AZ-501 CONTINUUM OF CARE - TUCSON PIMA COLLABORATIONTO END HOMELESSNESS PLAN TO SERVE UNSHELTERED INDIVIDUALS AND FAMILIES WITH SEVERE SERVICE NEEDS

Please refer to attachments for Sections P-1a, P-1b, P-2, and P-6a

P-1c: LEVERAGING HOUSING RESOURCES – LANDLORD RECRUITMENT

- **1 Current Strategy:** The CoC currently utilizes a de-centralized landlord engagement strategy through which the Public Housing Authority and housing service providers offering tenant-based rental assistance directly coordinate organization-level relationships with property managers within the region.
- a) The de-centralized strategy allowed individual organizations to cultivate and leverage personal relationships with property managers prior to the COVID-19 pandemic and worked well for many years due, in large part, to the region's low cost of living, historically affordable rental market, and ample availability of rental units. Since 2020, average rental prices have increased by 51.9% (1-br) and average rental vacancies have dropped to <3%. The current approach is no longer meeting community or provider needs. Swift and continued action is needed to expand current pilot approaches and establish centralized landlord engagement and retention strategies.
- b) Pima County is a vast geography totaling 9,198 square miles of mostly uninhabited land. There are few populated areas in which the CoC has historically been unable to identify units. The few exceptions to this include rural areas in which few units are available due to a shortage of rental housing supply of any type in the community and trust lands which have historically not been authorized for CoC support. Rates of unsheltered homelessness within these areas are also historically low so there has been little impact related to the effectiveness of the de-centralized strategy in these areas; however, continued need for affordable rental housing development is needed in order to leverage the availability of CoC funds throughout the region including rural areas and Tribal areas which are now eligible for CoC assistance.
- 2 New Practices to Recruit Landlords in Past 3 Years and Lessons Learned: In the past three years, the CoC and local jurisdictions have piloted multiple new strategies to increase landlord engagement and retention including the provision of centralized Landlord Incentives (signing bonuses and supplemental security deposits) provided through CARES Act funds and inclusive of a small-scale community landlord engagement campaign administered by the City of Tucson (expires 9/30/23); expanded of availability of landlord risk mitigation funds in the form of State-funded damage reimbursement (expired Summer 2022); and maintenance of a regional affordable housing availability web portal administered by Pima County. The PHA additionally administered separate landlord incentive and damage risk funds for voucher-holders, including persons experiencing homelessness who enter voucher programs, as did the State Medicaid agency. These strategies helped to mitigate the challenges experienced by subsidy-holders (voucher and TBRA) but were insufficient to address the critical need and shortfall of available affordable housing in the local market. Through these efforts, several lessons have been learned which inform the proposed strategies defined in this plan and include:
- a) Landlord incentives and risk mitigation funds should be consistent and coordinated at the community-level and across the spectrum of housing subsidy programs (e.g. TBRA, PHA, Medicaid Housing, etc.).
- b) Professional staffing is needed to build and manage ongoing customer service and support relationships with property managers. Simple engagement activities without long-term responsiveness to unanticipated challenges and tenant issues paired with community recognition fail to maintain lasting, consistent availability of units.
- c) Landlord engagement staffing should additionally support a centralized, current affordable housing portal or search bank which is easily accessed by persons in need of housing units, navigators, and property managers.
- 3 Use of Data to Update Landlord Engagement Strategies: The CoC's proposed strategies to develop a centralized and effective landlord engagement and retention system will utilize the following specific data points to measure the effectiveness and impact of the approach as it relates to landlord engagement, retention,

and participant benefit: a) the number of unique property owners/management companies listing unit availability in a centralized affordable housing portal/search bank, b) the number of properties and units listed in a centralized affordable housing portal/search bank, c) the number of new landlords successfully recruited to participate in a centralized affordable housing portal/search bank, d) dollars expended in landlord engagement, incentive, and risk mitigation funds; e) percent reduction in the by name list, and f) the average length of time from project entry to permanent housing move-in.

P-3a: CURRENT STREET OUTREACH STRATEGY

- 1 Street Outreach Coordination: The CoC's Outreach Coalition meets monthly and includes 135 individuals representing 30+ community outreach programs. The Outreach Coalition coordinates bi-weekly coordinated outreach activities and partners with local organizations to host community resource/homeless connect events. The Outreach Coalition additionally partners with the City of Tucson and Pima County Homeless Protocol teams to deliver coordinated outreach to prioritized encampments to prevent displacement and to provide housing/shelter placement assistance for encampments that must be displaced due to life/safety risk and/or presence on private property. Coordinated outreach schedules are shared via an online collaboration hub (Basecamp) which is used by outreach providers to share information and coordinate outreach service delivery. The City of Tucson adopted an encampment assessment conducted by outreach workers and law enforcement which provides an objective, evidence-based approach to determining encampment response based on risk to life and safety, personal property damage, and criminal issues; and provides encampment support to prevent displacement whenever possible. Outreach workers are able to initiate direct shelter placement using a daily shelter bed availability report which is published through the Outreach Coalition Basecamp, and recent approaches have included providing non-congregate sheltering in adapted hotel properties for encampment residents in cohorts to promote housing acceptance by preserving natural support networks and relationships.
- **2 Ensuring Outreach is Frequent:** Coordinated outreach occurs bi-weekly in cross-agency teams. Days/hours vary based on the prevailing trends among unsheltered persons at the time. ESG street outreach teams conduct outreach 7 days/week including early morning hours (6am-3pm) during the summer months and later hours (8am-5pm) during cooler winter months. RHY outreach targeting youth generally occurs in the afternoon and evening hours (12pm-8pm). Rural outreach is conducted in response to Homeless Protocol actions to address unsheltered homelessness in rural areas in which it is less common and coordinated by Pima County and its network of rural emergency assistance partners.
- 3– Helping People Exit Homelessness Including Unsheltered Homelessness: The primary goal of all street outreach activities is to promote rapid placement in temporary and permanent housing. Outreach workers use evidence-based progressive engagement strategies to build rapport and promote acceptance of shelter and housing services among unsheltered persons served. ESG and CoC funded outreach staff receive CoC-provided evidence-based Critical Time Intervention training and use housing-focused interventions to promote housing acceptance. Local jurisdictions have added low-barrier mandates to ESG shelter funding and supported costs associated with facility improvements to reduce barriers to shelter entry related to sobriety, companion animals, and other common concerns expressed by unsheltered persons. By adapting shelter and housing services to participant preferences and needs, and conducting housing-focused outreach, the overall rate of housing acceptance among long-time unsheltered persons has increased. Two recent encampment sheltering cohorts resulted in 89% shelter acceptance among 95 encampment residents demonstrating the success of this approach.
- **4**—Engaging Individuals and Families with the Highest Vulnerabilities and Culturally Appropriate Strategies: Outreach teams are deployed to unsheltered encampments based on tiered risk assessment that ensures limited outreach resources are targeted to areas of the greatest need. The CoC provides outreach worker training focused on Medication Assisted Treatment, Harm Reduction strategies, and other evidence-based practices to effectively serve individuals with high vulnerabilities and SAMHA-funded navigation teams and PATH outreach teams partner with community outreach programs to deploy nurse practitioners and behavioral

health professionals alongside peer navigators and outreach staff to promote engagement among persons with high severity of service needs. The CoC and ESG jurisdictions require cultural sensitivity/humility training for all outreach staff, and evaluate program hiring practices with a priority on funding and expanding projects which have demonstrated practices and policies to promote cultural appropriateness in service delivery and which employ individuals from disparately impacted subpopulations, including persons with lived expertise.

- 5 Connecting Individuals and Families Experiencing Unsheltered Homelessness to Permanent Housing: The CoC has implemented Housing First mandates for all CoC- and ESG-funded supportive housing programs and outreach teams use evidence-based CTI and progressive engagement practices to promote housing acceptance among persons experiencing unsheltered homelessness including individuals and families. The CoC additionally adopted a Dynamic Prioritization model in which persons with the highest severity of service needs are prioritized for all available housing solutions and transfers are arranged through Coordinated Entry to higher levels of care as needed in 2020. The CoC additionally partnered with PHA to double the number of voucher units set aside for referral through Coordinated Entry and the CoC's move-on strategy since 2019. These efforts produced an 140% increase in permanent housing placement among chronically homeless individuals in 2021. Outreach providers conduct in-field Coordinated Entry assessment and make direct referrals to PHA voucher and public housing set-asides through Coordinated Entry to expedite permanent housing placement for households with high severity of service needs. The HMIS Lead publishes a bi-weekly Housing Attempt to Locate list which includes all households matched to permanent housing placements which is shared with HMIS-participating outreach and SSO service providers and used to notify persons referred to permanent housing through CE. Outreach and navigation teams work closely to facilitate warm hand-offs for the purpose of coordinating document readiness and housing search/placement activities.
- 6 Hiring People with Lived Expertise to Conduct Street Outreach: Multiple outreach programs employ persons with lived expertise of homelessness in street outreach activities and provide paid opportunities for persons with more immediate lived expertise to provide peer-based outreach and engagement activities, including but not limited to the City of Tucson, Old Pueblo Community Services, Goodwill Metro, and Our Family Services. The CoC additionally requires that all CoC-funded agencies engage persons with lived expertise in ongoing program planning, oversight, and evaluation with compensation at a rate of not less than \$15/hour. These practices will be expanded through the Tucson Multi-Disciplinary Outreach Program which is included in the Priority List for the Supplemental CoC NOFO and includes a priority on hiring persons with lived expertise, as well as the creation of a paid externship program for peer outreach guides more immediately impacted by homelessness to participate in street outreach activities in partnership with project staff and volunteers. The table below identifies the three largest providers of street outreach services in Pima County, each of which is a partner in the proposed Tucson Multi-Disciplinary Outreach Project, and includes the total number of persons employed in street outreach as well as the percentage of such persons with lived expertise.

Outreach Service Provider	# Outreach & Navigation Staff	% Lived Expertise
Community Bridges, Inc.	47	100%
City of Tucson	10	80%
Old Pueblo Community Services	6	83%

P-3b: Current Strategy to Provide Immediate Access to Low-Barrier Shelter and Temporary Housing for Individuals and Families Experiencing Unsheltered Homelessness

1 – Current Strategy: The CoC currently publishes a daily roster of bed shelter vacancies as reported by emergency shelter providers. The list is distributed to outreach providers through the Outreach Coalition Basecamp virtual collaboration site and street outreach teams are able to initiate direct placement from the field to available shelter beds. Through the CoC's partnership with the City of Tucson Homeless Protocol, coordinated outreach strategies are used to provide move cohorts of mutually supportive peers from encampments to non-congregate and congregate shelter settings to preserve natural support networks and

promote shelter resource acceptance. Local jurisdictions have added clauses to ESG, CDBG Public Services, and General Fund grantmaking to shelter programs requiring low-barrier shelter approaches and continue coordinate with emergency shelter programs to reduce barriers to entry. Since the onset of the COVID-19 pandemic, local jurisdictions and non-profit providers have acquired and launched multiple non-congregate shelter sites offering 120+ beds nightly and continue to provide hotel-based non-congregate shelter for approximately 75 persons nightly through leased rooms. The 2022 Housing Inventory Count records 640 available year-round shelter beds; however, nightly shelter capacity reported by shelter and transitional housing providers suggests that actual bed capacity averages closer to 400 beds/night.

- 2 Performance of Current Strategy at Providing Access to Low-Barrier and Culturally Appropriate Temporary Accommodations: The current strategy has successfully reduced barriers to shelter entry including removal of sobriety requirements at two area shelters and the launch of four additional low-barrier shelter facilities; however, these increases have been insufficient to produce a 1:1 replacement of shelter capacity reductions resulting from physical distancing measures and ongoing staffing shortages. This has resulted in a total nightly shed bed occupancy reduction of approximately 38% since 2019, significantly contributing to the concurrent increase in unsheltered homelessness. The CoC has additionally implemented targeted transitional housing for LGBTQ+ youth and a grassroots housing project for LGBTQ+ seniors is now forming; these activities have demonstrated the positive impact of a targeted universalism approach and affirming low-barrier temporary accommodations for persons in disparately impacted communities.
- 3 New Practices Implemented in Past 3 Years and Lessons Learned: As described above, the CoC and its partners have implemented several new strategies in the past three years with meaningful lessons learned and which inform this plan including but not limited to:

Implementation of hotel-based non-congregate shelter services: At the height of the COVID-19 pandemic, the City of Tucson, Pima County, and CoC collaboratively launched a 400-bed hotel-based shelter intervention for persons impacted by COVID-19 and/or at risk of severe medical risk associated with COVID-19. This coordinated, community-level strategy was the CoC's first experience with coordinated shelter placement through Coordinated Entry and implemented CE best practices as they relate to vulnerability assessment for shelter placement. The effort demonstrated anecdotally held beliefs about the increased effectiveness of coordinated shelter placement, improved equity in distribution of shelter resources based on vulnerability factors, and increased expedience and effectiveness of permanent housing placement once sheltered. Conversely, this effort confirmed that the cost of this intervention makes it a less than desirable long-term solution with monthly shelter for a single household totaling approximately 3.5 months' supportive housing.

Population-centered shelter and temporary housing accommodations: The CoC introduced an LGBTQ+ affirming and centered transitional housing project for youth through the Youth Homelessness Demonstration Project. This project complies with fair housing requirements while centering and designing around the needs of young people experiencing homelessness and compounded consequences of heterosexism and transphobia. This project has highlighted the value of population- and person-centered program design and has influenced the CoC's approach to funding which now requires targeted universalism approaches and training.

Daily shelter reporting: The CoC Lead Agency has reported daily shelter bed availability through community lists since 2020 and has established voluntary access to a real-time bed availability reporting tool integration within the HMIS. Local jurisdictions have mandated participation for ESG shelter service providers and are currently working to increase compliance. Lessons learned include the improved utilization resulting from coordinated shelter availability communications and the need for mandated participation in an HMIS-integration to automate bed availability visibility within the CoC, activities which are included within this plan.

P-3c: Current Strategy to Provide Immediate Access to Low Barrier Permanent Housing for Individuals and Families Experiencing Unsheltered Homelessness

1 – Current Strategy: The CoC uses a dynamic prioritization Coordinated Entry approach which prioritizes persons with the greatest service need, including unsheltered persons, for all available supportive housing options and facilitates Coordinated Entry transfers to higher levels of care/supportive service delivery as needed to prevent returns to homelessness. Coordinated Entry referrals are separated into three priority pools with the top priority pool including persons experiencing at least two of the following risk characteristics: chronic homelessness and/or Dedicated Plus eligibility; Category 4 homelessness; high severity of service needs as indicated by CE assessment score; and/or risk of medical complication associated with COVID-19. Referrals from within the pool are ordered based on the number of risk factors identified and length of time homeless to ensure unsheltered persons with severe service needs are prioritized. As a result of new funding and leveraged partnerships between the CoC, PHA, and Medicaid services, the CoC increased the total number of permanent housing beds dedicated for persons experiencing homelessness and reported in the Housing Inventory Count from 1,692 in 2020 to 2,440 in 2022 (44% increase).

The CoC requires and monitors compliance with Housing First implementation in all CoC housing projects and provides comprehensive training and technical assistance to promote Housing First implementation in programs outside of its scope of authority. Local jurisdictions similarly require Housing First approach in supportive housing programs they fund and have implemented pilot initiatives to provide low-barrier, Housing First permanent housing for targeted populations with unique needs such as the Pima County Housing First pilot for justice-involved persons, the CoC/City of Tucson FUSE initiative, and the Tucson HEART initiative, each of which pair PHA vouchers with specialized supportive services to provide immediate low-barrier access to permanent housing for individuals and families with severe services needs who are experiencing unsheltered homelessness. The CoC has additionally partnered with the PHA to double the number of units set aside in HCV and Public Housing programs for referrals from Coordinated Entry and move-ons from supportive housing projects for people experiencing homelessness. These approaches and commitments are fully evidenced by the letters of commitment provided by the Public Housing Authority and attached to this plan which include 88 vouchers allocated for PSH projects included in the Supplemental NOFO priority list, 100 vouchers committed for the FUSE initiative, and expansion of the PHA homeless preference.

- 2 Performance of Current Strategy at Providing Access to Low-Barrier and Culturally Appropriate Access to Permanent Housing to Individuals and Families with Histories of Unsheltered Homelessness:
- The current strategy is built on decades of lessons learned in the local community and successfully leverages Medicaid services, mainstream benefits, and a variety of housing resources to provide low-barrier and culturally appropriate access to permanent housing for the target population. The current approach generally performs well in connecting individuals and families experiencing unsheltered homelessness; however, there are multiple key areas for improvement including a) reducing the length of time from Coordinated Entry referral to permanent housing move-in, decreasing the length of stay in transitional housing projects, increasing exits to permanent housing, increasing cash income, decreasing returns to homelessness, and improving reporting disaggregated reporting capacity to better understand and mitigate inequities in service outcomes. Each of these factors are included in the CoC's current strategic plan, adopted in 2021, with quantifiable target benchmarks.
- 3 Evidence that Supports the Use of Current Strategy: System performance data provides supportive evidence of the strategies used by the CoC despite the challenging pandemic climate. Since 2020, total income has increased for adult stayers (31%) and adult leavers (29%), first time homelessness has reduced (24%), exits and retention from non-time limited permanent housing have increased (96%), and returns to homelessness within 24 months have decreased (23%). As described above, total permanent housing beds with supportive services designated for persons experiencing homelessness increased by 44%. Two key data points, however, have worsened in large part due to the ongoing COVID-19 pandemic, rapidly changing rental housing market, and persistent staffing shortages at government and non-profit provider organizations in the region. These include 1) average and median length of time homeless, and 2) exits to permanent housing from shelter and time-limited supportive housing. Strategies proposed in Section P-4 of this plan intend to mitigate these challenges and accelerate improvements in the positive performance demonstrated above.

- **4 New Practices Implemented in Past 3 Years and Lessons Learned:** As described above, the CoC has taken decisive action since 2019 to increase availability of permanent housing beds and improve its Coordinated Entry prioritization strategies to better address the needs of persons experiencing unsheltered homelessness, particularly persons with severe service needs. Highlighted practices and lessons learned include:
- a) The CoC updated its Coordinated Entry approach to include dynamic prioritization, a streamlined project transfer process, participant choice options in Coordinated Entry referral (youth pilot), coordinated voucher move-on strategies, improved case conferencing practices, and the pairing of entitlement program and Medicaid services with vouchers to generate new permanent supportive housing solutions, resulting in an 140% increase in permanent housing placement among chronically homeless households in FY 2021, increased housing retention among persons referred to PHA housing, and near-parity in housing referral and acceptance rates among Black/African American and Hispanic/Latinx target communities.
- d) Landlord incentives including signing bonuses and risk mitigation funds established early in the pandemic and as described in Section P-3a above significantly improved access to affordable housing units for persons receiving subsidies which informs the landlord engagement and retention strategies included in this plan.
- e) The launch of 24-hour non-congregate shelter projects has significantly reduced the frequency of in-out shelter placements and returns to unsheltered homelessness. As a result, these projects have seen higher rates of exit to permanent housing as each participant's shelter placement is maintained until they are able to be provided permanent housing solutions, a key lesson which informs the CoC's approach to leveraging shelter and transitional housing as a bridge to permanent housing.

P-4: UPDATING THE COC'S STRATEGY TO IDENTIFY, SHELTER, AND HOUSE INDIVIDUALS EXPERIENCING UNSHELTERED HOMELESSNESS WITH DATA AND PERFORMANCE

1 – **Street Outreach:** The Tucson Multi-Disciplinary Outreach Project included in the CoC's priority list for supplemental funding will conduct coordinated outreach 5 days/week with professional and paraprofessional staffing leveraging a comprehensive array of supportive service, shelter, and treatment options available through direct placement by outreach workers. The project includes expanded medical outreach services (street medicine), utilizes paid peer outreach guides to ensure persons with lived expertise are central to program design and implementation, and will adapt the evidence-informed 'Streetworks' model to increase geographic coverage and distribution of outreach activities. The project will additionally implement and support trained volunteer outreach teams to expand outreach services.

CoC outreach partners work directly with local law enforcement to identify 'priority zones' for outreach activities offering pro-active alternatives to encampment enforcement and criminalization through outreach and engagement services. The CoC has additionally adopted a collaboration with Tucson Police Department through which TPD officers will receive an automatic alert if an individual with whom they come in contact has been matched to supportive housing through Coordinated Entry. The collaboration agreement was developed through a working group of law enforcement, persons with lived experience, and the CoC's Diversity, Equity and Inclusion, and Coordinated Entry Committees, and prohibits the use of housing information in enforcement activities while expanding the Coordinated Entry system's reach to include 700+ uniformed officers.

Data and Performance: The CoC's outreach projects, including the project included in the CoC's priority list, will include quarterly evaluation of the following performance indicators for ongoing improvement: #/% of persons contacted, #/% of persons completing CE assessment, #/% of persons entering shelter/temporary accommodations, #/% of persons entering permanent housing, #/% of persons enrolling in supportive services, and #/% of persons engaged in mainstream benefits. The CoC will additionally monitor geographic coverage, hours of street availability, and health service engagement to assess and update, as needed, its street outreach practices using a continuous quality improvement process, including quarterly review and feed-forward input sessions conducted with persons experiencing unsheltered homelessness.

Coordinated Entry and HMIS: All ESG, CDBG, and CoC street outreach services are entered within the HMIS and street outreach contacts recorded in the HMIS are used to maintain active status on the CoC's by name list for Coordinated Entry housing and service referral. Outreach teams conduct field-based and telephonic Coordinated Entry assessment to reduce barriers to Coordinated Entry housing placement for unsheltered persons, and street outreach contacts are recorded in the HMIS for evaluation and to maintain the by name list.

Approach to Incorporating New Partners: As described above, the CoC is currently expanding its existing partnership with local law enforcement agencies to launch the Housing Attempt to Locate protocol with the aim of expediting move-ins to housing matches arranged through Coordinated Entry, and with the region's largest healthcare provider for low-income persons, El Rio Community Health Center, for the purpose of expanding medical service engagement and provision of street-based medicine services. The proposed street outreach program included in the CoC Priority List additionally proposes to leverage new partnerships with grassroots and mutual aid organizations, business teams, faith communities, and other interested groups for the purpose of implementing a trained and supported volunteer outreach program with a focus on recruiting teams of already connected individuals (e.g. business colleagues, church members, cultural groups, etc.) and providing the training, support, and material resources they need to provide effective, impactful street outreach services.

2 – **Low-Barrier Shelter and Temporary Accommodations:** Through Supplemental NOFO and leveraged funds, the CoC intends to implement and/or expand the following best practices to better connect unsheltered persons, particularly persons with severe service needs, to low-barrier shelter and temporary accommodations:

Implementation of ESG Written Standard requiring real-time entry/exit data entry in HMIS and participation in public-facing shelter bed availability dashboard: The primary objective of this action item is to increase community awareness and utilization of shelter bed capacity, reduce shelter bed turn away experiences among unsheltered persons, and improve 311 hotline, Coordinated Entry Access Point, and street outreach team ability to initiate direct shelter placement.

Safely increase capacity in congregate and semi-congregate shelter settings by up to 50% with dedicated quarantine spaces and routine testing to address health risks: The primary objective of this action item is to increase the nightly bed occupancy in congregate and semi-congregate shelter settings through physical and programmatic risk management approaches. Testing and quarantine guidance are provided by the Pima County Health Department, and physical improvements are eligible for financial assistance through CDBG, local, and private funds. Local jurisdictions have additionally committed to dedicated American Rescue Plan and other resources to support the launch of additional semi-congregate shelter facilities to meet immediate shelter needs.

Increase availability of non-congregate shelter beds by 50% to address the needs of unsheltered persons with severe service needs: Local jurisdictions have acquired and are in the process of acquiring facilities for non-congregate sheltering including multiple hotel properties using American Rescue Plan and state/local funds.

Use of Data and Performance: Daily bed capacity and utilization will be evaluated to prioritize funding to expand and replicate highly utilized shelter programs. Daily bed utilization offers a more holistic view of shelter use than the current quarterly point in time count measurement of utilization and will be incorporated into improved reporting and data analytics tools implemented by the HMIS project included in the CoC's priority list. Overall, this improved, real-time understanding of bed availability will improve system performance by more effectively connecting unsheltered persons to available beds and reducing the number of persons who are unsheltered despite bed availability. Through its FUSE initiative, the CoC will engage in ongoing data matching with local health and justice systems to identify individuals and families who may be unknown or infrequently known to the homeless response system but who are experiencing homelessness and heavily utilizing emergency services to promote engagement in shelter and supportive housing/services programs with the aim of better connecting such persons to permanent housing and decreasing use of emergency services. The CoC will continue to conduct quarterly performance evaluation of emergency shelter, safe haven, and transitional housing beds using the following performance indicators for the purpose of ongoing in shelter/temporary settings), #/%

of exits to permanent housing, #/% of persons who increase income, #/% of persons with non-cash benefits, and #/% of households who return to homelessness. These measures are used to inform system planning, prioritize ESG, CoC, and other funding, and highlight opportunities for system improvement and technical assistance needs. The CoC will additionally evaluate inflow/outflow data, the by name list, and bed occupancy rates to evaluate the delta between system need and capacity, and coordinate with government and philanthropic partners to develop community-level resource strategies to address that gap.

New Practices and Activities Funded through this Competition: The CoC has prioritized available CoC Supplemental Program funding for street outreach and permanent supportive housing services, identified as the most critical and long-term funding gaps in the local community. Funding has not been allocated for non-congregate shelter and/or transitional housing; however, local jurisdictions have committed approximately \$4M for additional non-congregate shelter services and capital costs through other sources described in this plan. Although new services will not be directly supported through CoC Supplemental Program funds, the expansion of proposed SSO-Outreach, Planning and HMIS funds will all be used to support coordinated temporary bed placement, expanded bed capacity, and other strategies described in this section.

3a – **Permanent Housing (Improvement):** With CoC and leveraged funds, the CoC will implement the following best practices to improve its approach to housing persons with histories of unsheltered homelessness:

Centralized landlord engagement and retention practices: The CoC is currently working with Built for Zero to secure approximately \$770,000 to implement a centralized landlord engagement and retention approach inclusive of a) community-wide affordable unit availability portal, b) professional landlord outreach and engagement team, c) landlord incentive program, and d) risk mitigation funds. Participating agencies will be encouraged to take advantage of these resources, administered by the CoC, at no charge with the requirement that the organization designate a 24-hour on-call point of contact to address landlord/tenant issues and coordinate with the central landlord engagement team to ensure acceptable resolution. The project will track the following data-driven performance metrics for ongoing system improvement: days from Coordinated Entry referral to permanent housing move-in, dollars expended in landlord incentive and risk mitigation (damage) funds, reduction in # of persons on by name list, # of participating properties/property managers.

Frequent Utilizers Systems Engagement (FUSE): The CoC has secured consultancy and technical assistance from Corporation for Supportive Housing and is currently launching an evidence-informed FUSE initiative which will include a pilot cohort of 100 unsheltered high-utilizers with severe service needs identified through HMIS, justice, and health system data-matching. Identified unsheltered persons will be prioritized for Housing Choice Vouchers set aside by the PHA for this initiative and provided with comprehensive supportive services provided through leveraged mainstream health resources. This approach is intended to both improve and expand existing strategies. Specifically, it will improve strategies by providing new mechanisms for cross-sector data-matching and establishing a community oversight team responsible for coordinating the ongoing implementation of Coordinated Entry to better respond to unsheltered homelessness and persons with severe service needs. The FUSE initiative will include quarterly evaluation activities using the following metrics for data and performance to inform ongoing initiative and system improvements: #/% of persons retaining or exiting to permanent housing, #/% of persons increasing income, #/% of persons receiving mainstream benefits, #/% of persons returning to homelessness, and the frequency of emergency health service, jail booking, and law enforcement engagements.

Expediting Transfers from Temporary to Permanent Housing: The CoC has prioritized transitional housing as an interim solution to which persons should be referred only for the period of time necessary to obtain a lease and/or address permanent housing barriers. The CoC's established transfer policy permits transfers to permanent housing within 90 days; however, not all transitional housing projects currently leverage this approach. The CoC Program Grant Committee and CoC Lead will provide technical assistance to reduce lengths of stay in transitional housing by facilitating permanent housing placement among such projects.

Promoting Supportive Housing Move-On: The CoC's permanent supportive housing stock experiences limited movement. Recent reviews of project participation indicate that 50% or more of PSH-enrolled households remain in PSH due to ongoing rental assistance need, often for years after supportive services lessen. The CoC has partnered with the PHA to establish a more flexible homeless preference policy permitting move-ons from supportive housing once supportive services are addressed by mainstream resources and/or are no longer needed. Supplemental CoC Planning funds will be used to support coordinated review of PSH participation and support provider organizations in promoting and actualizing transfers to PHA subsidy for persons with ongoing financial assistance needs, thereby increasing movement through PSH and maximizing available bed capacity.

- **3a Permanent Housing (Expansion):** With CoC and leveraged funds, the CoC will implement the following best practices to expand permanent housing strategies for persons with histories of unsheltered homelessness:
- a) The CoC has prioritized CoC supplemental funding through this competition to include 178 additional units of permanent supportive housing, representing 74% of available funds and including site-based and scattered-site permanent housing units, provided through the CBI Pima PSH 78 and OPCS Mesquite PSH projects.
- b) The CoC has partnered with the PHA and mainstream healthcare providers to leverage mainstream case management and supportive services with housing vouchers to double the set-aside of HCVs and Public Housing units included in the PHA homeless preference.
- c) The CoC has partnered with the PHA, local jurisdictions, healthcare providers, justice partners, and service providers to launch the FUSE initiative through which 100 units of additional permanent supportive housing will be made available for unsheltered frequent utilizers, including persons with severe service needs, with the aim of reducing incarceration and emergency service use through permanent housing and support.
- d) The City of Tucson has committed \$2.7M in CDBG-CV and HOME-ARP funding to launch the Tucson HEART initiative which pairs supportive services with HCVs, EHVs, Stability Vouchers, and Public Housing units to provide on-going supportive services for 200+ persons connected to PHA programs through Coordinated Entry (homeless preference) and the CoC's supportive housing move-on strategies.

Use of Data and Performance to Improve Expansion Strategies and Achieve Results: The Tucson HEART, FUSE, Stability Voucher, and CoC-funded Permanent Supportive Housing projects described above will participate in quarterly CoC performance evaluation using the following metrics to drive on-going project and system improvement strategies: # of persons on by name list, # of units and beds reported and utilized in PSH and Other Permanent Housing types on the annual Housing Inventory Count, length of time from Coordinated Entry referral to permanent housing move-in, # of referrals to permanent housing "high needs" initiatives from Coordinated Entry and rate of success of those referrals, #/% of persons retaining or exiting to permanent housing, #/% of persons increasing income, #/% of persons receiving mainstream benefits, #/% of persons returning to homelessness, and #/% of persons residing in PSH component projects 3 years or longer who are move-on ready and #/% of such persons who accept move-on placement. Quarterly evaluation allows for improvisation in project activities and corrections to project strategies to achieve intended results.

P-5: IDENTIFYING AND PRIORITIZING HOUSEHOLDS EXPERIENCINED OR WITH HISTORIES OF UNSHELTERED HOMELESSNESS

1 - Strategies to Ensure Resources Provided Under Special NOFO Will Reduce Unsheltered Homelessness: The CoC Priority List includes core administrative services (CoC Planning and HMIS), Street Outreach, and Permanent Supportive Housing projects, all of which are intended to create a meaningful reduction in the number of persons experiencing unsheltered homelessness in the Tucson area. Permanent supportive housing projects prioritize individuals and families with high severity of service needs including chronic homelessness, Dedicated Plus eligibility, victimization, and co-morbidities. Expanded street outreach services will be provided throughout the CoC's geographic coverage area in order to engage unsheltered

individuals and families in basic needs assistance and housing-focused, time-limited service interventions. The street outreach project funded through Supplemental CoC Program funds will coordinate directly with interdepartmental Homeless Protocol initiatives administered by the City of Tucson and Pima County to coordinate outreach services and housing placement for willing unsheltered persons in community shelter, temporary accommodations, and permanent housing options with a priority on supporting encampments in which life/safety hazards and other issues are likely to result in dislocation. Anecdotal local evidence demonstrates that these encampments are generally comprised of persons with the highest service needs and the current cohort-based strategy of re-locating encampments as a group to non-congregate, low-barrier shelter settings has proven effective in promoting shelter and housing acceptance among individuals least likely to accept assistance.

Furthermore, the HATL partnership with law enforcement agencies is expected to reduce the frequency at which high-needs households are matched to housing but unable to be located, and expedite move-in to permanent housing among such persons. The 30 site-based units included in the Mesquite PSH project will provide a flexible alternative to reliance on community rental markets for PSH-eligible households with significant leasing barriers (e.g. prior criminal offenses, multiple evictions, etc.) and local efforts to reduce housing discrimination and promote landlord engagement and retention will promote housing availability within the community's restricted rental market.

- **2a Eligibility Processes:** All street outreach services funded through this project will exclusively serve persons experiencing unsheltered Category 1 homelessness and will target encampments with known populations of individuals and families with severe service needs as identified by local jurisdictions and homeless assistance programs. On-going assistance may be provided during shelter tenancy to promote move-on to permanent housing destinations; however, the project will not target or enroll sheltered persons who are able to be served by other community programs.
- **2b Coordinated Entry Processes:** The CoC utilizes a dynamic prioritization approach, as previously described, to prioritize households with high severity of service needs for all available housing interventions and does not prioritize explicitly based on sheltered or unsheltered status. The CoC previously prioritized unsheltered persons for permanent housing placements which resulted in a "path to nowhere" for sheltered persons and disincentivized shelter acceptance. Based on this learning, the CoC does not intend to prioritize persons for Coordinated Entry supportive housing referral based on their current shelter status but does intend to update its Coordinated Entry prioritization process to account for histories of unsheltered homelessness as a prioritization factor in recognition that unsheltered experiences increase vulnerability and result in negative health, safety, social, and behavioral health consequences for those who experience them.

By pairing Supplemental CoC Program funds with leveraged local and federal resources committed through other sources, the CoC's plan to reduce unsheltered homelessness is grounded in a whole-system approach which is intended to a) increase capacity at each stage of engagement (outreach, navigation, temporary housing, permanent housing), b) stimulate movement through the system to mainstream subsidies and/or self-sufficiency, and c) appropriately match unsheltered persons with appropriate temporary and/or permanent housing based on their individual needs and preferences through Coordinated Entry.

3 - Connecting Persons Living in Unsheltered Situations with Housing Resources through Street Outreach: As described in prior sections, the CoC's Outreach Coalition coordinates street outreach activities throughout the region and the proposed Tucson Multi-Disciplinary Outreach Project will expand outreach services to include daily outreach conducted by a multi-disciplinary outreach team, peer outreach guides, and trained volunteer outreach teams supported by qualified staff. Outreach activities are housing-focused and use the evidence-based Critical Time Intervention model to focus engagement and navigation services on addressing shelter and permanent housing needs. Outreach teams conduct field-based Coordinated Entry assessment and facilitate direct placement in shelter, temporary accommodations, detox, residential treatment, and other services. Outreach workers coordinate with Housing Navigation teams to facilitate enrollment in

mainstream voucher programs provided through the PHA's homeless preference and participate in case conferencing activities to inform the prioritization and housing service engagement of unsheltered participants.

4 - Additional Steps to Ensure Unsheltered Persons and Persons with Histories of Unsheltered Homelessness Can Access Housing and Other Community Resources: The CoC and its member agencies have implemented comprehensive strategies to reduce barriers to housing and community resource engagement among unsheltered persons. Current and planned activities include:

Access to Identification: The City of Tucson has established a flexible fund assistance program through which unsheltered persons are assisted to obtain identity documents and other basic needs. Local jurisdictions and federal/state agencies fund outreach and navigation services through which identity document assistance is provided. Copies of identity documents can be scanned and stored in a secure environment by service providers offering a "digital locker" for key documents and the CoC partners with community organizations to host multiple resource events throughout the year at which the MVD, Social Security, and Vital Records offices provide no-cost replacement of identity documents for unsheltered persons.

Housing Navigation Services: Local jurisdictions currently investment \$3M+ in housing navigation services administered through a variety of non-profit organizations and government departments. Navigation projects target high-system utilizers and households with complex housing and service needs, the majority of whom are experiencing chronic homelessness. The CoC's Supportive Services Only – Coordinated Entry grant includes CoC-funded housing navigation in Tucson and rural Pima County and its YHDP initiative includes Housing Navigation and Diversion services for unaccompanied and pregnant/parenting youth. Both projects accept referrals of households in need of housing navigation and prioritized for such services based on vulnerability and need through Coordinated Entry case conferencing, and the CoC is supplementing its requests for Supplemental CoC funds with its leveraged FUSE and Tucson Heart initiatives which braid comprehensive housing navigation and supportive services with voucher programs to bring additional permanent supportive housing capacity on line to meet the current need. Three SAMHA-funded housing navigation programs operate in the region and provide integrated health and housing navigation and supportive services for hundreds of unsheltered persons annually.

Access to Healthcare and Other Supportive Services: The CoC and its members work closely with AHCCCS, the State Medicaid agency, to integrate medical and behavioral health care with housing services. The CoC coordinates with the Medicaid housing program to cross-refer based on household needs and new permanent supportive housing projects require a guarantee of medical and behavioral health services provided directly by the housing service provider or through a formal written agreement to reduce gaps in service availability. One local partner, Community Bridges, Inc., provides guaranteed access to leveraged behavioral health services for persons served by all CoC programs (see attached letter of commitment), and other community providers leverage healthcare funding to provide case management, medical services, behavioral health treatment, and supportive services for participants enrolled in agency programs. All CoC providers have SOAR-certified staff and participate in ongoing training to ensure coordinated service linkages are provided to facilitate access to mainstream resources and supportive services for which participants are eligible, and the CoC's strategic plan and funding competitions are designed to prioritize service-rich supportive housing environments.

P-6: INVOLVING INDIVIDUALS WITH LIVED EXPERIENCE OF HOMELESSNESS IN DECISION MAKING – MEANINGFUL OUTREACH

1 – Meaningful Outreach Efforts to Form a Working Group: In preparation of this plan and associated funding competition, the CoC held a two-day unsheltered homelessness planning forum and several planning sessions, attended by 100+ community stakeholders. The CoC coordinated with outreach and shelter agencies to identify and support approximately 20 persons with current living experience to participate in these sessions and compensated their participation at a rate of \$15/hour, and additionally held listening sessions with encampment and shelter residents. The CoC Board approved the creation of a Lived Experience Council, modeled after the

CoC's existing Youth Action Committee, which conducted its first meetings to provide initial input and final approval to this plan. The CoC is scheduled to vote on updates to its governance charter in November 2022 in order to elevate the Lived Experience Council to the role of full committee authorizing veto authority for actions going before the full CoC and direct input into all CoC policy decisions. The CoC advertises opportunities for persons with lived experience to participate in CoC bodies including the Lived Experience Council through social media advertising, direct outreach by street outreach and navigation teams, and coordinated recruitment by member agencies.

- 2 Meaningful and Intentional Integration of Persons Experiencing Homelessness, Particularly Those who have Experienced Unsheltered Homelessness, into CoC Decision Making Structure: The CoC underwent considerable governance re-structuring in 2020 which was intended to center the voices of persons with lived and living experience, and members of communities disparately impacted by homelessness, in its decision-making bodies and processes. At the time of implementation, just two seats for persons with lived experience were reserved on the CoC Board. Today, the CoC Board includes 4 seats reserved for persons with lived expertise within the past five years and each CoC committee includes 2 seats reserved for persons with lived expertise; however, actual engagement is much higher. Currently, 35% of currently seated CoC Board and Committee members have lived expertise and 39% are Black, Indigenous, and People of Color (BIPOC). The CoC has provided ongoing training, restorative practices workshops, and made changes to its meeting practices to better accommodate the inclusion of persons with lived expertise and to promote practices based in shared power, a central goal of the CoC's practice. The CoC's Youth Action Committee has met bi-weekly since 2018 and leads all outreach and oversight activities related to youth homelessness efforts including but not limited to the CoC's YHDP initiative (e.g. quarterly performance evaluation, youth outreach and engagement, program policy review, hiring board participation, etc.) and, as described above, the CoC's Lived Experience Council was recently established as a paid working body to elevate the voices, leadership and authority of persons with lived expertise. As outlined in the CoC's Governance Charter, all persons with lived and living expertise who are not employed by and representing a CoC member agency are compensated for their participation in CoC activities at a rate of \$15/hour which is paid through CoC Planning and local/private funds.
- 3 Involvement of Persons with Lived Experience of Unsheltered Homelessness in the Delivery of Services: The CoC actively promotes employment practices focused on hiring of persons with lived expertise in service, management, and administrative roles within the CoC. The CoC hosts employment fairs at non-profit agencies in partnership with the local One Stop Center and conducts direct outreach to persons with lived expertise. Local planning efforts are underway with the goal of establishing a peer credential for homeless assistance programs, similar to the peer recovery support specialist credential, and CoC agencies routinely hire persons with lived experience. As cited above, the region's 3 largest street outreach and housing navigation programs employ 80% or more persons with lived expertise in outreach navigation programs, and the CoC Lead currently employs a total of 17 persons in homeless assistance roles, 76.5% of whom have lived expertise (including 80% of management and supervisory staff). The CoC additionally subsidizes peer employment opportunities through its YHDP Peer Outreach & Mentoring program and prioritizes persons with lived experience in hiring practices related to the CoC Planning Grant, Supportive Services Only Coordinated Entry grant, proposed Tucson Multi-Disciplinary Outreach Program, and multiple supportive housing projects.

P-7: SUPPORTING UNDERSERVED COMMUNITIES AND SUPPORTING EQUITABLE COMMUNITY DEVELOPMENT

1 - Current Strategy to Identify Populations in CoC Geography Not Served by the Homeless System at the Same Rates at which Such Populations Experience Homelessness: The CoC currently reviews LSA test submissions on a quarterly basis, compares HMIS to census and local poverty data using HUD and NAEH Equity Tools, and conducts annual evaluation of its Coordinated Entry system annually to identify and address disparities in service access and engagement. In addition to internal data evaluation, the CoC partners with the University of Arizona Southwest Institute for Research on Women to conduct external data analyses, including

a recent 3-year longitudinal assessment of homelessness trends which disaggregated HMIS data by race, ethnicity, gender, sexual orientation, age, disability status, and other factors using by name list, street outreach and supportive services only, Coordinated Entry, and housing service records. Data findings were reviewed by the CoC's Diversity, Equity, and Inclusion; HMIS; System Performance Evaluation; and Coordinated Entry Committees to identify opportunities and strategies to address identified disparities.

The table below provides a demographic comparison based on race and ethnicity prepared using 2021 system and community data and provides an example of the most persistent identified disparities which include over-representation of White persons supportive housing relative to unsheltered status, over-representation of Black/African American persons in homeless populations relative to general population, over-representation of Native American persons in shelter/supportive housing relative to unsheltered status, and over-representation of Multi-Racial persons in homeless populations relative to general population.

The CoC's efforts to improve Coordinated Entry processes are also demonstrated within this data with noteworthy findings of parity in the rates of shelter/supportive housing placement to unsheltered status among Black/African American and Hispanic/Latinx persons, reduced over-representation among White/Caucasian persons in shelter/supportive housing compared to prior years, and near parity in shelter/supportive housing placement to unsheltered status among Multi-Racial persons. The previously cited 3-year research project provides anecdotal evidence that, when disaggregated, Multi-Racial persons experiencing homelessness most commonly include Black/African American and Native American persons, suggesting the partial masking of disparities experienced by these communities in Single Race reporting.

	Pima County (Census)	Unsheltered	Shelter/Supportive Housing
White/Caucasian	84.3%	68%	74%
Hispanic/Latinx	37.5%	41%	41%
Black/African American	4.4%	13%	14%
Native American	4.5%	9%	5%
Asian/Pacific Islander	3.3%	<1%	<1%
Multi-Racial	3.3%	8%	6%

Data Limitations and Improvement Strategy: The CoC does not currently include location or origin zip code in its HMIS, tools that are needed to effectively measure engagement and need among rural areas. Anecdotal evidence suggests limited rates of unsheltered homelessness in rural populated areas scattered throughout the region; however, the HMIS Committee is currently evaluating strategies to add location data element(s) to the HMIS in order to measure this and better fit community resource distribution to localized community needs. The CoC's established dynamic prioritization approach results in high rates of service engagement among persons with disabilities, particularly those experiencing chronic homelessness and/or co-morbidities, including 69.84% of all persons served through shelter and supportive housing programs in FY 2021.

2 - How Underserved Communities in CoC Geography Interact with Homeless System and Description of Those Populations: The following summarizes key findings as they relate to underserved communities and their engagement in the homelessness response system identified by the CoC through its ongoing data analysis.

Black/African American Persons: Black/African American persons experience disproportionately high rates of homelessness, most pronounced among unaccompanied youth and families with children. For many years, local data suggested higher rates of temporary housing among Black/African American families (shelter and transitional housing) versus permanent housing placement (rapid rehousing and permanent supportive housing); however, previously cited changes to Coordinated Entry prioritization processes have achieved parity in these referral rates for the first time in FY 2021 and the CoC is continuing to monitor this data point to determine if sustainable improvement is achieved.

Hispanic/Latinx Persons: Hispanic/Latinx persons comprise a large portion of Pima County's population and disproportionately impacted by poverty; however, they do not currently experience disparate rates of homelessness based on reported system data and experience parity in referral to temporary and permanent housing relative to their proportion of the unsheltered population. The CoC acknowledges socio-cultural factors which may limit service engagement (e.g. higher rates of doubled-up, multi-generational families) and distort HMIS data to under-represent the real housing insecurity of Hispanic/Latinx community members.

Native American/Indigenous Persons: Native American communities experience significant over-representation in the unsheltered population and are under-served by temporary and permanent housing services. At present, Native American persons experience homelessness at double the rate of their general population representation and are unsheltered at double the rate that they are represented in temporary and permanent housing services. The CoC's current work to replace the VI-SPDAT with an equity-focused assessment tool and on-going revisions to the Coordinated Entry process are aimed at addressing this longstanding disparity. The CoC's existing SSO-CE project includes dedicated Tribal housing navigation and assessment services, and targeted approaches to address unsheltered homelessness among Native American persons are being collaboratively developed with Tribal entities as part of the CoC's Coordinated Entry Equity initiative.

Rural Communities: Persons residing in rural communities have limited access to locally provided temporary and permanent housing resources. Historically, most persons in need of services residing in rural areas relocated to metro areas where services are more available. The introduction of non-congregate sheltering, including temporary motel stays, and the CoC's mandate that all CoC housing service providers offer remote program services for persons residing in rural communities has improved access for persons in rural communities; however, the need for greater investment and strategic, localized service partnerships remains a pressing need.

Persons with Disabilities: Persons with disabilities are prioritized for Coordinated Entry referral to temporary and permanent housing destinations, and the CoC maintains a network of SOAR-certified staff members to assist such persons with non-cash benefits. The local One-Stop workforce development system provides specialized employment supports to promote income attainment, and as described above, the CoC's dynamic prioritization strategy results in referral to all available temporary and permanent housing solutions for highneeds households, nearly 100% of whom have one or more disabling conditions. In total, 69.84% of households assisted through all project types in FY 2021 had one or more disabling conditions.

LGBTQ+ Persons: Local data shows under-reporting of LGBTQ+ status at Coordinated Entry assessment and project entry. Anecdotal data and recent focus groups conducted with Transgender and Gender Non-Conforming (TGNC) persons with lived experience of homelessness suggest that these communities are unlikely to utilize congregate shelter and transitional housing programs but more commonly accept referrals to non-congregate shelter and supportive housing programs. The CoC recently launched an LGBTQ+-centered congregate transitional housing project for young people which is providing important evidence of the value and need for these types of affirming, population-centered communities. Increased housing need is being uncovered among LGBTQ+ youth and older adults, and the CoC hopes to replicate its existing services for LGBTQ+ youth to meet the needs of older adults if sustainable community funding can be secured.

Data Limitations and Improvement Strategy: The HMIS software currently lacks the capacity to support meaningful disaggregation of outcome data by race and ethnicity; however, the CoC has used the YHDP Supplemental Reporting tool to achieve this for youth projects and the proposed HMIS project included in the CoC's Priority List will included enhanced reporting capacities to better achieve this goal system-wide.

3 - Current Strategy to Provide Outreach, Engagement, and Housing Interventions to Serve Populations Not Previously Served by the Homeless System at the Same Rate at which they Experience Homelessness:The CoC conducts affirmative outreach campaigns according to its Board-approved affirmative outreach strategy which target Coordinated Entry advertising to Hispanic/Latinx and Spanish speaking communities,
Indigenous communities, Black/African American communities, and other target populations. Advertising is
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distributed in areas and media outlets frequented by disparately impacted groups, the CoC provides targeted anti-racism training and resources, and diversity in hiring and CoC decision-making is accounted for in funding review and monitoring processes to promote equity in community service delivery. Through this plan and the included improvement strategies, the CoC anticipates better addressing the needs of subpopulations identified as underserved relative to the rate at which they experience homelessness as follows:

Rural Populations: The proposed street outreach program will increase outreach and engagement services in rural communities through the creation and support of volunteer outreach teams, supported by local agencies and community groups. The CoC's existing Supportive Services Only Coordinated Entry grant will continue to provide housing navigation assistance for rural community residents and expand the rural Coordinated Entry network. All CoC projects are required to have capacity to deliver remote services for persons residing in distant, rural communities and proposed landlord engagement efforts will be fully inclusive of all inhabited areas of Pima County in which homelessness is reported including rural communities.

Native American/Indigenous Populations: The CoC is working with Tribal Housing Authorities to establish improved coordination to reduce unsheltered homelessness among Tribal members. The CoC participated in HUD's Coordinated Entry Equity Demonstration initiative and is currently working to replace the VI-SPDAT with a localized, equity-focuses assessment tool to increase rates of Coordinated Entry referral among this group. The CoC's proposed street outreach program will include cultural humility training and engage volunteer affinity groups to conduct culturally specific street outreach services, and the CoC has contracted with local researchers to conduct qualitative focus groups with a variety of underserved populations including Native American persons experiencing homelessness to better understand their experiences and the current systemic barriers leading to disparately high rates of unsheltered homelessness and lengths of time homeless.

Other BIPOC Persons: Although current system data suggests parity in service access among other racial and ethnic groups, the CoC is partnering with local researchers as noted above to expand current data-limited evaluation strategies to include qualitative understanding of the experiences of homelessness, systemic barriers, and safety of shelter and supportive housing programs with the aim of identifying strategic approaches to address disparities which may not be revealed through data analysis alone. The CoC additionally intends to continue to monitor system utilization data to identify any changes in access and utilization, and through the proposed HMIS data analytics improvements, anticipates launching a cross-team working group to partner with CoC committees to review system performance as it relates to housing and service outcomes, identify disparities, and develop strategies to address those disparities.

Persons with Disabilities: The CoC has prioritized the creation of service-rich permanent supportive housing through the Supplemental NOFO which, if funded, will add 178 additional PSH units to the local system inventory, 100% of which will be dedicated to persons with disabilities. Additionally, the CoC's proposed strategies including the FUSE and Tucson Heart initiatives leverage 250+ additional non-CoC housing units for this population. These efforts are further supported by the CoC's improved move-on strategy, expansion of the PHA's homeless preference program, and landlord engagement strategies described throughout this plan.

LGBTQ+ Persons: The CoC has implemented mandatory Equal Access Rule and Fair Housing training for all providers, hosts an 8-module LGBTQ+ Equity training series available on demand in the CoC's online training center, and provides in-kind grant funds to support LGBTQ+ equity and inclusion work at the organization level. The CoC's recent focus groups with TGNC individuals with lived experience and ongoing planning efforts with aging services, including LGBTQ+ senior organizations, highlight the need for LGBTQ+ centered services and programs, a strategy which has proven successful with the LGBTQ+ youth population and is being explored for possible older adult housing services. The CoC intends to conduct additional training in response to ongoing qualitative feedback provided by LGBTQ+ persons experiencing homelessness to address service and housing needs.