing serious mental illness (SMI) and connect them to intensive treatment and care coordination. DHS worked with OMH to establish specialized Shelter-Partnered ACT and Critical Time Intervention Programs serving people experiencing street homelessness (SOS), and partners closely with these programs to facilitate engagement. DHS and DOHMH are working to make mobile mental health program enrollment information available in DHS's CARES data system to identify existing treatment connections and improve continuity of care.

DHS's Institutional Referral Program (IRP) reviews more than 5,000 referrals annually from hospitals, psychiatric facilities, correctional institutions, and other settings before shelter entry. Referral information includes behavioral health diagnoses, medications, treatment and functional needs, and existing providers, supporting continuity of care and appropriate shelter placement. The program coordinates referrals to outpatient mental health care or mobile mental health care, and expedited placement in mental health shelters in a location necessary to support continuity of care.

DHS Family Care and Adult Complex Care programs provide intensive care coordination for clients with SMI and co-occurring medical, substance use, disability-related, and social service needs. Staff work with clients, shelter teams, hospitals, and community providers to coordinate treatment, address barriers to engagement, and promote stability.

For clients with serious mental illness, who experience barriers to accessing care in the community, DHS subcontracts with clinic providers at a small number of shelters. Most of these shelters are mental health shelters serving the highest acuity clients who are even more likely to be in crisis, have multiple behavioral and medical health conditions, and are less likely to attend appointments. Furthermore, there are directly funded clinics at all assessment sites. Those are essential for screening clients entering the system, both for the clients themselves so they can be assessed and linked to care and to identify clients not appropriate for shelter.

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)

The NYC CoC coordinates with the NYC Department of Health and Mental Hygiene's Assisted Outpatient Treatment (AOT) Program, which implements court-ordered outpatient treatment under Kendra's Law. AOT works with community-based mental health providers and care coordinators to support individuals with serious mental illness who may require court-ordered treatment to remain safely housed and in the community.

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 NYC CoC coordinates with NYC Health's Assisted Outpatient Treatment (AOT) Program and the broader network of behavioral health, supportive housing, and care coordination providers to promote housing stability and community integration for individuals with serious mental illness. NYC's AOT program monitors adherence to a civil court-ordered treatment and care coordination plan and works collaboratively with treatment providers when an individual is not engaging in required services. This structure provides an established mechanism for coordinating clinical care, case management, and community-based supports around individuals who may otherwise be at risk of hospitalization or housing instability.

Within NYC Human Resources Administration (HRA), clients may receive assessment, referral, and service coordination based on their identified clinical and functional needs, including when court involvement is part of the individual's circumstances. HRA's supportive housing assessment process considers mental health conditions, functional needs, treatment providers, hospitalization history, and the level of support an individual may require to maintain medication adherence and successfully live in the community.

HRA-HASA further supports housing stability through ongoing assessment and case management. Clients are assessed, as needed, to determine whether supportive housing and related services are necessary to live successfully in the community. Individuals residing in supportive housing receive ongoing assessments to identify changing needs and determine whether they are prepared to transition toward greater independence.

When a client is at risk of losing permanent housing, HRA-HASA can pursue appropriate legal and protective interventions to help preserve housing stability, including petitioning the court for appointment of a Guardian ad Litem when appropriate. This can provide additional advocacy and support for clients who may have difficulty protecting their housing interests independently.

Together, these approaches allow the CoC and its public-system partners to align housing, behavioral health, clinical, and legal supports. Court orders such as AOT orders can reinforce engagement with treatment and care coordination, while housing-focused assessments and ongoing case management address the practical supports necessary for individuals to remain housed, stabilize in the community, and, when appropriate, move toward greater independence.

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)

The NYC CoC partners with NYC 988 and the NYC Department of Health and Mental Hygiene (DOHMH). Providers can connect individuals experiencing a behavioral health crisis to NYC 988, which provides 24/7 crisis counseling, assessment, information and referral, and access to urgent behavioral health services. NYC 988 serves as the single point of access for Mobile Crisis Teams (MCTs), which provide community-based assessment, de-escalation, crisis intervention, and linkage to ongoing services.

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.	406

1C-1g.	Treatment and Recovery Services—24/7 Access to Detox, Residential, or Inpatient Treatment.	
Is there 24/7 access to detox, residential, and inpatient behavioral health treatment within the geographic area of your CoC?		Yes

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)

In partnership with NYC Human Resources Administration (HRA)'s Customized Assistance Services (CAS) the NYC CoC connects Cash Assistance clients to community-based behavioral health and substance use treatment providers based on assessed needs. Through this referral partnership, individuals experiencing or at risk of homelessness can access appropriate behavioral health and substance use services that support housing stability and recovery.

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)

Odyssey House Haven, NY0350, is an existing NYC CoC funded permanent supportive housing project that provides housing and recovery-oriented services to individuals with histories of substance use disorders. The project operates in coordination with Odyssey House's substance use treatment and recovery services and provides a drug-free, recovery-supportive residential environment. Odyssey House Haven is also recognized by the NYS OASAS as a housing provider.

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 NYC CoC coordinates with City and State agencies, health systems, and community providers to identify housing, health, behavioral health, and substance use needs and facilitate warm hand-offs to stable housing. Coordination includes direct referrals, care planning, case conferencing, and follow-up to support continuity of care and prevent homelessness.

DHS shelter care coordinators and case managers assess clients and connect them to medical, mental health, substance use, and housing resources. DHS's Institutional Referral Program reviews more than 5,000 referrals annually from hospitals, psychiatric facilities, correctional institutions, and other settings, using clinical information to support appropriate shelter placement and continuity of care. Family and Adult Complex Care programs provide intensive coordination for clients with complex medical, behavioral health, substance use, disability-related, and social service needs.

The CoC partners with H+H, DOHMH, OASAS, OMH, hospitals, and community providers to bring services directly to clients. OASAS-funded staff operate in 25 shelters, providing assessment, treatment navigation, onsite services, and linkage to outpatient and higher levels of care, including medications for addiction treatment. DHS's HUD-funded Enhanced Services partnership with H+H provides mobile healthcare and care coordination for shelter and street homeless clients. DHS also works with OMH on Shelter-Partnered ACT and Critical Time Intervention programs and with DOHMH on overdose prevention and peer services.

For behavioral health and substance use crises, the CoC connects clients to NYC 988 and Mobile Crisis Teams for assessment, intervention, and ongoing services. Following overdoses and other crises, DHS provides safety planning, case conferencing, and supported referrals to treatment, healthcare, housing, and other services.

HRA's Customized Assistance Services connects Cash Assistance clients to behavioral health and substance use providers based on assessed needs. HASA provides ongoing assessment and case management, including supportive housing referrals and interventions to preserve housing. The CoC also coordinates with Assisted Outpatient Treatment (AOT) and community providers when court-ordered treatment is part of an individual's care plan.

Together, these pathways connect individuals from shelters, hospitals, crisis systems, and treatment settings to housing and supportive services.

1C-2.	Supportive Services Investment.	
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	Number
1. Enter your CoC's FY 2026 Annual Renewal Demand (ARD).	\$215,396,488
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.	\$82,546,536
3. Percent of your CoC's FY 2026 ARD (from element 1 above) that is supportive services funding (from element 2 above).	38%
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.	\$44,310,024

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).

59%

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)?

64.12%

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)

NYC Department of Social Services (DSS) serves as both the NYC Emergency Solutions Grant (ESG) grantee and the lead agency and collaborative applicant for the NYC CoC. These complementary roles help facilitate ongoing coordination and consultation between the CoC and ESG program management in the planning, allocation and administration of ESG funds. This coordination includes establishing funding priorities, developing performance standards, evaluating outcomes, and informing policies related to the administration of the Homeless Management Information System (HMIS).

The CoC's commitment to this collaborative planning process is codified in the CoC's Bylaws. Article II (Mission and Purpose) identifies among the CoC responsibilities the need to "manage CoC Planning activities with the Emergency Solutions Grant (ESG) recipient as part of the Consolidated Plan." Through this process, the CoC and ESG recipients work together to assess community needs. Identify service gaps, align funding priorities, and coordinate strategies to address homelessness across NYC.

The goals established in NYC's five- year Consolidated Plan are closely aligned with the CoC's mission to invest in proven strategies to reduce both sheltered and unsheltered homelessness, prevent households at risk of homelessness from entering shelter; connect individuals and families to permanent housing and community-based resources, and promote housing stability. The CoC and ESG recipients use data, system performance information, and ongoing engagement with providers and community stakeholders to monitor emerging trends and adjust priorities as needs evolve.

The collaborative relationship between the CoC and the ESG recipient is further reinforced through shared leadership. The Associate Commissioner of the DSS unit responsible for ESG project management serves as one of the CoC Co-Chairs, providing a direct mechanism for communication and coordination between ESG administration and CoC leadership. CoC Co-chair and ESG staff work together to identify gaps in the homelessness response system, assess the needs of people experiencing homelessness, and use the findings to inform the Consolidated Plan Priorities.

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 NYC CoC coordinates with emergency shelter providers through a citywide coordinated-entry framework to connect individuals and families experiencing homelessness with appropriate CoC-funded housing assistance. Shelter providers serve as critical access points for identifying households experiencing homelessness, assessing housing and service needs, and facilitating connections to CoC resources, including rapid rehousing (RRH), permanent supportive housing, and other housing interventions. The CoC uses the Coordinated Assessment and Placement System (CAPS) to support consistent, transparent, and person-centered assessment and referral practices.

Through intake, ongoing case management, housing planning, and service-plan reviews, shelter staff identify households that may be eligible for CoC assistance and support them in completing required assessments, documentation, and applications. Providers help households address immediate needs and barriers to housing, including obtaining identification and income documentation, accessing public benefits, addressing safety concerns, and preparing for housing placement. Shelter providers also work with households to identify the intervention that best aligns with their needs, including connecting households able to achieve housing stability with RRH. RRH combines housing search and relocation assistance, landlord engagement, case management, and time-limited rental assistance to support a rapid transition from homelessness to permanent housing.

The CoC supports coordination through program guidance, technical assistance, regular communication, data-system procedures, and established referral protocols. Available client-level information and housing assessments help inform referrals based on household composition, homelessness history, disability and service needs, income, safety considerations, and the household's ability to sustain housing with time-limited assistance. Coordinated Entry helps the CoC assess and prioritize access to scarce housing resources based on established eligibility and prioritization criteria.

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 NYC CoC maintains strong, ongoing data-sharing partnerships with City and State government agencies to ensure that current, comprehensive information about homelessness informs planning, resource allocation, and system improvement. The CoC is housed within the NYC Department of Social Services' Office of Research and Policy Innovation (ORPI), which leads the CoC's HMIS, HIC, and PIT data collection, analysis, and reporting efforts.

ORPI shares System Performance Measures (SPMs) annually with City officials and CoC stakeholders to assess system effectiveness, identify trends, and inform priorities for improving outcomes. In addition, ORPI provides the NYS Office of Temporary and Disability Assistance (OTDA) with biannual reports on persons served, exit rates and destinations, and length of stay across Outreach, Prevention, Shelter, Transitional Housing, and Permanent Supportive Housing. These reports include breakdowns by household type and key special populations, including veterans and veteran families, enabling State and local partners to identify disparities, monitor outcomes, and better understand the needs of different populations experiencing or at risk of homelessness.

The CoC also provides HIC and PIT data to City and State officials annually and upon request. These data provide critical information on the size and characteristics of the homeless population, available housing resources, and changes in system capacity, supporting coordinated planning across government agencies and the broader homelessness response system.

Through these established data-sharing practices, the CoC ensures that HUD-required and locally collected data are not only reported for compliance purposes, but actively used to strengthen coordination, identify emerging needs, evaluate system performance, and inform policy and resource decisions. Data are shared in accordance with applicable privacy, confidentiality, and legal requirements.

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 NYC CoC operates within one of the nation's largest and most complex homelessness response systems, serving individuals and families across shelter, street outreach, health, social service, and other systems of care. The scale and complexity of this system require connecting information across data sources to better understand client needs, identify gaps, and improve outcomes.

The NYC Department of Social Services (DSS) has a coordinated data strategy that brings together information across homeless service sectors to support timely, data-driven planning and service delivery. A key part of this is the integration of outreach data from StreetSmart with shelter and social services data, which creates a more comprehensive understanding of clients' interactions with the homelessness response system. We additionally do frequent matches to Medicaid claims data to understand the health and mental health needs of New Yorkers experiencing homelessness.

One example of NYC's use of cross-system data is the Coordinated Application and Placement System (CAPS). CAPS gives case managers access to information about a client's interactions with shelters, hospitals, and the corrections system, helping staff better understand needs, history, and preferences. CAPS also maintains critical personal documentation needed to pursue employment and housing and identifies housing opportunities for which clients may be eligible, in many cases connecting them directly to the appropriate application portal.

These integrated data are used to examine pathways from services to outcomes, identify populations or services that may be underrepresented or underutilized, and identify opportunities to improve access and performance. Findings can inform changes to policy, practice, resource allocation, and provider strategies.

The NYC HMIS serves as a central data warehouse through which multiple systems can converge. Data from shelter system's CARES database, StreetSmart, CAPS, and other data sources are incorporated into the HMIS warehouse, allowing for cross-system analysis while maintaining appropriate data governance and privacy protections. In 2027, NYC will transition its warehouse to a Microsoft Fabric platform using a dynamic data lake that will expand our ability to develop dynamic reporting and dashboards and further strengthen NYC's ability to turn data into actionable insights, improve coordination, and improve outcomes for people experiencing homelessness.

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 NYC CoC supports participant connections to employment and training opportunities through partnerships with the Human Resources Administration (HRA) and a network of workforce development programs developed and administered by CoC grantee organizations. All HRA Career Services programs include resume and interview support, benefits counseling, and referrals to job readiness training, vocational and sector-specific training, and opportunities for educational advancement to prepare PH, TH, and SSO participants receiving cash assistance and SNAP benefits for higher-wage jobs. HRA maintains its own workforce pipeline that matches employers in the business community directly with job seekers receiving these mainstream benefits.

In addition to the city agencies that administer WIOA-funded programming, the NYC Workforce Development Board local plan identifies a network of roughly 200 workforce programs run by at least 150 community-based nonprofits and employment service providers. Approximately 30 of these programs are administered by CoC grantees through in-house services or co-located with social enterprise models of employment. Notable initiatives include Project Renewal's Behavioral Health, Culinary Arts, and Social Service Training Programs; Concern for Independent Living's Cyclone Bagels—a participant-run bagel shop co-located with supportive housing for veterans; Jericho Project's Workforce Opportunities Program; and the Center for Urban Community Services' Career Network.

The CoC facilitates connections between these programs and all CoC-funded housing and SSO projects through a range of community-centered events and activities, including dedicated public meeting agendas and stakeholder engagement sessions with grantee workforce teams. These activities serve to both raise awareness of NYC's robust public and private workforce development system and identify areas for further support and innovation. The CoC additionally encourages all projects to direct a portion of supportive services funds towards participant employment and training activities, providing technical assistance to support program operations and ongoing partnerships within the existing workforce development landscape.

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)

NYC Department of Homeless Services (DHS) Street Homeless Solutions (SHS) operates a comprehensive 24/7/365 outreach system to identify, engage, and connect New Yorkers experiencing unsheltered homelessness to shelter, health care, behavioral health services, supportive services, and permanent housing. SHS coordinates with law enforcement, transit personnel, EMS, hospitals, and other first responders to combine outreach and clinical expertise with safety, emergency response, transportation, and operational capabilities.

Partnership Assistance for Transit Homelessness (PATH): PATH is a subway co-response initiative involving DHS SHS, the NYPD Transit Bureau, and clinical partners. Teams conduct targeted outreach to individuals experiencing unsheltered homelessness, assess immediate needs, build rapport, and offer connections to low-barrier shelter, Safe Havens, stabilization programs, food, medical care, behavioral health services, and other supports. When medical or psychiatric emergencies arise, teams coordinate with EMS for appropriate evaluation and transport.

Subway Co-Response Outreach Teams (SCOUT): SCOUT is a partnership among DHS, the MTA, and MTA Police Department (MTAPD), combining clinical expertise with transit public-safety resources. DHS clinicians and MTAPD officers locate and engage individuals who may be experiencing serious mental illness, behavioral health crises, physical health concerns, or other urgent needs. Teams facilitate voluntary connections to shelter and services, medical or psychiatric evaluation, or hospital transportation when appropriate.

End-of-Line and Encampment Outreach: SHS conducts intensive outreach at subway terminals and encampments in coordination with NYPD, MTAPD, MTA/New York City Transit, contracted outreach providers, and City agencies including Sanitation, Parks, and Transportation. Teams repeatedly offer connections to Drop-In Centers, Safe Havens, stabilization beds, medical and behavioral health care, benefits, case management, and housing. Persistent engagement allows individuals who initially decline services to build trust and reconnect when ready.

EMS and First-Responder Coordination: Across SHS operations, outreach teams and clinicians coordinate with EMS and other first responders when individuals require emergency medical or psychiatric assessment or transportation. Following acute care, outreach teams can support continuity of care and connections to shelter and services.

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 NYC CoC supports family and support-network reunification as part of their diversion efforts for individuals and families at NYC Department of Homeless Services (DHS) emergency shelter intake. During the intake process, DHS staff explore whether an applicant has relatives, friends, or other supportive connections who may be able to provide a safe and stable alternative to shelter. This includes identifying potential reunification opportunities, assessing whether the arrangement is viable, and with the applicant's consent, contacting the identified support person to confirm their willingness and ability to assist.

When a safe and appropriate reunification option is identified, staff help coordinate the necessary arrangements. This may include confirming the destination, developing a travel plan, addressing documentation or scheduling needs, and communicating with family members, service providers, or other entities in the receiving location. Staff may also help connect the applicant to available services or assistance in the destination community to support a successful transition.

Through this family and support-network reunification program, Project Reconnect, DHS assists eligible individuals and families who have a viable housing option locally, elsewhere in the United States, or internationally. The program covers eligible transportation costs associated with reunification, including travel to another geographic area when appropriate. Depending on the circumstances and destination, assistance may include arranging and purchasing bus, train, or airfare and coordinating transportation to the departure location.

Before travel is arranged, staff verify that the receiving party has agreed to the reunification and that the applicant will have an appropriate place to stay upon arrival. Staff also work to identify and resolve potential barriers to travel and coordinate logistics so the individual or family can reach the destination safely.

These efforts help applicants reconnect with trusted support systems, avoid or shorten a shelter stay when a safe alternative is available, and transition to a more stable living arrangement. Participation is voluntary, and reunification is pursued only when the applicant agrees and the proposed arrangement has been assessed as safe, appropriate, and feasible.

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 NYC CoC cooperates fully with local efforts to advance public safety and assists first responders in providing services to homeless individuals. This is demonstrated through the Quarterly Interagency Reporting on Encampment Cleanups and Aided Removals. This quarterly report that is required by NYC Local Law 34 of 2024, provides strong evidence that NYC has a robust local effort to advance these objectives. The most recent publicly available report for CY25Q2 shows a clear personnel and financial investment in clearing encampments.

Aggregate encampment removal costs for the quarter totaled \$674,449 across four city agencies: NYC DHS, NYC Police Department(NYPD), NYC Parks, and the Department of Sanitations (DSNY). This includes \$374.068 in spending specifically for NYPD Aided Removal costs. Aggregate Encampment Personnel Counts for the quarter total 3,260 personnel, including 1,667 from NYPD.

These investments and the coordinated response to advance these objectives have resulted in large numbers of individuals being assisted in through encampment cleanups and NYPD aided homeless removals. In just the 3-month period of CY25Q2, 592 street homeless individuals were removed from an encampment location and related personal property was cleared through coordinated interagency encampment cleanups. Additionally, in the same time period, NYC Police Department officers conducted 6,215 individual aided homeless removals.

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)

NYC Administrative Code 16-122 currently prohibits a person from erecting a structure (which includes encampments) on sidewalks or other public places. This shapes how persons experiencing unsheltered homelessness are identified and connected to services. Under NYC311's "Homeless Encampment" policy, reports of encampments trigger a NYC Police Department (NYPD) response within four hours, followed by NYC Department of Homeless Services (DHS) outreach teams who verify the site, offer shelter placement, and safeguard belongings for up to 90 days. Through this approach, DHS addresses encampment clean-ups in a manner that balances the needs of the community with the needs of one of our most vulnerable populations, street homeless individuals.

The NYC CoC leverages these local policies to create an interagency approach to quickly clear encampments on public property. DHS Outreach Workers, DHS nurses, DHS-contracted outreach providers and clinicians all regularly visit encampment sites and attempt to connect clients located within such sites to services and housing. Encampment sites identified for emergency clearings are addressed on an expedited timeline. All non-emergency clearing encampment sites are visited at least once a day for seven days by different outreach entities in order to connect to clients living within such encampments and connect them to services. Services offered can range from assistance with storage for belongings to direct on-street provision of medical/mental health/ substance use services, assistance with housing packages and referrals.

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)

NYC is unique among U.S. cities in operating under a right to shelter mandate: anyone seeking shelter can access it, 24 hours a day, 365 days a year. As a result, the persistence of street encampments in NYC is not primarily a function of unmet access to temporary housing, it reflects the complex needs of a population disproportionately affected by severe trauma, serious mental illness, and chronic substance use disorder. Many individuals who remain unsheltered are choosing the street over available shelter, often citing a sense of autonomy, freedom, safety, and informal community that they feel shelter settings don't offer them.

In NYC, encampments are defined as a fixed or temporary physical structure built or set up as a shelter or dwelling in an area not meant for people to live, such as areas without sanitation services, water, trash removal, etc. An encampment does not need to be occupied to be considered an encampment; a structure that has been abandoned is still considered an encampment.

Encampments across the city vary widely in scale and character, ranging from a single individual with an accumulation of belongings to multi-person sites where several individuals gather in one location. A significant portion of this population, particularly at smaller non-structural sites, is transient, moving between locations rather than remaining fixed in one place. This mobility is a defining operational challenge: DHS works continuously to identify and re-verify encampment locations, direct outreach, and resources to them, and maintain engagement with individuals even as their location shifts.

Despite these challenges, DHS outreach connects individuals to transitional housing daily, and the Street to Home pilot provides a direct pathway to permanent housing through single room occupancy (SRO) placements. Engagement strategies are tailored to the individual, whether that is a person with long-term, single-site street homelessness driven by serious mental illness, or someone more transient who needs consistent reengagement and referral to services wherever they are found.

DHS Outreach's holistic service approach and the coordination with law enforcement (NY Police Department) to clear encampments has lead to a reduction of encampments across NYC, as evidenced by the reduction from 543 encampments in July of 2024 to 382 encampments in June 2025.

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)

NYS and NYC have enacted several laws and policies that decrease and discourage the usage of illicit drugs in public. NY Penal Law §§ 220.03-220.21 makes it illegal to possess a controlled substance, with escalating penalties based on the weight of the substance. There are also enhanced penalties based on proximity to a school or playground. NY Penal Law § 220 defines controlled substances to include all substances listed in the NY Public Health Law § 3306 schedules I, II, III, IV, and V with the exception of marijuana. It is illegal to possess a controlled substance without a valid prescription or licensed authorization. Additionally, NY Penal Law § 240.40 makes it illegal to be publicly under the influence of a narcotic or a drug other than alcohol to the degree that he may endanger himself or other persons or property. NYC has taken additional steps to prohibit or discourage use of illicit drugs in public. In 2014, the City Council enacted the Smoke-Free Air Act which prohibited the smoking of any substance, legal or illicit, in many outdoor public spaces, including NYC parks, beaches, and pedestrian plazas.

Further, judicial diversion in NYC is a court-supervised alternative to incarceration that allows eligible individuals facing specific felony charges to undergo substance abuse or mental health treatment instead of serving jail time. By placing addicted individuals into comprehensive rehabilitation, this framework directly serves to decrease the public use of illicit drugs and disrupt visible open-air drug markets in local neighborhoods.

The CoC leverages this beneficial policy, which is authorized under NY Criminal Procedure Law (CPL) Article 216, the program aims to address the root causes of criminal behavior by replacing traditional punishment with rehabilitation.

To participate, individuals must undergo a court-approved clinical assessment confirming that a substance use disorder directly contributed to their criminal conduct. This legal mechanism acts as a critical intervention point to quickly connect individuals who are using illicit drugs in public with appropriate services, bypassing months of standard courtroom delays to immediately deploy medical and psychological stabilization. Once enrolled, participants follow a strict, individualized treatment plan that includes rehab, counseling, and routine drug testing, all while making regular court appearances so a specialized judge can monitor their progress.

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)

The most recent reporting from NYS Department of Health (DOH) confirms an overall decline in overdoses in the CoC's(NY-600) geographic area. According to the most recent NY State DOH Opioid Quarterly Report (July 2026), the rate of overdose deaths involving opioids in New York City (crude rate per 100,000 persons) has been cut in half from a high of 31.7 (Apr-Jun 2023) to a rate of 15.1 (Jul-Sep 2025). Naloxone administration reported by EMS in NYC have also declined, from a high of 3,815 (Jul-Sep 2023) to 1,728 (Jan-Mar 2026). While the rate of overdose deaths involving opioids and Naloxone administrations by EMS have dropped, the number of persons enrolling in substance use disorder treatment has held steady in NYC, with a total of 25,715 persons enrolling in the most recent quarterly report (Oct-Dec 2025).

Illicit drug use in public spaces in NYC has seen a decline as well. The NYC Police Department (NYPD) maintains citywide crime statistics based on calls for assistance. According to the most recent Citywide Quality of Life Stat, calls about "Drug use/Sale/OD" are down 44.3% compared to the same period in 2025. Similarly, the overall number of disorderly behavior calls regarding persons in crisis are down 7.9% compared to the same period in 2025.

The CoC capitalizes on these declining metrics by embedding rapid-response protocols into local outreach. In tandem with NYPD and EMS, the CoC supports public safety by routing individuals directly into acute medical and behavioral treatment when appropriate. This synchronized approach ensures that individuals with substance use disorders have a coordinated pipeline to recovery services.

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)

NYS Mental Hygiene Law (MHL) § 9.41 and § 9.58 allow for evaluations of persons who are dangers to themselves or others to be involuntarily committed for psychiatric evaluation. A psychiatric evaluation can be initiated either by law enforcement pursuant to section 9.41 or designated clinicians pursuant to section 9.58. The CoC's street outreach funded contracts all have designated clinicians operating with and accessible to the outreach teams to conduct involuntary commitment evaluations as necessary. The term "designated clinicians" is broadly defined to include physicians, or when working with a mobile crisis outreach team it also includes psychologists, registered professional nurse, a licensed clinical social worker or a licensed master social worker working with supervision.

The City as a whole utilizes the involuntary removal process regularly, as seen in the 2025 Annual Report, there were 7,299 involuntary removals under MHL § 9.41 and 1,408 involuntary removals under MHL § 9.58. The CoC will utilize the involuntary removal process as part of its street homeless outreach contract to evaluate and transport individuals they are engaging with as appropriate. The laws can also be utilized for those in private dwellings, including shelter or other temporary or permanent housing funded by the CoC.

In addition, Kendra's Law is a NYS statute that allows courts to order Assisted Outpatient Treatment (AOT) for individuals with serious mental illness who are deemed a danger to themselves or others. Through NYC's AOT Program, participants receive structured, court mandated treatment designed to stabilize symptoms, reduce risk, and help individuals remain safely housed in the community.

The CoC works in coordination with the NYC Department of Health and Mental Health (DOHMH), the agency that oversees the AOT program, which ultimately supports our ability to meet HUD's objectives. By ensuring that high risk individuals are connected to required treatment, AOT contributes to safer public environments and reduces the likelihood of violence, crisis events, or destabilizing behaviors that can harm persons experiencing homelessness. This aligns directly with HUD's priority of reducing trauma and creating safe, stable environments for citizens of NYC.

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)

NYS passed the Sexual Offender Registration Act (SORA) in 1996 as well as the Sexual Assault Reform Act (SARA) in 2000. SORA requires all those convicted of sex offenses to be categorized as levels 1, 2, or 3 and to follow certain requirements based on their crimes and designation level, including reporting changes to addresses within 10 days, having a current photo taken, disclosing internet usernames and email addresses, and reporting to law enforcement on a set schedule. The minimum amount of time a person will be on the registry is 20 years. SARA requires Level 2 and Level 3 offenders or those whose victims were children to adhere to additional requirements, including not residing within 1000 feet of a school, and not entering schools, parks, zoos, or other facilities where minors are likely to be present. SORA also imposes conditions on those who move to New York from out of state and requires a registration. A public registry is searchable for level 2 and 3 offenders.

The CoC leverages these beneficial NY State laws as well as local NYC policies to ensure information is shared in accordance with SORNA. The NYC Department of Homeless Services (DHS) works to place homeless individuals in accordance with SORA and SARA requirements. DHS coordinates intake and placement for new parolees who will be subject to SARA to ensure compliance with the law. DHS also screens individuals at intake and works with parole officers to determine if there any necessary restrictions or conditions to placement.

For Permanent Supportive Housing, the practice is that applicants check the address of the program they have been referred to with their Probation/Parole officer. If the address is cleared, then the interview process proceeds as per usual. If the address is disallowed, the case worker declines the interview in the NYC Coordinated Entry System and another eligible applicant is selected. For clients in DHS programs, DHS helps addresses get checked centrally at Department of Corrections for faster response times.

Applicants accepted to units with certain forms of federally-funded rental assistance, such as Project-Based Vouchers administered by NYC Housing Preservation and Development (HPD) or NYCHA, will have their status checked by the PHA. Applicants with prohibited statuses will be notified of their denial and another eligible applicant will be referred to the unit.

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 NYC Department of Homeless Services (DHS) operates one of the nation's largest outreach systems, with more than 400 outreach professionals working across all five boroughs. DHS Street Homeless Solutions oversees contracted street and subway outreach teams that provide outreach, case management, and housing placement services, with outreach available 24/7.

The NYC CoC strategy emphasizes persistent, person-centered engagement. Recognizing that individuals experiencing unsheltered homelessness may initially decline services or require customized assistance, outreach teams make repeated contacts, build trust, assess individual needs, and continually offer pathways indoors. The Joint Command Center (JCC) coordinates with outreach teams to track, assist, and engage individuals on a case-by-case basis and supports immediate responses to opportunities for engagement.

Once engaged, individuals are connected to services based on need, ranging from assistance obtaining identification and benefits to health care, referrals to substance use treatment and mental health treatment, family reunification counseling, shelter, specialized beds, housing navigation, development of housing packages, permanent housing, and tenancy-sustaining services. DHS also partners with NYC Health + Hospitals (H+H) through the Street Outreach and Wellness (SHOW) program, which deploys mobile units providing on-site medical and social services, including wound care, vaccinations, and behavioral health care.

The CoC supplements citywide outreach with specialized street and subway initiatives for individuals with complex behavioral health needs. Subway Co-Response Outreach Teams (SCOUT) and Partnership Assistance for Transit Homelessness (PATH) pair DHS staff with first responders and health professionals to connect individuals to hospitals, health care, specialized beds, and shelter.

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)	Yes
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	Yes
7.	Public Pre-K	Yes
8.	Tribal Home Visiting Program	No
	Other (limit 150 characters)	
9.		

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)	Yes
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)

The NYC CoC, led by the NYC Department of Social Services (DSS), has written policies and procedures to ensure that individuals and families experiencing homelessness are informed of their educational rights and connected to appropriate educational services. These procedures are implemented across the homelessness response system in coordination with the NYC Public Schools (NYCPS), including Students in Temporary Housing (STH) and McKinney-Vento educational supports.

For families entering shelter, DSS assesses the educational needs of school-age children and considers school attendance and educational continuity when making shelter placements. Family placement practices prioritize keeping children connected to their existing schools when feasible, including consideration of the school attended by the youngest school-age child.

Placement information is tracked through DSS's shelter and management reporting systems, including the Monthly Management Report (MMR), allowing DSS to monitor family placements and identify school-age children requiring educational supports.

DSS and shelter providers inform families of their rights under the McKinney-Vento Homeless Assistance Act, including the right to enroll in school, remain in the school of origin when appropriate, and receive transportation and other educational supports. Students in Temporary Housing who are enrolled in school are identified and connected to the appropriate NYCPS supports and school-based resources. Shelter and case-management staff assist families with school enrollment, transfers, documentation, and coordination with NYCPS and McKinney-Vento liaisons when educational needs arise.

Transportation is an integral component of this process. For eligible students, DSS and NYCPS coordinate transportation to the student's school or other appropriate educational destination. DSS provides or facilitates access to OMNY cards and other transportation resources to support students and families in reaching school and destination services when applicable. These procedures help reduce transportation barriers and support educational continuity despite changes in shelter placement.

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 NYC CoC coordinates with the NYC Administration for Children's Services (ACS) and other child welfare partners to support youth and families transitioning from public systems of care and to prevent homelessness among households involved with child welfare services.

ACS identifies families and youth involved in the child welfare system who may be at risk of housing instability or homelessness, including families with an active preventive services case. ACS and NYC Department of Homeless Services (DHS) coordinate closely to ensure households can be connected to housing assistance, homelessness prevention resources, benefits, case management, and other supports based on their circumstances and eligibility.

For families in emergency shelter involved with ACS that require housing assistance to safely transition to or maintain community-based housing, DHS coordinates access to available housing resources. This includes connecting eligible households to the City Family Homelessness and Eviction Prevention Supplement (CityFHEPS), a city-funded rental assistance program that can help eligible families obtain or retain permanent housing in the community. When appropriate, housing assistance can support a family's transition from a shelter or other temporary setting into a stable community residence, reducing reliance on the shelter system and supporting family preservation.

DHS and ACS also coordinate around the housing needs of youth and families whose involvement with public systems may affect their ability to secure or maintain housing. Caseworkers and service providers assist households with applications, documentation, benefits, housing search, landlord engagement, and connections to ongoing supportive services. This coordination allows housing needs to be addressed alongside child welfare and family-support needs rather than treating homelessness separately from the underlying child welfare case.

For youth transitioning from foster care, the City's child welfare and housing systems similarly coordinate to connect eligible young people with housing resources and supportive services as they move toward greater independence. The CoC's network of permanent housing, rapid rehousing, supportive services, and other community-based resources provides additional pathways for eligible youth who are experiencing or at risk of homelessness.

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)

The NYC Department of Youth and Community Development (DYCD) funds community-based organizations to provide services to support runaway and homeless youth (RHY) and help them develop a plan to reunite with their families. The RHY Services continuum includes a street outreach program, eight drop-in centers, five of which are open 24/7, and residential programs including crisis services support services and transitional living programs, some of which serve pregnant and parenting youth.

The CoC structure supports collaboration. A representative from the DYCD RHY program has a government seat on the steering committee in order to lift up the needs of youth and young adults experiencing homelessness in NYC, as well as ensuring that they have access to serviced funded through the CoC. The Youth Committee of the CoC is co-chaired by two DYCD representatives and youth with lived experience from a RHY program provider. This representation ensures that the youth served through the DYCD RHY programs have access to the programs funded through the CoC.

Funding administered through the CoC supports RHY. DYCD was awarded a Youth Homelessness Demonstration Program (YHDP), which funded a street outreach program, rapid re-housing programs, and social services only programs specifically for youth. DYCD funded providers participated in the formation of the coordinated community plan to prevent and end youth and young adult homelessness. The providers, youth with lived experience (NYC Youth Action Board) and 15 key city agencies were part of the implementation of the YHDP program. The experience with the YHDP cemented collaboration among the RHY services providers and the work of the CoC. Several of the RHY services providers receive funding for supportive housing through the CoC, thus ensuring that youth are included in these essential services.

The CoC, the NYC Department of Social Services (DSS), and DYCD collaborate on the annual Point-in-Time Count. The DSS initiative is the HOPE Count, and the DYCD initiative is the NYC Youth Count. Together we accomplish the aim of counting the number of unsheltered individuals in NYC.

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)

VIP Case Sandra (TH) has been in operation since 2005. This program provides services to families with children who are survivors of domestic violence. Casa Sandra leverages its relationships with family shelters to prioritize moving program participants and their families into permanent housing while providing supportive, trauma informed services for up to 24 months. Casa Sandra provides a safe environment for healing for all household members (adults, youth, children).

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)

Casa Sandra's highly trained Housing Case Managers (HCM) assess each participant and their household to ascertain which supportive services are the best fit to support them to increase their income to pay rent. HCM are aware that each case is unique and each household dynamic different. As such, during the intake process, they inquire about the participants' hobbies and interests and if there are other things that they are interested in exploring. Casa Sandra's HCM understands that as a DV survivor, there are many things that the person may suppress. Once the engagement is fluid with the HCM as a rapport has been established, the HCM presents a range of workforce development opportunities, including highlighting Casa Sandra's own workforce development program known as the "Economic Justice Program" (EJP). EJP's mission is to create long-term stability for survivors. As described in more detail below, EJP offers small grants to help clients start their own businesses, conducts financial workshops, and provides personalized financial coaching to help clients build alternative sources of income. This program is designed to support survivors who face challenges in finding traditional employment opportunities.

Serving a DV population, Casa Sandra approaches workforce development with a trauma informed lens. Understanding that there are three types of abuse: financial control, employment sabotage, and economic exploitation. Casa Sandra's EJP services are tailored to address each type and work to give the client a personalized service to help them achieve financial freedom, and self-sufficiency. Services include:

- (1) Financial Workshops: Workshops in financial literacy, help rebuilding credit, labor rights, job readiness, and skill-building to nurture small business ventures
- (2) Achieving Goals: Support for survivors to obtain their vocational, entrepreneurial, and educational goals
- (3) Financial Management: Help for survivors to open bank accounts, file taxes, and learn budgeting skills
- (4) Marketing and Online Sales: Expert trained staff to train survivors in how to market their small business and develop skills for online strategies, including how to develop web pages, establish social media accounts for small businesses, and create engaging promotional videos

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)

Casa Sandra serves as a bridge within NYC's complex safety net of institutions and organizations, including DSS, HRA, and other collaborating partners (who also serve the DV community). Casa Sandra leverages funding from the Homeless and Housing Assistance Program (HHAP), and Office on Violence Against Women (OVW) to optimize its daily operations and provide case management and financial services for DV survivors. Casa Sandra's trauma-informed services and referrals for mental health services, as well as their economic justice and advocacy work, emphasize self-sufficiency practices. They help survivors navigate public benefits, obtain employment and child-care services, develop and implement savings plans, and ultimately transition to permanent un-subsidized housing placement. As per Casa Sandra's 2024-2025 Annual Performance Report 100% of program participants exited to permanent housing. Additionally, a 25% increase in income for program leavers was reported, such that most clients exiting were no longer reliant upon public benefits.

Casa Sandra provides comprehensive services to tenants beginning on their first day in the program. Program participants stay in a private apartment for up to 12 months -24 months. The program supports survivors in becoming highly independent. All units are furnished and include appliances, bed linens, and access to food and toiletries. Tenants are assigned individual Housing Case Managers (HCM) during intake and assessment. Participants work collaboratively to create an individualized service plan where long-term housing stability is the goal from the very start. A Casa Sandra HCM works with participants to navigate public benefits as well as workforce development opportunities with the goal of helping them eventually move off of safety net assistance. As one example, HCM staff assisted a participant who was receiving WIC to obtain subsidized childcare, which in turn allowed them to complete their cosmetology license and exit the program to unsubsidized housing.

Casa Sandra is committed to meeting participants and their families where they are, understanding the need for a diverse array of programming to meet participant needs. HCMs work one-on-one with survivors to provide tailored case management and financial education. This practice addresses immediate financial goals, helps survivors navigate employment or public benefits, and helps begin the healing process.

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)

Casa Sandra provides survivors with comprehensive assistance that includes connections to childcare, parenting supports, health care, and education to help them stabilize. Casa Sandra works to address the needs of the entire household. As such, Casa Sandra provides referrals to their internal Child and Adolescent Program (CAP). CAP provides clinical support to children and teens aged 3-18 who have faced or witnessed domestic, sexual, and community violence, disasters, traumatic grief, medical trauma, and refugee trauma. CAP provides families with therapeutic interventions that foster healthy parent-child bonds through individual, group, and parent-child counseling, as well as culturally competent parenting workshops. These services create resilient adult/child relationships and mitigate Post-Traumatic Stress Symptoms in adults and children. Through participation in the program, families are given tools to disrupt and end intergenerational cycles of violence. This allows the family to focus on the household's various sustaining components, as the survivor works with a support network to continue the journey toward self-sufficiency.

Casa Sandra holds monthly Town Hall meetings and Parent support groups. Through these connections, participants have been able to build healthy relationships. These skills help participants when they transition to their own permanent housing situations. For the grant period 9/1/2024-8/31/25 seven households were placed into permanent housing; of these households, six were families with children.

Casa Sandra understands that the lack of adequate childcare can hinder the ability to pursue education and or obtain employment. Casa Sandra Housing Case Manager (HCM) have successfully worked with participants to help them overcome these hurdles.

One participant was able to enroll in a Home Health Aide program after receiving childcare assistance. This participant subsequently graduated, found employment, and was able to exit the program to an unsubsidized apartment located with the help of her HCM within the 24-month time frame. Another participant with childcare assistance was able to prepare for and eventually pass her New York State Real Estate Exam to become a licensed real estate agent.

Casa Sandra's 2024-2025 APR indicated a 22% increase of income for Casa Sandra participants and a 25% increase of income for program leavers. The TH program has a 100% PH placement rate and 100% utilization rate.

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)

Once a month the NYC CoC hosts the Veterans Task Force (VTF). Representatives from the two local VA medical centers, SSVF grantees, HUD-VASH providers, the Department of Veterans Services (DVS), the Department of Homeless Services (DHS), the Department of Social Services (DSS), Veteran-serving non-profits and legal aid providers gather to discuss the specific needs of veterans in our community. Areas of collaboration include data sharing, By-Name-List improvement & universal intake language.

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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)

The NYC CoC partners with the Mayor's Office to End Domestic & Gender-Based Violence who oversee the Family Justice Centers, multi-service centers staffed by CBOs & city agencies. HRA Domestic Violence Services (DVS) oversees the City's residential & nonresidential services. ENDGBV & HRA are members of many task forces (TF) including the Brooklyn Human Trafficking TF & Manhattan Sexual Assault TF, and ENDGBV co-chairs the NYS Office for the Prevention of DV's Regional Council meetings in NYC.

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 NYC CoC partners with the NYC Reentry Task Force to provide streamlined, comprehensive reentry services to individuals who are in an “acute rearrest period.” As part of this effort, multiple agencies meet twice a week to discuss the individual cases of people who are leaving custody in order to identify and connect individuals to the public benefits, services, and opportunities that can help the individuals stabilize their life, reducing their likelihood of rearrest and readmission.

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)

The NYC CoC partners with the Coordinated Behavioral Health Task Force initiative which pulls together multiple City partner agencies (H+H, DOHMH, NYPD, MTA, etc.) to serve individuals who are experiencing unsheltered homelessness and have complex health and mental health needs. The work focuses on increasing housing stability with improved outcomes achieved in the health and criminal justice domains as well. This initiative is being rigorously evaluated through a US Treasury SIPPR grant.

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)

West Side Federation for Senior and Supportive Housing (WSFSSH) serves aging adults through CoC-funded TH and PSH projects, Valley Lodge and 129th St. Residence (an NYS-licensed Adult Care Center). These sites provide in-house social services and 24/7 program aides, with long-standing healthcare partnerships providing on-site medical and psychiatric care. WSSFSSH also partners with NYC Department for the Aging for programming across three senior centers offering community support.

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)

Kingsbridge Heights (NY1164) a Permanent Supportive Housing (PSH) project prioritizes individuals and families experiencing chronic homelessness. Their ranking in the CoC Project listing is # 23. According to their Annual Progress Report, for the program year ending 4/30/2026, 100% of clients served were Chronically Homeless individuals and families (33 units with 111 beds).

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)

Operated by the Center for Urban Community Services (CUCS), the Kingsbridge Heights PSH program utilizes a person-centered case management model grounded in evidence-based practices, including Motivational Interviewing and skill-building interventions for on-site behavioral healthcare. Families work collaboratively with case managers to establish individualized goals. Each household collaborates with a case manager to set personalized goals focused on stability, income, and well-being.

The program also includes a certified SOAR (SSI/SSDI Outreach, Access, and Recovery) worker who assists residents with SSI applications. Currently, three residents are in the application process. Additional funding from the Sunshine Grant has expanded tutoring services for children, particularly those with learning disabilities, through the SMARTS curriculum, which strengthens executive functioning skills.

Mental health remains a key service area, 52 percent of heads of household and one adult child received on-site psychiatric care from Janian Medical Care, a CUCS affiliate. The Education and Activities Specialist (EAS) staff supported residents with navigating individual educational and living plans, organizing self-care events, and facilitating family engagement and enrichment activities. Community involvement expanded through partnerships with the Kingsbridge Heights Community Center, the NYPD Community Affairs, and Bronx-based educational and legal organizations.

CUCS Staff collaborate with partners, including Administration for Children's Services (ACS), preventive service agencies and providers such as HomeBase, The Bronx Defenders, Legal Aid providers, and local schools to advocate for families and address their needs.

An Education and Activities Specialist supports families with IEP advocacy, community-building activities, and connections to community resources.

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)

Kingsbridge Heights program provides supportive permanent housing and services to 32 chronically homeless individuals and families. At least one person in each household has a mental illness; many clients with Serious Mental Illness (SMI) have also experienced domestic violence, substance use issues, live with physical disabilities and HIV/AIDS, and may possess a developmental disability. Kingsbridge Heights neighborhood is in the Bronx, NY, a community with vulnerable individuals in great need of social services and housing. The referrals are through the CoC's Coordinated Assessment System, which includes SPOA (Single Point of Access), and the Department of Homeless Services (DHS) streamlined housing system to connect those most in need to vacant units. CUCS' psychiatric services program, Janian Medical Care, provides on-site services.

CUCS also utilizes their contract with the NYC Department of Health whose mission is "to provide direction, planning, funding, and oversight for the provision of mental health, mental retardation/developmental disabilities, chemical dependency treatment and prevention services to the residents of New York City and also to engage in public education and advocacy to insure the provision of culturally competent, cost-effective, high-quality care." The Kingsbridge Heights supportive permanent housing program provides the following services on daily basis: Assessment of Service Needs; Case Management; Education Services; Employment Assistance and Job Training; Food, Legal Services; Mental Health Services, Substance Abuse Treatment Services.

CUCS Staff also assist with off-site medical appointments. To strengthen family services, staff completed Parenting Journey facilitator training and led a 12-session parent group focused on self-awareness, parenting practices, and healthy relationships. The Kingsbridge Heights program is further exploring expanding programming grounded in Family Systems Theory to provide comprehensive services to adults and families with children. NYC CoC, HPD, and CUCS, as partners of the Continuum of Care, remain dedicated to ending homelessness and supporting long-term family success through a holistic, data-driven approach.

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)

Since opening on March 1, 2019, the Kingsbridge Heights supportive permanent housing program has housed residents, including adults and children, at a 32-unit operational capacity. During the most recently completed program year, CUCS's Kingsbridge PSH program, as HPD's subrecipient, maintained a utilization rate of 93.75% and a 94.12% rate of exits to positive housing destinations, with 16 households leaving for independent housing or other permanent housing destinations. A major focus for such success is on improving financial stability. CUCS Staff assist families in accessing benefits such as SSI, WIC, and TANF. During the reporting period, 82.5% of families increased or gained income, 100% accessed at least one non-cash benefit, and 100% of residents maintained health insurance coverage.

The program's goals include that 90% will maintain stable permanent housing, and 90% of adults age 18 or older will maintain or increase their income at the end of the operating year or at program exit. Continued CoC Program funding supports rental assistance, which aids in tenant stability, self-sufficiency, and independence.

On-site support services include assessment of service needs, case management, educational services, employment training and job assistance, food, housing search and counseling services, life skills training, mental health services, outreach services, substance abuse treatment services, and transportation. Staff members work with children and youth to ensure that they are enrolled in school and receive educational services.

Kingsbridge also promotes resident participation in external programs and creates volunteer opportunities for both residents and the broader community. The program is located close to public transportation, making it easy for individuals to utilize services and amenities in the community. During the current reporting period, 78% of residents gained or increased their income.

A Sunshine Grant funded tutoring services for children with learning disabilities. Using the SMARTS Executive Function curriculum, students completed assessments and received tailored lessons that improved their organization, working memory, and self-advocacy. The Bragers Scholarship Fund was established to support post-secondary education.

These services focusing on improvements on education and job training and readiness correlates with program's success in 16 (sixteen) program exits to unsubsidized independent housing and living or othe

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?	Yes
2.	If you selected 'Yes' for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	08/05/2026
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes

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.	09/23/2026
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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 NYC CoC is reallocating funds from lower-performing and less needed projects to create a list of high performing and high priority projects through use of multiple strategies, all of which we communicated through grantee-specific notifications. First, the lowest performing PSH projects in our Annual Evaluation were selected for full reallocation. The Annual Evaluation metrics differ by project type but focus on the categories of Housing Stabilization, Utilization, and Income & Benefits. Similarly, only the highest performing RRH projects by special population served were included in Tier 1. All renewing TH projects were maintained in Tier 1 and renewing SSO projects were maintained only if they were effectively operating in terms of spenddown and compliance.

Our second strategy involved a focus on projects also receiving funding from other City/State agencies. Through conversation with partner agencies and grantees, a subset of projects was selected for full reallocation based on the expectation that those projects will continue operations in the absence of CoC funds while minimizing potential housing impacts to existing program participants. By focusing on reallocating of lower performing projects and grants that are less essential to the overall viability of the housing programs they support, we are taking a strategic approach to maximizing the impact of CoC funds.

Finally, to select high-performing projects that will apply for reallocated funds, we used a new project scoring rubric focused on organizational capacity, alignment with HUD and local priorities, and project scope and design. This rubric rewarded new project applicants with proven organizational capacity and strong experience in the proposed activities, as well as service approaches that support participant self-sufficiency and long-term housing stability.

(2) Yes, our CoC identified the low performing and less needed projects described above through our 2026 local competition.

(3) Yes, the CoC is reallocating 28 renewal projects based on low performance and community need.

(4) N/A

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)	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)

There were no methodological or data quality changes in our sheltered count between 2025 and 2026. We did not conduct an unsheltered count for HUD in 2026 due to extreme weather.

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)

Evaluation Period: 12 month period (July 2024-June 2025)

The NYC CoC has dedicated enormous resources and taken several steps to reduce the number of encampments during the evaluation period. The CoC and the NYC Department of Homeless Services (DHS) efforts address the needs of people in encampments together with the public's need for clear sidewalks and unobstructed access to homes, businesses, and parks.

In NYC, encampments are defined as a fixed or temporary physical structure built or set up as a shelter or dwelling in an area not meant for people to live, such as areas without sanitation services, water, trash removal, etc. An encampment does not need to be occupied to be considered an encampment; a structure that has been abandoned is still considered an encampment.

First, we made sure clients in encampments knew when a cleaning was scheduled. Outreach staff communicated the date and time clearly and in advance, and offered clients options both for placement and for help reducing their belongings. This was often challenging, as many clients live with mental health conditions that make it difficult to part with possessions, but our outreach workers approached every situation with compassion and a crises management perspective.

Second, we worked to offer placement options that clients would find desirable. Whenever possible, we offered low-barrier, low-density sites within the same borough and, where available, within the same neighborhood.

Third, when a client showed signs of serious mental illness, we arranged for a clinician to meet with them and offer assessment and support.

Fourth, we ensured that outreach workers were on site for every cleaning. Outreach workers continued to offer placement options and worked with clients and our agency partners to pack the belongings clients wanted to keep and discard items they no longer needed.

Finally, we offered clients the opportunity to voucher essential items they could not carry or could not bring into a shelter or Safe Haven. This ensured that clients did not lose necessary belongings, such as medication or important documents, during a cleaning. It also kept large amounts of belongings from becoming a barrier to placement.

Through this work, the CoC reduced the number of encampments, built trusting relationships with clients, encouraged people experiencing street homelessness to come indoors, and helped keep our communities safe and accessible for everyone.

2A-4a.	Reduce Encampments—Number of Encampments.	
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1. Enter the estimated number of encampments in the beginning of your evaluation period.	543
2. Enter the reduction in the number of encampments during your evaluation period.	161

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.	427
2. Enter the reduction in the number of people in encampments during your evaluation period.	208

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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)

Per the SPM, the number of people who were homeless for the first time in shelter and transitional housing decreased from 90,425 in FFY2024 to 88,495 in FFY2025. This constitutes a 2.13% decrease. In July 2026, NYC's Department of Social Services (DSS) reported nearly 33,000 households helped avoid shelter and remained stably housed based on early interventions provided by the agency through Homebase and other services.

To continue these trends, NYC is taking an "all-of-the-above" approach to protect tenants, add new housing, and invest in affordable and public housing. These measures will act to reduce and prevent homelessness among New Yorkers. This includes keeping New Yorkers in their homes by increasing funding for right to counsel and building 200,000 new affordable homes faster and cheaper over the next decade.

Additionally, to strengthen financial stability, the City connects eligible adults with employment and training opportunities suited to their needs. As one example, HRA's Pathways to Industrial and Construction Careers (PINCC) program offers free training, job placement, and supports such as transportation and tools. It has connected more than 1,300 low-income New Yorkers to prevailing wage jobs since 2024. HRA's Career Services opportunities complement benefits and housing assistance, supporting greater self-sufficiency while recognizing that households have different needs and capacities.

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 NYC CoC is implementing a coordinated, system-wide strategy to reduce the length of time individuals and families remain homeless by accelerating pathways to permanent housing, expanding housing capacity, strengthening services for people experiencing unsheltered homelessness, and reducing administrative barriers to housing placement.

From FFY 2024 to FFY 2025, the average length of time homeless in shelter and transitional housing increased by approximately 20 days, while the median increased by 8 days. For families with children, part of this increase reflects a decline in new shelter entrants; because new entrants generally have shorter stays, fewer new entrants can increase the overall average length of stay. The CoC is using these data to focus on strategies that increase the rate and speed of exits to permanent housing while continuing to prevent new episodes of homelessness.

A key component is reducing barriers that delay housing placement. The City is streamlining administrative processes within housing programs to help households move more quickly from shelter into available housing and is expanding the supply of deeply affordable housing for homeless and high-needs households. These investments, coupled with efforts to strengthen shelter as a bridge to permanent housing, are intended to increase housing exits and reduce time spent in the homeless services system.

The CoC is also strengthening pathways from street homelessness to stable housing. In FY 2026, DHS outreach workers referred more than 13,032 unsheltered New Yorkers to permanent housing, transitional programs, and other stable settings—a 20 percent increase over FY 2025. New outreach investments also emphasize intensive case management and clinical services, including connections to psychiatric care and substance use treatment when appropriate, to address barriers that can delay engagement and housing and services placement.

The CoC will continue to monitor length of homelessness, housing exits, and other SPMs to assess the impact of these strategies, identify populations experiencing longer stays, and adjust resources and interventions accordingly. By combining expanded housing opportunities, streamlined processes, targeted outreach, and data-driven system improvement, the CoC is working to shorten the duration of homelessness and improve the speed and sustainability of exits to housing.

2A-7.	Successful Permanent Housing Placement—Exits to Unsubsidized Housing.	
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Based on HMIS data, what percent of program participants exited from TH/RRH/PSH collectively to unsubsidized housing?	32.16%
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Describe how you calculated the data for this response.**(limit 2,500 characters)**

The percent of program participants exiting from TH/RRH/PSH who moved to unsubsidized housing is 32.16%. This is based on data from an APR run for CoC-funded TH/RRH/PSH projects operating in federal fiscal year 2025 (October 1, 2024 – September 30, 2025). The percent was calculated by first taking the sum of anyone exiting as “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,” and then dividing that number by the total exits during the year (excluding deaths; the rate is 27% with deaths included in denominator). This calculation excludes Victim Service Providers that do not participate in HMIS.

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.	02/10/2026
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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	99,425	3,192	94,752	92.00%
2. Safe Haven (SH) beds	40	0	0	0.00%
3. Transitional Housing (TH) beds	1,976	369	924	39.00%
4. Rapid Re-Housing (RRH) beds	1,041	721	1,762	100.00%
5. Permanent Supportive Housing (PSH) beds	40,371	937	15,043	36.00%
6. Other Permanent Housing (OPH) beds	15,290	0	0	0.00%

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)

We will continue increasing the participation among PSH (currently 36%), TH (39%), and SH projects (0%). Now that HUD has updated the HOMES tool, in the next 12 months we will be able to upload more than 4,000 HUD VASH beds to our HMIS data warehouse. We have also started working with PSH providers that already upload their HUD-funded projects to our HMIS data warehouse and have an additional ~2,000 non-HUD funded beds to upload. These combined efforts will increase our PSH participation to over 52%. TH and SH portfolios are much smaller and potential increases to TH funding will increase our TH participation with the HMIS requirement for funding.

In the next 12 months and beyond, we will continue to encourage participation in our HMIS warehouse using a variety of incentives. First, we are updating our HMIS data warehouse in 2027 with more enhanced reporting, data visualization, and upload capabilities that will increase system performance and data quality. Second, we are working to better align projects in our HMIS system with our coordinated entry system Coordinated Assessment and Placement System (CAPS), which has over 90% PSH participation. This alignment will make it easier to facilitate future uploads from providers and data collected in CAPS. Finally, we are uplifting examples in our community of organizations using APIs to reduce data entry burdens and exploring broader implementations of API.

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	Attachment 1C-1. ...	09/30/2026
02. 1C-1f. List of CoC Program Projects and Number of Units that require Substance Abuse Treatment	Yes	Attachment 1C-1f ...	09/30/2026
03. 1C-3. Language from Project Supportive Service Agreements	Yes	Attachment 1C-3 L...	09/30/2026
04. 1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety	Yes	Attachment 1C-10 ...	09/30/2026
05. 1D-1. Local Competition Scoring Tool	Yes	Attachment 1D-1 L...	09/29/2026

06. 1D-2c. Local Competition Selection Results	Yes	Attachment 1D-2c ...	09/30/2026
07. 2A-8b. FY 2026 HDX Competition Report	Yes	Attachment 2A-8b ...	09/29/2026
08. 3A-1. HUD-2996 Certification for Opportunity Zone Preference Points	No	Attachment 3A-1 H...	09/29/2026
09. 3A-2a. Project List for Other Federal Statutes	No		
10. 3A-DP. Your CoC's Policy or Statement to Advance Recovery	No	Attachment 3A-DP ...	09/29/2026
11. Other	No		

Attachment Details

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

Attachment Details

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

Attachment Details

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

Attachment Details

Document Description: Attachment 1C-10 Evidence of Coordination and Noninterference with Local Efforts to Advance Public Safety

Attachment Details

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

Attachment Details

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

Attachment Details

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

Attachment Details

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

Attachment Details

Document Description:

Attachment Details

Document Description: Attachment 3A-DP 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	09/24/2026
1B. Coordination and Engagement–Accountable Structure and Participation	09/30/2026
1C. Coordination and Engagement	09/30/2026
1D. Project Review/Ranking	09/30/2026
2A. HMIS Implementation	09/30/2026
3A. Policy Initiatives	09/29/2026
4A. Attachments Screen	09/30/2026
Submission Summary	No Input Required



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

Figure	Description	Page Number
1	List of TH/RRH/PSH Projects and Treatment Providers with On Site Substance Use Treatment	2

Grant ID	Applicant Name	Project Name	Project Type
NY0295	COMMUNITY ACTION FOR HUMAN SERVICES, INC.	JHB HDFC (NY0295) FY2024	PSH
NY1519	Concern for Independent Living, Inc.	Concern Pitkin Apartments	PSH
NY0350	CUCS, Inc.	The Prince George	PSH
NY0246	CUCS, Inc.	Dorothy Day	PSH
NY1463	Gay Men's Health Crisis, Inc.	Health and Housing Connect	PSH
NYtrans03	Gay Men's Health Crisis, Inc.	GMHC CoC RRH Project FY24	TH
NY1481	GMHC	Connection to Housing and Care	PSH
NY0286	Goddard Riverside Community Center	Housing Options (NY0286L2T002316)	PSH
NY1039	Goddard Riverside Community Center	Havens (NY1039L2T002308)	PSH
NY0239	Goddard Riverside Community Center	Corner House (NY0239L2T002316)	PSH
NYnew23	Housing Plus Solutions	Journey to Home	TH
NY0249	Housing Works, Inc.	Housing Works Consolidated Congregate Housing FY 24	PSH
NY0225	Jewish Board of Family and Children's Services, Inc.	Burnside Community Residence	TH
NY0297	Kenmore Housing Development Fund Corp.	Kenmore Hall	PSH
NY0374	Lantern Community Services	Schafer Hall SHP	PSH
NY0732	Lower Eastside Service Center, Inc	Diversity Works FY2024	PSH
NY0854	NYC HPD	Rustin Lindenguild Consolidated	PSH
NY0785	NYC HPD	Lenniger	PSH
NY0227	NYC HPD	Casa Renacer	PSH
NY1164	NYC HPD	Kingsbridge Heights	PSH
NY0722	NYC HPD	St. Joseph Consolidated	PSH
NY0912	NYC HPD	Breaking Ground Consolidated	PSH
NY0723	NYC HPD	Diversity Works	PSH
NY0208	NYC HPD	Lantern Consolidated	PSH
NYnew15	Project Hospitality	Vanderbilt	TH
NYnew17	Project Hospitality	Carpenter House	TH
NYnew16	Project Hospitality	O'Callaghan House	TH
NY0730	Project Renewal, Inc.	In Homes Now Consolidated (NY0730)	PSH
NY0982	Project Renewal, Inc.	Home (NY0982)	PSH
NY0357	Project Renewal, Inc.	Shelter Plus Care (NY0357)	PSH
NY1046	Project Renewal, Inc.	PRI Transitions (NY1046)	PSH
NY0266	The Fortune Society, Inc.	Fortune Academy Residence	TH
NY1479	VOA	Home:BASE Project	PSH
NY0242	Vocational Instruction Project Community Services, Inc	Crotona SRO NOFO FY2024	PSH
NY0377	Women In Need, Inc.	SHINE Families FY2024	PSH



Attachment 1C-1f: List of CoC Program Projects and Number of Units that Require Substance Abuse Treatment

Figure	Description	Page Number
1	List of CoC Program Projects and Number of Units that Require Substance Abuse Treatment	2



GRANT	PROJECT NAME	ORG	TYPE	UNITS
NY0267	Fortune Academy S+C	The Fortune Society, Inc.	PSH	51
NY0203	Abraham Apartments NOFO FY2024	Vocational Instruction Project Community Services, Inc	PSH	43
NY0242	Crotona SRO NOFO FY2024	Vocational Instruction Project Community Services, Inc	PSH	17
NY0286	Housing Options (NY0286L2T002316)	Goddard Riverside Community Center	PSH	13
NY1039	Havens (NY1039L2T002308)	Goddard Riverside Community Center	PSH	18
NY0332	Palace Hotel SRO	Bowery Residents' Committee, Inc.	PSH	21
NY0884	Liberty Avenue	Bowery Residents' Committee, Inc.	PSH	35
NY0377	SHINE Families FY2024	Women In Need, Inc.	PSH	73
NY0295	JHB HDFC (NY0295) FY2024	COMMUNITY ACTION FOR HUMAN SERVICES, INC.	PSH	44
NYnew	HUD Transitional Housing Program	Gay Men's Health Crisis, Inc.	TH	31
NY1463	Health and Housing Connect	Gay Men's Health Crisis, Inc.	PSH	35
NY1481	Connection to Housing and Care	GMHC	PSH	25



Attachment 1C-3: Language from Project Supportive Service Agreements

Figure	Description	Page Number
1	Casa Sandra TH Occupancy Agreement	2-10
2	Urban Pathways RRH Agreement	11-12
3	NYC-CoC TH Service Agreement Template	13-14
4	NYC-CoC RRH Service Agreement Template	14-15
5	NYC-CoC PSH Service Agreement Template	15-16



Violence Intervention Program

P.O. Box 1161 Triborough Station, New York NY 10035 | Tel. 212.410.9080 | Fax 646.975.4554 | www.vipmujeres.org

Casa Sandra Transitional Housing Program for Social Change

OCCUPANCY AGREEMENT

This Occupancy Agreement (the “**Agreement**” or “**Occupancy Agreement**”) is dated (MM/DD/YYYY), by and between **Violence Intervention Program, Inc.**, a New York not-for-profit corporation, having an office at P.O. BOX 1161, Triborough Station, New York, NY 10035 (“**Licensor**”) and an individual (**name**)

Now, therefore, in exchange for good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, the Licensor and Occupant do hereby covenant and agree as follows:

1. **Occupancy Fee:**

- (a) In exchange for the privilege to use and occupy certain space (the “**Licensed Space**”), designated from time to time by the Licensor, which is located at **#### University Ave. Bronx, NY 10452 Apt# ##** occupant shall pay the Licensor a monthly fee, which shall be calculated in accordance with the guidelines established by the U.S. Department of Housing and Urban Development, which are attached hereto as **Exhibit A**, and made part hereof (such applicable amount in accordance therewith, the “**License Fee**”). The License Fee is due and payable in advance on the first (1st) day of each calendar month. Payments shall be made by check or money order to the Licensor or to the Licensor’s designated staff member (Program Assistant). Cash payments are not accepted. The License Fee for the Initial Term (as hereinafter defined) of this Occupancy Agreement has been calculated in the amount of \$0
 - (i) The License Fee will be recalculated every January and July; the Occupant is obligated to provide proof of income for this recalculation.
 - (ii) The Occupant is further obligated to immediately report a change in income to determine any impact on the amount of the License Fee.
 - (iii) The Licensor shall provide the following utilities at no additional cost to the Occupant: heat, gas, and water.
- (b) **Deposit:** Occupant will provide a deposit in the amount of \$0.00 prior to the Commencement Date (as hereinafter defined) of the Occupancy Agreement (the “**Deposit**”). Subject to the terms of this **Section 1(b)**, the Deposit will be returned to the Occupant after termination of this Agreement, if there are no arrears due to the Licensor, after the Licensor

conducts the assessment for damage to the property, licensed space or the common areas (as defined below). In the event the Occupant causes material damage to the Property, the Licensed Space, or the Common Areas, the Licensors shall use all, or any portion, of the Deposit to repair such damage, and such portion of the Deposit used to repair such damage shall not be returned to Occupant. To avoid doubt, the Licensors shall not be obligated to hold the Deposit in a separate account.

2. **Term:** The Occupancy Agreement shall be valid for a term commencing on (MM/DD/YYYY) and terminating on (MM/DD/YYYY) (such period of time, the “**Initial Term**”), unless sooner terminated in accordance with the terms of this Agreement. The term of this Agreement will automatically renew, on a monthly basis, for up to 11 additional months following the end of the Initial Term (the last day of such 11-month period, the “**MM/DD/YYYY**”). Either Licensors or Occupant may terminate this Agreement prior to the Outside Termination Date upon thirty (30) days prior written notice to the other, and if so terminated, Occupant shall vacate the Property upon the expiration of said thirty (30) day period.
3. **Fully Revocable License; No Property Rights Granted:** In exchange for the above noted License Fee, Licensors hereby grants and Occupant hereby accepts a fully revocable license, terminable as pursuant to **Sections 2, 4 and 6** of this Agreement, to use and occupy a certain designated residential space at the Property and receive case management and additional supportive wellness services, such as counseling, job and housing placement and medical and legal referral services. This Agreement does not grant Occupant any right, title or interest in or to the Property or any portion thereof, nor is any tenancy, leasehold, or estate right hereby granted to or created in the Occupant. This Agreement is valid between Licensors and Occupant only; it is a personal entitlement which Occupant shall not assign or sublicense voluntarily, involuntarily, by operation of law or otherwise.
4. **No Exclusive Domination or Control Over the Licensed Space:**
 - (a) The Licensors shall designate the Licensed Space for the Occupant's use upon or shortly before the Commencement Date, provided that the Licensors may change this designation as needed occasionally. Licensors reserves the right to designate to Occupant a Licensed Space (with a roommate or roommates) and to assign a new occupant to fill vacancies, make changes in Licensed Space assignments, and to reassign or move Occupant to another property for reasons of health, safety, security, conduct or any other reason, in Licensors's sole and absolute discretion. Occupant may not change Licensed Space without prior authorization from Licensors. Without limiting the foregoing, if (i) the Occupant is not currently residing in a studio apartment, (ii) the Occupant is one individual without any children, (iii) a new occupant requires more space because they have children, and (iv) there is a studio apartment available, Occupant may be asked to move to a studio apartment unit.

- (b) The Licensors reserves the right to inspect the Licensed Space, the Common Areas, and other portions of the Property from time to time in the interest of health, safety, and property control. Authorized personnel of the Licensors may enter any room, including, without limitation, the Licensed Space or any portion of the Property, at any time without prior notice.
- (c) Occupant shall use the Licensed Space only as a private residence for Occupant and Occupant's children, where applicable. To the extent Occupant has children residing with Occupant, Occupant shall cause Occupant's children to comply with the applicable terms and restrictions outlined in this Agreement (including the rules and regulations outlined in **Schedule 1**). Occupant, together with such children, as applicable, and Occupant's Guests (as hereinafter defined) of Occupant shall be entitled to use the common facilities of the Property, i.e. bathrooms, kitchens, common rooms and shared outdoor space (the "**Common Areas**") (along with the other residents and their guests) for so long as Occupant continues to use and occupy the Licensed Space pursuant to this Agreement and complies with the terms of this Agreement and **Schedule 1** attached hereto and incorporated herein.
- (d) Occupant, by executing this Agreement, hereby recognizes and agrees that any failure to (i) comply with the rules and regulations enumerated in **Schedule 1**, which is incorporated by reference, and any rules and regulations which Licensors may hereafter enact, and (ii) participate in case management programs (each a "**Compliance Failure**") may be grounds for the termination of this Agreement.
- (e) Occupant shall not be permitted to perform any alterations on the Property, the Licensed Space, or the Common Areas, including but not limited to painting, removing furniture or fixtures, installing heating or cooling air conditioning units, or any other act that would change the appearance or structure of any portion of the Property. Additionally, Occupant shall not use portable heaters, use electric stoves, or obtain cable services which are installed on the exterior of the Property.

5. **Non-Participants/Guests:**

- (a) Subject to and in accordance with paragraph 5 of **Schedule 1** attached hereto, the Occupant may not have guests ("Guests" and each a "Guest"). To avoid doubt, Guests shall (i) only be permitted in the Common Areas and (ii) not to remain overnight on the Property or in the Licensed Space.
- (b) The Licensors's grant of permission to the Occupant for any Guest on any particular occasion does not waive the Licensors's right to refuse permission to the Occupant for that same Guest or any other Guest on any other occasion.

6. **Additional Termination Rights:**

- (a) Licensors may terminate this Agreement at any time on prior written notice to Occupant in the event (x) that Occupant fails to pay the License Fee, (y) of a Compliance Failure or (z) that Occupant (or Occupant's children, if applicable) commits acts or engages in conduct that damages the Property, creates a threat or danger to Occupant, Licensors, Licensors' employees or to other occupants, Guests or other visitors at the Property, creates an unreasonable liability for Licensors, or Occupant's behavior (or Occupant's children's behavior, as applicable) is otherwise sufficiently egregious to warrant Occupant's and Occupant's children's, as applicable, immediate removal from the Property in Licensors' sole discretion. In the event that this Agreement is terminated as described in this **Section 6(a)**, Occupant shall forfeit any monies already paid as a License Fee or other house financial fees separately agreed to and handled by the other residents of the Property.
 - (b) This Agreement shall automatically terminate upon the earlier of: (x) the Outside Termination Date and (y) the termination of this Agreement by Licensors or Occupant in accordance with its terms.
 - (c) If Occupant (and/or Occupant's children, as applicable) does not vacate the premises upon the termination of this Agreement, Licensors may begin eviction proceedings to have the Occupant (and Occupant's children, as applicable) removed from the premises, as governed by applicable state and local law.
7. **Notices:** All bills, statements, notices, demands, requests and other communications (collectively, "**Notices**") hereunder shall be in writing and shall be deemed duly given (a) on the date of delivery if delivered personally (with proof of receipt) or the date of rejection, (b) on the first (1st) business day following the date of dispatch if delivered by a recognized next-day courier service, or (c) on the earlier of confirmed receipt or the fifth (5th) business day following the date of mailing if delivered by registered or certified mail, return receipt requested, postage prepaid. If to Occupant, Notices must be sent to Occupant at the Property. If to Licensors, Notices must be sent to Licensors' address as set forth in the first paragraph of this Agreement.
8. **Indemnification:** Occupant shall indemnify and hold harmless Licensors against all liability, suits, injury, loss, claims or damage (including, without limitation, reasonable attorneys' fees and disbursements) to Licensors or any other person or property, arising from (i) the use or occupancy by Occupant of the Property, (ii) Occupant's (and Occupant's children, as applicable) failure to timely vacate the Property in accordance with the terms and conditions of this Agreement, (iii) any accident, injury or other incident occurring at or within the Property, or (iv) the acts of any and all of Occupant's Guests, family members, or invitees.
9. **Licensors' Liability:**
- (a) Neither Licensors, nor any partner, director, officer, shareholder, principal, agent, servant or employee of Licensors shall be liable to Occupant for any loss, injury or damage to Occupant or to any other person, or to its or their

property, irrespective of the cause of such injury, damage or loss, nor shall the aforesaid parties be liable for any damage to property of Occupant or of others, entrusted to employees of Licensors, nor for loss of or damage to any such property by theft or otherwise; unless due to Licensors, or an above listed party's gross negligence or willful misconduct.

- (b) Neither Licensors, nor any partner, director, officer, shareholder, principal, agent, servant or employee of Licensors shall be liable (y) for any such damage caused by other residents or persons in, upon or about the Property, or (z) even if negligent, for consequential damages arising out of any loss of use of the Property or any equipment, facilities or other of Occupant's property therein by Occupant or any person claiming through or under Occupant.
 - (c) Occupant shall be solely responsible for the security, repairs and replacement of all its personal property under its custody and control on the Property, and Licensors shall have no responsibility therefor.
 - (d) The liability of the Licensors for the Licensors's obligations under this Agreement shall be limited to the Licensors's interest in the Property. The occupant shall not look to any property or assets of the Licensors (other than the Licensors's interest in the Property) in seeking to enforce the Licensors's obligations under this Agreement or to satisfy a judgment for the Licensors's failure to perform such obligations.
10. **No Waiver:** No delay by Licensors in the pursuit of Licensors's rights and remedies pursuant to this Agreement, applicable law or otherwise shall constitute a waiver of any such rights or remedies. The rights and remedies of Licensors are separate and in addition to each other. The choice of one does not prevent Licensors from using another.
11. **Jurisdiction:** This Agreement shall be construed under the laws of the State of New York.
12. **Entire Agreement:** This Agreement, and the Exhibits and Schedules attached hereto, constitute the entire agreement between the parties with respect to the subject matter hereof, and all understandings and agreements heretofore or simultaneously had between the parties are merged in, superseded by and contained in this Agreement.
13. **Amendments; Modification.** This Agreement may not be waived, changed, modified, or discharged orally, but only by an agreement in writing signed by the parties hereto, and any consent, waiver, approval, or authorization shall be effective only if signed by the party granting such consent, waiver, approval or authorization.
14. **Counterparts.** This Agreement may be executed in counterparts and delivered by facsimile or portable document format ("pdf") copy, each of which shall be deemed an original and all of which, when taken together, shall be deemed one and the same instrument.

15. **Severability**. Whenever possible, each provision or portion of any provision of this Agreement shall be interpreted in such manner as to be effective and valid under applicable laws, but if any provision or portion of any provision of this Agreement is held to be invalid, illegal, or unenforceable in any respect under any applicable laws, such invalidity, illegality or unenforceability shall not affect any other provision or portion of any provision in such jurisdiction. This Agreement shall be reformed, construed, and enforced in such jurisdiction as if such invalid, illegal, or unenforceable provision or portion of any provision had never been contained herein.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of this (DATE).

Print Occupant's Name

Occupant's Signature

Licensor/ Representative

Violence Intervention Program, Inc.

Exhibit A

Income and Resident Rent Calculation Worksheet

[To be attached]

Schedule 1

CASA SANDRA RULES

I _____, agree to the following conditions in accepting transitional housing from Casa Sandra, a program of the Licensors. I understand that Casa Sandra may change or modify these rules or may change the program at any time.

1. I understand that the Licensed Space is the property of the Licensors, and my living there is a temporary arrangement, contingent on my participation in Casa Sandra's program and curriculum, and may be terminated by the Licensors at **ANY TIME**. I understand that I have no tenancy rights to the Licensed Space. I understand that I **MUST LEAVE** if Licensors staff instructs me to do so.
2. I agree that all furniture provided before my move-in is the property of the Licensors. Throughout my stay and upon my departure from the unit, I will not remove any furnishings, appliances, equipment, or other items provided by the Licensors.
3. I agree to refrain from the use of alcohol, illegal drugs, selling or buying illegal drugs, and carrying or concealing weapons during my occupancy at Casa Sandra. I agree that my occupancy may be immediately terminated if I engage in illegal activities or engage in behavior that in any way creates a threat or danger or is in any way harmful to me, the Licensors, the Licensors's staff, and other employees, other residents, Guests or other visitors or at the facility.
4. I understand there is NO SMOKING in the Licensed Space, the Common Areas, or on the Property (inside/outside).
5. I have read and reviewed the Non-Participant Policy in the Casa Sandra Participant Manual and agree to abide by that policy, including, without limitation, the following:
 - a. All non-participants will sign a Confidentiality Agreement
 - b. Neither I nor the non-participant will loiter in the lobby or outside the building.
6. I agree to keep all Licensed Space furnishings in good condition. All furnishings and appliances that are Casa Sandra's property may not be removed from the premises. I will keep my Licensed Space in good order and understand that there will be announced and unannounced apartment inspections to prevent roaches and mice. I will keep up my personal appearance and hygiene. Upon moving into the apartment, I will do a walk-through with the program assistant or housing case manager to sign off on the apartment's condition. Upon departure, I will do the same procedure when I move. Providing that there is no damage or alterations to my apartment, I will receive my security deposit.
7. I agree to participate in supportive services, as appropriate, and to attend all resident meetings during my stay. I agree to follow my treatment plan and outpatient program.
8. I agree to look for employment. If I am already employed, I will remain in good employee standing, but if I cannot maintain my employment, I will immediately inform the staff at Casa Sandra. I agree to attend vocational/educational services as suggested by Casa Sandra staff.

9. I will comply with all document requests promptly, including without limitation those related to my income, as requested by the Program Assistant or Housing Case Manager. Additionally, I will immediately notify the Program Assistant or Housing Case Manager of any change to my income (earned income, public benefits, child support, other).
10. Once a month, I will be given an update on how much time I have left in the program and any License Fee arrears that need to be brought up to date by the time my next License Fee is due.
11. I agree to actively seek out assistance for License Fee arrears, including, without limitation, programs offered by the Human Resource Administration, various charities and non-profits, and other options that will help me pay my arrears in full.
12. I agree to unannounced inspections of the Licensed Space conducted by Casa Sandra staff.
13. I agree that conducting personal business on the premises is prohibited.
14. I agree to refrain from the use of candles or incense.
15. If I own a pet, I will notify the Program Assistant beforehand, and my pet will be tended to and not left alone for long periods. I will clean up after my pet. *Review the Pet Disclosure and Agreement Document (addendum).*
16. I agree to comply fully with these rules. I understand that non-participants must abide by the resident house rules listed above. Failure to abide by these rules may result in the non-participant being told to leave the premises and/or my occupancy terminated.

Occupant's Printed Name

Occupant's Signature

Date:



Key-to-Home RRH Client Rights and Responsibilities

As a client in the Key-to-Home Rapid Re-Housing program, I understand I am responsible for:

- Being an active participant in my housing search and overall housing process.
- Being respectful towards staff and other parties involved in my housing process.
- Meeting with my case manager and/or housing specialist at least twice a month.
- Cooperating with Key-to-Home staff.
- Submitting documentation as needed to Key-to-Home staff.

As a client in the Key-to-Home Rapid Re-Housing program, I understand that my rights as a client include:

- Receiving services without discrimination against clients or potential candidates based on income, race, age, religion, gender, sexual orientation, disability, national origin, prior legal history, immigration status, veteran status, etc.
- The right to privacy and confidentiality with all client information.
- The right to receive language assistance as needed.
- The right to file a formal complaint against any services or staff at Urban Pathways.

I certify that I have received and understand my rights and responsibilities as a client or potential client of the Key-to-Home RRH program.

Client Signature

Date



Key-to-Home RRH Client Participant Agreement

Date	
Applicant Name	

I, _____, have applied to be enrolled in Urban Pathways Key-to-Home Rapid Re-Housing (RRH) program to receive time-limited rental assistance and comprehensive case management services.

I understand and agree that the financial assistance and case management services at Key-to-Home RRH are time limited on a per case basis.

I understand and agree to provide truthful and accurate information related to the requirements of the rapid re-housing such as income, and other household eligibility.

I understand and agree to submit any necessary documentation related to the Key-to-Home Rapid Re-Housing process.

I understand and agree to fully cooperate with the Key-to-Home staff as an active participant in my housing process.

I understand and agree that failure to meet these requirements may potentially result in being exited from the Key-to-Home RRH program.

Program Applicant Signature

Date

Staff Signature

Date



Transitional Housing (TH) Supportive Service Agreement

Participant _____
Name:

Case _____
Manager

Name:

Agency _____
Name:

Agreement _____
Date:

1. Purpose of Agreement

- The purpose of this Agreement is to outline the housing-focused supportive services provided through the Transitional Housing (TH) program and to establish the commitments made by both the Participant and the Agency to support stable housing and transition to permanent housing. This program operates in compliance with HUD regulations outlined in 24 CFR Part 578.

2. Participant Responsibilities & Engagement

- The Participant will help develop and review a service plan, attend scheduled appointments, communicate with the Case Manager about changing needs or barriers, and work toward the goals in the plan. The Participant will engage in at least 20 hours per week of services, activities, or employment, which may include case management, counseling, treatment, volunteering, education, job training, community activities, or work. Employment hours may count toward the 20 hours. The 20-hour requirement does not apply to participants over age 62, individuals with handicaps as defined in 24 CFR 8.3, or individuals with developmental disabilities as defined in 24 CFR 578.3.

- _____

3. Agency Commitments & Services Provided

- Providers will assess service needs, provide or coordinate appropriate services, and develop a service plan. Staff will review the plan with the Participant, address barriers to engagement, and provide reasonable accommodation as applicable.

- _____

4. Confidentiality & Grievance Procedures

- All personal data and case files will be handled in accordance with the local HMIS Privacy Notice. If the Participant disagrees with an agency decision or wishes to appeal a service modification, the Participant has the right to file a formal grievance according to the Agency's grievance policy provided at intake.

5. Agreement Term & Termination

- This Agreement becomes effective on the date signed below and remains valid for the duration of the Participant's enrollment in the TH project. Either party may request a modification to the service plan.

Failure to comply may result in termination of TH program assistance, subject to prior written notice and applicable due process requirements.

Participant Signature:

Date:

Case Manager Signature:

Date:

TEMPLATE

Rapid Re-Housing (RRH) Supportive Service Agreement

Participant _____
Name: _____

Case _____
Manager _____

Agency _____
Name: _____

Agreement _____
Date: _____

1. Purpose of Agreement

- The purpose of this Agreement is to outline the housing-focused supportive services provided through the Rapid Re-Housing (RRH) program and to establish the commitments made by both the Participant and the Agency to achieve and maintain stable, independent housing. This program operates in compliance with HUD regulations outlined in 24 CFR Part 578.

2. Agency Commitments & Services Provided

The Agency agrees to provide services tailored to the Participant's needs, which may include:

- **Housing Search & Placement:** Assisting in identifying affordable, safe, and permanent housing options.
- **Case Management:** Providing regular housing-focused case management to address barriers to housing stability.
- **Financial Assistance Coordination:** Reviewing and coordinating temporary rental assistance, security deposits, utility assistance, or other eligible assistance as authorized by program funding and applicable guidelines.

3. Participant Responsibilities & Engagement

The Participant agrees to actively participate in the housing stabilization plan by fulfilling the following:

- **Regular Check-ins:** Meeting with the assigned Case Manager at least monthly, or as otherwise established in the individualized service plan, to review goals and housing stability.
- **Lease Compliance:** Abiding by the terms of the independent lease agreement executed with the landlord, including paying any required portion of rent on time.
- **Income & Progress Updates:** Providing documentation regarding household income, employment status, and other information needed for required recertifications or assistance determinations.

4. Financial Responsibility & Transition Plan

- RRH provides time-limited financial assistance intended to support the Participant's transition to permanent housing. Assistance levels may be re-evaluated based on household income, housing stability, program guidelines, and applicable CoC policy. The Participant and Agency will work together to identify steps toward assuming greater responsibility for housing costs. Program assistance does not guarantee permanent or indefinite rental subsidies.

5. Confidentiality & Grievance Procedures

- All personal data and case files will be handled in accordance with the local HMIS Privacy Notice. If the Participant disagrees with an agency decision or wishes to appeal a service modification, the Participant has the right to file a formal grievance according to the Agency's grievance policy provided at intake.

6. Agreement Term & Termination

- This Agreement becomes effective on the date signed below and remains valid for the duration of the Participant's enrollment in the RRH project. Either party may request a modification to the service plan. Failure to comply may result in termination of RRH program assistance, subject to prior written notice and applicable due process requirements.

Participant Signature:

Date:

Case Manager Signature:

Date:



Permanent Supportive Housing (PSH) Supportive Service Agreement

Participant _____
Name: _____

Case _____
Manager _____

Agency _____
Name: _____

Name: _____
Agreement _____
Date: _____

1. Purpose of Agreement

- The purpose of this Agreement is to outline the housing-focused supportive services provided through the Permanent Supportive Housing (PSH) program and to establish the commitments made by both the Participant and the Agency to support long-term housing stability and tenancy retention. This program operates in compliance with HUD regulations outlined in 24 CFR Part 578.

2. Agency Commitments & Services Provided

The Agency agrees to provide or coordinate supportive services designed to help the Participant maintain stable housing and address identified needs, which may include:

- **Case Management & Housing Stability:** Providing regular, individualized support to address barriers to housing stability, tenancy retention, and quality of life.
- **Service Coordination:** Connecting the Participant to health, behavioral health, employment, benefits, community, and other services based on identified needs and preferences.
- **Tenancy Support:** Assisting with communication with landlords, understanding lease responsibilities, resolving tenancy-related concerns, and preventing avoidable housing loss.

- _____

3. Participant Responsibilities & Engagement

The participant agrees to actively participate in the PSH program by fulfilling the following:

- **Communication & Check-ins:** Maintain reasonable communication with the Case Manager and participate in scheduled appointments or other agreed-upon contacts.
- **Lease Compliance:** Abide by the applicable lease or occupancy agreement and meet the Participant's responsibilities as a tenant.
- **Service Participation:** Actively participate in developing and reviewing an individualized service plan and engage in agreed-upon supportive services to the extent that is reasonably necessary to support housing stability and personal goals.

- _____

4. Housing Stability & Ongoing Support

- PSH is intended to provide long-term housing stability with ongoing supportive services tailored to the Participant's needs. The Participant and Agency will review the service plan as appropriate and may modify services, goals, or strategies as needs change. Support may include coordination with other providers and reasonable accommodation as applicable.

5. Confidentiality & Grievance Procedures

- All personal data and case files will be handled in accordance with the local HMIS Privacy Notice. If the Participant disagrees with an agency decision or wishes to appeal a service modification, the Participant has the right to file a formal grievance according to the Agency's grievance policy provided at intake.

6. Agreement Term & Termination

- This Agreement becomes effective on the date signed below and remains valid for the duration of the Participant's enrollment in the PSH project. Either party may request a modification to the service plan. Failure to comply may result in termination of PSH program assistance, subject to prior written notice and applicable due process requirements.

Participant Signature:

Date:

Case Manager Signature:

Date:



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

Figure	Description	Page Number
1	Local Law 34 2024	2-7
2	Encampment Removal Cost	8
3	Aided Homeless Removal Numbers	9-10
4	Data Dictionary	11-12

**LOCAL LAWS
OF
THE CITY OF NEW YORK
FOR THE YEAR 2024**

No. 34

Introduced by Council Members Nurse, Hanif, Ossé, Restler, Cabán, Ayala, Richardson Jordan, Won, Feliz, De La Rosa, Williams, Marte, Sanchez, Avilés, Narcisse, Hudson, Brewer, Krishnan, Gutiérrez, Farías and Gennaro.

A LOCAL LAW

To amend the administrative code of the city of New York, in relation to requiring reports on removals involving individuals experiencing homelessness and the outcomes for those individuals

Be it enacted by the Council as follows:

Section 1. Chapter 1 of title 21 of the administrative code of the city of New York is amended by adding a new section 21-152 to read as follows:

§ 21-152 Reports on removals involving individuals experiencing homelessness. a. Definitions.

For purposes of this section, the following terms have the following meanings:

Affected individual. The term “affected individual” means any individual perceived as experiencing homelessness who is temporarily or permanently removed from a location or whose personal property has been cleared at a location.

Agency removal. The term “agency removal” means a removal by or on behalf of any agency or agencies or a removal where an agency representative was present, except that such term does not include a police-directed removal.

Police-directed removal. The term “police-directed removal” means a removal by an employee of the police department without coordination with another agency or entity.

Removal. The term “removal” means an action or directive by or on behalf of any agency, that results in an individual perceived as experiencing homelessness temporarily or permanently leaving a location or the clearing by or on behalf of any agency of personal property, which may include a sleeping bag, shelter, tarp, tent, bed, cardboard, metal sheeting, furniture, or other objects at a location.

Robot. The term “robot” means an artificial object or system that senses, processes, and acts, to at least some degree, and is operated either autonomously by computers or by an individual remotely. The term does not include unmanned aerial vehicles.

Shelter. The term “shelter” means a building or individual units within a building, used by the department or by a person under contract or similar agreement with the department to provide temporary emergency housing.

Transitional housing. The term “transitional housing” means placement in a shelter, stabilization bed, or safe haven.

b. No later than 1 month after the effective date of the local law that added this section, and quarterly thereafter, the commissioner, in consultation with the police commissioner, the commissioner of sanitation, and the commissioner of parks and recreation, shall submit to the speaker of the council, the public advocate, and the mayor, and publish on the department’s website, in a machine readable format, a report on removals conducted during the prior month. The report shall include a table in which each row references a unique occurrence of a removal. Each such row shall include the following information and any additional information the commissioner deems appropriate, set forth in separate columns:

- 1. A unique identification number for each removal;*
- 2. Whether the removal was an agency removal or a police-directed removal;*

3. *The council district where the removal occurred;*
 4. *Whether or not at removal has previously been conducted at that location;*
 5. *The source of initiation for the removal, including but not limited to requests by an agency, office, organization, or 311 report;*
 6. *The date and time of the start of the removal;*
 7. *The agencies and divisions within agencies with personnel present for the removal;*
 8. *The non-government entities present for the removal;*
 9. *The number of agency personnel present and total hours spent on the removal by personnel, disaggregated by agency;*
 10. *The number of affected individuals involved in the removal; and*
 11. *The cost of removals, including, but not limited to, the costs associated with the following information:*
 - (a) *The number of agency staff present during and before a removal, disaggregated by the agency and relevant job title;*
 - (b) *The total time an agency was present before and during a removal;*
 - (c) *Any overtime hours used to conduct a removal, including a methodology on how overtime hours were calculated; and*
 - (d) *Any additional costs such as the use of any specialized equipment during a removal, including unmanned aerial vehicles and robots.*
- c. *No later than 1 month after the effective date of the local law that added this section, and quarterly thereafter, the commissioner shall submit to the speaker of the council, the public advocate, and the mayor and publish on the department's website, in a machine readable format, a report on the same-day outcomes for individuals experiencing homelessness involved in a*

removal during the prior month. Such report shall include a table in which each row references a unique occurrence of a removal. Each such row shall include the following information, as well as any additional information the commissioner deems appropriate, set forth in separate columns:

1. A reference to the unique removal identification number as reported in subdivision b of this section;

2. The council district where the removal occurred;

3. The number of affected individuals on the date of the removal;

4. The number of affected individuals who were offered housing vouchers on the date of the removal;

5. The number of affected individuals who were offered housing voucher applications on the date of the removal;

6. The number of affected individuals who were offered direct permanent housing placements on the date of the removal;

7. The number of affected individuals who were offered supportive housing on the date of the removal;

8. The number of affected individuals who were offered placement in transitional housing on the date of the removal;

9. Any services not listed in paragraphs 4 to 8 of this subdivision offered to an affected individual on the date of the removal;

10. The number of affected individuals who were detained involuntarily and brought to a hospital for a mental health evaluation pursuant to section 9.41 or 9.58 of the mental hygiene law;

11. The number of affected individuals who entered transitional housing on the date of the removal; and

12. The number of affected individuals who were arrested on the date of the removal.

d. The reports required by subdivisions b and c of this section shall include a data dictionary.

e. Except as otherwise expressly provided in this section, no report required by subdivision b or c of this section shall contain personally identifiable information.

f. No information that is otherwise required to be reported pursuant to this section shall be reported in a manner that would violate any applicable provision of federal, state, or local law relating to the privacy of information.

§ 2. This local law takes effect 100 days after it becomes law.

THE CITY OF NEW YORK, OFFICE OF THE CITY CLERK, s.s.:

I hereby certify that the foregoing is a true copy of a local law of The City of New York, passed by the Council on December 20, 2023 and returned unsigned by the Mayor on January 19, 2024.

MICHAEL M. McSWEENEY, City Clerk, Clerk of the Council.

CERTIFICATION OF CORPORATION COUNSEL

I hereby certify that the form of the enclosed local law (Local Law No. 34 of 2024, Council Int. No. 1153-A of 2023) to be filed with the Secretary of State contains the correct text of the local law passed by the New York City Council, presented to the Mayor and neither approved nor disapproved within thirty days thereafter.

SPENCER FISHER, Acting Corporation Counsel.



Encampment Removal Cost

Agency	Cost
DHS	\$ 16,837
NYPD (Encampments)	\$ 42,789
NYC Parks	\$ 5,283
DSNY	\$ 609,539
Total	\$ 674,449

Note: NYPD, DHS and Parks cost calculation methodology is a pro-rated formula based on salary and time. DSNY uses a per team cost calculation methodology. More information is available in the LL34 data dictionary.

Aggregate Encampment Personnel Counts by NYC Agency (CY25Q2)	
Agency	Count
DHS	1,117
NYPD (Encampment Cleanup)	1,667
NYC Parks	476
DSNY	N/A
Total	3,260

NYPD Aided Removal Cost (CY25Q2)	
NYPD (Aided Homeless Removals)	\$ 374,068

Aided ID	Occurrence Date	Occurrence Time	City Council Districts	Previous Removals at Location	Source	Agencies Present	Non Gov't Entities Present	Number of NYPD Personnel	Agency Removal	Police Removal	Number of Individuals
202531032483	4/6/2025	9:49:00 PM	29	N/A	N/A	N	N/A	1	N	Y	1
202520332788	4/21/2025	9:44:00 PM	1	N/A	N/A	N	N/A	1	N	Y	1
202530134009	5/22/2025	4:40:00 AM	27	N/A	N/A	N	N/A	1	N	Y	1
202521238020	6/4/2025	1:00:00 PM	4	N/A	N/A	N	N/A	1	N	Y	1
202530633001	6/15/2025	11:01:00 PM	26	N/A	N/A	N	N/A	1	N	Y	1
202524634260	6/27/2025	3:00:00 AM	15	N/A	N/A	N	N/A	1	N	Y	1
202530134712	6/28/2025	10:28:00 PM	24	N/A	N/A	N	N/A	1	N	Y	1
202526132685	5/21/2025	12:46:00 AM	45	N/A	N/A	N	N/A	1	N	Y	1
202524633074	4/1/2025	9:03:00 AM	15	N/A	N/A	N	N/A	1	N	Y	1
202529232374	4/11/2025	3:56:00 PM	34	N/A	N/A	N	N/A	1	N	Y	1
202520532936	4/30/2025	9:24:00 PM	2	N/A	N/A	N	N/A	1	N	Y	1
202523932927	6/1/2025	3:59:00 PM	17	N/A	N/A	N	N/A	1	N	Y	1
202523833495	4/11/2025	1:02:00 PM	17	N/A	N/A	N	N/A	1	N	Y	1
202519933736	4/1/2025	12:50:00 AM	1	N/A	N/A	N	N/A	1	N	Y	1
202530133173	4/1/2025	8:00:00 AM	28	N/A	N/A	N	N/A	1	N	Y	1
202521235358	4/1/2025	8:15:00 AM	4	N/A	N/A	N	N/A	1	N	Y	1
202531432526	4/1/2025	8:43:00 AM	31	N/A	N/A	N	N/A	1	N	Y	1
202528232835	4/1/2025	9:58:00 AM	33	N/A	N/A	N	N/A	1	N	Y	1
202532132417	4/1/2025	10:36:00 AM	51	N/A	N/A	N	N/A	1	N	Y	1
202520832414	4/1/2025	11:45:00 AM	3	N/A	N/A	N	N/A	1	N	Y	1
202527333356	4/1/2025	12:34:00 PM	37	N/A	N/A	N	N/A	1	N	Y	1
202528232836	4/1/2025	12:53:00 PM	33	N/A	N/A	N	N/A	1	N	Y	1
202521236574	5/1/2025	4:04:00 PM	3	N/A	N/A	N	N/A	1	N	Y	1
202532032665	4/1/2025	6:31:00 PM	51	N/A	N/A	N	N/A	1	N	Y	1
202521732942	4/1/2025	6:46:00 PM	4	N/A	N/A	N	N/A	1	N	Y	1
202532132420	4/1/2025	9:20:00 PM	51	N/A	N/A	N	N/A	1	N	Y	1
202529832574	4/1/2025	9:45:00 PM	32	N/A	N/A	N	N/A	1	N	Y	1

202531834128	6/5/2025	11:07:00 AM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834135	6/6/2025	12:08:00 AM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834145	6/6/2025	9:00:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834205	6/10/2025	2:19:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834216	6/11/2025	3:00:00 AM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834231	6/11/2025	11:35:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834239	6/12/2025	1:07:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834241	4/25/2025	6:30:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834242	6/12/2025	8:52:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834250	6/13/2025	4:30:00 AM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834267	6/15/2025	12:07:00 AM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834352	6/21/2025	11:20:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834377	6/23/2025	1:30:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834396	6/24/2025	5:29:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834447	6/28/2025	10:26:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531834449	6/29/2025	3:00:00 AM	49	N/A	N/A	N	N/A	1	N	Y	1
202531933119	4/17/2025	11:45:00 AM	50	N/A	N/A	N	N/A	1	N	Y	1
202531933148	4/18/2025	9:05:00 AM	49	N/A	N/A	N	N/A	1	N	Y	1
202531933156	4/20/2025	4:16:00 AM	49	N/A	N/A	N	N/A	1	N	Y	1
202531933305	5/4/2025	3:30:00 AM	49	N/A	N/A	N	N/A	1	N	Y	1
202531933371	5/9/2025	10:50:00 AM	51	N/A	N/A	N	N/A	1	N	Y	1
202531933838	6/24/2025	10:00:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202531933887	6/29/2025	9:40:00 PM	49	N/A	N/A	N	N/A	1	N	Y	1
202532032757	4/15/2025	2:00:00 PM	50	N/A	N/A	N	N/A	1	N	Y	1
202532032959	5/7/2025	2:58:00 AM	50	N/A	N/A	N	N/A	1	N	Y	1
202532033039	5/16/2025	3:35:00 AM	50	N/A	N/A	N	N/A	1	N	Y	1
202532033091	5/23/2025	1:59:00 AM	50	N/A	N/A	N	N/A	1	N	Y	1
202532033165	5/31/2025	9:22:00 AM	50	N/A	N/A	N	N/A	1	N	Y	1
202532033245	6/10/2025	4:00:00 AM	50	N/A	N/A	N	N/A	1	N	Y	1
202532033388	6/30/2025	10:25:00 AM	51	N/A	N/A	N	N/A	1	N	Y	1

Total= 6214

Data Dictionary - Dataset Information	
General	
Dataset Name	Local Law 34 of 2024 Quarterly Interagency Reporting on Encampment Cleanups and Aided Removals
Agency Name	Department of Homeless Services (DHS), New York Police Department (NYPD), New York City Department of Parks & Recreation (Parks), Department of Sanitation New York (DSNY)
Update Frequency	Quarterly
Dataset Description	This report is divided into three sections, the first being line-level data from four different agencies that collaboratively work on encampment cleanups, the second being aggregate costs and personnel counts disaggregated by whether those costs are associated with the multi-agency encampment cleanups or the aided removals, and the third being the the aided removal line-level data. Aided removals are exclusively conducted by the NYPD, and they typically involve a single officer and a single affected individual.
Dataset Keywords	Encampment cleanups; Aided removals; Homelessness
Detailed Description	
	Line-Level Data Tab: Each row represents a unique encampment cleanup All Costs Tab: Each row represents agency-specific and total encampment cleanup personnel counts and costs. NYPD aided removal costs are organized separately. Aided Homeless Removals Tab: Each row represents a unique aided homeless removal conducted by a single NYPD Officer affecting a single individual.

Cost Calculation	To calculate the aggregate costs, NYPD, DHS, and Parks each used a formula that calculated the average hourly rate for the titles of personnel involved, multiplied by the number of personnel involved, multiplied by the average time spent and the number of cleanups. NYPD uses a similar formula for aided removals, using the titles and average salary, average service time, and number of removals. DSNY does not track the time spent at cleanups by personnel, so the cost for DSNY is per team, per day. However, DSNY does not spend the entire day at encampment cleanups.
Definitions (For purposes of this section, the following terms have the following meanings)	The term “affected individual” means any individual perceived as experiencing homelessness who is temporarily or permanently removed from a location or whose personal property has been cleared at a location. The term “agency removal” means a removal by or on behalf of any agency or agencies or a removal where an agency representative was present, except that such term does not include a police-directed removal. The term “police-directed removal” means a removal by an employee of the police department without coordination with another agency or entity. The term “removal” means an action or directive by or on behalf of any agency, that results in an individual perceived as experiencing homelessness temporarily or permanently leaving a location or the clearing by or on behalf of any agency of personal property, which may include a sleeping bag, shelter, tarp, tent, bed, cardboard, metal sheeting, furniture, or other objects at a location. The term “shelter” means a building or individual units within a building, used by the department or by a person under contract or similar agreement with the department to provide temporary emergency housing. The term “transitional housing” means placement in a shelter, stabilization bed, or safe haven.



1D-1	Local Competition Scoring Tool
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Figure	Description	Page Number
1	2026 Annual Evaluation HMIS Metrics Description	2-20
2	New Project Scoring Rubric	21-25

2026 Annual Evaluation HMIS Metrics Description

Overview

This document describes the metrics used to evaluate Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), and Transitional Housing (TH) projects for the 2026 Annual Evaluation. This guide also outlines how to calculate these metrics using the Annual Performance Report (APR). The HMIS metrics are organized into five areas: housing stabilization, utilization, income and benefits, and data quality. The evaluation period for the 2026 annual evaluation is the 2025 calendar year (1/1/2025-12/31/2025).

Please note that if you are comparing your APR to the ClientInsight PSH Evaluation Tool the results may differ slightly depending on vendor interpretation of the HUD reporting specifications.

How do I access the Evaluation Tool?

Currently, there is only an evaluation tool for PSH projects. RRH and TH projects can run an APR to see their evaluation results. For PSH projects, follow these steps to access the tool:

1. Log-in to ClientInsight
2. Select “Reports”
3. Select “Community Reports”
4. Search for and select “Permanent Supportive Housing (PSH) Evaluation Tool”

How can I find out more details about the 2026 Evaluation?

Supporting documents are available on the NYC CoC website’s Annual Evaluation page:
<https://www.nyc.gov/site/nycccoc/providers/annual-evaluation.page>.

We highly recommend you review all the documents on the website if you have any questions.
If you still have questions, please email the HMIS team at DSSHMIS@dss.nyc.gov.

HMIS Metrics

1. HOUSING STABILIZATION

➤ PSH - Maintaining or Exiting to Permanent Housing

Description	Source	Calculation
Percent of people who remain in permanent supportive housing or exit to a permanent housing situation.	APR Question 5a and 23c	(Q23c Total persons exiting to positive housing destinations + Q5a Total number of stayers)/ (Q5a Total number of persons served – Q23c Total persons exiting to excluded destinations)

APR EXAMPLE:

In the example below, **86%** $[(1+18) / (23-1) * 100]$ of people maintained or exited to permanent housing.

Q23c - Exit Destination

Data Element	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
TOTAL	5	5	0	0	0
Total persons exiting to positive housing destinations	1	1	0	0	0
Total persons exiting to destinations that excluded them from the calculation	1	1	0	0	0

Q5a - Report Validations Table

Category	Count Of Clients For DQ	Count Of Clients
Total Number of Persons Served	23	23
Total Number of Stayers	18	18

➤ **RRH and TH – Exits to Permanent Housing**

Description	Source	Calculation
Percent of people who exited to a permanent housing situation.	APR Question 23c	Q23c Total persons exiting to positive housing destinations/ (Q23c Total persons – Q23 Total persons exiting to excluded destinations)

APR EXAMPLE:

In the example below, **25%** $[(1 / (5-1)) * 100]$ of people exited to permanent housing

Q23c - Exit Destination

Data Element	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
TOTAL	5	5	0	0	0
Total persons exiting to positive housing destinations	1	1	0	0	0
Total persons exiting to destinations that excluded them from the calculation	1	1	0	0	0

➤ **RRH and TH – Exits to Non-Homeless Destinations**

Description	Source	Calculation
Percent of people who exited to a non-homeless destination	APR Question 23c	$1 - (Q23c \text{ Total persons exiting to Homeless Situations}) / (Q23c \text{ Total persons} - Q23 \text{ Total persons exiting that excluded them from the calculation})$

APR EXAMPLE:

In the example below, **100%** $[(1 - (0 / (5-1))) * 100]$ of people exited to a non-homeless destination.

Q23c - Exit Destination

Data Element	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Homeless Situations					
Subtotal	0	0	0	0	0

TOTAL	<u>5</u>	<u>5</u>	0	0	0
Total persons exiting to positive housing destinations	<u>1</u>	<u>1</u>	0	0	0
Total persons exiting to destinations that excluded them from the calculation	<u>1</u>	<u>1</u>	0	0	0

➤ **RRH – Housing Placements**

Description	Source	Calculation
Percent of people served longer than 30 days who moved into housing.	APR Question 7a, 22a1	Q7a Total persons moved into housing / (Q7a Total persons served – Q22a1 Total persons with length of participation 0-30 days)

APR EXAMPLE:

In the example below, **94%** $[(31 / (33-0)) * 100]$ of people served longer than 30 days moved into housing.

Q7a - Number of Persons Served

Number Of Persons Served	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Adults	33	33	0		0
Children	0		0	0	0
Client Doesn't Know / Prefers Not to Answer	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	<u>33</u>	33	0	0	0
For PSH & RRH - the total persons served who moved into housing	<u>31</u>	31	0	0	0

Q22a1 - Length of Participation CoC Projects

	Total	Leavers	Stayers
30 days or less	0	0	0
31 to 60 days	0	0	0
61 to 90 days	1	1	0
91 to 180 days	8	1	7
181 to 365 days	12	0	12
366 to 730 days (1-2 Yrs)	12	0	12
731 to 1,095 days (2-3 Yrs)	0	0	0
1,096 to 1,460 days (3-4 Yrs)	0	0	0
1,461 to 1,825 days (4-5 Yrs)	0	0	0
More than 1,825 days (>5 Yrs)	0	0	0

➤ RRH – Rapid Placements

Description	Source	Calculation
Percent of people who moved into housing between 8 and 90 days of their project enrollment date. <i>Note: Projects should enroll clients in the program when the client begins receiving services and record a housing move-in date once they move into housing.</i>	APR Question 22c	Q22c Total persons length of participation (8-14) + (15-21) + (22-30) + (31-60) + (61-90 days) / Q22c Total persons moved into housing

APR EXAMPLE:

In the example below, **57%** $[(2+1+1+1+3) / 14] * 100$ of people moved into housing between 8 and 90 days of project enrollment.

Q22c - Length of Time between Project Start Date and Housing Move in Date

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	<u>4</u>	<u>4</u>	0	0	0
8 to 14 days	<u>2</u>	0	<u>2</u>	0	0
15 to 21 days	<u>1</u>	1	0	0	0
22 to 30 days	<u>1</u>	<u>1</u>	0	0	0
31 to 60 days	<u>3</u>	<u>3</u>	0	0	0
61 to 90 days	<u>0</u>	0	0	0	0
91 to 180 days	<u>3</u>	1	<u>2</u>	0	0
181 to 365 days	0	0	0	0	0
366 to 730 days (1-2 Yrs)	0	0	0	0	0
Total (persons moved into housing)	<u>14</u>	<u>10</u>	<u>4</u>	0	0
Average length of time to housing	37.86	30.60	56.00	0.00	0.00
Persons who were exited without move-in	<u>2</u>	<u>2</u>	0	0	0
Total Persons	<u>16</u>	<u>12</u>	<u>4</u>	0	0

2. UTILIZATION

➤ PSH – Average Unit Utilization Rate

Description	Source	Calculation
Average unit utilization rate	PSH Evaluation Tool	Sum of the total number of days each head of household was enrolled in the program during the year / Sum of the total number of days units were available during the year

SAMPLE DATA EXAMPLE:

Given the example data below the average unit utilization rate would be **73%** $[(1,137 / 1,811) * 100]$.

Example Data for 2025 Calendar Year

Head-of-Household Details – assumes all clients are head of households

Client ID	Entry Date	Exit Date	Number of days enrolled in program in 2025
1	11/5/2004		365
2	1/12/2006		365
3	5/16/2007		365
4	10/1/2007	2/12/2025	42
Total			1,137

Inventory Details

Inventory ID	Inventory Start Date	Inventory End Date	Unit Inventory	Total number of days units were available during 2025
1	11/5/2004	1/5/2025	4	(4 days x 4) = 16
2	1/6/2025		5	(359 days x 5) = 1,795
Total				1,811

➤ RRH – Utilization Rate

Description	Source	Calculation
Utilization Rate	APR Q5a and ESNAPS application	Q5a Total Households/ Total persons project stated they will serve in ESNAPS application

APR EXAMPLE:

Let's assume that the ESNAPS application for this project stated they would serve 70 households. The Utilization Rate would be **87%** [(61/70) *100].

Q5a - Report Validations Table

Category	Count Of Clients For DQ	Count Of Clients
Number of Adult Heads of Household	61	61

➤ TH – Average Utilization Rate

Note: the utilization rate for TH projects is calculated using the four point-in-time counts because utilization is calculated using the APR for the 2026 evaluation.

Description	Source	Calculation
Average utilization rate	APR Q7b and HMIS Warehouse bed inventory	(Q7b January point-in-time/HMIS Warehouse Bed Inventory) + (Q7b April point-in-time/HMIS Warehouse Bed Inventory) + (Q7b July point-in-time/HMIS Warehouse Bed Inventory) + (Q7b October point-in-time/HMIS Warehouse Bed Inventory) / 4

APR EXAMPLE:

Let's assume that the bed inventory in the HMIS warehouse for this project is 60 beds. The Utilization Rate would be **83%** $[(51/60 + 51/60 + 51/60 + 47/60)/4]*100]$

Q7b - Point in Time Count Of Persons on the Last Wednesday

Point in Time Count Of Persons on the Last Wednesday	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
January	51	51	0	0	0
April	51	51	0	0	0
July	51	51	0	0	0
October	47	47	0	0	0

3. INCOME & BENEFITS

➤ PSH – Increasing or Maintaining Any Income

Description	Source	Calculation
Percent of adults who increased or maintained any income (earned or other)	APR Q18, Q19a1 and Q19a2	(Q19a1 Total adults retained and same + Retained and increased + Gained between entry and annual assessment) + (Q19a2 Total adults retained and same + Retained and increased + Gained between entry and exit) / (Q18 Total adults staying or exiting – Q18 Adults not yet required to have annual assessment)

APR EXAMPLE:

In the example below, **96%** $[(0+33+1+3+11+0)/(45+16-11)*100]$ of adults maintained or increased their total income.

Q18 - Client Cash Income Category - Earned/Other Income Category - by Start and Annual Assessment/Exit Status

Number of Adults By Income Category	Number of Adults at Start	Number of Adults at Annual Assessment Stayer	Number of Adults at Exit Leavers
Number of adult stayers not yet required to have an annual assessment		11	
Number of adult stayers without required annual assessment		0	
Total Adults	61	45	16

Q19a1 - Client Cash Income Change - Income Source - by Start and Latest Status

A. Income Change by Income Category Universe Adult Stayers with Income Information at Start and Annual Assessment	B. Had Income Category at Start and Did Not Have It at Annual Assessment	C. Retained Income Category But Had Less at Annual Assessment Than at Start	D. Retained Income Category and Same at Annual Assessment as at Start	E. Retained Income Category and Increased at Annual Assessment	F. Did Not Have the Income Category at Start and Gained the Income Category at Annual Assessment	G. Did Not Have the Income Category at Start or at Annual Assessment	H. Total Adults including those with No Income	I. Performance Measures Adults who Gained or Increased Income from Start to Annual Assessment Average Gain	J. Performance measure Percent of persons who accomplished this measure
Number of Adults with Any Income (i.e., Total Income)	0	0	0	33	1	0	34	34	100.00

Q19a2 - Client Cash Income Change - Income Source - by Start and Exit

A. Income Change by Income Category Universe Adult Leavers with Income Information at Start and Exit Assessment	B. Had Income Category at Start and Did Not Have It at Exit Assessment	C. Retained Income Category But Had Less at Exit Assessment Than at Start	D. Retained Income Category and Same at Exit Assessment as at Start	E. Retained Income Category and Increased at Exit Assessment	F. Did Not Have the Income Category at Start and Gained the Income Category at Exit Assessment	G. Did Not Have the Income Category at Start or at Exit Assessment	H. Total Adults including those with No Income	I. Performance Measures Adults who Gained or Increased Income from Start to Exit Assessment Average Gain	J. Performance measure Percent of persons who accomplished this measure
Number of Adults with Any Income (i.e., Total Income)	0	2	3	11	0	0	16	11	68.75

➤ RRH and TH – Increasing Earned Income

Description	Source	Calculation
Percent of adults who increased earned income	APR Q18, Q19a1 and Q19a2	(Q19a1 Total adults with earned income retained and increased + Gained between entry and annual assessment) + (Q19a2 Total adults with earned income retained and increased + Gained between entry and annual assessment) / (Q18 Total adults staying or exiting – Q18 Adults not yet required to have annual assessment)

APR EXAMPLE:

In the example below, **21%** $[(1+3+0+0)/(31+2-19)*100]$ of adults that increased their earned income.

Q18 - Client Cash Income Category - Earned/Other Income Category - by Start and Annual Assessment/Exit Status

Number of Adults By Income Category	Number of Adults at Start	Number of Adults at Annual Assessment Stayer	Number of Adults at Exit Leavers
Number of adult stayers not yet required to have an annual assessment		19	
Number of adult stayers without required annual assessment		0	
Total Adults	33	31	2

Q19a1 - Client Cash Income Change - Income Source - by Start and Latest Status

A. Income Change by Income Category Universe Adult Stayers with Income Information at Start and Annual Assessment	B. Had Income Category at Start and Did Not Have It at Annual Assessment	C. Retained Income Category But Had Less at Annual Assessment Than at Start	D. Retained Income Category and Same at Annual Assessment as at Start	E. Retained Income Category and Increased at Annual Assessment	F. Did Not Have the Income Category at Start and Gained the Income Category at Annual Assessment	G. Did Not Have the Income Category at Start or at Annual Assessment	H. Total Adults including those with No Income	I. Performance Measures Adults who Gained or Increased Income from Start to Annual Assessment Average Gain	J. Performance measure Percent of persons who accomplished this measure
Number of Adults with Earned Income (i.e., Employment Income)	1	0	3	1	3	4	12	4	33.33

Q19a2 - Client Cash Income Change - Income Source - by Start and Exit

A. Income Change by Income Category Universe Adult Leavers with Income Information at Start and Exit Assessment	B. Had Income Category at Start and Did Not Have It at Exit Assessment	C. Retained Income Category But Had Less at Exit Assessment Than at Start	D. Retained Income Category and Same at Exit Assessment as at Start	E. Retained Income Category and Increased at Exit Assessment	F. Did Not Have the Income Category at Start and Gained the Income Category at Exit Assessment	G. Did Not Have the Income Category at Start or at Exit Assessment	H. Total Adults including those with No Income	I. Performance Measures Adults who Gained or Increased Income from Start to Exit Assessment Average Gain	J. Performance measure Percent of persons who accomplished this measure
Number of Adults with Earned Income (i.e., Employment Income)	0	0	1	0	0	1	2	0	0.00

➤ PSH and TH – Non-Cash Benefits

Description	Source	Calculation
Percent of adults who had at least one non-cash benefits at their latest annual assessment or exit	APR Q18 and 20b	(Q20b Adults with 1 or more sources of cash benefits at latest annual + Q20b Adults with 1 or more non-cash benefits at exit) / (Q18 Total adults staying or exiting – Q18 Adults not yet required to have annual assessment)

APR EXAMPLE:

In the example below, **98%** $[(33+16) / (45+16-11)*100]$ of adults had at least one non-cash benefit at their latest annual assessment or at exit.

Q18 - Client Cash Income Category - Earned/Other Income Category - by Start and Annual Assessment/Exit Status

Number of Adults By Income Category	Number of Adults at Start	Number of Adults at Annual Assessment Stayer	Number of Adults at Exit Leavers
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Number of adult stayers not yet required to have an annual assessment		11	
Number of adult stayers without required annual assessment		0	
Total Adults	61	45	16

Q20b - Number of Non-Cash Benefit Sources

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
No Sources	23	1	0
1+ Sources	38	33	16
Client Doesn't Know/Prefers Not to Answer	0	0	0
Data Not Collected/Not stayed long enough for annual assessment	0	11	0
Total	61	45	16

➤ PSH and TH – Health Insurance

Description	Source	Calculation
Percent of people with health insurance	APR Q5 and 21	(Q21 People with 1 insurance at annual assessment + Q21 People with more than 1 insurance at annual assessment + Q21 People with 1 insurance at exit + Q21 People with more than 1 insurance at exit) / (Q5a Total people – Q21 Stayers not required to have an annual assessment)

APR EXAMPLE:

In the example below, **98%** $[(33+14+1+1) / (61-11)*100]$ of people have health insurance.

Q5a - Report Validations Table

Category	Count Of Clients For DQ	Count Of Clients
Total Number of Persons Served	61	61

Q21 - Health Insurance

	At Start	At Annual Assessment for Stayers	At Exit for Leavers
Number of Stayers not yet Required To Have an Annual Assessment		11	
1 Source of Health Insurance	58	33	14
More than 1 Source of Health Insurance	2	1	1

4. Data Quality

➤ PSH, RRH and TH – Personally Identifying Information (PII) Data Elements

Description	Source	Calculation
Percent of total responses to the PII data elements <i>without</i> data errors ¹ .	APR Q5a and 6a	$1 - (\text{Q6a Total data errors for name} + \text{Q6a Total data errors for date of birth} + \text{Q6a Total data errors for race and ethnicity}) / \text{Q5a Total people}$

APR EXAMPLE:

In the example below, **98%** $[1 - ((0+0+1) / 61) * 100]$ of responses to the PII data elements do not have a data quality error.

Q5a - Report Validations Table

Category	Count Of Clients For DQ	Count Of Clients
Total Number of Persons Served	61	61

¹ This includes number of cases where a client answers, “Doesn’t Know or Prefers Not to Answer”, where the information is missing, and where there are data issues as defined by the APR specifications.

Q6a - Data Quality: Personally Identifiable Information

Data Element	Client Doesn't Know Prefers Not to Answer	Information Missing	Data Issues	Total	% of Issue Rate
Name (3.01)	0	0	0	0	0.00%
Social Security Number (3.02)	0	0	0	0	0.00%
Date of Birth (3.03)	0	0	0	0	0.00%
Race and Ethnicity (3.04)	0	1		1	1.64%
Gender (3.06)	0	0		0	0.00%
Overall Score				1	1.64%

➤ **PSH, RRH and TH – Universal Data Elements (UDE)**

Description	Source	Calculation
Percent of total responses to the universal data elements <i>without</i> data errors.	APR Q5a and 6b	1 - (Q6b Total data errors for project start date+ Q6b Total data errors for relationship head of household+ Q6b Total data errors for disabling condition) / Q5a Total people

APR EXAMPLE:

In the example below, **100%** [1- ((0+0+0) / 61)*100] of responses to the universal data elements do not have a data quality error.

Q5a - Report Validations Table

Category	Count Of Clients For DQ	Count Of Clients
Total Number of Persons Served	61	61

Q6b - Data Quality: Universal Data Elements

Data Element	Client Doesn't Know Prefers Not to Answer	Information Missing	Data Issues	Total	% of Issue Rate
Veteran Status (3.07)	0	0	0	0	0.00%
Project Start Date (3.10)			0	0	0.00%
Relationship to Head of Household (3.15)		0	0	0	0.00%
Enrollment CoC (3.16)		0	0	0	0.00%
Disabling Condition (3.08)	0	0	0	0	0.00%

➤ PSH, RRH and TH – Income and Housing Data Elements

Description	Source	Calculation
Percent of total responses to the income and housing data elements <i>without</i> data errors.	APR Q5a and 6c	1 - (Q6c Total data errors for destination+ Q6c Total data errors for income and sources at start+ Q6c Total data errors for income and sources at annual assessment + Q6c Total data errors for income and sources at exit) / (Q5a Total people)

APR EXAMPLE:

In the example below, **97%** [1- ((2+0+0 + 0) / 61)*100] of responses to the income and housing data elements do not have a data quality error.

Q5a - Report Validations Table

Category	Count Of Clients For DQ	Count Of Clients
Total Number of Persons Served	61	61

Q6c - Data Quality: Income and Housing Data Quality

Data Element	Client Doesn't Know Prefers Not to Answer	Information Missing	Data Issues	Total	% of Issue Rate
Destination (3.12)	0	<u>2</u>		<u>2</u>	12.50%
Income and Sources (4.2) at Start	0	0	0	0	0.00%
Income and Sources (4.2) at Annual Assessment	0	0	0	0	0.00%
Income and Sources (4.2) at Exit	0	0	0	0	0.00%

➤ **PSH – Chronic Homelessness Data Elements**

Description	Source	Calculation
Percent of records <i>able</i> to calculate chronic homelessness	APR Q6d	1 – Q6d Percent of records unable to calculate chronic homelessness

APR EXAMPLE:

In the example below, **100%** [100% - 0.00%) of records are able to calculate chronic homelessness.

Q6d - Data Quality: Chronic Homelessness

Starting into project type	Count of total records	Missing time in institution (3.917.2)	Missing time in housing (3.917.2)	Approximate Date started (3.91.3) Missing	Number of times (3.917.4) DK/PNTA/missing	Number of months (3.917.5) DK/PNTA/missing	% of records unable to calculate
ES-EE, ES-NbN, SH, Street Outreach	0			0	0	0	0.00%
TH	0	0	0	0	0	0	0.00%
PH (all)	<u>37</u>	0	0	0	0	0	0.00%
CE	0	0	0	0	0	0	0.00%
SSO, Day Shelter, HP	0	0	0	0	0	0	0.00%
Total	<u>37</u>						0.00%

➤ PSH – Missing Housing Move-in Dates

Description	Source	Calculation
Percent of head of households not missing a housing move-in date	APR Q5a and 22e	1 – (Q22e total head of households not yet moved into housing / Q5a total head of households)

APR EXAMPLE:

In the example below, **100%** $[1 - (0/61) * 100]$ of head of households are not missing a housing move-in date.

Q5a - Report Validations Table

Category	Count Of Clients For DQ	Count Of Clients
Number of Adult Heads of Household	<u>61</u>	<u>61</u>

Q22e - Length of Time Prior to Housing - based on 3.917 Date Homelessness Started

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Not yet moved into housing	0	0	0	0	0

(All Project Types)			
Category 1: Organization Capacity and Experience			
Descriptor	Application Component	Question/Instructions in Application	Max Points
Funding Experience	Survey Monkey: Q44	Describe your organization's (and subrecipient(s) if applicable) experience effectively utilizing federal funds. If there is no experience with federal funds, describe your organizational experience utilizing state, local or private sector funding.	10
Service Model Experience	Narratives: Q4	(TH Only) Describe your agency's experience operating transitional housing and working with the intended service population.	15
		(SSO Only) Describe your agency's experience with the service model described above and working with the intended service population.	
	(Transition Grants Only) RRH/TH-RRH Prior Experience	[Consider past experience and performance under the RRH or TH-RRH model]	
HMIS Capacity	HMIS Internal Score	[Determined by HMIS team]	5
		Subtotal	30
Category 2: Alignment with HUD and Local Priorities			
Descriptor	Application Component	Question/Instructions in Application	Max Points
Population Priorities	Survey Monkey: Q29 (or project description narrative if necessary)	The NYC CoC is encouraging applications for projects that would serve the following subpopulations. If your project would serve any of these populations, select all that apply: - Older adults (62+) - Individuals with substance use disorder - Individuals with complex medical needs	7.5

Community Need	Narratives: Q5	In an environment of scarce federal funding for housing and services, explain how your proposed use of CoC funds would meet a community need (including how you identified that need) and augment or fill a gap in local/state funding.	12.5
		Subtotal	20
Category 3: Project Design and Purpose			
Descriptor	Application Component	Question/Instructions in Application	Max Points
Resource Coordination	Narratives: Q2	Describe your plan to coordinate and integrate with resources both internal and external to your agency, including physical and behavioral health, public benefits, and employment programs. Describe how these service connections will help participants to both increase their income and maximize their ability to live independently.	10
Project Scope & Design	(TH Only) Survey Monkey: Q9	For site-based TH, does your agency have site control?	30
	(TH Only) Narratives: Q1	Provide a description that addresses the entire scope of the proposed project. Your response must include all elements listed below: • the target population(s) to be served • anticipated length of stay for participants • the type of transitional housing that will be provided, including detailed plans for how the program will acquire units • how the program will facilitate exits into permanent housing and long-term housing stability • how the CoC Program funding will be used, as well as plans to leverage non-CoC funding • an outline of your staffing plan, including expected caseloads for direct service staff	
	(SSO Only) Survey Monkey: Q25	Briefly describe the intended service model and how it would assist participants in obtaining permanent housing.	
	(SSO Only) Narratives: Q1	Provide a description that addresses the entire scope of the proposed project, including: • the target population(s) to be served	

		• how/where the program will engage with participants and provide services • how the program will facilitate successful client outcomes (including moving from street homelessness to shelter and from shelter to permanent housing) • how the CoC Program funding will be used, as well as plans to leverage non-CoC funding • an outline of your staffing plan, including expected caseloads for direct service staff	
	(Expansions Only) Survey Monkey: Q34	Will this expansion increase the number of program participants?	
	(Expansions Only) Survey Monkey: Q35	Number of additional participants served (point-in-time):	
	(Expansions Only) Survey Monkey: Q38	Will this expansion project provide additional supportive services to program participants?	
	(Expansions Only) Survey Monkey: Q39	Indicate how the project will provide additional supportive services to program participants: 1. Increase the number of or expand supportive services provided 2. Increase frequency or intensity of supportive services	
	(Expansions Only) Narratives: Q3	For proposed expansions of existing CoC-funded projects – if applicable: Describe your project’s current operations and how the additional resources will be used to further the project’s impact. Note: expansion funding can be used to increase the number of participants served and/or to increase the frequency or depth of services provided to existing participants	
Budget Clarity & Consistency	Budget Appendix	[See scoring guidance for alignment criteria]	5
Cost Eligibility	Budget Appendix	[Based on Budget Appendix, team knowledge of previously funded projects]	5
		Subtotal	50
		Total Points Awarded	100



Attachment 1D-2c: Local Competition Selection Results

Figure	Description	Page Number
1	Local Competition Selection Results	2-23



#	Organization Name	Project Name	Score	Status	Rank	Requested Funding Amount	Reallocated Funds
1	New York City Department of Social Services (DHS)	FY2026 CoC Planning Grant (NY-600)		Accepted	Not Ranked	\$1,500,000.00	\$-
2	NYC HRA Department of Social Services	DV Coordinated Entry FY26 Renewal	N/A	Accepted	1	\$844,171.00	\$-
3	New York City Department of Social Services (DHS)	HMIS Renewal Project FY2026 (NY0317)	N/A	Reduced Reallocated	2	\$2,217,363.00	\$(59,178)
4	NYC HRA Department of Social Services	SSO CAPS FY'24 Renewal	N/A	Reduced Reallocated	3	\$2,323,379.00	\$(59,178)
5	Services for the UnderServed, Inc.	OM12 (OM10/PH12) Renewal FY26	100%	Reduced Reallocated	4	\$252,435	\$(79,716)
6	Housing + Solutions	Housing+Solutions S+C	99%	Accepted	5	\$424,509	\$-
7	Project Renewal, Inc.	In Homes Now Consolidated	99%	Accepted	6	\$2,674,442	\$-
8	Concern for Independent Living, Inc.	Concern Pitkin Apartments	99%	Accepted	7	\$159,966.00	\$-
9	NYC HPD	El Rio	99%	Reduced Reallocated	8	\$872,343.00	\$(119,002)



NY-600-FY26 Application

10	NYC HPD	Rustin Lindenguild Consolidated	98%	Reduced Reallocated	9	\$2,032,980.00	\$(277,227)
11	CUCS, Inc.	The Prince George	98%	Accepted	10	\$384,146.00	\$-
12	Association to Benefit Children	ABC Permanent Supportive Housing Project Renewal FY2026	98%	Accepted	11	\$195,754.00	\$-
13	NYC HPD	Lenniger	98%	Reduced Reallocated	12	\$1,317,695.00	\$(179,741)
14	BronxWorks Inc.	BronxWorks HUD Scattered Site	98%	Accepted	13	\$2,094,081.00	\$-
15	Palladia, Inc.	Stratford Renewal FY26	98%	Accepted	14	\$832,635.00	\$-
16	FACES NY, Inc.	FACES NY WWC 2026	98%	Accepted	15	\$263,159.00	\$-
17	Services for the UnderServed, Inc.	Briarwood Renewal FY26	98%	Accepted	16	\$1,050,336	\$-
18	NYC HPD	CAMBA Hegeman	98%	Reduced Reallocated	17	\$1,005,480.00	\$(137,169)
19	Palladia, Inc.	Cedar Tremont Renewal FY26	98%	Accepted	18	\$760,003.00	\$-
20	Housing + Solutions	Grace House Consolidated	98%	Accepted	19	\$3,694,827.00	\$-
21	The Bridge Inc.	The Bridge S+C	98%	Accepted	20	\$251,576	\$-
22	NYC HPD	Casa Renacer	98%	Reduced Reallocated	21	\$894,433.00	\$(122,037)



NY-600-FY26 Application

23	NYC HPD	Villa Ave	98%	Reduced Reallocated	22	\$569,994.00	\$(77,759)
24	NYC HPD	Kingsbridge Heights	98%	Reduced Reallocated	23	\$670,195.00	\$(91,437)
25	Pibly Residential Programs Inc.	PIBLY 2026	97%	Accepted	24	\$656,056	\$-
26	Community Counseling & Mediation	2026 Rico's Place	97%	Accepted	25	\$265,905.00	\$-
27	Palladia, Inc.	Flora Vista Renewal FY26	97%	Accepted	26	\$314,533.00	\$-
28	NYC HPD	St. Joseph Consolidated	97%	Reduced Reallocated	27	\$2,465,805.00	\$(336,332)
29	NYC HPD	290 East 3rd Street Residence	97%	Reduced Reallocated	28	\$847,248.00	\$(115,546)
30	Housing Works, Inc.	Housing Works Consolidated Congregate Housing FY 24	97%	Accepted	29	\$2,488,707.00	\$-
31	Palladia, Inc.	Chelsea Court Renewal FY26	97%	Accepted	30	\$198,057.00	\$-
32	Kenmore Housing Development Fund Corp.	Kenmore Hall	97%	Accepted	31	\$1,172,256.00	\$-
33	Community Counseling & Mediation	2026 Georgia's Place	97%	Accepted	32	\$256,393.00	\$-
34	NYC HPD	Breaking Ground Consolidated	97%	Reduced Reallocated	33	\$4,084,807.00	\$(1,962,827)
35	Bowery Residents'	Liberty Avenue	97%	Accepted	34	\$408,658.00	\$-



NY-600-FY26 Application

	Committee, Inc.						
36	NYC HPD	Diversity Works	97%	Reduced Reallocated	35	\$775,801.00	\$(105,813)
37	Lower Eastside Service Center, Inc	Diversity Works	97%	Accepted	36	\$332,001.00	\$-
38	Project Hospitality, Inc.	Project Hospitality Permanent Housing 2026	97%	Accepted	37	\$5,735,772	\$-
39	NYC HPD	Bronx Park East Residence	96%	Reduced Reallocated	38	\$887,258.00	\$(121,051)
40	NYC HPD	Palladia Consolidated	96%	Reduced Reallocated	39	\$1,909,792.00	\$(260,459)
41	Lantern Community Services	Schafer Hall SHP	96%	Accepted	40	\$401,129.00	\$-
42	NYC HPD	CAMBA Consolidated	96%	Reduced Reallocated	41	\$1,715,365.00	\$(234,032)
43	POSTGRADUA TE CENTER FOR MENTAL HEALTH	PCMH City Wide Homes FY2026	96%	Accepted	42	\$3,491,097	\$-
44	NYC HPD	St. John's House II	96%	Reduced Reallocated	43	\$457,338.00	\$(62,382)
45	NYC HPD	Geel Consolidated	96%	Reduced Reallocated	44	\$1,808,129.00	\$(246,573)
46	NYC HPD	Project Renewal Consolidated	96%	Reduced Reallocated	45	\$2,686,577.00	\$(366,482)
47	Lutheran Social	Muhlenberg Residence FY2024	96%	Accepted	46	\$254,736.00	\$-



NY-600-FY26 Application

	Services of New York						
48	NYC HPD	Edith MacGuire Residence	96%	Reduced Reallocated	47	\$981,442.00	\$(250,053)
49	The Fortune Society, Inc.	FY2026 S+C - The Fortune Society	96%	Accepted	48	\$2,315,821	\$-
50	NYC HPD	SUS Consolidated	96%	Reduced Reallocated	49	\$1,367,120.00	\$(186,539)
51	NYC HPD	WSFSSH Consolidated	95%	Reduced Reallocated	50	\$855,928.00	\$(116,733)
52	The Bridge Inc.	Park West House Project	95%	Accepted	51	\$1,334,270	\$-
53	CUCS, Inc.	Dorothy Day	95%	Accepted	52	\$272,392.00	\$-
54	NYC HPD	Odyssey House Haven	95%	Reduced Reallocated	53	\$1,201,810.00	\$(163,947)
55	NYC HPD	Truxton	95%	Reduced Reallocated	54	\$738,197.00	\$(100,701)
56	NYC HPD	Ruby's Place	95%	Reduced Reallocated	55	\$486,187.00	\$(66,326)
57	Project Renewal, Inc.	Home (NY0982)	95%	Accepted	56	\$656,603	\$-
58	Services for the UnderServed, Inc.	OM40 (OM9/PH40) Renewal FY26	95%	Reduced Reallocated	57	\$951,193	\$(167,858)
59	NYC HPD	Kingsbridge Terrace	94%	Reduced Reallocated	58	\$505,221.00	\$(68,907)
60	Lutheran Social Services of New York	Community House FY2026	84%	Accepted	59	\$447,066.00	\$-
61	Vocational Instruction	Crotona SRO NOFO FY2024	90%	Accepted	60	\$272,375	\$-



NY-600-FY26 Application

	Project Community Services, Inc						
62	Palladia, Inc.	Hill House Renewal FY26	94%	Accepted	61	\$304,394.00	\$-
63	Goddard Riverside Community Center	Housing Options (NY0286L2T00 2518)	94%	Accepted	62	\$350,278.00	\$-
64	Bowery Residents' Committee, Inc.	Palace Hotel SRO	93%	Accepted	63	\$481,288.00	\$-
65	Praxis Housing Initiatives, Inc	Praxis Housing Initiatives	93%	Accepted	64	\$1,389,863	\$-
66	Goddard Riverside Community Center	Havens (NY1039L2T00 2510)	93%	Accepted	65	\$289,687.00	\$-
67	Promesa, Inc.	Promesa Renewal 2026	93%	Accepted	66	\$1,747,783	\$-
68	Vocational Instruction Project Community Services, Inc	Abraham Apartments NOFO FY2024	93%	Accepted	67	\$122,858	\$-
69	NYC HPD	NCS Consolidated	92%	Reduced Reallocated	68	\$656,147.00	\$(89,503)
70	Bailey House Inc.	SHIP FY 26	92%	Reduced Reallocated	69	\$2,519,710.00	\$(419,952)
71	Bailey House Inc.	STARS II FY 26	92%	Accepted	70	\$1,247,843.00	\$-
72	Institute for Community Living, Inc.	Integrated Permanent Housing Support	92%	Accepted	71	\$255,498.00	\$-



NY-600-FY26 Application

		Services Employment Program FY 24					
73	United Bronx Parents, Inc	UBP Renewal Application 2023	92%	Accepted	72	\$596,496	\$-
74	NYC HPD	Lantern Consolidated	92%	Reduced Reallocated	73	\$5,967,339.00	\$(2,867,465)
75	NYC HPD	Boston Road	91%	Reduced Reallocated	74	\$735,473.00	\$(100,310)
76	NYC HPD	Ilene R. Smith Residence	91%	Reduced Reallocated	75	\$483,048.00	\$(65,871)
77	Goddard Riverside Community Center	Corner House (NY0239L2T00 2518)	81%	Accepted	76	\$249,068.00	\$-
78	Palladia, Inc.	Fox Point Renewal FY26	91%	Accepted	77	\$155,912.00	\$-
79	Project Renewal, Inc.	Shelter Plus Care	90%	Accepted	78	\$738,082	\$-
80	NYC HPD	North Core Studios	90%	Reduced Reallocated	79	\$607,471.00	\$(82,884)
81	Services for the UnderServed, Inc.	OASAS S+C (Shelter Plus Care) Renewal FY26	90%	Reduced Reallocated	80	\$2,961,318	\$(650,045)
82	Palladia, Inc.	Community Housing Program Renewal FY26	89%	Reduced Reallocated	81	\$734,779.00	\$(232,036)
83	HELP Social Service Corporation	Genesis Homes Supportive Housing Program I	89%	Accepted	82	\$1,348,883.00	\$-



NY-600-FY26 Application

84	Women In Need, Inc.	SPC Triangle House FY2024	89%	Accepted	83	\$1,480,641.00	\$-
85	NYC HPD	CCM Consolidated	89%	Reduced Reallocated	84	\$921,329.00	\$(125,684)
86	Palladia, Inc.	Scattered Sites Renewal FY26	89%	Reduced Reallocated	85	\$311,268	\$(9,627)
87	Project Renewal, Inc.	PRI Transitions	88%	Accepted	86	\$963,578	\$-
88	FACES NY	FACES NSP 2026	88%	Accepted	87	\$471,339.00	\$-
89	NYC HPD	Camba Gardens II	88%	Reduced Reallocated	88	\$2,946,306.00	\$(401,877)
90	Community Action for Human Services, Inc	JHB HDFC (NY0295) FY2026 (NY0295L2T002417	88%	Accepted	89	\$155,181.00	\$-
91	NYC HPD	JHB Housing	88%	Reduced Reallocated	90	\$617,931.00	\$(84,275)
92	Columba Kavanagh House, Inc.	COLUMBA KAVANAGH HOUSE, INC. FY2026	87%	Accepted	91	\$523,098.00	\$-
93	NYC HPD	Warren Street Residence	87%	Reduced Reallocated	92	\$657,231.00	\$(89,639)
94	Community Access, Inc	Warren Street SRO FY26	87%	Accepted	93	\$611,051.00	\$-
95	Women In Need, Inc.	SHINE Families FY2024	84%	Accepted	94	\$2,714,303.00	\$-
96	West Side Federation for Senior and Supportive Housing, Inc.	129th Street Residence	82%	Reduced Reallocated	95	\$655,130.00	\$(218,376)



NY-600-FY26 Application

97	Gay Men's Health Crisis, Inc.	Health and Housing Connect	81%	Accepted	96	\$1,775,097.00	\$-
98	GMHC	Connection to Housing and Care	81%	Accepted	97	\$1,004,556.00	\$-
99	VOA	Home:BASE Project	76%	Reduced Reallocated	98	\$781,312	\$(260,437)
100	Urban Pathways, Inc.	Crossroads	90%	Accepted	99	\$907,747	\$-
101	Covenant House New York/Under 21, Inc.	CHNY FY27 Housing Navigator Program	81%	Accepted	100	\$166,880.00	\$-
102	New Destiny Housing Corporation	Housing and Retention Services 2026	74%	Reduced Reallocated	101	\$1,782,380.00	\$(221,370)
103	Jericho Project	Jericho Project Unsheltered RRH	90%	Reduced Reallocated	102	\$2,458,678.00	\$(892,105)
104	Rising Ground, Inc.	New Home YHDP	87%	Accepted	103	\$2,367,526	\$-
105	Violence Intervention Program, Inc.	VIP RRH Renewal Application FY 2026	88%	Accepted	104	\$991,429	\$-
106	Sakhi for South Asian Survivors	Sakhi RRH 1386 FY2026	82%	Accepted	105	\$458,954	\$-
107	Sanctuary for Families, Inc.	Sanctuary for Families Rapid Re-Housing Project FY26 Renewal	82%	Accepted	106	\$956,651	\$-


NY-600-FY26 Application

108	Violence Intervention Program, Inc.	Casa Sandra TH Renewal Application FY2024	78%	Accepted	107	\$341,800	\$-
109	Ali Forney Center	Renewal Application TH FY26	73%	Accepted	108	\$1,049,052.00	\$-
110	The Fortune Society, Inc.	FY2026 SHP - The Fortune Society	72%	Accepted	109	\$484,559	\$-
111	Good Shepherd Services	Chelsea Foyer - FY26 Renewal	71%	Accepted	110	\$409,079.00	\$-
112	Urban Resource Institute	Urban Center for Change FY2026	71%	Accepted	111	\$250,294	\$-
113	Jewish Board of Family and Children's Services, Inc.	Burnside Community Residence	62%	Accepted	112	\$620,866.00	\$-
114	Common Ground Management Corporation D.B.A. Breaking Ground Management	Project Welcome MAT (Moving on an Accelerated Timeline)	45%	Reduced Reallocated	113	\$1,172,615.00	\$(62,488)
115	Goddard Riverside	Goddard Riverside Manhattan Street Outreach Team (NY1488H2T00 2200)	54%	Reduced Reallocated	114	\$1,217,644.00	\$(95,815)
116	Care for the Homeless	CFH - Coordinated	34%	Reduced Reallocated	115	\$1,271,143.00	\$(141,639)



NY-600-FY26 Application

		Care for Housing					
117	Jericho Project	Jericho Project Transitional Housing	90%	Accepted	116	\$5,494,762.00	\$5,494,762
118	Gay Men's Health Crisis, Inc.	RRH To Transitional Housing Program	87%	Accepted	117	\$2,031,129.00	\$2,031,129
119	HeartShare St. Vincent's Services	HeartShare St. Vincents Services TH	84%	Accepted	118	\$2,358,153.00	\$2,358,153
120	Volunteers of America - Greater New York, Inc.	Paloma Project Renewal FY24	81%	Accepted	119	\$879,964.00	\$879,964
121	Rising Ground, Inc.	New Home Young Adult TH-1	81%	Accepted	120	\$3,033,622	\$3,033,622
122	Covenant House New York/Under 21, Inc.	Transitional Housing Grant	77%	Accepted	121	\$3,175,657.00	\$3,175,657
123	Housing+Solutions	Supportive Services Only - Foundation for Success	81%	Accepted	122	\$1,052,140.00	\$1,052,140
124	Good Shepherd Services	Foundations for Youth Living	80%	Accepted	123	\$1,490,402.00	\$1,490,402
125	Good Shepherd Services	Safe Homes Project	76%	Accepted	124	\$1,072,036.00	\$1,072,036
126	Good Shepherd Services	Street Outreach Program	N/A	Accepted	125	\$869,865.00	\$869,865



NY-600-FY26 Application

127	Common Ground Management Corporation D.B.A. Breaking Ground Management	Project IN-Reach (INtegrating Risk Mitigation and INcreasing Care Coordination)	N/A	Accepted	126	\$2,764,713.00	\$2,764,713
128	Safe Horizon	Safe Horizon Streetwork Project 2026 - Street outreach and homelessness prevention for unsheltered youth up to age 25	N/A	Accepted	127	\$900,000	\$900,000
129	CUCS	Medication Case Management and Integrated Psychiatric Services	95%	Accepted	128	\$3,056,706.00	\$3,056,706
130	The Fortune Society	The Fortune Society - Transitioning Home: Supportive Temporary Housing for Formerly Incarcerated New Yorkers	93%	Accepted	129	\$1,277,573	\$1,277,573
131	The Fortune Society	The Fortune Society - Supporting Solutions: Outreach and Holistic	92%	Accepted	130	\$1,004,788	\$1,004,788



NY-600-FY26 Application

		Support for Formerly Incarcerated New Yorkers (New Project Application - SSO)					
132	CUCS	CUCS Manhattan Street Outreach Program	92%	Accepted	131	\$1,342,839.00	\$1,342,839
133	Volunteers of America - Greater New York	Fast Track to Housing For Homeless Adults	91%	Accepted	132	\$2,137,659	\$2,137,659
134	Anthos Home	Anthos Home Housing Navigation	91%	Accepted	133	\$2,445,440.00	\$2,445,440
135	The Children's Rescue Fund	CRF Coordinated Supportive Services Initiative	81%	Accepted	134	\$4,698,355	\$4,698,355
136	Volunteers of America - Greater New York	Safety and Stability for People Fleeting Domestic Violence	88%	Accepted	135	\$2,055,853	\$2,055,853
137	Gay Men's Health Crisis	HUD-Transitional Housing Program	88%	Accepted	136	\$2,928,835.00	\$2,928,835
138	Anthos Home	Anthos Home Older Adult Housing Navigation	87%	Accepted	137	\$2,445,440.00	\$2,445,440



NY-600-FY26 Application

139	DHS	Healthcare Facility-to-Shelter Care Transitions Program	85%	Accepted	138	\$2,528,640.00	\$671,535
140	Care for the Homeless	CFH Transitional Housing - Street Homeless and Complex Needs	83%	Accepted	139	\$3,896,984.00	\$3,896,984
141	Common Ground Management Corporation D.B.A. Breaking Ground Management	Project CARE (Coordinated Acuity Response and Engagement)	81%	Accepted	140	\$1,754,467.00	\$1,754,467
142	Volunteers of America - Greater New York	Wales Transitional Housing	81%	Accepted	141	\$1,446,183	\$1,446,183
143	Rising Ground	Rising Ground Safe Home TH	80%	Accepted	142	\$2,273,744	
144	Ali Forney Center	SSO:Housing Navigation and Stabilization	79%	Accepted	143	\$999,900.00	\$999,900
145	Rising Ground	Rising Ground Bridges to Home TH	76%	Accepted	144	\$2,591,479	
146	Project Hospitality	Project Hospitality - Vanderbilt	75%	Accepted	145	\$1,539,658	\$1,539,658
147	Project Hospitality	Project Hospitality -	74%	Accepted	146	\$1,738,045	\$1,738,045



NY-600-FY26 Application

		Carpenter House					
148	Housing Plus Solutions	Transitional Housing: Journey to Home	73%	Accepted	147	\$6,317,027.00	\$6,317,027
149	Project Hospitality	Project Hospitality - O'Callaghan House	71%	Accepted	148	\$2,432,825	\$2,432,825
150	The Ladies of Hope Ministries	LOHM TH NYC	71%	Accepted	149	\$1,449,459	\$1,449,459
151	Jewish Board of Family and Children's Services, Inc.	Bridge to Home (SSO)	66%	Accepted	150	\$1,101,750.00	\$1,101,750
152	Bronx Family Network	Pathways to Permanent Housing (P2H)	65%	Accepted	151	\$2,571,558.00	\$2,571,558
153	Korean American Family Service Center	KAFSC Queens Transitional Housing Program	64%	Accepted	152	\$1,587,846.00	
154	Black Veterans for Social Justice, Inc.	BVSJ RRH Support Service Only 2024	61%	Accepted	153	\$492,461.00	\$492,461
155	Urban Resource Institute	Harmony House FY2024	61%	Accepted	154	\$1,418,794	\$1,418,794
156	The Hetrick-Martin Institute, Inc.	HMI Youth Homelessness Demonstration Program	N/A	Accepted	155	\$866,891	\$866,891



NY-600-FY26 Application

157	New Destiny Housing Corporation	Pathways to Self-sufficiency for DV Survivors 26	87%	Accepted	156	\$466,596.00	\$466,596
158	Care for the Homeless	CFH Connections to Healthcare	85%	Accepted	157	\$936,195.00	\$936,195
159	Urban Pathways	Key to Home TH	81%	Accepted	158	\$1,010,540	\$1,010,540
160	Project Renewal	Project Renewal: SSO Program	74%	Accepted	159	\$545,739	
161	The Ladies of Hope Ministries	LOHM DV TH NYC	70%	Accepted	160	\$1,900,262	\$1,900,262
162	Safe Horizon	Safe Horizon Shelters Project 2026 - Supportive Services for Survivors	64%	Accepted	161	\$1,030,065	\$1,030,065
206	Anthos Home Inc	Anthos Home Rapid Rehousing Program Renewal FY2024	53%	Fully Reallocated	Not Ranked	\$-	\$(1,140,289.00)
181	Bailey House Inc.	Schafer Hall FY '24	90%	Fully Reallocated	Not Ranked	\$-	\$(506,687)
185	Banana Kelly Improvement Assoc Inc	Rental Assistance Program	79%	Fully Reallocated	Not Ranked	\$-	\$(678,339)
180	Black Veterans for Social Justice, Inc.	BVSJ RRRH Support Service Only 2024	61%	Fully Reallocated	Not Ranked	\$-	\$(492,461)



NY-600-FY26 Application

214	Care for the Homeless	CFH - Street to Home: Embedding RRH with Coordinated Care	30%	Fully Reallocated	Not Ranked	\$-	\$(1,643,919)
223	Common Ground Management Corporation D.B.A. Breaking Ground Management	Project IN-Reach (Integrating harm Reduction and Increasing Care Coordination)	N/A	Fully Reallocated	Not Ranked	\$-	\$(2,764,713)
226	Covenant House New York/Under 21, Inc.	CHNY FY24 THRRH Renewal (NY1166)	77%	Fully Reallocated	Not Ranked	\$-	\$(3,175,657)
165	CUCS, Inc.	The Christopher	96%	Fully Reallocated	Not Ranked	\$-	\$(133,674)
225	DHS	Enhanced Health Services	N/A	Fully Reallocated	Not Ranked	\$-	\$(3,105,097)
166	FACES NY	FACES NY CSH 2024	91%	Fully Reallocated	Not Ranked	\$-	\$(148,197)
211	Foundation for Research on Sexually Transmitted Diseases	FROST'D	82%	Fully Reallocated	Not Ranked	\$-	\$(1,433,283)
218	Gay Men's Health Crisis, Inc.	GMHC CoC RRH Project FY24	87%	Fully Reallocated	Not Ranked	\$-	\$(2,031,129)
194	Good Shepherd Services	YHDP Street Outreach Program	82%	Fully Reallocated	Not Ranked	\$-	\$(869,865)



NY-600-FY26 Application

202	Good Shepherd Services	Safe Homes Project DV RRH	76%	Fully Reallocated	Not Ranked	\$-	\$(1,072,036)
220	Good Shepherd Services	YHDP Rental Assistance Program (TLRA RRH)	80%	Fully Reallocated	Not Ranked	\$-	\$(2,336,366)
169	Harlem United Community AIDS Center	124th St. Residence	86%	Fully Reallocated	Not Ranked	\$-	\$(252,136)
184	Harlem United Community AIDS Center	Harlem United Family Program	78%	Fully Reallocated	Not Ranked	\$-	\$(677,945)
221	HeartShare St. Vincent's Services	HeartShare St. Vincents YHDP	84%	Fully Reallocated	Not Ranked	\$-	\$(2,358,154)
201	Housing+Solutions	SHERO (NY1382L2T00 2201)	81%	Fully Reallocated	Not Ranked	\$-	\$(1,052,140)
163	Institute for Community Living, Inc.	Cathedral Condos FY24	93%	Fully Reallocated	Not Ranked	\$-	\$(44,535)
167	Institute for Community Living, Inc.	Flatbush Ave FY24	71%	Fully Reallocated	Not Ranked	\$-	\$(171,150)
168	Institute for Community Living, Inc.	Lewis Avenue FY24	86%	Fully Reallocated	Not Ranked	\$-	\$(171,151)
172	Institute for Community Living, Inc.	Lawton Street FY24	97%	Fully Reallocated	Not Ranked	\$-	\$(332,900)
207	Institute for Community Living, Inc.	Emerson Family Supported FY24	83%	Fully Reallocated	Not Ranked	\$-	\$(1,202,198)



NY-600-FY26 Application

217	Institute for Community Living, Inc.	Shelter Plus Care 94 and 95 FY24	81%	Fully Reallocated	Not Ranked	\$-	\$(1,736,049)
164	Jericho Project	Loring Place Vocational Education	96%	Fully Reallocated	Not Ranked	\$-	\$(54,970)
227	Jericho Project	Rapid Rehousing 2	90%	Fully Reallocated	Not Ranked	\$-	\$(5,494,762)
179	Jewish Board of Family and Children's Services, Inc.	Kingsbridge CR/SRO	95%	Fully Reallocated	Not Ranked	\$-	\$(484,670)
188	Jewish Board of Family and Children's Services, Inc.	Maple House CR/SRO	83%	Fully Reallocated	Not Ranked	\$-	\$(725,506)
198	Jewish Board of Family and Children's Services, Inc.	124th Street CR/SRO	85%	Fully Reallocated	Not Ranked	\$-	\$(980,720)
199	Jewish Board of Family and Children's Services, Inc.	White Plains Road CR/SRO	91%	Fully Reallocated	Not Ranked	\$-	\$(991,451)
204	Jewish Board of Family and Children's Services, Inc.	Jewish Board DV - RRH	66%	Fully Reallocated	Not Ranked	\$-	\$(1,101,750)
205	Jewish Board of Family and Children's Services, Inc.	Bronx Permanent Housing	89%	Fully Reallocated	Not Ranked	\$-	\$(1,110,166)
182	Lower Eastside Service Center, Inc	LESC House FY2024	98%	Fully Reallocated	Not Ranked	\$-	\$(544,592)



NY-600-FY26 Application

216	New Destiny Housing Corporation	HousingLink 2024	91%	Fully Reallocated	Not Ranked	\$-	\$(1,728,243)
171	NYC HPD	Clinton Housing W. 42nd Street CoC	87%	Fully Reallocated	Not Ranked	\$-	\$(328,942)
173	NYC HPD	Chelsea Leaf North	N/A	Fully Reallocated	Not Ranked	\$-	\$(376,256)
183	NYC HPD	Wazobia House	93%	Fully Reallocated	Not Ranked	\$-	\$(559,438)
186	NYC HPD	Dorothy McGowan	100%	Fully Reallocated	Not Ranked	\$-	\$(688,742)
189	NYC HPD	Stardom Hall	N/A	Fully Reallocated	Not Ranked	\$-	\$(777,301)
191	NYC HPD	Ehrlich Residence	88%	Fully Reallocated	Not Ranked	\$-	\$(818,433)
195	NYC HPD	Gibb Mansion	89%	Fully Reallocated	Not Ranked	\$-	\$(874,695)
200	NYC HPD	Gramercy Leaf	93%	Fully Reallocated	Not Ranked	\$-	\$(1,008,720)
212	NYC HPD	VIP Consolidated	92%	Fully Reallocated	Not Ranked	\$-	\$(1,448,526)
219	NYC HPD	Sobro Consolidated	N/A	Fully Reallocated	Not Ranked	\$-	\$(2,107,254)
222	NYC HPD	Community Access Consolidated CoC	61%	Fully Reallocated	Not Ranked	\$-	\$(2,432,841)
203	Restore NYC, Inc.	Restore Rapid Rehousing for Survivors of Trafficking	43%	Fully Reallocated	Not Ranked	\$-	\$(1,083,360)



NY-600-FY26 Application

224	Rising Ground, Inc.	New Home Young Adult Rapid Rehousing	81%	Fully Reallocated	Not Ranked	\$-	\$(3,033,622)
197	Safe Horizon	Safe Horizon Streetwork Project	N/A	Fully Reallocated	Not Ranked	\$-	\$(900,421)
209	Sakhi for South Asian Survivors	Sakhi RRH Program FY2024 NOFO	76%	Fully Reallocated	Not Ranked	\$-	\$(1,272,102)
174	Services for the UnderServed, Inc.	FY24 Renewal Decatur/Rock	97%	Fully Reallocated	Not Ranked	\$-	\$(378,245)
176	Services for the UnderServed, Inc.	FY24 Renewal Broadway	89%	Fully Reallocated	Not Ranked	\$-	\$(416,326)
187	Services for the UnderServed, Inc.	FY24 Renewal OMH Knick/Beach	94%	Fully Reallocated	Not Ranked	\$-	\$(695,799)
215	Services for the UnderServed, Inc.	FY24 Renewal Brooklyn Supported Housing	89%	Fully Reallocated	Not Ranked	\$-	\$(1,719,805)
213	The Bronx Parent Housing Network, Inc.dba Housing Solutions of New York (HSNY)	HSNY AHSAPP	0%	Fully Reallocated	Not Ranked	\$-	\$(1,606,902)



NY-600-FY26 Application

193	The Hetrick-Martin Institute, Inc.	HMI Youth Homelessness Demonstration Program	N/A	Fully Reallocated	Not Ranked	\$-	\$(866,912)
190	The Ladies of Hope Ministries	Ladies of Hope Ministries - DV RRH NYC 2024	58%	Fully Reallocated	Not Ranked	\$-	\$(788,471)
192	The Partnership To End Homelessness	Safe Future	55%	Fully Reallocated	Not Ranked	\$-	\$(819,586)
175	University Consultation & Treatment Center for Mental Hygiene	The Ehrich Residence	88%	Fully Reallocated	Not Ranked	\$-	\$(397,734)
208	Urban Pathways	Key to Home Initiative	33%	Fully Reallocated	Not Ranked	\$-	\$(1,260,680)
170	Urban Pathways, Inc.	Cluster House	97%	Fully Reallocated	Not Ranked	\$-	\$(305,570)
178	Urban Pathways, Inc.	Ivan Shapiro House	91%	Fully Reallocated	Not Ranked	\$-	\$(483,184)
210	Urban Resource Institute	Harmony House FY2024	61%	Fully Reallocated	Not Ranked	\$-	\$(1,418,794)
177	Volunteers of America - Greater New York, Inc.	Victory Commons Renewal FY2024	84%	Fully Reallocated	Not Ranked	\$-	\$(416,668)
196	Volunteers of America - Greater New York, Inc.	Paloma Project Renewal FY24	81%	Fully Reallocated	Not Ranked	\$-	\$(879,964)



Attachment 2A-8b	FY 2026 HDX Competition Report
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Figure	Description	Page Number
1	FY 2026 HDX Competition Report	2-22

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

NY-600 - New York City 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

NY-600 - New York City 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

NY-600 - New York City 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	192,786	305.8	236.0
1.2 Persons in ES-EE, ES-NbN, SH, and TH	193,370	306.7	237.0

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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”)	193,995	299.0	224.0
1.2 Persons in ES-EE, ES-NbN, SH, TH, and PH (prior to “housing move in”)	194,541	302.0	225.0

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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	610	49	8.0%	12	2.0%	15	2.5%	76	12.5%
Exit was from ES	31,960	2,068	6.5%	733	2.3%	1,194	3.7%	3,995	12.5%
Exit was from TH	267	31	11.6%	11	4.1%	8	3.0%	50	18.7%
Exit was from SH	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from PH	1,134	39	3.4%	19	1.7%	33	2.9%	91	8.0%
TOTAL Returns to Homelessness	33,971	2,187	6.4%	775	2.3%	1,250	3.7%	4,212	12.4%

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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	193,500
Emergency Shelter Total	192,925
Safe Haven Total	0
Transitional Housing Total	871

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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)	6,880
Number of adults with increased earned income	330
Percentage of adults who increased earned income	4.8%

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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)	6,880
Number of adults with increased non-employment cash income	2,579
Percentage of adults who increased non-employment cash income	37.5%

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

Metric	Value
Universe: Number of adults (system stayers)	6,880
Number of adults with increased total income	2,781
Percentage of adults who increased total income	40.4%

Metric 4.4 – Change in earned income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	1,086
Number of adults who exited with increased earned income	127
Percentage of adults who increased earned income	11.7%

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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)	1,086
Number of adults who exited with increased non-employment cash income	453
Percentage of adults who increased non-employment cash income	41.7%

Metric 4.6 – Change in total income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	1,086
Number of adults who exited with increased total income	532
Percentage of adults who increased total income	49.0%

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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.	144,870
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.	56,375
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)	88,495

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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.	146,499
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.	56,924
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.)	89,575

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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	12,397
Of persons above, those who exited to temporary & some institutional destinations	8,178
Of the persons above, those who exited to permanent housing destinations	900
% Successful exits	73.2%

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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	107,087
Of the persons above, those who exited to permanent housing destinations	45,029
% Successful exits	42.1%

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	12,714
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	12,373
% Successful exits/retention	97.3%

2025 HDX Competition Report

2026 Competition Report - SPM Data

NY-600 - New York City 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)	196,784	873	13,311	3,256	18,868
Total Leavers (HMIS)	109,541	389	1,075	1,383	11,891
Destination of Don't Know, Refused, or Missing (HMIS)	50,305	79	55	32	1,971
Destination Error Rate (Calculated)	45.9%	20.3%	5.1%	2.3%	16.6%

2025 HDX Competition Report

2026 Competition Report - SPM Notes

NY-600 - New York City 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	No notes.	

2025 HDX Competition Report

2026 Competition Report - HIC Summary

NY-600 - New York City 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	102,617	94,752	99,425	0	99,425	95.3%
SH	40	0	40	0	40	0.0%
TH	2,345	555	1,976	0	1,976	28.1%
RRH	1,762	1,041	1,041	0	1,041	100.0%
PSH	41,308	14,106	40,371	0	40,371	34.9%
OPH	15,290	0	15,290	15,290	0	NA
Total	163,362	110,454	158,143	15,290	142,853	77.3%

2025 HDX Competition Report

2026 Competition Report

NY-600 - New York City CoC

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	102,617	0	3,192	0	3,192	0.00%
SH	40	0	0	0	0	NA
TH	2,345	369	369	0	369	100.00%
RRH	1,762	721	721	0	721	100.00%
PSH	41,308	937	937	0	937	100.00%
OPH	15,290	0	0	0	0	NA
Total	163,362	2,027	5,219	0	5,219	38.84%

2025 HDX Competition Report

2026 Competition Report

NY-600 - New York City CoC

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	102,617	94,752	102,617	92.34%
SH	40	0	40	0.00%
TH	2,345	924	2,345	39.40%
RRH	1,762	1,762	1,762	100.00%
PSH	41,308	15,043	41,308	36.42%
OPH	15,290	0	0	NA
Total	163,362	112,481	148,072	75.96%

2025 HDX Competition Report

2026 Competition Report - HIC Summary

NY-600 - New York City 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

NY-600 - New York City CoC

For PIT conducted in January/February of 2026

Submission Information

Date of PIT Count	Received HUD Waiver
2/10/2026	Yes

Total Population PIT Count Data

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered-Only Count
Emergency Shelter Total	132,892	118,121	99,595
Safe Haven Total	37	39	30
Transitional Housing Total	2,808	2,850	1,924
Total Sheltered Count	135,737	121,010	101,549
Total Unsheltered Count	4,397	4,673	NA
Total Sheltered and Unsheltered Count*	140,134	125,683	101,549

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-Only Count
Total Sheltered Count	3,463	2,783	2,631
Total Unsheltered Count	817	822	0
Total	4,280	3,605	2,631



3A-1 HUD-2996 Certification for Opportunity Zone Preference Points
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Figure	Description	Page Number
1	Signed HUD-2996 Form and list of census tracks	2-4

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: New York City Department of Social Services

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, Continuum of Care Program

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."

See attached

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 New York City Continuum of Care is submitting a portfolio of 162 projects in response to the 2026 CoC NOFO. These homeless assistance projects will support access to housing in communities where they operate, including 71 Opportunity Zones, while promoting economic stability for participants and strengthening partnerships and local infrastructure to end homelessness in NYC.

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: Erin _____ Middle Initial: _____ Last Name: Dalton _____ Suffix: _____

Title: Commissioner _____ Organization: NYC Department of Social Services _____

Signature:  _____ Date: 9/28/26 _____

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

36005004300	36005041100
36005004800	36047022100
36005005200	36047028100
36005007300	36047028300
36005007900	36047034700
36005008500	36047036100
36005012300	36047036900
36005012701	36047037500
36005012901	36047079001
36005014100	36047080800
36005014300	36047082000
36005014701	36047092200
36005015100	36047109800
36005016700	36047113400
36005016900	36047119600
36005017500	36047119800
36005017901	36061002201
36005020000	36061009400
36005020200	36061011900
36005020502	36061017000
36005020900	36061018200
36005021502	36061018800
36005021700	36061019200
36005022500	36061019400
36005024300	36061019600
36005026500	36061020600
36005027300	36061022400
36005033201	36061022700
36005035900	36061023700
36005036100	36081024000
36005036901	36081044601
36005036902	36081046000
36005037300	36081117100
36005038100	36085013302
36005040304	36085020702
	36005007000



Attachment 3A-DP: Your Coc's Policy or Statement to Advance Recovery

Figure	Description	Page Number
1	NYC CoC Substance Abuse and Recovery Policy	2-3



NYC CoC Substance Use and Recovery Housing Policy

Adopted: 09.28.2026

Purpose

The New York City Continuum of Care (NYC CoC) is committed to ensuring that NY-600 CoC-funded housing projects operate in compliance with federal law, HUD requirements, and the FY 2026 CoC Notice of Funding Opportunity (NOFO).

The NYC CoC also recognizes that substance use disorders are treatable medical conditions and supports access to evidence-based treatment, recovery services, and recovery-oriented housing opportunities.

1. Requirements and Prohibited Activities in CoC-funded housing projects

- A. All NY-600 CoC-funded housing projects shall not operate drug injection sites or "safe consumption sites," knowingly distribute drug paraphernalia on or off property under their control, knowingly permit the use or distribution of illicit drugs on property under their control, or conduct any of these activities under the pretext of "harm reduction."
- B. All NY-600 CoC-funded housing project applicants and recipients must comply with all certifications and assurances required by HUD in the applicable CoC Program Competition.
- C. All NY-600 CoC-funded housing projects shall at all times operate in compliance with federal law.

2. Compliance Monitoring and Remedies

The NYC CoC will monitor compliance with this policy through its established monitoring and compliance oversight processes.

If the CoC determines that a project has violated this policy, the CoC may take one or more of the following actions:

- A. Require corrective action and submission of a plan of corrective action;
- B. Require staff training or technical assistance;
- C. Consider the violation during local competition scoring, project review, or ranking processes;



- D. Pursue any additional remedies available under CoC governance documents, grant agreements, or federal regulations.

3. Recovery and Treatment Services

The NYC CoC urges all CoC-funded projects to:

- Assist participants in accessing substance use disorder (SUD) treatment when requested or clinically appropriate;
- Establish referral relationships with licensed treatment providers within or outside of the CoC;
- Connect participants to medication-assisted treatment, outpatient treatment, inpatient treatment, peer recovery support, recovery coaching, and other evidence-based services within or outside of the CoC;
- Coordinate with recovery housing providers and recovery-oriented systems of care within or outside of the CoC;
- Support participants pursuing recovery goals consistent with their individual needs and preferences.

4. Recovery Housing and Treatment-Based Programs

Nothing in this policy restricts or prohibits 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. All projects must comply with fair housing laws, disability rights requirements, and applicable due process protections.