

Leadership Capacity

Maximum Points: 15

HUD will award up to 15 points to applicants that demonstrate they have the necessary leadership in place to effectively manage the development of a CCP to prevent and end youth homelessness. Applicants must:

1. Describe how the CoC addressed challenges for youth at-risk-of or experiencing homelessness resulting from the outbreak of COVID-19. Examples can include working with school liaisons to identify youth who are disconnected from schools; specific outreach and strategies to youth providers; and dedicating housing resources to youth.

We recognized early that COVID increased the risk of negative outcomes for Youth and Young Adults (YYA) at-risk or experiencing homelessness due to co-occurring health conditions and close physical proximity to others in shelters, campsites, doubled up and in high density rentals. They lost access to many resources because of business closures and remote working initiatives, and faced significant financial challenges as Cape Cod's tourism-based economy came to a standstill. In response, the Cape and Islands Regional Network on Homelessness (CoC) Emergency Planning committee met weekly to identify gaps in services and collaboratively address community needs. The Barnstable County Dept. of Human Service (BCDHS)– Collaborative Applicant/HMIS lead/Coordinated Entry (CE) lead–led the meetings which included Duffy Health Center, the county Dept. of Public Health, regional homelessness outreach programs, law enforcement and corrections, town and state officials, the MA Dept. of Mental Health, private foundations, shelter providers, the Cape and Islands National Alliance on Mental Illness, visiting nursing providers, disabilities programs, PHAs, non-CoC funded transitional housing (TH), faith-based organizations, and food access providers. Together we assessed the needs of YYA in the community and responded with the following: *Blended funding* from Cape Cod Healthcare, ESG-CV1 and CV2, town CDBG funds, private donations and state YYA homelessness funds to provide a motel testing/isolation/quarantine site, food access, sanitation facilities, laundry services, clothing, and other basic needs; *A mobile shower unit* with help from the county, state Emergency Management Agency, and state Senator's office serving a daily average of 19 people with on-site case management and referrals to resources; *Updated CE Policies and Procedures* to prioritize those most likely to experience negative outcomes from COVID-19; *Offering vaccines* to all staff and YYA at all TH and PSH programs with vaccine clinics at shelters and mobile clinics for unsheltered folks (>70% of staff and guests fully vaccinated within first 5 months of 2021); *Food access programs for YYA* through direct food delivery to unsheltered YYA and new locations for meals, boxes with several days' worth of provisions, and a social distanced breakfast program with staff to engage YYA and monitor for outbreaks. These initiatives limited COVID infections among YYA, helped avoid outbreaks in shelter and TH by quickly moving YYA who tested positive into temporary housing and YYA awaiting testing results into hotels, and increased YYA engagement, CE assessment, and documentation gathering needed to transition YYA into housing despite the pandemic.

2. Describe one initiative outside of applying for grant funds and related to youth homelessness that has been designed or implemented by the Youth Action Board or youth in the community. Examples could include designing a youth court, developing or improving a drop-in center or creating a peer partnership program.

The Youth Action Board (YAB) designed and implemented a cooking class-community meal program for YYA experiencing housing instability as a method of social connection, skill building for sustaining independent housing, and YAB recruitment. They were responding to a finding from our Community Needs Assessment (CNA) that “Small social networks, stigma, and a lack of awareness suppress identification, prevention, and intervention.” Their program expands social networks by offering a collaborative setting to interact, create a meal together, and share in the efforts of working toward a common goal. The classes and meal include transportation resources (a big issue here) so any YYA in the CoC can participate. The YAB has partnered with the Barnstable County Food Access Coordinator to provide packages of food for YYA to take with them and to sign up for mobile food pantry deliveries, so YYA can avoid the stigma they associate with standing in line at a traditional pantry location.

3. Demonstrate how the YAB decision-making process is integrated into the larger CoC and how recommendations or decisions from the YAB are implemented.

A YAB member sits on the Policy Board (CoC governing body) with full voting power on all policy, procedure, and funding decisions. The CoC Program Manager/YYA Homelessness lead sets the agenda for the Policy Board and works collaboratively with the YAB to center the needs of YYA experiencing housing instability during each meeting. The YAB board member is provided draft meeting materials to review with the YAB for recommendations, concerns, and questions. The CoC Program Manager meets with individual YAB members and the whole YAB to review the Policy Board agenda, provide additional information on subject matter covered in the meeting and provide additional support as needed. The YAB Board Member has the authority to recommend changes to Policies and Procedures and other decision-making processes and can move to postpone a vote to engage the rest of the YAB more deeply in a discussion.

4. Demonstrate how the CoC structure will support the lead agency. The applicant must clearly identify the names of committees (and approximate number of members) within the CoC that will be involved in the planning and implementation of a coordinated community approach to prevent and end youth homelessness, each current committee objective, and current youth-relevant task(s).

Policy Board-32 members including a member of the YAB. In charge of oversight and decision-making and the overall work to end homelessness on the Cape and Islands; Youth-relevant task is to review, implement, and oversee the strategic plan on YYA homelessness and housing instability, including updates to regional policy and the allocations of YYA resources. **Executive**

Committee-10 members; Assess community need for services and resources and makes recommendations to the Policy Board on systems improvements and innovative service strategies; Youth relevant tasks are to guide decision making on implementation of the state YYA homelessness grant, increase authentic YYA partnership, analyze CE for barriers and gaps specific to YYA, approve the YYA CNA and homelessness strategy, and coordinate innovative strategy sessions to identify opportunities for new programming and resources. **YYA Homelessness Committee**-17 Members, including YAB members and partner agency leadership. Sets CoC goals and objectives for preventing and ending YYA homelessness; All tasks are youth relevant, including drafting our annual YYA homelessness strategy and leading key action steps (e.g., development of YYA emergency housing, a CoC YYA transportation strategy, a feasibility study for low barrier communal housing). **HMIS Committee**-6 members; Implement an effective HMIS for the CoC and our providers. Youth relevant tasks include reporting and analysis of YYA homelessness HMIS project data that capture information beyond universal data elements. **Youth Action Board (YAB)**-10 members; ensure that YYA priorities are incorporated in all CoC decisions. All tasks are youth relevant including voting membership on the Policy Board, participation in YYA PSH CoC monitoring and participation in policy development and strategic planning to address and end YYA homelessness.

5. Describe the CoC's current written plan or strategy to prevent and end youth homelessness. If a part of a plan to prevent and end all forms of homelessness, to get maximum points under this criterion, there must be a dedicated Section or set of youth-specific strategies and objectives. The narrative should include the organizations or agencies that helped to develop, signed or adopted the plan.

In Spring 2022, the Policy Board approved our YYA homelessness strategic plan. The YYA committee partnered with the YAB over several months to draft the plan. It was approved by the Board and signed by all partner agencies—YAB, Duffy Health Center, Housing Assistance Corporation, Homeless Prevention Council, Fairwinds Nantucket Counseling Center, Champ Homes, and Martha's Vineyard Community Services. The plan establishes YYA priorities including the following Strategies and Objectives: 1) Improve system coordination and capacity to implement an effective coordinated community response to prevent and end YYA homelessness; 2) Increase system capacity to support YYA with high level needs; 3) Add low barrier, safe, and affirming housing and shelter that comprehensively meets the needs of YYA with lived experience; 4) Improve the ability of YYA experiencing homelessness to access resources across the CoC; 5) Increase community awareness to reduce stigma, engender greater understanding and support, and increase identification and access; 6) Reduce the prevalence and impact of food insecurity among YYA experiencing homelessness and housing instability.

6. Describe two youth-specific strategies to address youth homelessness in the plan described in question 5.

1) Develop a YYA-specific crisis residential project where YYA can find a safe and comfortable bed to sleep in, meet their immediate basic needs, and connect to navigation and case management to help them either return home or find alternative long term safe housing. Action steps include securing funding, program design, identifying a provider and physical site, and analysis of effectiveness based on YYA feedback. 2) Develop a region-wide transportation strategy, like MassHealth PT-1, that meets a broad range of needs including employment opportunities, YAB related events, community integration, advocacy and other travel locations. Action steps include analyzing current transportation resources, identifying an ongoing funding stream, and annual program analysis.

7. Define what authentic youth collaboration means to your community.

Authentic Youth Collaboration on the Cape and Islands means YYA with lived experience shaping the homelessness prevention and response system through active participation in assessing community need and providing their perspective on system-level decision making. Their expertise is critical for policy discussions, improves the identification of effective solutions, increases solution buy-in from YYA stakeholders, and encourages policy change that helps traditional providers value and integrate YYA agency into their programs. Older adult supporters play an integral role in providing YYA with needed information on the CoC, alternative funding sources, networking with key stakeholders and establishing a collaborative and enriching environment for YYA to thrive. Additionally, YYA who provide input are compensated for their time at a commensurate rate. Our CoC strives to include YYA partnership at the program and organization level and increase the capacity, experience, training, support, and coordination to sustain meaningful system-level YYA engagement.

8. Describe how the CoC prioritizes authentic youth collaboration through the Youth Action Board or through youth participation in committee meetings or planning and feedback events.

The CoC prioritizes authentic youth collaboration by including YYA in system level decision making and the assessment of community needs and gaps in services. The facilitator of the Policy Board, who sets the agenda and includes a standing item for YYA homelessness and the YAB, is the CoC's YYA homelessness lead, a member of the YAB is a voting member of the Policy Board, YAB members are on the YYA committee, and YAB members participate in CoC program monitoring. YYA actively participated in production of the 2019 CNA, 2022 CNA Update and the 2022 Prioritized Strategies to address and end YYA homelessness. The CoC won't finalize any such documents without YAB participation. YAB members participate in annual monitoring visits for the YYA PSH project in which they are enrolled to provide

feedback and their unique perspective. They are a part of the onsite team, are provided with documentation to review on their own time, and the monitoring lead is available to answer questions and meet with them at their convenience.

9. Describe how youth are prepared, debriefed, and otherwise supported for participation in committee meetings and other planning and feedback events.

The CoC Program Manager and 2 Older Adult Allies support YAB members before and after meetings by preparing, debriefing and providing them additional information including meeting materials and overviews of relevant CoC specific elements (i.e. HMIS, CE, NOFO, Annual Site Visits). The Allies provide support at all YAB activities and connect with YAB members regularly between meetings. YAB and Allies inform the CoC Program Manager when homelessness system knowledge can be enhanced and are provided with information on the CoC's services and its complicated administrative framework. The YAB member on the Policy Board has the support and guidance of the YAB, CoC Program Manager (who facilitates), CoC staff and board members. The CoC provides training opportunities, including on adultism, to its older adult board members and staff from all partner agencies on special considerations in working alongside YYA with lived experience.

Community Need

Maximum Points: 20

HUD will award up to 20 points to applicants that can demonstrate high need in the community based on the number and needs of the community's youth experiencing homelessness.

Applicants must:

1. Describe the most recent youth homelessness needs assessment conducted by the CoC. The narrative must include the following:

1a. The name of the lead and partnering agencies or organizations involved in the assessment.

1b. How youth were involved in designing or executing the needs assessment.

1c. A description of disparities identified through the assessment, including race, gender, LBGTQ+ status, system involvement, and health disparities, such as HIV/AIDS.

1d. An explanation of the key findings from the youth homelessness needs assessment, including the number and types of youth-appropriate housing units and the number of youths experiencing homelessness.

If no needs assessment was conducted in the previous 5 years, write "none."

1a. BCDHS led the completion of the 2019 can with partners Fenway Health, Falmouth Service Center, Falmouth Public Schools, Fairwinds Nantucket Counseling, St. Paul's Nantucket, Nantucket Library, Martha's Vineyard (MV) Island-Wide Youth Collaboratory, MV Community

Services, Duke's County, MV Hospital, MV Housing Authority, Mass. Dept. of Children and Families, Chilmark Library, PIER Recovery, Aids Support Group of Cape Cod, Duffy, Homeless Prevention Council, Housing Assistance Corporation, Faith Family Kitchen, Catholic Social Services (shelter provider), Council of Churches, Champ Homes, YMCA, Hyannis Youth Center, Homeless Not Hopeless, Belonging to Each Other (seasonal shelter), Nauset Schools, Barnstable Schools, United Way, Barnstable PD., Cape Cod Healthcare and the Cape Cod Foundation. In Spring 2022, DHS updated the CNA with progress on the CNA's 8 Key Findings and 2 Recommendations. **1b.** YYA contributed through focus group participation, one-on-one interviews, and surveys. We worked with local partners to identify YYA with lived experience who represented different populations (BIPOC, school-aged, living outside, in homelessness programs, system involvement) and prioritized their expertise and creative expression, which is prominently represented throughout the CNA. The YAB reviewed, offered feedback, and approved the CNA update in 2022. **1c.** The CNA determined Black, Latinx, and LGBTQ YYA on the Cape and Islands experience homelessness at disproportionate rates compared to their representation among all YYA. Of the 147 who received services through our state funded program in FY21, 14.9% identified as Black/African American, 2.7% as American Indian/Native Alaskan, and 10.9% as "Other." 3.4% identified their ethnicity as Hispanic/Latino. By comparison, 3.5% of all residents identify as Black/African American, 0.7% as American Indian/Alaskan Native and 3.4% as Latinx. 7.5% of YYA receiving services in FY21 identified as LGBTQ and 1.3% as Transgender. No individuals identified as gender non-conforming. 5 out of 28 YYA who were transitioned to stabilized housing identified as LGBTQ. Only 11% of YYA experiencing homelessness during our 2019 Youth Count reported foster care experience, well below national estimates of roughly 30%. Our YYA report slightly lower than national rates of involvement in the juvenile or criminal justice system, ~33% compared to ~50% identified in national research. 7% of the 55 YYA in HMIS in 2021 reported a chronic health condition and none reported being diagnosed with HIV/AIDS. There were no new reported HIV cases for all 0-19 yo and <5 for all 20-29 yo from 2017-2019 in the CoC. <5 0-12 yo, <5 13-19 yo, and 27 20-29 yo were living with HIV in the CoC in 2019.

1d. Key Findings from the Needs Assessment included: *As many as 2,400 YYA may experience some form of homelessness over the course of a year, but the number with high needs may be much smaller.* In FY20 130 YYA received services through the State funded YYA homelessness grant and 147 YYA received services in FY21. *Homelessness affects vulnerable and minority populations disproportionately.* 2021 Census estimates indicate that ~3.5% of residents identify as Black/African American, 0.7% as American Indian/Alaskan Native, and 3.4% as Latinx. In the most recently completed fiscal year of the state YYA grant 14.9% identified as Black/African American, 2.7% as American Indian/Native Alaskan and 10.9% as "Other". 3.4% identified their ethnicity as Hispanic/Latino. 7.5% of YYA receiving services through the program identified as LGBTQ and 1.3% as Transgender. *The lack of year-round affordable housing puts pressure on housing stability for YYA.* There are currently only 6 CoC funded beds dedicated to YYA. All other beds are open to all age demographics. There are 2 beds specifically dedicated to YYA

under age 21 for Winter response and ~200 “bed nights” of hotel Winter response dedicated to those 24 and under. ***There are several service-related gaps that may leave YYA with unmet needs.*** The CoC has actively worked to address service gaps including adoption of the YYA focused TAY VI-SPDAT for CE, annual increases in state funding to address and end YYA homelessness, expanding partnerships with the Dept. of Children and Families (DCF), convening a Children’s Behavioral Health workgroup, and providing a year-long training institute to all partner agencies on best practices for working with YYA experiencing housing instability. ***Small social networks, stigma, and a lack of awareness suppress identification, prevention, and intervention.*** BCDHS and the State grant partners engage with key community stakeholders to build regional capacity to address YYA homelessness and disseminate information on services and resources with the goal of increasing awareness for identification, prevention and intervention. ***YYA voices were largely absent from decision making but progress is being made and needs to be built up.*** Past YYA engagement was often project based or confined to information collection. The community launched a YAB in February 2022 for authentic YYA voice to shape the homelessness system for the region and we revamped CoC policy to weave YYA partnership throughout our work. We must capitalize on these efforts to deeply engrain YYA partnership and give the YAB the time and support to build and cement their own identity. ***Sub-Regional differences and similarities matter.*** Cape Cod has three sub-regions-Upper Cape, Mid-Cape, Lower/Outer Cape-and two islands. Each of has unique characteristics that differentiate them from the others, but also share key elements that add to region wide strengths and barriers. ***The Cape and Islands do not have a system designed to prevent and end YYA homelessness.*** Our YYA homelessness system has grown steadily since the CNA. In FY19, the total budget was \$228,162 for 2.05 FTE of staffing, serving 70 YYA between January and June 2019. 3 years later in FY22, the budget is \$542,841 for 4.6 FTE of staffing. Overall, the grant has supported 434 YYA, including 91 YYA successfully moved into stable housing, and our YAB!

2. Describe at least one youth-focused intervention that is not currently operating in the community that the community wishes to pursue OR one intervention that could be improved and capacity increased. Include in your response the barriers that currently prevent you from implementing or improving the intervention.

The YAB and YYA Homelessness Committee brainstormed and prioritized the following interventions not currently operating: ***YYA specific crisis residential*** where YYA can find a safe and comfortable bed, meet immediate basic needs, and connect to navigation and case management to help return home or find alternative long-term housing. Barriers include lack of a physical location to site the program with record high real estate costs and zoning restrictions favoring luxury residential; funding to accommodate the high startup cost and the resources needed to make the program successful; location given the complex geography of the region and; dramatic fluctuations in population and resources in our seasonal service-based economy. ***Low barrier YYA-specific communal housing HUB*** that includes housing, onsite supports, childcare,

food access, medical and behavioral health resources, and employment services. Barriers include lack of a physical location with constraints mentioned above, the trust of necessary non-homelessness partners (need feasibility study and momentum), funding for startup and smoothly blended sources that allow seamless delivery of multiple resource, diverse partnership development to provide comprehensive and holistic supports. ***A YYA homelessness taxi or ride share program*** for a broad range of needs, like work, shopping, appointments, etc., that allows YYA to live their lives independently and successfully. Barriers include funding for such a broad or “unrestricted” strategy, finding partners where this is practical given our complex geography, and overcoming fears of risk or harm with a system that is safe and secure for YYA.

3. Identify and discuss factors that are currently contributing to youth homelessness in the community, including how your community identified which factors are most prominent. To be considered for maximum points under this Rating Factor, your response must describe factors at the community level and not how individual factors are identified on a case-by-case basis.

We identified many factors that contribute to Youth Homelessness in our CoC through our comprehensive CNA work and follow up debriefs with the YAB and YYA Committee: 1) A limited system in place to accurately identify and engage with YYA experiencing housing instability. 2) Historical and systemic racism and other forms of oppression have caused vulnerable and minority populations to experience homelessness at higher rates, exacerbated by vast income inequality and the seasonal service-based vacation economy that maintains it. 3) A severe lack of affordable year-round housing because of significant seasonal shifts in population and rental housing costs. 4) Service gaps that leave YYA with unmet needs including lack of timely and effective YYA homelessness risk assessment and access to mental health services for YYA and lack of YYA-focused substance use treatment and recovery strategies. 5) Cliff effects for YYA leaving “the System” (High School, Youth Incarceration, Child Public Welfare) play a major role, particularly after High School where an aging population (14.8% of the population is <18 and 31.4% is >65) has little interest in funding programming and resources for YYA. 6) Small social networks, stigma and a lack of awareness in a region made up of small insular towns suppresses identification, prevention and intervention for YYA experiencing housing instability.

4. Provide a description and assessment of the disparity in your community's homeless response system, including in the relative number of applications for housing and other services, approved applications, and program outcomes for populations that have a higher incidence of homelessness or that have been underserved historically by homeless housing assistance programs in the community (e.g. Black people, Indigenous people, people of color, former foster youth, justice-involved youth, individuals with disabilities). If identified, how will your community address the disparities, consistent with fair housing and civil rights requirements? If you have not conducted such an assessment, what are your plans to assess the rates of homelessness, outreach activities, applications for housing assistance, or rates of housing placement from the homeless response system for populations that have a higher incidence of homelessness?

The CoC assessed its homeless response system 3x in the past 3 years. **BIPOC**-Our CNA identified that homelessness affects minority populations disproportionately, with BIPOC YYA representing a larger percentage of those experiencing housing instability compared to their representation in the general population. We analyzed HMIS, MA YYA Grant, CE, and PIT data to determine if racial disparities exist in rates of people presenting for supports, accessing homelessness resources, and service outcomes. We found the largest demographic disparity for those identifying as “Black or African America” presenting for supports with significant overrepresentation in Family Emergency Shelter (4% of total population, 13% of total unduplicated enrollees, 15% of all project enrollments, 20% of all shelter enrollments including 28% of family shelter enrollments). Referrals and outcomes looked brighter. In CE, targeted outreach resulted in Black persons being assessed, referred to, and accepted in PSH projects at a higher rate than their percentage of total CE assessments (12% of individuals assessed, 15% of all referrals to PSH and 33% of acceptances into PSH); the rate of referral returns for Black persons was lower (10% of returned referrals). Black persons achieved a higher rate of Positive and Neutral Outcomes than their percentage of enrollments and a lower rate of Negative Outcomes (15% of all enrollments, 17% of positive outcomes, 24% of neutral outcomes, 10% of negative outcomes). To ensure racial equity, we connect Black participants to housing through targeted communications, guided support services, housing search and landlord outreach. In response to the percentage of BIPOC accessing family shelter, we targeted our 15 Emergency Housing Vouchers (EHVs) to families in shelter, rather than households with one member. There is a huge disproportionate effect of DV among BIPOC enrolled in Family ES, and so the CoC and its partners work on community initiatives like culturally sensitive DV awareness trainings and community outreach to stop the violence before it begins. We also adopted an equity lens when making referrals to EHVs from Family Shelters and we allocated CoC funding through the 2021 NOFO for an 8 bed DV. **Systems Involved**-11% of local YYA experiencing homelessness in our annual Youth Count reported foster care experience and 33% reported involvement in the juvenile or criminal justice system. Currently, the CoC databases cannot track referrals or outcomes specifically for these YYA as our data is de-identified after intake; but we recently added a DCF Liaison, working at the intersection of homelessness and foster care, who will start tracking referrals and outcomes by systems-involvement for the CoC this year. **Disabilities**-66% of YYA receiving front line services through the state YYA grant in FY21 reported a mental

health, developmental or physical disability. 100% of those in our permanent housing programs have a disability, as all current resources are targeted to YYA with disabilities. Currently, outcomes reporting for the grant tracks race, ethnicity, gender and sexual orientation status, but not disabilities. The CoC will include outcome measurement for YYA diagnosed with a disability in the annual CNA update going forward. We are also recommending to the state that they include tracking referrals and outcomes for systems involved YYA and outcomes for YYA with disabilities as a part of their required reporting.

5. Describe how your community is addressing needs of transgender, gender non-conforming, and non-binary youths to ensure privacy, respect, safety, and access in projects, such as shelters, outreach activities, and permanent housing.

All CoC funded programs, shelters, and CE access points operate in accordance with HUD's 2016 Equal Access Rule. The CoC and its partner agencies collaborate with Fenway Health which advocates for and delivers innovative, equitable, accessible health care, supportive services, and transformative research and education centering LGBTQIA+ people, BIPOC individuals, and other underserved communities. They advocate for, counsel, and case manage transgender, gender non-conforming and non-binary YYA, address food insecurity and financial assistance for housing through connections to local agencies, including the Cape & Islands Trans Resource Fund and the CoC, provide housing search for stable permanent housing, and complete RAFT and housing applications. They facilitate the Transgender Social Support Group and connect YYA to external support, when needed, such as the Trevor Project Trans Life-Line and the LGBT Youth National Talk line. Fenway also refers to gender affirming hormone therapy, education and treatment of STIs, and transgender competent nurses and therapists. The Homeless Prevention Council (CoC Youth Committee member) and AIDS Support Group of Cape Cod provide targeted outreach in Provincetown to individuals who identify as LGBTQ. Both agencies utilize meeting locations that ensure privacy and safety and are CE access points. The agencies CEOs are members of the Policy Board. Finally, the YYA Committee convenes a community of practice for front line workers and supervisors that builds off a year-long training institute and includes a supportive learning environment for trauma informed care, adultism, and equity for historically oppressed YYA, including transgender and gender non-conforming YYA.

Collaboration

Maximum Points: 15

HUD will award up to 15 points to applicants that can demonstrate strong current community-wide partnerships that are working to prevent and end youth homelessness. Applicants must:

1. Indicate whether the Coordinated Entry Process incorporates youth. If the Coordinated Entry Process incorporates youth, the Collaborative Applicant must answer Questions 1a-1c; if the Coordinated Entry Process does not incorporate youth, the Collaborative Applicant does not need to answer Questions 1a-1c.

1a. Indicate whether there is a separate coordinated entry access point for youth or, if access points are designed for all persons presenting for assistance, describe what youth-specific policies and procedures the CoC has adopted to ensure that access points are appropriate for youth.

1b. Describe how youth are prioritized within the coordinated entry process, including factors used to prioritize youth or subpopulations of youth.

1c. Describe the extent to which all other youth homelessness and at-risk providers and other stakeholders providing services to homeless and at-risk youth (including LGBTQ+ resource centers, PCWAs and other mainstream resource providers) are integrated into the coordinated entry process.

Our CE process incorporates YYA. **1a.** YYA use all access points. The CoC has trained staff members at each location to work with YYA. 3 access points on the Cape and 1 on each island are YYA homelessness hubs. Staff from these agencies participated in a year long YYA Homelessness Training Institute (including YYA-led lessons) to dramatically increase their capacity to serve YYA and overrepresented YYA subpopulations, including at access points. We promote these locations extensively, including through an e-newsletter that reached over 2000 stakeholders. **1b.** We use the TAY-VISPDAT. In addition to standard factors such as physical health, substance use, and experiences with trauma or abuse, it prioritizes YYA for the following reasons for housing instability: fleeing family/group/foster home; difference in religious or cultural beliefs from caregivers; family or friends causing homelessness; and conflicts around gender identity and sexual orientation. State funded resources accessible at CE are extremely flexible, allowing us to use additional factors based on the state's at-risk definition, accounting for YYA experiencing couch-surfing, doubling up and general housing instability. **1c.** The CoC has an extensive networking of providers serving YYA experiencing and at-risk of homelessness that refer individuals to CE. This includes 35+ unique sources-DCF (our PCWA), DMH, DTA, the County House of Corrections, Mass Rehab and a broad range of private mainstream resource partners. Representatives from schools systems, state agencies, healthcare providers, homelessness service providers and other key stakeholders provide oversight and design expertise from their organizational and sectoral perspective regarding CE for YYA.

2. Describe how the CoC works with education providers in the community. To receive full points, this response should include a specific initiative or effort that the CoC and at least one educational partner (K-12 schools, local technical college or university) has collaborated with regarding youth and young adult homelessness.

The CoC collaborates with school systems from all towns in the CoC. Education providers participate in CoC work groups, case coordination and advocacy initiatives, including the Children's Behavioral Health workgroup, the CoC's state YYA grant, and the Health and Human Services Advisory Council. School administrators and libraries played a critical role in interviews and focus groups for our 2019 CNA. The CoC has formal MOUs in place with Barnstable Schools, the CoC's largest district, and with the Cape Cod Collaborative which coordinates regional Special Education. The CoC collaborates with the MA Dept. of Elementary and Secondary Education (DESE) to ensure educational access for YYA in shelter and coordinate systems level services and resources. The McKinney-Vento Liaison from the Monomoy district is a CoC Policy Board member and disseminates information on CoC YYA homelessness services and resources to their counterparts in all districts. We recently launched an initiative with Barnstable High School and Generation Citizen. The CoC program manager presented an overview of YYA Homelessness to 8th and 11th grade students who brainstormed strategies at the individual and systems level, including the use of a universal homelessness screening tool, dissemination of information on YYA homelessness services, resources within the school and at community locations frequented by students, fundraising and advocacy to create affordable housing options. The project increases awareness, deepens the school's commitment, and adds ideas and energy to our response system.

3. What other youth leadership bodies exist in your community and how does that group engage on youth homelessness?

The CoC partners with youth leadership bodies throughout the region including: *Youth Street-Reach program of the Cape Cod Council of Churches*, which is YYA led and directly engages with those experiencing homelessness to provide resources; *Cape Cod YMCA Y Achievers program* which participated in development of the 2019 CNA. *Barnstable High School's Generation Citizen*, a student led "Action Civics" service-learning project, where 8th and 11th grade students chose to focus on YYA homelessness as the subject matter to explore and worked with the CoC Program Manager and CoC expert to learn more about the issue, understand the current services and resources, and create a plan for how the class could contribute. *Nauset Interfaith Council's Youth Outreach and Hospitality program*, which is co-led by YYA and older adult allies- is working with Homeless Prevention Council on our Host Home pilot.

4. Describe how your CoC assesses and provides information about connections to health insurance coverage and available health services including sexually transmitted infections prevention and treatment; mental and physical health supports; and substance abuse treatment.

The CoC and its partner agencies prioritize access to health insurance and providing information on health services for every YYA engaged with the homelessness system. Expedited applications for Mass Health are completed in partnership with the Cape Cod Healthcare PHO Navigators and staff from Duffy Health Center trained in SOAR. The AIDS Support Group of Cape Cod (ASGCC), community lead for STI education and treatment, an active YYA homelessness partner, and a CE access point, trains CoC partner agencies on communicable diseases and operates a mobile resource center to provide condoms and Narcan training and syringe services. They test for HIV, HCV, Hepatitis and STIs and refer YYA for treatment if positive. Duffy Health Center offers services for STIs, mental and physical health supports, psychiatric care, counseling services and substance use treatment including medication assisted treatment and peer supported recovery. YYA also have access to Duffy's Alternative Peer Group (APG), a 6-month outpatient treatment program for teens struggling with substance use. We operate the Network of Care online portal where YYA can access information on available resources for STIs, mental and physical health, and substance use treatment. The county also leads the Regional Substance Addiction Council (RSAC) and disseminates a bi-monthly RSAC e-newsletter to 2000+ stakeholders with information on health resources and new initiatives.

5. How does the CoC work with each of the following institutions to ensure that participants in the programs are not released into homelessness?

- Child welfare (Foster Care)
- Justice system (juvenile and adult)
- Institutions of mental and physical health

Child Welfare—The CoC and DCF work closely on the state's Unaccompanied Homeless YYA commission programs, the county led Children's Behavioral Health workgroup and Health and Human Services Advisory Council, and the Planning Board to identify new interventions to stop the movement of YYA from foster care to homelessness. The CoC has a MOU with DCF and the Falmouth Housing Authority to utilize federal FYI vouchers to house YYA at risk of homelessness when exiting the Child Welfare system. As part of the state YYA program, the CoC and DCF have created a full-time DCF Liaison position working with both the local and regional offices to identify YYA at risk of homelessness as they age out and provide stabilization services and resources to support maintenance of housing. **Carseral Systems (Juvenile and Adult)**—The Dept. of Youth Services (DYS) and Barnstable County House of Corrections coordinate directly with the CoC and its YYA homelessness partner agencies regarding at-risk YYA leaving the carseral ("justice") system. The Reintegration Coordinator from the Barnstable County House of Corrections sits on the Policy Board and attends Emergency Planning meetings to discuss system level discharge planning to housing resources to maximize stable housing

options for YYA. The Reintegration Team offers post discharge housing stability services to all YYA connected to the CoC partners. ***Institutions of Mental and Physical Health***–The CoC collaborates with the MA Dept. Of Mental Health (Case Management and inpatient psychiatric hospital), Cape Cod Healthcare (inpatient psychiatric hospital and medical facilities), Martha’s Vineyard Hospital (medical), Nantucket Cottage Hospital (medical), the psychiatric crisis stabilization unit (mental health), the Therapeutic Respite Program (mental health) and numerous off-Cape providers. The Cape and Islands DMH Site Director sits on our Policy Board and the Southeast MA Director for Child, Youth and Family Services sits on the Children’s Behavioral Health workgroup led by BCDHS, providing expertise on system level services and resources for YYA experiencing housing instability and those being released from mental health placements. The CoC partners with Navigators from Cape Cod Healthcare who participate in CoC meetings to support YYA efforts and offer housing search resources for those who would otherwise exit into homelessness. The CEO of Duffy Health Center (full medical and mental health wrap-around services), Outer Cape Health Services (community health center for medical and behavioral health services) and a rep from Cape Cod Healthcare (largest medical and behavioral health provider) are on the Policy Board to ensure coordination at the highest level. The CoC’s YYA Program Manager has 10+ years experience in behavioral health, trauma informed care, and harm reduction, and leads YYA case conferencing meetings.

Youth Collaboration

Maximum Points: 30

HUD will award up to 30 points to applicants that demonstrate how voices of Youth with lived experience of homelessness are a crucial component to addressing and ending youth homelessness. In order to be successful, responses to this Section should clearly be written by Youth Action Board (YAB) members and applicants must consider how youth with lived experience will be integrated into system and program design and implementation. Applicants must:

1. Describe the mission and vision of the YAB.

“***The mission*** of the Cape and Islands YAB is to advance awareness and advocacy toward ending YYA homelessness with the intention of creating lasting macro-level change. We exist to create systemic change by challenging current assumptions and biases about YYA homelessness through authentic youth collaboration and lived experience.” “***The vision*** of the Cape and Islands YAB is an inter-connected community among unhoused and housing insecure youth, while achieving safe and sustainable living options who have access to necessary resources”

2. Describe the structure and work of the YAB:

2a. How long has the YAB been in existence?

2b. How many members does the YAB have? If attendance at meetings extends beyond membership, state the attendance at the most recent three meetings.

2c. How often does the YAB meet?

2d. Describe the decision-making structure of the YAB.

2e. What training and other preparation are YAB members provided on the CoC structure, CoC rules, housing types, and other issues surrounding homelessness?

2a. YAB launched in February 2022. **2b.** YAB has 10 active members. **2c.** YAB meets 2x per month. **2d.** The decision-making structure of the YAB is consensus-based and centered around an open dialogue and collaborative approach. **2e.** YAB members receive training and ad hoc support and have open communication with the CoC Program Manager. Training and education includes topics such as the role of the CoC and DHCD, funding rules and regulations, and the role of YAB Policy Board and committee members (e.g. meeting schedules, formats, and attendance expectations; how to use their voting power and any parliamentary procedure; current issues and agenda items). YAB members learn about CoC structure, rules, housing types, and relevant issues and projects surrounding homelessness from the 2 older adult allies (YYA service provider staff), who prepare YAB facilitators prior to meetings and debrief with them afterwards. YAB members receive training and support in statewide YAB meetings, where they learn about the CoC and best practices for maintaining a YAB from peers and older adult allies in a community of practice. The CoC also brings in a national leader in YYA homelessness to join meetings, present and answer questions, walk through our CNA and YYA homelessness strategy, mentor older adult allies supporting the YAB, and train partners to address their adultism and work effectively with YYA. Members also bring a wealth of their own expertise, having learned from lived experience the difficulty of navigating complex systems and barriers

3. Is the membership of the YAB reflective of the population of youth and young adults experiencing homelessness in the community?

3a. Provide data indicating the prevalence of youth of color, LGBTQ+, and gender non-conforming youth in the general population of youth experiencing homelessness.

3b. Describe how members of the YAB are recruited to ensure represents the population, including racial, ethnic, and gender identities of youth experiencing homelessness in your community.

YAB members report that their membership represents a “good start.” YAB is made up of YYA who’re unaccompanied, parenting, couples, BIPOC, LGBTQ+ and have experienced a variety of circumstances. Our different experiences interacting with homelessness systems enhances our ability to provide perspective to the community. **3a.** In HMIS for 2021, 15% of YYA identified

as Black/African American, 2.7% as American Indian/Native Alaskan, 10.9% as “Other,” and 3.4% as Hispanic/Latino. 7.5% of YYA identified as LGBTQ and 1.3% as Transgender. Given our small numbers, these data fluctuate significantly each year. **3b.** We recruit primarily through word of mouth: Members recruit their peers; adult allies talk about the YAB to clients; YAB recruitment is a standing agenda item for the YYA Homelessness Committee. The CoC Program Coordinator discusses YAB membership at all external engagements with YYA (e.g., school partnerships). We regularly discuss diversity in recruitment and cast a wide net to include as many members as possible. One adult ally facilitator works for the Homeless Prevention Council with special expertise in LGBTQ+ YYA. We intend to expand our YAB community through Tik Tok, radio presence and social media campaigning.

4. Describe how YAB members are or will be compensated for their time and expertise. Please indicate if compensation for YAB members is based on a salary or regular hourly rate and the salary or rate paid.

The CoC pays YAB members \$20/hr through Venmo or Cash App. YAB members are paid within 48hrs of a meeting, training or activity. The CoC and its partners provide food and transportation when in person, and members have access to professional development activities as YOUth Count Ambassadors, MA Unaccompanied Homeless Youth Commissioners, and mentees of our amazing older adult facilitators.

5. If compensation is not provided, how are youth incentivized to participate in the YAB or other aspects of the youth homelessness system? These may include professional development opportunities, access to other resources, etc.

Compensation is always provided. See above.

6. From a youth perspective, what are the biggest challenges to integrating youth voice into community decision-making structures? To receive full points, this response should be written by a youth or include quotes from youth regarding the challenges to integrating youth voice.

We, the YAB, identified the following as the biggest challenges to integrating YYA voice: 1) Not having people that will listen to our concerns and actively work towards resolving them; 2) If someone who is “in power” doesn’t listen, lack of adult advocates to make them listen; 3) Lack of funding; 4) Unable to pay for hotel rooms/emergency housing opportunities which makes it hard to even participate in decision-making; 5) Lack of empathy from those who have the power to change/offer solutions: people attach stigmas about homelessness to the individual–“likability”; 6) Lack of awareness; 7) Lack of preventative resources (what would they look like), learning what housing instability looks like, preparing for 18th birthday (aging out of DCF,

parents legally able to kick youth out); 8) “Taking into account the different perspectives of each member, who is going through something different” and; 9) Breaking generational cycles.

7. From a youth perspective, what are the biggest challenges/barriers to sustaining a Youth Action Board? To receive full points, this response should be written by a youth or include quotes from youth regarding the challenges to sustain a Youth Action Board.

We, the YAB, identified the following as the biggest challenges to sustaining a YAB: 1) If the YYA are not seeing outcomes—seeing progress from the work that they have been doing; 2) Challenging to find peers to join; 3) Lack of motivation and accessibility to connect with each other; 4) Ensuring outcomes; 5) Lack of funding/expertise to support them; 6) Scheduling conflicts: work/transportation; 7) Misunderstanding about the purpose and goals of the YAB; 8) “Life getting in the way”—needing to consistently work towards getting more members, regularly checking in with current members/potential new members; 9) Trouble focusing on YAB, additional expectations when basic needs like shelter are not currently being met and; 8). Understanding that everyone has different priorities.

8. From a youth perspective, identify the biggest areas of risk in the current youth homelessness system (for example, aging out of foster care or transitioning from an institution) and how the community is working to address these risks.

We, the YAB, identified the following as the biggest areas of risk in the current YYA homelessness system: 1) LACK OF SAFE HOUSING; 2) Ignorance of other people (community hiding the “social problems” to keep the affluent reputation of the Cape); 3) Substance use/addiction; 4) Generational issues/lack of family support; 5) Favors for housing; lack of regular/safe availability of housing; 6) Mental health—imposter syndrome (“thinking that they do not deserve better and self-sabotage”, lack of self-esteem); 7) Health & hygiene; 8) Employment: hard to get a job/payment/bank account/etc without a consistent address, no credit to build, no stability or schedule and; 9) High living expenses, lack of resources, disconnected from the rest of the state (“the mainland”). The community is working on these risks by addressing key YYA homelessness priorities. The prioritized strategies for 2022-2023 include 16 First Tier Actions and 10 Second Tier Actions under 6 objectives which will make a meaningful impact in our community and respond directly to the findings of our CNA and the voices of YYA and the YYA providers who serve them. The CoC and its partners committed to building a system that effectively responds to the needs of YYA to make their housing instability rare, brief, and one-time. This year, the YYA Committee held 2 strategic planning sessions to discuss current services and resources, identify gaps and barriers, and brainstorm initiatives that would best meet our needs. Together with us, the YAB, they reviewed an initial list of objectives and actions to identify and focus on those projects that were most meaningful and could reasonably be accomplished within a year. All our priorities are in the final plan.

9. From a youth perspective, if selected as a YHDP community, how would your community define success?

If selected as a YHDP community, we, the YAB, would define success as: 1) Sufficient housing for YYA; 2) Being part of the collective community with resources that satisfy needs; 3) Successful connection from those resources that help meet the population's needs; 4) “Self-sufficient” “being able to take independent action” and feeling well supported in supporting an open dialogue about a “taboo” topic—Homelessness is an “uncomfortable topic” for people and they often shy away from it, success would be measured by more comfort and openness to talk about homelessness and that it IS present on the Cape.

Data and Evaluation Capacity

Maximum Points: 20

HUD will award up to 20 points to applicants that can demonstrate the existence of a functioning Homeless Management Information System (HMIS) that facilitates the collection of information on homelessness using residential and other homeless services and effective performance measures. The applicant must:

1. Indicate the percentage of all types of homeless beds, excluding beds provided by victim service providers, that currently participates in HMIS.

87.56%

2. Indicate the percentage of all types of youth beds, excluding beds provided by victim service providers, that are covered in HMIS, regardless of funding source.

100%

3. Describe how the CoC actively recruits new homeless projects to HMIS for youth-dedicated projects.

While all youth-dedicated projects in the CoC currently participate in HMIS, the CoC has strong policies and strategies in place for actively recruiting new projects including: *a)* Active ongoing networking with providers to encourage participation in HMIS. *b)* BCDHS provides funding for the full cost of the HMIS to ensure that cost is never a barrier to joining. *c)* HMIS program manager makes regular presentations to agencies, elected officials and key YYA homelessness stakeholders to demonstrate the value of HMIS data and to show how HMIS data analysis benefits the community, such as identifying barriers to YYA homelessness services, locating gaps in YYA homelessness programming and evaluating overall performance of the region’s homelessness response system. *d)* The CoC offers free data analysis services to local YYA

homelessness service providers and other youth serving agencies, regardless of whether they participate in HMIS, including data services to support agency and regional funding requests. e) The YYA Program Manager actively recruits all new YYA homelessness dedicated programs and YYA serving agencies to participate in HMIS.

4. Describe how the CoC supports the transition of new homeless projects to HMIS, including financial resources, technical resources, and training.

The CoC supports the transition of new homeless projects to HMIS in the following ways: **Financial**-CoC provides free HMIS licensing and access to all participating agencies. The state provides additional funding for YYA homelessness services in HMIS, such as the development of custom reporting tools. **Technical Assistance**-HMIS Manager provides direct technical assistance to new HMIS participants and weekly “Office Hours” to address non-emergency issues. The HMIS vendor works directly with new YYA homelessness partner agencies to develop more advanced custom data collection instruments and reports that exceed the scope of the CoC’s data collection requirements. The CoC also pays for unlimited csv downloads and regularly scheduled uploads of datasets to partners from agencies providing YYA homelessness service that do not enter data directly into HMIS. **Training**- HMIS Program Manager provides on-site training to all providers and specialized presentations to whatever subject matter is requested. A full self-service library of training videos is available on the BCDHS website (New End User training, Data Privacy and Security, advanced report writing, etc.)

5. In addition to gathering youth data in HMIS, indicate whether the CoC gathers youth data from other sources (i.e., education, juvenile justice, child welfare). If the CoC does gather youth data from other sources, please describe the data collected, the system(s) the data are collected from and the system(s) in which the data are stored.

We incorporate data from DESE (homeless student demographics and graduation rates), DCF (number and type of quarterly discharges), and DYS (number of YYA in residential custody and exits) annually as we update our CNA. This data comes from state databases and are provided through a collaboration with the state’s unaccompanied homeless youth commission. They are de-identified and captured in our updated CNA. We also collect data through an independent statewide Youth Count that captures detailed information on reasons YYA left housing, age of first experience of homelessness, and many other unique data elements not captured by HMIS. Our data are submitted to the principal investigator at Clark University who then provides our region with a detailed de-identified report that we use to develop our annual CNA update.

6. Describe how the CoC monitors the performance of its youth providers. The description should include:

- **Monitoring criteria**
- **Frequency of monitoring**
- **Process by which the CoC provides feedback regarding monitoring to providers**
- **How the CoC support providers with identified issues to improve their performance**
- **How youth are involved in the monitoring of projects**

The CoC monitors the performance of YYA providers for data quality, coverage and completeness, capacity and utilization, CE participation, and HMIS participation on an ongoing basis. We monitor DV services offered, average length of participation, cost effectiveness, Housing First policies, recordkeeping compliance, MOUs, Match documentation, financial P&P, spend down (previous and contract year), Leases or Occupancy Agreements, successful exits, and rates of cash benefits, increase in cash benefits, non-cash benefits, and health insurance annually. We conduct quarterly monitoring for state grant funded YYA projects focused on the number of YYA served, services provided, and successful participant outcomes. The CoC runs regular DQ reports and shares recommendations to help providers fix problems. The HMIS Lead works individually with providers to offer guidance and training, and is available for both scheduled and impromptu meeting and phone calls. The CoC uses annual project site visits to discuss performance criteria, program achievements, and shortcomings. Site visits are interactive where providers voice concerns and the CoC offers guidance and support. The HMIS and CoC managers meet directly with CoC grantees and state YYA grantees to review all required documentation and provide feedback on data, APR submissions, and financial usage and reporting. YYA play a crucial role in CoC project monitoring. YYA in the project receive monitoring tools to give direct feedback and the CoC recruits them to participate in person as part of the monitoring team during each annual site visit.

7. Demonstrate how the CoC has used data to develop a strategy to prevent and end youth homelessness. These data can be related to the composition of the local population of youth experiencing homelessness or the effectiveness of various interventions for serving homeless youth.

The CoC actively uses data to develop innovative community strategies to address YYA homelessness. We used the analysis of our CNA, informed by qualitative and quantitative data from multiple sources, to successfully argue for a 6 bed YYA dedicated CoC project in 2019. Additionally, focus group and interview data that highlighted a critical need to increase system staff capacity helped us argue for and develop a CoC sponsored year-long YYA homelessness training institute to build the capacity of providers and support our YYA more effectively. Data on the lack of affordable housing units and safe shelter led the CoC to launch a Host Homes pilot program on the Outer Cape. Finally, our equity analysis identified that Black/African Americans

in the Family Shelter system were vastly overrepresented (4% of population v. 28% of shelter enrollments), which led our CoC to award our 15 EHV's awarded to households in that system.

8. Describe how youth are currently brought into evaluation and quality improvement conversations in your community, either at the project or system level.

The CoC actively works to add authentic youth voice to evaluation and quality improvement for projects and the system. For example, a project participant from the CoC YYA dedicated PSH program, a YAB member, participated in CoC annual monitoring for that and 3 others projects administered by the same agency. The YAB work to improve our system through feedback on the annual CNA update and our Prioritized Strategies for the YYA homelessness. Their feedback is given extra weight in improvement conversations compared to older adult allies, and all YAB priorities are included in the community priorities. This year, the YAB identified creating year-round crisis housing beds dedicated to YYA, increasing the number of provider staff to work with YYA with high level needs, and partnering with local businesses on employment opportunities and job training as their top priorities. This feedback directly informed funding requests for the state Unaccompanied Homeless YYA grant for FY23.

9. If selected as a YHDP community, how would stakeholders define and measure success?

Stakeholders would define success as a partnership with YYA with lived experience to improve the homelessness system's ability to identify and engage YYA experiencing housing instability before they experience homelessness, reduce barriers to equal access, and expand the network of YYA serving agencies connected to the CoC. We would track authentic YYA voice in decision making, increased and improved access to available services, reductions in total YYA experiencing homelessness, and increased participation of YYA serving agencies in CoC workgroups. Measurements would include total number of YAB members, increasing the number of YYA participating in CoC related functions (monitoring, review and ranking of projects, committees, etc.), tracking the number of YYA at-risk of homelessness completing intakes for services in comparison to intakes for YYA experiencing homelessness, increasing YYA housing resources, and expanding the number of YYA serving agencies on the YYA Homelessness workgroup. We believe that YHDP will allow us to meet and exceed the 2022-2023 Prioritized Strategies developed by the YAB and YYA Homelessness committee.