

Before Starting the CoC Application

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

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

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

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

Your CoC Must Approve the Consolidated Application before You Submit It

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

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

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: OH-508 - Canton, Massillon, Alliance/Stark County CoC

1A-2. Collaborative Applicant Name: Canton/Massillon/Alliance/Stark County CoC

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Stark Mental Health and Addiction Recovery

1B. Coordination and Engagement–Accountable Structure and Participation

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

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- Frequently Asked Questions

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

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

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

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

17.	State Government Staff/Official(s)	Yes	0
18.	State or Local Elected Public Official(s)	Yes	2
19.	Local Jail(s)	Yes	0
20.	Mental Health Service Organization(s)	Yes	1
21.	Mental Illness Advocate(s)	Yes	1
22.	Organization(s) led by and serving people with disabilities	Yes	0
23.	Other homeless subpopulation advocate(s)	Yes	1
24.	Other nonprofit homeless assistance provider(s)	Yes	4
25.	Other social service provider(s)	Yes	1
26.	Public Housing Agencies	Yes	1
27.	Recovery Housing or Sober Living Provider(s)	Yes	0
28.	School Administrators/Homeless Liaison(s)	Yes	0
29.	School District(s)	Yes	0
30.	Street Outreach Team(s)	Yes	1
31.	Substance Abuse Advocate(s)	Yes	1
32.	Substance Abuse Service Organization(s)	Yes	1
33.	Universities	No	
34.	Veteran Serving Organization(s)	Yes	1
35.	Agencies Serving Survivors of Human Trafficking	Yes	1
36.	Victim Service Provider(s)	Yes	1
37.	Domestic Violence Advocate(s)	Yes	1
38.	Other Victim Service Organization(s)	Yes	0
39.	State Domestic Violence Coalition	Yes	0
40.	State Sexual Assault Coalition	No	
41.	Youth Advocate(s)	Yes	1
42.	Youth Homeless Organization(s)	Yes	0
43.	Youth Service Provider(s)	Yes	1
44.	Other Homeless Assistance Provider(s)	Yes	0
45.	Local Business or Chamber of Commerce or a Member of a Business Improvement District	Yes	0
	Other: (limit 50 characters)		
46.			
47.			

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

(limit 2,500 characters)

The CoC maintains a transparent and publicly available membership process. Membership information and an online membership form are posted on the CoC's public website, starkcountyhomeless.org, making the invitation accessible to individuals and organizations throughout Stark County. The form allows someone to become a member immediately or to immediately remove their membership. A current membership list of approximately 115 members, including member contact information, is also publicly available on the website. The CoC formally distributes an invitation for new members at least annually through its Board, committees, workgroups, member organizations, partner networks, the Collaborative Applicant's Board of Directors, and public jurisdictions. Membership is not limited to the annual solicitation period. Interested individuals and organizations may join on any day of the year by completing the online form or contacting the Collaborative Applicant or CoC Board Chair by phone, email, or in person. This combination of an annual public invitation and a continuously available online process ensures that membership opportunities are transparent and accessible across the CoC's entire geographic area.

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

The CoC engages through multiple, ongoing channels rather than relying on a single meeting or annual event. Stakeholders participate in CoC Board meetings, committees, workgroups, provider meetings, community-planning sessions, strategic-planning activities, surveys, and public comment periods. Meeting schedules, minutes, membership information, and opportunities to participate are publicly available at starkcountyhomeless.org. Individuals and organizations may also provide input directly to the Collaborative Applicant or join the CoC at any time through the website. The CoC conducts targeted outreach based on the expertise and perspective needed for a particular issue. Although the CoC works to maintain the appropriate mix of representatives on its Board, committees and workgroups (for example, mental health, veteran, elected officials and law enforcement representation), it does not limit participation among established members or those who routinely attend meetings. When needed expertise or representation is missing, the CoC invites guests and additional partners to participate in discussions and planning. The CoC also makes a deliberate effort to engage newer community leaders, organizations that have not traditionally participated in the CoC, and individuals whose perspectives may differ from existing policies or practices. These participants can identify assumptions, risks, gaps, and opportunities that may be overlooked by those who have worked within the system for an extended period. The goal is to continually broaden participation and avoid relying on the same organizations and individuals simply because they have historically been involved. Input gathered through these channels is documented and reviewed alongside performance data, monitoring results, funding requirements, and identified system gaps. Committees and workgroups evaluate the information and develop recommendations for the CoC Board. This process ensures that a broad range of expertise and viewpoints informs performance improvement, strategic planning, policies, funding priorities, and other CoC decisions.

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

(limit 2,500 characters)

CoC uses an open, publicly documented process to accept and consider proposals from current recipients and organizations that have never received CoC Program funding, including faith-based organizations. Before the NOFO is released, Collaborative Applicant shares information about anticipated funding opportunities and offers technical assistance on CoC Program requirements, applicant eligibility, SAM.gov registration, e-snaps, and the local application process.

After HUD releases the NOFO, the CoC publicly announces the opening of the local competition through its website, community meetings, partner networks, and email distribution lists. The announcement identifies available renewal, bonus, and reallocation funding and provides application instructions, deadlines, funding priorities, eligibility and threshold requirements, workshop information, links to HUD and e-snaps resources, and Collaborative Applicant contact information. Application workshops and technical assistance are available to all interested organizations, regardless of whether they currently receive CoC funding.

All proposals submitted by the local deadline are reviewed for eligibility and threshold requirements and evaluated using CoC Board-approved scoring criteria published on the CoC's website. Applications are considered based on proposal quality, responsiveness to community needs and funding priorities, organizational capacity, program design, and applicable HUD requirements, not an organization's previous receipt of CoC funding. Scoring and ranking recommendations proceed through the CoC's established review and Board approval process. Applicants are notified of the results and may use the publicly documented reconsideration process if they disagree with a decision. Currently, six agencies within the CoC's geographic area receive CoC Program funding. During the current competition, CoC received and considered two applications from a faith-based organization that had not previously received CoC Program funding: one for street outreach and one for a Supportive Services Only shelter project. Both applications were approved and included on the CoC Priority Listing submitted to HUD. The organization received access to the same public information, technical assistance, application materials, and review process as all other applicants. This demonstrates that the competition is accessible to new organizations and that proposals are evaluated through a consistent and transparent process.

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

(limit 2,500 characters)

The CoC identified a gap in moving people efficiently from unsheltered homelessness and emergency shelter into housing. HMIS, coordinated entry, monitoring, performance data, and stakeholder feedback demonstrate insufficient outreach, shelter services, transitional housing, and flexible assistance. The CoC will maintain permanent supportive housing for individuals requiring long-term assistance while adding transitional housing for households needing short- to medium-term housing and services. Strategies include outreach, housing-focused shelter services, transitional housing, flexible assistance, landlord engagement, employment and benefit connections, and referrals to mainstream systems. Individualized services will address adults, families, youth, veterans, survivors of domestic violence, people with disabilities, and other relevant subpopulations. Performance targets already exist for CoC-funded projects. Agencies submit status reports to the Collaborative Applicant comparing results with established targets. Targets will be reevaluated based on the current NOFO, HUD expectations, baseline data, and project design. Measures include reducing average length of time homeless by 10%; increasing permanent housing exits by 10%, emphasizing exits without subsidies; maintaining at least 85% housing utilization; reducing returns to homelessness; and increasing employment income. Results will be reviewed quarterly and annually, with technical assistance or corrective action when needed. Within 90 days of award notification, the CoC will finalize system/project performance targets and implementation strategies. Providers will then transition existing permanent supportive housing participants, based on individual needs, to appropriate programs, housing resources, or unsubsidized housing without disrupting housing stability. Revised expectations will take effect after the transition and implementation of project models, with quarterly reviews beginning in the first year. Funding will include CoC renewal, reallocation, and bonus funding; match secured by CoC-funded projects; ESG; the Ohio Homeless Crisis Response Program; public housing resources; local government and mainstream programs; and other state, local, private, public, and philanthropic dollars. Stark Housing Network, as Collaborative Applicant, with the CoC Board, will oversee implementation, monitor performance, and recommend strategy adjustments.

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

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

1C. Coordination and Engagement

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1C-1.	Treatment and Recovery Services—On-site Substance Use Treatment Availability.	
	You must upload the List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment attachment to the 4A. Attachments Screen.	
	What percent of your TH/RRH/PSH projects have substance use treatment available on site?	33%

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

(limit 2,500 characters)

OH- 508 is not a rural CoC.

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

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

(limit 2,500 characters)

CoC partners with local behavioral health board (Board) and its funded provider network to ensure that people experiencing homelessness can access outpatient mental health and substance use disorder treatment across a range of care levels. CoC-funded housing providers also contract with community behavioral health providers onsite and home-based behavioral health services. Available mental health services range from routine outpatient care to high-intensity Assertive Community Treatment (ACT). Coleman Health Services operates Stark County's fidelity-based ACT team, which provides multidisciplinary treatment, intensive care coordination, outreach, and support for people with serious mental illness. Other available services include assessment, case management, individual and group counseling, psychiatric care, medication management, psychosocial interventions, and same-day access at several provider locations. The substance use treatment network offers all ASAM levels of care, including general outpatient treatment, medication-assisted treatment, detoxification, and residential treatment. Providers coordinate referrals so individuals can enter the level of care appropriate to their clinical needs and transition between levels as those needs change. The Board leads the county's Zero Suicide Initiative. All Board-funded providers participate in the initiative and use the Columbia Suicide Severity Rating Scale to identify risk and support appropriate intervention. The county also operates a crisis hotline, adult and youth mobile crisis services, and a Crisis Stabilization Unit that provides crisis intervention, case management, medication management, counseling, 24-hour supervision, and community reintegration planning. In September 2026, Stark County opened a Behavioral Health Urgent Care Center that includes a 23-hour Crisis Receiving Unit and accepts walk-ins and first-responder drop-offs. Recovery supports include recovery housing, mental health residential facilities, employment assistance, drop-in centers, classes, and support groups. The Board contracts with recovery-housing operators to provide temporary financial assistance for Stark County residents with little or no income. CoC also coordinates with the PATH program, which provides street outreach, screening, case management, behavioral health referrals, and housing support for people experiencing homelessness. Together, partnerships provide multiple entry points to treatment and care continuity.

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

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

(limit 2,500 characters)

The CoC partners with the local health board (Board), and housing providers to connect people experiencing homelessness with peer support and recovery navigation. The Board funds Peer Recovery Supporters who provide outreach, engagement, and ongoing recovery support in emergency departments, hospital systems, specialized court dockets, residential treatment facilities, and community-based access points. Peer staff collaborate with medical and behavioral health professionals to facilitate warm handoffs, connect individuals to appropriate treatment and recovery resources, and reduce gaps in care. The Board also funds peer navigators who assist individuals before and during the assessment and enrollment process. Navigators help people overcome barriers that may have previously prevented them from accessing or remaining engaged in services. They complete a Social Determinants of Health assessment with each participant to identify and prioritize individualized needs and connect them with appropriate community resources. In addition, the Board supports two peer-run organizations that offer recovery-focused classes and support groups, including specialized loss and grief support. Peer support is also incorporated directly into the CoC's homeless response system. The countywide street outreach team includes substance use disorder peer expertise who engages individuals experiencing unsheltered homelessness and helps connect them to treatment, recovery services, housing, and other supports. CoC housing providers also involve individuals who have successfully exited subsidized housing programs after experiencing similar challenges. These individuals use their lived experience to encourage and support newly enrolled participants, help them navigate services, and demonstrate that housing stability and recovery are achievable.

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

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

(limit 2,500 characters)

The CoC identifies individuals who may be experiencing Serious Mental Illness through coordinated entry, Homeless Navigation, emergency shelters, street outreach, PATH outreach, and participating housing programs. Staff use standardized screening, direct observation, participant self-report, and available service history to identify behavioral health needs and barriers to housing stability. When significant needs are identified, staff facilitate referrals and warm handoffs to qualified behavioral health providers for clinical assessment, diagnosis, and treatment. The CoC partners with the local behavioral health board and its funded provider network to connect individuals with an appropriate level of care. This includes case management, counseling, psychiatric services, medication management, crisis intervention, residential services, and intensive community-based treatment. Coleman Health Services operates Stark County's Assertive Community Treatment team, which meets ACT fidelity standards and is funded by the behavioral health board. The multidisciplinary team provides intensive care coordination, assertive outreach, treatment, medication support, and other community-based services for individuals with the most serious mental illnesses. Its purpose is to improve safety, stability, daily functioning, and continued engagement in treatment. The CoC also partners with the PATH program, which conducts outreach to people with Serious Mental Illness who are experiencing homelessness, including individuals living in places not meant for human habitation. PATH staff provide screening, case management, basic-needs assistance, and connections to mental health and substance use treatment, housing, and other community supports. CoC providers coordinate with these behavioral health partners to help participants remain engaged in treatment and maintain stable housing.

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

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

(limit 500 characters)

The CoC partners with the local behavioral health board (StarkMHAR) and Coleman Health Services to connect participants with court-related behavioral health services. StarkMHAR supports the HOPE mental health track, Recovery Court, and POLARIS mental health docket. It also funds the countywide AOT monitor through Coleman Crisis. The CoC coordinates referrals to these programs and to crisis providers that assist individuals needing evaluation for inpatient civil commitment.

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

(limit 2,500 characters)

The CoC funded provider staff coordinate with the local behavioral health board (StarkMHAR), Coleman Health Services, specialty court staff, and other behavioral health providers to support participants whose mental health or substance use disorders affect their housing stability. Through coordinated entry, Homeless Navigation, street outreach, shelters, and housing programs, CoC staff identify participants who are involved with Recovery Court, the POLARIS mental health docket, the HOPE mental health track, Assisted Outpatient Treatment (AOT), or inpatient civil commitment processes. With the participant's consent and consistent with applicable privacy requirements, CoC staff coordinate with court personnel, the countywide AOT monitor, treatment providers, case managers, and housing providers. Coordination may include case conferencing, referrals, warm handoffs, discharge planning, and information sharing needed to align housing and behavioral health services. When a participant is leaving an inpatient setting, partners work to prevent discharge to homelessness by connecting the individual with shelter or housing, treatment, medication management, benefits, transportation, and other community supports. Court orders associated with specialty court participation, AOT, or civil commitment may provide a structured framework for treatment engagement, medication management, court monitoring, and follow-up. The CoC and its housing providers reinforce these plans by helping participants attend appointments, understand program requirements, address barriers, and remain connected to their treatment teams. Housing assistance is coordinated with, but is not used to duplicate, court-ordered services. This collaboration supports housing stability by combining safe housing with the level of behavioral health care and accountability appropriate to each participant. As participants stabilize, the partners focus on strengthening independent living skills, increasing income and access to benefits, maintaining treatment connections, reducing crisis-system and justice-system involvement, and transitioning to less intensive services when appropriate.

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

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

(limit 500 characters)

The CoC partners with the local behavioral health board and its crisis provider network, which operates the local 988/crisis hotline, adult mobile crisis services, youth Mobile Response and Stabilization Services, and crisis stabilization services. The system also includes a Behavioral Health Urgent Care Center and Crisis Receiving Unit offering walk-in and first-responder access, short-term observation, stabilization, medication management, counseling, and peer support.

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

Identify the number of CoC Program-funded units that require program participant engagement in substance abuse treatment services as a condition of continued participation in the program in accordance with 24 CFR 578.75.

0

1C-1g.

Treatment and Recovery Services—24/7 Access to Detox, Residential, or Inpatient Treatment.

Is there 24/7 access to detox, residential, and inpatient behavioral health treatment within the geographic area of your CoC?

No

1C-1h. Treatment and Recovery Services—Formal Partnership with Behavioral and Mental Health Facilities.

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

(limit 500 characters)

CoC has a formal partnership with ICAN Housing, Stark County's SAMHSA PATH provider. ICAN participates in the CoC and provides street outreach, screening, case management, and connections to mental health and substance use treatment for people with serious mental illness who are experiencing homelessness, including those living in places not meant for human habitation. PATH staff also help participants access housing, benefits, physical healthcare, and other community supports.

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

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

(limit 500 characters)

The CoC does not currently have a CoC Program-funded project that operates sober housing under 24 CFR 578.93(b)(5). However, CoC-funded providers can refer participants to sober living and recovery housing beds available through community partners when requested and appropriate to the participant's needs and preferences.

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

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

(limit 2,500 characters)

CoC coordinates with the local behavioral health board, PATH program, Coleman Health Services, peer recovery providers, the local crisis system, specialty courts, Assisted Outpatient Treatment, hospitals, and recovery housing providers through Coordinated Entry and Homeless Navigation. These partnerships help identify people who are homeless or at risk of homelessness and connect them with appropriate housing and behavioral health services. With participant consent and consistent with privacy requirements, partners make direct referrals, facilitate warm hand-offs, participate in case conferencing, and coordinate discharge and transition planning. Rather than providing only contact information, referring staff help connect the participant directly with the receiving housing or service provider, share necessary documentation, schedule appointments, and address barriers such as identification, transportation, benefits, medication access, and communication. Street outreach and PATH teams engage people living in unsheltered locations and connect them to Coordinated Entry, shelter, housing, mental health and substance use treatment, and other community resources. Crisis providers, hospitals, residential treatment programs, courts, and the AOT monitor can coordinate with Homeless Navigation and housing providers when an individual is preparing to leave an institutional or treatment setting. The goal is to identify a safe housing option before discharge and prevent release to homelessness whenever possible. Peer recovery supporters and navigators help participants remain engaged throughout the transition, understand available resources, and follow through with housing and treatment referrals. For individuals with Serious Mental Illness, coordination with Coleman's Assertive Community Treatment team and other behavioral health providers combines housing assistance with intensive care coordination, medication management, treatment, and community-based support. When requested and appropriate, participants may also be referred to available sober living or recovery housing beds. After placement, housing and service providers continue coordinating to address emerging needs, reduce returns to crisis systems or homelessness, and support long-term housing stability and movement toward independence.

1C-2. Supportive Services Investment.

	Number
1. Enter your CoC's FY 2026 Annual Renewal Demand (ARD).	\$4,404,480
2. Of projects your CoC proposed to be funded in the FY 2026 CoC Program Competition, enter the total amount of funding for the supportive services budget line items.	\$2,116,669
3. Percent of your CoC's FY 2026 ARD (from element 1 above) that is supportive services funding (from element 2 above).	48%
4. Enter the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services for the projects included in your CoC's FY 2026 ARD.	\$614,804

5. Percent of your CoC's FY 2026 ARD (from element 1 above) that is the supportive services funding in proposed projects (from element 2 above) plus the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services (from element 4 above).

62%

1C-3.	Participation Requirements for Supportive Services.	
	You must upload the Language from Project Supportive Service Agreements attachment to the 4A. Attachments Screen.	
	What percent of your housing projects (TH, PH-PSH, PH-RRH, and Joint projects) require program participants to take part in supportive services (e.g. case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h)?	100.00%

1C-4. Consulting with ESG Recipients.

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

(limit 2,500 characters)

The CoC's Collaborative Applicant, Stark Housing Network, is under contract with the City of Canton, the only ESG recipient within the CoC's geographic area. This relationship allows the CoC to work directly with the City to establish ESG priorities that align with the community's homeless response system. In collaboration with the City, Stark Housing Network prepares the ESG application guidance, application, and scoring materials. These documents align ESG investments with CoC priorities, identified service gaps, desired system outcomes, and available CoC Program resources. Applications are reviewed through the CoC's Recipient Approval and Evaluation Committee, which develops funding recommendations for consideration and approval by the CoC Board. The City of Canton's Community Development Director serves on the CoC Board, and two additional City staffs member participates on the committee that develops funding recommendations. This Board and committee involvement, together with the City's contract with Stark Housing Network to administer ESG funding, supports close collaboration throughout the planning, application, allocation, contracting, and monitoring processes. This structure allows the CoC to directly influence how ESG funding addresses changing community needs. For example, the CoC has recently prioritized street outreach to increase staff capacity to effectively cover the CoC's entire geographic area. The CoC and City also consider how ESG investments can complement potential CoC Program funding, including resources available through the FY 2026 CoC Notice of Funding Opportunity. This coordination helps address service gaps, avoid duplication, and balance investments among street outreach, emergency shelter, homelessness prevention, and rapid rehousing.

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

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

(limit 2,500 characters)

All publicly and privately funded emergency shelters (including our largest faith-based shelter) in the community coordinate access to services through the CoC's Homeless Navigation coordinated entry system. Homeless Navigation staff screen individuals and families, identify immediate needs and housing barriers, facilitate shelter referrals, and provide warm handoffs to shelter providers. Shelter staff also connect residents with Homeless Navigation for housing screening and referrals to available CoC-funded and other community housing resources. The community's two domestic violence shelter providers enter participant information into comparable databases to protect confidentiality while supporting required data collection. One of these providers also offers CoC funded housing resources directly. Homeless Navigation facilitates warm handoffs to domestic violence shelters so survivors can access confidential, trauma-informed shelter and housing services without compromising their safety or personally identifying information. Shelter providers participate in weekly by-names meetings with Homeless Navigation, housing providers, outreach teams, and other community partners. During these meetings, partners review the needs of individuals and families currently in shelter, identify appropriate housing opportunities, coordinate documentation and referrals, address barriers, and assign follow-up responsibilities. This regular coordination helps ensure that shelter stays serve as a pathway to the most appropriate housing option including short- or medium-term assistance or permanent housing (with or without a subsidy). Through the Homeless Navigation coordinated entry system, case conferencing, direct referrals, and ongoing communication, the CoC connects sheltered households with CoC-funded permanent supportive housing, rapid rehousing, transitional housing, and supportive services based on eligibility, vulnerability, and individual needs. Partners also coordinate connections to mainstream benefits, behavioral healthcare, employment services, and other resources that support long-term housing stability.

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

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

(limit 2,500 characters)

The CoC, through its Collaborative Applicant, Stark Housing Network, Inc. (SHNI), shares and will expand its sharing of PIT, HIC, HMIS, and System Performance data with Canton, Massillon, Alliance, Stark County, and the Ohio Department of Development. The mayors of Alliance and Massillon serve on the SHNI Board, while Canton's Community Development Director and Chief of Police serve on the CoC Board. These relationships provide regular opportunities to review findings with local government partners. SHNI will use its HMIS extracts, annual PIT and HIC results, and System Performance reports to prepare aggregate summaries for board meetings, government planning meetings, and presentations. The Systems Performance Committee and HMIS partners will review data quality and help interpret trends before findings are shared. SHNI will discuss identified gaps and proposed responses with government partners, then use those discussions to inform Consolidated Plans, Annual Action Plans, ESG and HCRP investments, and seasonal shelter planning. All sharing will follow applicable law and the CoC System Privacy Notice. The notice permits de-identified information for research and statistical purposes and disclosure for government reporting obligations. Other uses or disclosures of protected personal information must fall within the notice's specified purposes or have the participant's written authorization, which may be revoked.

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

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

(limit 2,500 characters)

CoC uses HMIS alongside behavioral health, health care, human services, outreach, and corrections data to strengthen cross-system coordination, identify emerging needs, and improve connections to housing and supportive services for people experiencing homelessness. COC HMIS participates in the Ohio Human Services Data Warehouse, supporting a broader understanding of homelessness and its intersection with health and human services systems. Locally, Coordinated Entry (CE) and HMIS are situated within the county mental health board in the department responsible for processing behavioral health claims and administering electronic health record data. CE and HMIS also collaborate with the board's clinical department regarding behavioral health data. This organizational structure enhances the CoC's capacity to examine trends across systems, better understand service utilization and behavioral health needs, and use findings to inform planning and service coordination. CE and HMIS also work closely with PATH providers to review outreach data and participate in PATH project governance meetings. Collaboration strengthens understanding of outreach activity and engagement with individuals experiencing unsheltered homelessness and serious mental illness. Creates a mechanism for data and operational trends to inform program oversight, improve coordination among street outreach, behavioral health, Coordinated Entry, and housing resources, and identify opportunities to strengthen access to services. CoC further incorporates corrections-system information through CE's partnership with the Stark County Jail (county's only jail; no prisons) that facilitates access to CE for individuals involved with the corrections system-provides real-time information that supports monitoring of trends, identification of housing and service needs, and connections to the homeless response system. Collectively, these partnerships extend the CoC's use of data beyond HMIS alone. By routinely incorporating information and expertise from human services, behavioral health, electronic health records, PATH outreach, and corrections systems, COC is better positioned to identify cross-system trends, recognize service gaps, inform resource allocation, and strengthen coordinated responses.

1C-6. Employment and Workforce Development Partnership.

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

(limit 2,500 characters)

CoC has established partnership with the local Workforce Development Board. Its Executive Director serves on the CoC Board and Executive Committee, as well as the Board of Stark Housing Network, the CoC's Collaborative Applicant. This cross-system leadership supports coordination between the homeless response and workforce development systems. As needed, the Workforce Development Board (or Ohio Means Jobs) provides comprehensive training to newly hired homeless service staff and refresher training to existing provider staff. Training covers available workforce resources, eligibility requirements, referral processes, registered apprenticeship programs, and connections to community and technical colleges. It also includes connections to the State Vocational Rehabilitation provider, which is located within the same workforce center, and strategies for effectively connecting participants with employment, education, training, and disability-related employment services. Employment services are also integrated within the CoC's funded provider network. One of the CoC's six currently funded agencies operates a workforce development and training program tailored to the needs of the people it serves. This agency has an MOU with another CoC-funded provider to extend the same workforce support to that provider's participants. Another CoC-funded agency has direct relationships with manufacturing and distribution companies that provide employment and workforce development opportunities. The agency combines these opportunities with life-skills development, transportation assistance, employment preparation, and other individualized supports needed to obtain and maintain employment. The Ohio Means Jobs partnership also supports the CoC's Youth Homelessness System Improvement work. The CoC is strengthening connections among homeless-service providers, workforce programs, and youth-serving organizations to help youth ages 18–24 access employment and education resources while being connected directly to homelessness prevention assistance. This approach addresses immediate housing instability while supporting long-term economic independence. The Workforce Development Board's involvement in CoC governance and provider training helps strengthen referral pathways, identify service gaps, and incorporate employment and income outcomes into the CoC's broader efforts to promote housing stability and reduce returns to homelessness.

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

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

(limit 2,500 characters)

ICAN Housing is Stark County's only street outreach provider, serving as the central operational partner for connecting people experiencing unsheltered homelessness with housing and community resources. Coordination occurs countywide, with a concentrated focus on Canton, the county's largest city and the community with the highest number of people experiencing homelessness. In Canton, ICAN Housing coordinates directly with the Canton Police Department's Homeless Liaison, the Police Chief, and Canton Health Department personnel. This partnership establishes clear responsibilities, supports efficient deployment of resources, and aligns outreach with public safety and public health operations. Partners share information about individuals living outdoors and newly identified encampments to coordinate an appropriate response.

ICAN's outreach team serves as the intended first point of contact, responding to referrals from the police liaison and other partners. Staff address immediate needs, explain available resources, and maintain engagement to connect individuals with housing, mental health and substance use treatment, employment, and other supports. When an encampment is scheduled for closure, outreach staff communicate that information, encourage individuals to relocate with their belongings, and work to maintain contact so service connections can continue. Police personnel manage public safety responsibilities, while Health Department personnel conduct site cleanup after individuals have departed, including removal of remaining items. Health Department staff do not engage directly with encampment occupants. The police liaison brings specialized training in de-escalation, critical time intervention, and related practices that support a coordinated response. This division of responsibilities allows each partner to operate within its expertise, reduces the need for direct enforcement interactions, and supports orderly site resolution while maintaining access to services. Ongoing communication helps partners respond consistently, coordinate resources, and connect individuals to longer-term housing and stability.

1C-8. Family or Support Network Reunification.

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

(limit 2,500 characters)

Reconnecting someone with a safe family member or friend is the first problem-solving step when the CoC's Homeless Navigation system screens a person for shelter. Staff ask whether a trusted person can offer a safe place to stay or help resolve the housing crisis before making a shelter referral. This conversation continues during outreach, shelter stays, and participation in CoC Program-funded housing as circumstances change. Reconnection is guided by the participant's choice and an assessment of safety. CoC recipients use case management to help participants identify supportive people, make contact with their consent, and plan a safe, sustainable transition. When support is available in another geographic area, staff can coordinate with the receiving household and local service providers. Assistance may include travel costs when funding is available and the expense is eligible. The CoC has engaged outside consultants to train staff in these housing problem-solving conversations. During the colder months, a dedicated outreach and family diversion effort helps families avoid or exit homelessness by reconnecting them with relatives or friends who can provide a safe place to stay. Diversion funding can address immediate barriers through transportation assistance, food, and other practical supports needed to make the arrangement possible. For families involved with the child welfare system, the CoC has a MOU with the public housing authority and child protective services which enables Homeless Navigation staff can help connect eligible households with the Public Housing Authority's Family Unification Program (FUP). FUP vouchers can support families when inadequate housing is a primary factor in a child's placement outside the home or delays the child's return

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

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

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

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

(limit 2,500 characters)

The CoC cooperates with local efforts to clear encampments, reduce public drug use, address people who may pose a danger to themselves or others, and respond to SORNA requirements. Outreach staff coordinate with first responders and public agencies, make service referrals, and respect each agency's authority to carry out its public safety responsibilities. A letter signed by Canton's Chief of Police, who serves on the CoC Board, documents this partnership. For encampments, ICAN Housing, the county's only street outreach provider, coordinates with Canton's police homeless liaison and Health Department. ICAN makes initial contact, assesses needs, and offers connections to shelter, housing, health care, and treatment. When local authorities schedule a closure, outreach staff inform occupants and help them access services. Police direct public safety operations, and Health Department personnel coordinate cleanup. Outreach staff do not obstruct or delay those activities. To help first responders address public drug use and behavioral health crises, the county supports CIT training for officers and other crisis responders. When someone may pose a danger to themselves or others, first responders and clinical partners determine the appropriate emergency or behavioral health response; CoC partners assist with service connections and follow-up. The CoC also works with the Sheriff's Office to clarify referral procedures for people subject to SORNA requirements and help staff connect them with available services while protecting confidential HMIS information. These defined roles allow first responders to act promptly on safety concerns while CoC partners provide the housing and service connections within their expertise.

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

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

(limit 2,500 characters)

Canton, the largest city in the CoC's geographic area, and Massillon, the second largest, have adopted campsite removal procedures that include notice to a local homeless-services agency. This allows outreach staff to connect occupants with services before a closure. In Canton, ICAN Housing, the county's only street outreach provider, coordinates with the police homeless liaison and Health Department. ICAN contacts occupants, assesses urgent needs, and offers connections to shelter, housing, treatment, and other services. Police manage safety, and Health Department personnel handle cleanup. ICAN estimates that Stark County had four small, entrenched encampments at the beginning of the evaluation period and currently knows of none meeting its local definition. Locations now generally involve one to four people using them temporarily, with fewer belongings and camping materials than were found at the more established encampments. ICAN attributes this change in part to earlier community reports, faster outreach, and stronger coordination with local authorities. The principal barrier is providing timely outreach across the entire county with one provider, particularly in smaller cities and townships beyond Canton and Massillon. To address this, the CoC prioritized street outreach in its most recent ESG funding process and included street outreach projects on its FY2026 CoC Priority Listing. ICAN plans to add an outreach worker, assign staff to geographic areas, and build relationships with community leaders and police departments so reports of people camping in public reach outreach staff sooner. ICAN will continue engagement after a site closes and has funding to provide limited housing assistance that can help people with application fees, deposits, and rent.

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

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

(limit 2,500 characters)

For local tracking, ICAN Housing, the CoC's sole street outreach provider, defines an encampment as a group of individuals established in one location over an extended period, with significant accumulated belongings and established social dynamics. At the beginning of the last two years, Stark County had an estimated four small encampments across multiple communities. Currently, there are no known encampments meeting this local definition. This reduction reflects stronger coordination among the CoC, street outreach, municipal leadership, law enforcement, and public health partners. Earlier reporting and coordinated responses allow partners to engage individuals, address sites, and connect people with housing and services before encampments become more established. The absence of encampments meeting this definition does not mean unsheltered homelessness has ended. Outreach teams continue to identify and engage individuals and small groups in temporary locations throughout the county.

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

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

(limit 2,500 characters)

Local law enforcement can respond to illicit drug use in public, while the CoC's outreach and crisis response practices provide routes to treatment and housing. ICAN Housing, the CoC's street outreach partner, coordinates with law enforcement during encampment responses and connects people to Homeless Navigation, shelter, housing, and substance use treatment. CoC-funded agencies carry Narcan during outreach and other participant contacts, using those encounters to address immediate safety needs and offer treatment and recovery referrals. Canton's police chief and the local behavioral health board's clinical director serve on the CoC Board, supporting coordination across these systems. A 24-hour mobile response and the Canton and Stark County Quick Response Teams provide additional ways to reach people during a crisis or after an overdose. ICAN's limited capacity to cover the full county and an individual's decision to decline help can delay a connection to care. Ohio's emergency hospitalization standard also requires more than public drug use alone; it applies when the statutory criteria for mental illness and substantial risk of physical harm are met. The CoC will address these limits by prioritizing street outreach funding, expanding coverage, and coordinating repeated contact among ICAN, Homeless Navigation, law enforcement, and treatment providers. Staff will call 911 for an overdose, medical emergency, or immediate threat; request mobile behavioral health response for an appropriate crisis; and continue offering Narcan, treatment referrals, recovery supports, shelter, and housing assistance when a person does not initially accept help. In the CoC's FFY2025 System Performance Measures, 71 people exited street outreach during the prior two-year period and 13 returned to homelessness; 58, or 81.7%, had no recorded return. This measures housing stability following outreach rather than a reduction in public drug use but supports continued investment in outreach connections to housing and services including treatment and recovery.

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

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

(limit 2,500 characters)

Stark County continues to face challenges related to substance use and overdose, although overdose deaths have declined substantially in recent years compared with peak years of the opioid epidemic. Opioids and stimulants remain the primary drivers of overdose risk, and community agencies continue to monitor both fatal and non-fatal overdoses. Overdose deaths have decreased over the past several years while remaining a major public health concern. The county maintains public dashboards tracking fatal and non-fatal overdose incidents and conducts annual Overdose Fatality Reviews to identify trends and prevention strategies. Fentanyl and other synthetic opioids remain central contributors to overdose deaths. Usage of stimulants such as methamphetamines have increased. Although comprehensive statistics on public drug use are limited, local agencies continue to address drug use occurring in public locations such as parks, parking lots, public restrooms, vacant properties, and areas within urban centers. Public overdoses, discarded drug paraphernalia, and visible substance use are addressed by first responders and partnering agencies. Stark County has expanded prevention, treatment, recovery, and life-savings efforts through initiatives such as Save Stark, Project DAWN naloxone distribution, peer support services, and collaboration among the local behavioral health board, local hospitals, law enforcement, and the Stark County Health Department. The county also maintains overdose dashboards and annual review processes to guide policy and program decisions.

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

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

(limit 2,500 characters)

Our CoC's response to individuals who may be a danger to themselves or others is supported by Ohio's emergency psychiatric hospitalization and civil commitment laws. Qualified professionals can seek an evaluation or court-ordered treatment when a person meets the required mental illness and risk criteria. In Stark County, assisted outpatient treatment through the local behavioral health board, Coleman Crisis, and the Probate Court provides another option for eligible individuals. Our CoC works with law enforcement and behavioral health partners to connect people encountered through street outreach and encampment responses to appropriate crisis services. Canton's police chief and the clinical director of the local behavioral health board both serve on the CoC Board. Their participation supports direct coordination between the homeless response system, law enforcement, and behavioral health services. A 2026 Ohio report lists 738 Crisis Intervention Team (CIT)-trained officers on record across 24 of Stark County's 26 law enforcement agencies, including 181 Canton Police officers, 35 Massillon Police officers, 28 Alliance Police officers, and 202 Stark County Sheriff's officers. These cumulative figures (2006-2025) show the trained response capacity available to CoC partners. Homelessness, living outdoors, refusing services, or substance use alone does not meet the legal standard for involuntary psychiatric intervention. Mental illness and the applicable risk must be established. Limited psychiatric beds and treatment capacity can also delay care. Our CoC will strengthen referrals among outreach teams, law enforcement, crisis providers, and the Probate Court; train staff to document observed behavior and functional impairment; and use multidisciplinary case conferences for people experiencing repeated crises. We will coordinate housing and treatment plans following crisis care and continue outreach, voluntary treatment connections, and housing assistance when involuntary intervention is not legally available. By improving documentation and coordination while using emergency hospitalization, civil commitment, assisted outpatient treatment, and CIT-trained law enforcement, we can help eligible individuals reach care before a crisis escalates.

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

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

(limit 2,500 characters)

In Stark County, Ohio's sex offender registration law and the Sheriff's Office's registration and notification practices support information sharing in accordance with SORNA. People required to register must report their residence or, if they have no fixed address, describe where they intend to stay. The Sheriff's Office requires Tier 1 registrants to verify annually, Tier 2 registrants every 180 days, and Tier 3 registrants every 90 days. Registrants must also report address changes. These recurring checks help keep location information current across Canton, Alliance, Massillon, and surrounding Stark County communities. Frequent location changes among unsheltered individuals and privacy limits on Homeless Management Information System (HMIS) records can hinder information sharing. A shelter entry or outreach contact does not necessarily establish someone's current residence. HUD permits disclosure of participant information for law enforcement purposes only under specific conditions. Our CoC will coordinate with the Sheriff's Office to establish clear procedures for Homeless Navigation, outreach, shelter, and housing staff to direct registrants to report their location and address changes promptly. We will also establish a process for referring potential registration issues and responding to lawful, specific information requests. The CoC will offer training twice a year so providers understand registration requirements, their role in supporting compliance, and the limits on sharing HMIS information. Written guidance, referral procedures, and training materials will be available on the CoC website for staff to consult between sessions. We will review our HMIS privacy notice and disclosure procedures with counsel and securely document any information shared. These steps will support timely, accurate coordination while protecting participant information.

1C-11. Outreach Strategy.

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

(limit 2,500 characters)

The CoC uses year-round street outreach, Homeless Navigation, coordinated entry, shelters, and community referrals to reach individuals and families in Canton, Massillon, Alliance, and throughout Stark County. ICAN Housing, the county's sole street outreach provider, visits travel centers, parking lots, riverbanks, encampments, and other places not meant for habitation. Workers respond to partner and public safety referrals, make repeated contact with people who have not engaged with services, meet immediate needs, and offer connections to Homeless Navigation. This reaches people who may never enter a shelter or seek help on their own. The strategy includes single adults, families with children, unaccompanied youth and young adults, veterans, older adults, people with disabilities or prolonged homelessness, and people with mental health or substance use needs. Outreach staff assess each household's needs and preferences and connect them to appropriate shelter, housing, health care, behavioral health treatment, recovery resources, employment services, and other supports. When safe and voluntary, they explore reconnection with family or trusted supports and assistance to stabilize that arrangement. People fleeing domestic violence, sexual assault, or stalking can be referred confidentially to specialized survivor services. The CoC identified outreach staffing as a countywide gap and prioritized street outreach in its FY2026 CoC applications and recent Emergency Solutions Grant funding. ESG resources have enabled ICAN to expand services; an additional outreach position will extend coverage and follow-up. ICAN also has annual funds for application fees, security deposits, and rent to help remove immediate housing barriers. During winter, ICAN increases outreach and adjusts schedules to connect people with seasonal overnight accommodations and ongoing services. The CoC coordinates with locally funded and faith-based partners operating overnight centers in Canton, Massillon, and Alliance; on-site engagement reaches people who may otherwise remain disconnected after the centers close. Alliance for Children and Families provides winter diversion for unsheltered families on the shelter waiting list, including safe reconnection and stabilization assistance. Across entry points, the CoC maintains contact and makes referrals that move people from immediate safety needs toward an appropriate housing or service options.

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

		Written Agreement
1.	Child Care (including Child Care and Development Fund)	Yes
2.	Early Childhood Providers	Yes
3.	Early Head Start	Yes
4.	Home Visiting Program (including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	Yes
5.	Head Start	Yes
6.	Healthy Start	No
7.	Public Pre-K	Yes

8.	Tribal Home Visiting Program	No
	Other (limit 150 characters)	
9.		

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

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

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

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

(limit 2,500 characters)

The CoC's Providers' Education Related Policies and Duties require every CoC project serving families with children or unaccompanied youth to designate an Education Coordinator. The Education Coordinator is responsible for ensuring that children and youth are enrolled in school and connected to appropriate education-related programs, including Head Start, services for infants and toddlers with disabilities under Part C of IDEA, and services authorized under the McKinney-Vento Homeless Assistance Act. Coordinated Entry, shelter, and housing staff are expected to understand the McKinney-Vento definition of homelessness and the educational services available to eligible children and youth. Brochures and posters explaining educational rights are provided in housing projects and shelters, posted in communal areas, and made available through the CoC website. Coordinated Entry staff explain these rights, provide contact information for school liaisons, and consider children's educational needs, including proximity to their current schools, when referring families to shelters and permanent housing. The CoC distributes the SEA and LEA McKinney-Vento Education Liaison list to CoC- and ESG-funded providers. Education Coordinators work with families and school liaisons to address enrollment, attendance, transportation, special education, English-language learning, extracurricular activities, and other individualized educational needs. This process is intended to minimize educational disruption and ensure that students experiencing homelessness have equal access to a free and appropriate public education.

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

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

(limit 2,500 characters)

The CoC coordinates with foster care and child welfare partners to prevent youth and families transitioning from public systems of care from being discharged into homelessness. Coordination focuses on identifying housing needs before discharge, making timely referrals, and connecting eligible households to housing assistance and supportive services. The CoC Coordinated Entry Lead and the only public housing authority (PHA) in the CoC's geographic areas have an executed Memorandum of Understanding that establishes a formal referral process for the Family Unification Program (FUP). Through this partnership, eligible families whose lack of adequate housing is contributing to the separation of children from their families—or delaying family reunification—may be referred for FUP housing assistance. Coordinated Entry facilitates referrals, assists with connections to housing navigation and community resources, and coordinates with PHA throughout the referral process. PHA determines program eligibility and administers the applicable housing assistance. Referrals are initiated as early as possible to allow time to address eligibility requirements, documentation, housing barriers, and supportive-service needs before a youth or family exits care. When voucher assistance is not immediately available, Coordinated Entry connects the household to other appropriate prevention, shelter, housing, and community-based resources. This formal coordination creates a direct pathway between the child welfare, homeless-response, and public-housing systems; reduces gaps during transitions from care; supports family preservation and reunification; and helps youth and families obtain and maintain stable housing.

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

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

(limit 2,500 characters)

The CoC currently has no providers receiving federal Runaway and Homeless Youth (RHY) funding within its geographic area, including RHY-funded Street Outreach Programs, Basic Center Programs, Transitional Living Programs, or Maternity Group Homes. Therefore, coordination with locally funded RHY providers is not currently applicable. The CoC coordinates with existing youth-serving organizations to identify and engage youth experiencing homelessness or housing instability. Partners include the local American Job Center/One-Stop Career Center's Comprehensive Case Management and Employment Program (CCMEP), the Legacy Project, NAMI Stark County, the Stark County Educational Service Center, school homeless liaisons, and local school districts. These relationships help connect youth to available housing, education, employment, and supportive-service resources. Through the Youth Homelessness System Improvement (YHSI) Grant, the CoC is working to strengthen local resources and develop a more coordinated response to youth homelessness, with particular attention to young adults ages 18–24. Through its Youth Committee and collaboration with youth-serving partners, the CoC is identifying service gaps, improving access and referral pathways, and developing opportunities to expand homelessness prevention and housing stabilization supports. This work emphasizes coordination across agencies so young people can access assistance without repeatedly navigating separate systems or retelling traumatic experiences. Although these efforts do not represent RHY-funded programming, they are building the partnerships and service capacity needed to address the current gap, strengthen the community's response to youth homelessness, and secure additional youth specific funding.

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

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

(limit 500 characters)

ICAN Housing's GITA (Gaining Independence Through Transitional Assistance) and Domestic Violence Project, Inc.'s Hope Housing propose transitioning from RRH to TH. GITA will exclusively serve families with children experiencing homelessness. Hope Housing will serve adult survivors fleeing violence and their dependent children who lack safe alternative housing and resources. Both will combine housing assistance with individualized services to support transitions to permanent housing.

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

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

(limit 2,500 characters)

ICAN Housing's GITA and Domestic Violence Project, Inc.'s Hope Housing will combine housing assistance with individualized employment and income supports to help families build the financial capacity to pay rent and maintain permanent housing. GITA participants work with a Supportive Services Specialist to complete a needs assessment and develop an Individualized Service Plan identifying employment goals, barriers, action steps, providers, and target dates. Progress is reviewed at least twice monthly. ICAN's in-house Workforce Development program offers career coaching, job-readiness and soft-skills development, resume and interview assistance, job placement, and employment-retention support. Participants may access manufacturing credentials, technical training, and other upskilling opportunities through workforce and employer partnerships. Assistance with transportation, childcare, identification documents, uniforms, and employment-retention incentives helps parents obtain and maintain employment. Hope Housing participants will work with a Housing Coordinator to develop an individualized Housing Stability Plan addressing income, employment, safety, and housing goals. Partnerships with the local one-stop career center and Goodwill Industries of Greater Cleveland will connect survivors to vocational assessments, career exploration, job development and placement, workforce training, resume assistance, and interview preparation. Partners also provide coaching in skill building, goal setting, problem solving, and budgeting. DVPI will assist with job applications, interview reminders, transportation, and onsite childcare during case management meetings. Hope Housing's survivor-centered approach addresses employment barriers associated with economic abuse, interrupted work histories, trauma, and safety concerns. Participants unable to work because of disability, health conditions, or caregiving responsibilities will receive assistance applying for appropriate income supports. GITA also helps participants access SSI/SSDI and navigate changes in benefits as earnings increase. Together, these services support income growth, employment retention, and the ability to sustain rent after housing assistance ends.

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

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

(limit 2,500 characters)

ICAN Housing's GITA and Domestic Violence Project, Inc.'s Hope Housing will supplement CoC-funded housing and supportive services by connecting families to mainstream benefits and community-funded services that help meet basic needs and preserve household income for rent. GITA Supportive Services Specialists assess eligibility and assist families in applying for and maintaining Medicaid, Medicare, SSI/SSDI, SNAP, HEAP, PIPP, childcare assistance, and cash assistance, including TANF when eligible. Coordination with the Stark County Department of Job and Family Services connects families to public benefits, employment and training activities, childcare assistance, and related family supports. Verified work, service, or volunteer activities associated with SNAP or cash assistance may also count toward GITA's supportive-service participation requirements, reducing duplication and helping families maintain benefits while pursuing housing and employment goals. Hope Housing's Housing Coordinator will guide eligible participants who choose to receive benefits through enrollment in SNAP, SSI, Medicaid, and Medicare. These resources help survivors meet food, healthcare, and other basic needs while pursuing employment and housing stability. The local one-stop career center and Goodwill Industries of Greater Cleveland will supplement the project with job development, placement, vocational assessments, employment coaching, and budgeting support. CommQuest (behavioral health agency) will provide access to behavioral health and substance use treatment, addressing barriers that can interfere with employment and housing retention. GITA also connects families to food pantries, diaper banks, transportation assistance, workforce programs, and employment-retention supports. Specialists help households navigate the benefits cliff as income increases. Across both projects, coordination with mainstream and community resources extends the reach of CoC assistance, reduces household expenses, and supports sustained housing stability.

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

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

(limit 2,500 characters)

ICAN Housing's GITA and Domestic Violence Project, Inc.'s Hope Housing combine scattered-site transitional housing with services tailored to parents and children. In both projects, the provider leases directly from landlords, reducing a barrier to housing while staff help families address their other needs. GITA's Supportive Services Specialist develops and regularly updates an Individualized Service Plan with each household. Through the Early Childhood Resource Center and other partners, families are connected to childcare, SPARK early childhood programming, parenting support, and childcare assistance; staff also help address transportation barriers. Specialists help families obtain health coverage and connect pregnant participants and children to appropriate medical care, including prenatal care, primary care, and specialists as needed. Partnerships with school homeless liaisons and care teams support children's enrollment and educational needs, while adults can access education, technical training, and workforce development. In Hope Housing, each participant works with a Housing Coordinator on a Housing Stability Plan that combines housing assistance, safety planning, and family supports. DVPI offers on-site childcare during case management meetings when needed and connects families to childcare and parenting education. The Housing Coordinator helps families access health coverage, pregnancy-related and child healthcare as needed, and educational or vocational opportunities. Regular case management and reassessments in both projects allow housing and services to change with each family's needs and support a transition to permanent housing.

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

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

(limit 500 characters)

The CoC maintains an active partnership with the Department of Veterans Affairs, including the Community Referral and Resource Center (CRRC), as well as the Veterans Service Commission (VSC) and other local Veteran service providers. This partnership integrates immediate Veteran identification, referral, case coordination, and housing prioritization into the homelessness response system and ensures that Veterans are promptly connected to Veteran-specific services, housing resources, etc. The spe

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

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

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

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

(limit 500 characters)

The county's largest domestic violence provider serves on the CoC Board and the State Domestic Violence Coalition, bringing both local and statewide expertise to our work. As a CoC-funded rapid rehousing provider, it also offers peer training and support to agencies serving survivors of domestic violence and sexual assault.

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

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

(limit 500 characters)

The CoC partners with the Stark County Jail (only jail; no prisons) to identify people at risk of homelessness before release. Jail staff refer them to Homeless Navigation, which reviews referrals daily and coordinates discharge planning. The Special Populations System Navigator helps connect individuals with shelter, housing, benefits, and supportive services. After release, the Homeless Navigation Hotline screens for eligibility and helps address housing barriers.

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

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

(limit 500 characters)

Aultman Hospital, which is the largest hospital in the CoC's geographic area, has partnered with the CoC related efforts for 20 years, including CEO leadership in establishing HMIS and serving on the board of a CoC funded agency. For 8 years, Aultman's endowment has supported wraparound healthcare and prevention services, including medical, dental, vision, prenatal, maternal, immunization, midwife, and doula care, reducing reliance on emergency departments for non-emergency needs.

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

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

(limit 500 characters)

The CoC partners with Direction Home Akron Canton, which serves Stark County's older adults and people with disabilities. Direction Home has met with CoC-funded providers to share resources and referral options for older adults experiencing homelessness. Providers can connect eligible individuals to its Aging and Disability Resource Center for care assessments, in-home supports, and assisted living waiver options.

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

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

(limit 500 characters)

Six CoC projects prioritize chronic homelessness, including ICAN Housing's Stark Accessible Housing, formerly Cherry Grove. This PSH project dedicates 100% of its CoC-funded units to individuals experiencing chronic homelessness. A recently approved HUD amendment expanded the project from serving 10 individuals to serving 21 individuals by adding 11 Duncan Square units funded through HOME-ARP.

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

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

(limit 2,500 characters)

ICAN Housing's Stark Accessible Housing provides on-site and community-based behavioral healthcare through a formal partnership with Coleman Health Services. Coleman provides clinical case management, counseling, nursing services, and medication management. Staff meet residents in their apartments or the property's common space, reducing transportation barriers and bringing care directly to individuals with intensive service needs. The project primarily serves adults with severe and persistent mental illness. Each participant works with an ICAN Supportive Services Specialist to develop a personalized service plan reflecting individual needs, strengths, preferences, and goals. Specialists meet with participants at least monthly to review progress and update plans. Staff use motivational interviewing and stages-of-change approaches to encourage engagement while preserving participant choice in disability-related treatment. Safety planning is incorporated into service delivery, particularly for participants with behavioral health or substance use needs. When substance use concerns are identified, ICAN connects participants with TASC, CommQuest, or Arrow Passage Recovery for on-site and same-day access to peer support, case management, and recovery-focused services. Specialists also help schedule appointments, provide or coordinate transportation for off-site care, and follow up on referrals. Assistance obtaining and maintaining health insurance supports continuity of treatment. Stark Accessible Housing receives CoC and HOME-ARP funding. Its approved amendment adds Duncan Square to the project, increasing capacity from 10 to 21 individuals. ICAN has secured additional funding through local HOME ARP to develop the additional 11 units and partners to provide necessary supportive services at both properties, maintaining the same services for an increased number of individuals.

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

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

(limit 2,500 characters)

ICAN Housing's Stark Accessible Housing assesses participant needs at entry and throughout tenancy through individualized service planning, regular case management, and coordination with clinical providers. The project serves individuals with intensive needs, primarily adults with severe and persistent mental illness, including older adults and people with disabilities. Under ICAN's written Supportive Services Agreement, participants meet with a Supportive Services Specialist at least monthly to review their Individualized Services Plan, identify needs and preferences, discuss progress, and communicate changes in their circumstances. Specialists regularly review and update plans so services remain responsive to changing needs. In-home visits allow staff to assess household management, housekeeping, tenancy skills, and other daily living needs while providing practical assistance. Coleman Health Services' clinical case management, counseling, nursing, and medication management provide access to clinical support as behavioral health needs change. Specialists connect participants to primary care providers, medical specialists, and treatment providers as needed, assist with appointments and transportation, and follow up to support continued engagement. The project also assesses accommodation needs and arranges physical modifications to help residents remain safely housed when appropriate. When a participant's needs require a different care setting, the project's experience includes transitions beyond independent supportive housing. The application reports that one participant moved to a nursing home to better meet his needs. These ongoing assessments, clinical connections, and documented transitions demonstrate how the project identifies changing care needs and supports access to more appropriate services or housing.

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

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

(limit 2,500 characters)

ICAN Housing's Stark Accessible Housing addresses changing service needs through its written Supportive Services Agreement and ongoing Individualized Services Plan reviews. Participants meet with a Supportive Services Specialist at least monthly to review progress, identify needs and preferences, and update goals. This process provides a recurring opportunity to consider whether participants continue to need intensive PSH services or could pursue other permanent housing. The program application expressly identifies diminishing need for supportive services as a reason to consider departure from the intensive-service project and states that ICAN will offer housing search assistance to individuals leaving the program. The written service agreement includes applying for affordable housing among the activities that may be incorporated into a participant's individualized plan. ICAN supports greater independence through in-home assistance with budgeting, household management, and tenancy skills. Specialists help participants obtain and maintain SSI/SSDI and other benefits, access community resources, and maintain health insurance to support continuity of care at program exit. Workforce Development staff provide job-readiness, placement, and retention assistance when appropriate to participant capacity and help participants understand how employment may affect benefits. These supports help participants strengthen the financial and daily living skills needed to maintain housing with a different level of assistance. The transition plan helps participants prepare to rent and maintain housing without an ongoing subsidy whenever feasible, while recognizing that some will need continued rental assistance to remain stably housed. It also identifies other subsidized permanent housing as a transition option when needed. Readiness is considered in relation to each participant's circumstances, service needs, and housing goals through the individualized planning process.

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

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

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

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

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

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

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

1D-2a.	Web Posting of CoC-Approved Consolidated Application Before the CoC Program Competition Application Submission Deadline.	
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	Enter the date your CoC posted all parts of the CoC-approved Consolidated Application on the CoC's website or partner's website—which included: 1. the CoC Application, and 2. Project Priority Listings.	09/25/2026
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1D-2b.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on the Website.	
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	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/25/2026
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1D-2c.	Local Competition Selection Results for All Projects.	
	You must upload the Local Competition Selection Results attachment to the 4A. Attachments Screen.	

	Does your attachment include: 1. Project Names, 2. Project Scores, 3. Project Rank, 4. Project Status—Accepted, Rejected, Reduced Reallocated, Fully Reallocated, 5. Amount Requested from HUD, and 6. Reallocated Funds +/-.	Yes
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1D-2d.	Projects Rejected/Reduced—Notification Outside of e-snaps.	
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1.	Did your CoC reject or reduce any project application(s) submitted for funding during its local competition?	No
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1D-2e.	Projects Accepted—Notification Outside of e-snaps.	
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	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	08/04/2026
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1D-3.	Reallocation—Reviewing Performance of Existing Projects.	
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	Describe:
1.	your CoC's reallocation process to reallocate from lower performing projects to create new high performing projects, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed,
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year,
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

1) The CoC follows its board-approved Procedures for Inviting and Reviewing Applications for CoC Funding to identify lower-performing projects and reallocate funding to new projects with strong performance potential. The Collaborative Applicant and Recipient Approval and Evaluation Committee (RAEC) review project applications, Annual Performance Reports, monitoring findings, financial information, and progress toward HUD and local performance standards. Reallocation criteria include consistently failing to meet performance standards; repeated data, reporting, or compliance deficiencies; repeated underspending or grant mismanagement; unusually high costs; and opportunities to use funding more effectively. Changes in local needs or funding priorities are also considered. The Systems Performance Committee reviews data trends and system gaps to recommend funding priorities. Recipients considered for reallocation receive notice explaining the reasons and amount proposed, generally before the local competition begins. Available funding is advertised through the local competition, and RAEC evaluates renewal and new project applications using board-approved scoring criteria, including performance, organizational capacity, and alignment with CoC priorities. Applicants may request reconsideration within five working days of receiving scoring and recommendation notices. RAEC makes final recommendations for CoC Board approval. 2) Yes. During this year's local competition, the CoC identified two lower-performing projects for reallocation: one permanent supportive housing project and one rapid rehousing project. These projects were identified based on their performance, not because their services were determined to be less needed. 3) Yes. The CoC reallocated a total of \$1,014,681 from these two lower-performing projects during this year's local competition. This represents approximately 23% of the CoC's total Annual Renewal Demand of \$4,404,480. Reallocation directs resources toward new projects selected through the local competition to improve performance and strengthen the homelessness response system. 4) Not applicable. The CoC reallocated funding from lower-performing projects during this year's local competition.

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

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

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

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

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

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

(limit 2,500 characters)

1) Between the 2025 and 2026 unsheltered PIT Counts, the CoC strengthened volunteer engagement, accessibility, and data quality. Street teams' start time changed from 5:00 a.m. to 7:00 a.m., and volunteer participation increased, including record participation in Alliance. The CoC added a foster care experience survey question and partnered with the VA to connect Veterans identified during the count with the CRRC. Weekly review and technical assistance from ICF, HUD's Technical Assistance provider, supported PIT and HIC implementation, resolution of questions, and adherence to HUD requirements. Winter Storm Fern required adjustments for volunteer safety and service-site closures. Most street teams deployed Tuesday morning instead of Monday morning; one team conducted outreach Monday evening. Closures affected St. Joseph's in Massillon, St. John's Samaritan's Table, SARTA Cornerstone Bus Transit, and the Main Library. To mitigate coverage gaps, volunteers visited the library when it reopened Tuesday, covered Dueber Warming Center on two mornings, and conducted outreach at Massillon Warming Center. These adaptations supported coverage, although weather disruptions remain relevant when interpreting results. 2) Alliance's unsheltered count increased from 11 in 2025 to 31 in 2026, approximately 182%. Record volunteer participation expanded identification capacity, and the later start time may have improved engagement. The increase may therefore reflect improved coverage as well as population changes and should not be attributed solely to increased unsheltered homelessness. Respondents reporting domestic violence experience increased from 15 to 33. PIT data cannot establish the cause; changes may reflect the population, identification, disclosure, or a combination. The CoC will monitor this finding through future counts and other data sources. The count also identified fewer people age 55 and older experiencing homelessness. Weather-related closures and deployment changes may have affected who was reached, despite alternative outreach. PIT data alone cannot determine whether this decrease reflects a population change or differences in coverage. The CoC will use these findings to maintain expanded geographic coverage, improve outreach to older adults, and monitor domestic violence trends and unsheltered homelessness in Alliance. Year-to-year comparisons will consider both implementation improvements and weather disruptions.

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

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

(limit 2,500 characters)

Through coordinated community efforts, the size and duration of encampments in the CoC geographic area have decreased significantly during the evaluation period. Areas that previously contained large numbers of tents and individuals who had become entrenched are now more likely to consist of one to four individuals at a time. This progress is attributed in part to stronger coordination among community partners and faster response times when individuals experiencing unsheltered homelessness are identified. Individuals staying in smaller, more temporary locations are less likely to establish the types of structures and accumulated belongings that can make an encampment more difficult to address. Instead, current situations are generally characterized by more temporary sleeping arrangements and limited personal belongings and refuse. This indicates a reduction in the level of entrenchment, or formal encampments observed in previous years. The broader community has also become more aware of how and where to report individuals experiencing unsheltered homelessness. Businesses, property owners, and other community members are increasingly reporting individuals or small groups located in wooded areas or other locations adjacent to commercial properties. Earlier notification allows outreach teams and community partners to engage individuals sooner, connect them with available resources, and address housing and service needs before temporary locations become more established encampments. Together, improved coordination, faster outreach, and increased community awareness have contributed to reducing both the size and degree of entrenchment of encampments during the evaluation period.

2A-4a.	Reduce Encampments—Number of Encampments.	
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1. Enter the estimated number of encampments in the beginning of your evaluation period.	4
2. Enter the reduction in the number of encampments during your evaluation period.	0

2A-4b.	Reduce Encampments—Number of People in Encampments.	
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1. Enter the estimated number of people in encampments in the beginning of your evaluation period.	32
2. Enter the reduction in the number of people in encampments during your evaluation period.	0

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

(limit 2,500 characters)

The number of encampments and people living in them has decreased, so the CoC will continue the strategies already in place.

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

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

(limit 2,500 characters)

The CoC will reduce first-time homelessness through targeted prevention, earlier identification of housing instability, housing problem-solving, and stronger connections to community resources. HDX data showed a modest increase in people experiencing homelessness for the first time, from 711 in 2025 to 762 in 2026. The CoC will monitor this measure and use findings to guide prevention strategies. The CoC revamped coordinated entry in 2025, creating separate shelter and housing screening tools and service tracks based on household needs. Through Homeless Navigation, this approach emphasizes early housing problem-solving and quick connections to lighter-touch resources that can resolve a crisis before a household enters shelter or experiences unsheltered homelessness. Strategies include identifying safe housing alternatives, engaging supportive networks when appropriate, and connecting households to available financial and community assistance. SHNI will continue coordinating with the City of Canton and Stark County to align ESG and HCRP prevention resources with identified needs. The CoC will work with providers to strengthen timely referrals for households facing housing loss and connect eligible households to rental and utility assistance, benefits, legal assistance, and other stabilization supports. Prevention assistance will be paired with individualized planning to address the circumstances placing housing at risk. Through Youth Homelessness System Improvement efforts, the CoC is strengthening connections between youth ages 18–24, youth-serving organizations, and homelessness prevention assistance. This work will help identify housing instability earlier and connect youth to resources before they enter the homeless response system. Workforce partnerships will also support access to employment, training, and income needed to maintain housing. The Systems Performance Committee, HMIS partners, and providers will review first-time homelessness data alongside coordinated entry and prevention information to identify common pathways into homelessness and gaps in assistance. SHNI's planned systemwide dashboard will support ongoing monitoring and shared accountability. Findings will inform outreach, referral practices, funding recommendations, and provider technical assistance. Progress will be assessed through fewer first-time entries into homelessness and improved housing stability among households receiving prevention support.

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

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

(limit 2,500 characters)

The CoC's System Performance Measures Metric 1.2 show that the average length of time homeless increased from 73.8 in 2025 to 78.5 days in 2026. The CoC has identified gaps in short- to medium-term housing, supportive services, and street outreach and is using its FY2026 funding priorities to help fill them. In 2025, the CoC revised coordinated entry to use separate shelter and housing screening tools. Homeless Navigation now assesses each household's needs and identifies an appropriate housing track: lighter intervention, medium intervention, or more intensive housing and supportive services. Based on that assessment, staff may offer housing problem-solving, explore safe and voluntary reconnection with family or trusted supports, or connect the household to shelter, housing assistance, and other services. The CoC is prioritizing FY2026 applications for transitional housing, supportive services, and street outreach so these tracks lead to resources households can use. Additional outreach capacity will help reach unsheltered people and connect them to Homeless Navigation sooner; expanded supportive services can address barriers such as health needs, employment, transportation, connection to treatment and obtaining documents; and transitional housing can provide a short- to medium-term option for households that need time and support before securing permanent housing. The CoC's Systems Performance Committee reviews performance data and provider outcomes to identify delays and recommend improvements, while the CoC Board provides oversight and holds the system accountable for progress in reducing the time individuals and families remain homeless.

2A-7.	Successful Permanent Housing Placement—Exits to Unsubsidized Housing.	
	Based on HMIS data, what percent of program participants exited from TH/RRH/PSH collectively to unsubsidized housing?	37.90%

Describe how you calculated the data for this response.

(limit 2,500 characters)

The calculation was based on the CoC HMIS APR Q23c, Exit Destination, for the reporting period October 1, 2024, through September 30, 2025. The denominator included all 457 exits reported in Q23c during the reporting period. For the numerator, the CoC identified exits to permanent housing without an ongoing housing subsidy. The categories used were verified by the Collaborative Applicant through an AAQ to HUD (an AAQ was submitted prior to the release of the Detailed Instructions for the CoC Application). This included 23 exits to family with permanent tenure, 13 exits to friends with permanent tenure, 135 exits to rental housing by the client with no ongoing housing subsidy, and 2 exits to housing owned by the client with no ongoing housing subsidy. These destination categories totaled 173 exits.

The resulting percentage was calculated by dividing 173 qualifying permanent housing exits by 457 total exits, resulting in 37.9% of all exits during the reporting period being permanent housing without an ongoing housing subsidy: $173 \div 457 \times 100 = 37.9\%$.

This methodology uses the total population reported in APR Q23c as the denominator and includes only the identified permanent destinations without ongoing housing subsidy in the numerator.

2A-8.	Housing Inventory Count (HIC) and Point-in-Time (PIT) Count Date.	
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	Enter the date your CoC conducted its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count.	01/25/2026
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2A-8a.	HIC and PIT Count Data—HDX 2.0 Submission Date.	
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	Did your CoC submit its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count data in HDX 2.0 by April 30, 2026, 8:00 p.m. EDT?	Yes
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2A-8b.	Longitudinal System Analysis (LSA) Data—HDX 2.0 Submission Date.	
	You must upload your CoC's FY 2026 HDX Competition Report to the 4A. Attachments Screen.	

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

Using the FY 2026 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds	Adjusted Total Year-Round, Current VSP Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
1. Emergency Shelter (ES) beds	182	79	261	100.00%
2. Safe Haven (SH) beds	3	0	3	100.00%
3. Transitional Housing (TH) beds	15	39	54	100.00%
4. Rapid Re-Housing (RRH) beds	189	36	225	100.00%
5. Permanent Supportive Housing (PSH) beds	565	0	565	100.00%
6. Other Permanent Housing (OPH) beds	9	0	9	100.00%

2A-9a. Partial Credit for Bed Coverage Rates of 84.99 Percent or Lower for Any Project Type in Question 2A-9.

For each project type with a bed coverage rate that is 84.99 percent or lower in question 2A-9, describe:

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

(limit 2,500 characters)

1) This question does not apply due to the bed coverage rate being over 84.99 percent. 2) This question does not apply due to the bed coverage rate being over 84.99 percent.

3A. Policy Initiatives

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

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

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

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

3A-2	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.
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Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes? No

4A. Attachments Screen For All Application Questions

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

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

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

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3.	We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4.	Attachments must match the questions they are associated with.
5.	Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6.	If you cannot read the attachment, it is likely we cannot read it either.
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
	. We must be able to read everything you want us to consider in any attachment.
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8.	Only use the 'Other' attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
01. 1C-1. List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment	Yes	List of TH/RRH/PS...	09/24/2026
02. 1C-1f. List of CoC Program Projects and Number of Units that require Substance Abuse Treatment	Yes	List of CoC Progr...	09/24/2026
03. 1C-3. Language from Project Supportive Service Agreements	Yes	Language from Sup...	09/25/2026
04. 1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety	Yes	Evidence of Coord...	09/22/2026
05. 1D-1. Local Competition Scoring Tool	Yes	Local Competition...	09/25/2026

06. 1D-2c. Local Competition Selection Results	Yes	Local Competition...	09/25/2026
07. 2A-8b. FY 2026 HDX Competition Report	Yes	FY 2026 HDX Compe...	09/22/2026
08. 3A-1. HUD-2996 Certification for Opportunity Zone Preference Points	No	HUD-2996 Certific...	09/23/2026
09. 3A-2a. Project List for Other Federal Statutes	No		
10. 3A-DP. Your CoC's Policy or Statement to Advance Recovery	No	CoC Statement to ...	09/25/2026
11. Other	No		

Attachment Details

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

Attachment Details

Document Description: List of CoC Program Projects and Number of Units that require Substance Abuse Treatment

Attachment Details

Document Description: Language from Supportive Services Agreements

Attachment Details

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

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description: FY 2026 HDX Competition Report

Attachment Details

Document Description: HUD-2996 Certification for Opportunity Zone
Preference Points

Attachment Details

Document Description:

Attachment Details

Document Description: CoC Statement to Advance Recovery

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/25/2026
1B. Coordination and Engagement–Accountable Structure and Participation	09/25/2026
1C. Coordination and Engagement	09/25/2026
1D. Project Review/Ranking	09/25/2026
2A. HMIS Implementation	09/25/2026
3A. Policy Initiatives	09/25/2026
4A. Attachments Screen	09/25/2026
Submission Summary	No Input Required

On-Site Substance Use Treatment by Project					
Applicant	Application Type	Project Name	Component Type	On-Site Substance Use Treatment?	Total Amount requested from HUD
ICAN Housing	Renewal	West Park Apartments	PH-PSH	Yes	\$140,621
ICAN Housing	Renewal	Cherry Grove	PH-PSH	Yes	\$209,751
Alliance for Children and Families	Renewal	B-FIRST	PH-PSH	No	\$161,797
ICAN Housing	Renewal	Shelter Plus Care SRA	PH-PSH	Yes	\$296,071
Alliance for Children and Families	Renewal	SOHO Bonus	PH-PSH	No	\$266,153
Alliance for Children and Families	Renewal	A-FIRST	PH-PSH	No	\$172,831
ICAN Housing	Transition	Supportive Transitional Opportunity Program (STOP)	TH	No	\$603,264
Alliance for Children and Families	Transition	SOHO 2015	TH	No	\$187,685
ICAN Housing	Transition	Gaining Independence through Transitional Assistance (GITA)	TH	No	\$92,953
ICAN Housing	Transition	Gaining Independence through Transitional Assistance (GITA)	TH	No	\$252,245
Domestic Violence Project, Inc.	Transition	Hope Housing	TH	Yes	\$196,158
Stark Metropolitan Housing Authority	Renewal	Gateway	PH-PSH	No	\$198,592
YWCA of Canton	Renewal	New Beginnings	PH-PSH	Yes	\$48,078
Stark Metropolitan Housing Authority	Renewal	Hunter House	PH-PSH	No	\$52,038
Alliance for Children and Families	New	Rising Up - DV	TH	No	\$440,000
Alliance for Children and Families	New	Shared Housing Park	TH	No	\$150,000

List of CoC Program Projects & Number of Units that Require Substance Use Treatment

Applicant	Application Type	Project Name	Component Type	# of Units Requiring Substance Use Treatment	Total Amount requested from HUD
ICAN Housing	Renewal	West Park Apartments	PH-PSH	0	\$140,621
ICAN Housing	Renewal	Cherry Grove	PH-PSH	0	\$209,751
Alliance for Children and Families	Renewal	B-FIRST	PH-PSH	0	\$161,797
ICAN Housing	Renewal	Shelter Plus Care SRA	PH-PSH	0	\$296,071
Alliance for Children and Families	Renewal	SOHO Bonus	PH-PSH	0	\$266,153
Alliance for Children and Families	Renewal	A-FIRST	PH-PSH	0	\$172,831
ICAN Housing	Transition	Supportive Transitional Opportunity Program (STOP)	TH	0	\$603,264
Alliance for Children and Families	Transition	SOHO 2015	TH	0	\$187,685
ICAN Housing	Transition	Gaining Independence through Transitional Assistance (GITA)	TH	0	\$92,953
ICAN Housing	Transition	Gaining Independence through Transitional Assistance (GITA)	TH	0	\$252,245
Domestic Violence Project, Inc.	Transition	Hope Housing	TH	0	\$196,158
Stark Metropolitan Housing Authority	Renewal	Gateway	PH-PSH	0	\$198,592
YWCA of Canton	Renewal	New Beginnings	PH-PSH	0	\$48,078
Stark Metropolitan Housing Authority	Renewal	Hunter House	PH-PSH	0	\$52,038
Alliance for Children and Families	New	Rising Up - DV	TH	0	\$440,000
Alliance for Children and Families	New	Shared Housing Park	TH	0	\$150,000

Transitional Housing Supportive Services Agreement

Participant Information:

Name:	Phone Number:
Social Security Number:	Date of Birth:

Services Agreement:

I understand that engaging in supportive services is now required for participation in a Transitional Housing Program at "X agency".

I agree to abide by the supportive services requirements of this program and understand that failure to comply will result in termination from the program, the end of financial assistance for my housing from "X agency", and possible eviction by my landlord.

Roles and Responsibilities:

Program Responsibilities	Participant Responsibilities
• Provide you with a Supportive Services Specialist • Help you understand your lease and program agreements • Support you in exploring your needs, preferences and goals • Support you in creating and achieving an Individual Services Plan • Connect you with the services you want or need • Keep your information private • Treat you with respect	• Meet with your Supportive Services (SS) Specialist at least every two weeks • Work with your SS Specialist to identify your needs and preferences • Set and take steps towards your goals • Follow up on referrals and appointments • Turn in paperwork needed to verify participation in services, for recertification and income updates • Tell staff when you need help or your situation changes • Treat staff with respect

Service Requirements:

I agree to engage in twenty (20) hours of supportive services each week, which will be tailored to my individual needs, and may include, but is not limited to:



Case Management	Financial Literacy Program
Peer Support Groups (such as NAMI, ASCEND, NA and AA meetings)	Parenting Education
Employment Services	Life Skills Education
Job Searching/Vocational Training/Job Mentoring	*Substance Use Treatment
Applying for Affordable Housing	*Mental Health Treatment
Volunteering	Other approved services

**Services related to these items cannot be required as they are disability-related*

I understand that if I am employed, the twenty-hour requirement will be reduced by the exact number of hours that I am working (*i.e. if working 10 hours a week, only 10 hours of supportive services will be required*).

I agree to meet with "X agency's" Supportive Services staff **at least every two weeks**. At these required meetings I will provide the required verifications of my participation in supportive services and/or any employment hours **every two weeks** to document that I have met the twenty-hour a week requirement.

I understand that if I miss two consecutive meetings with the "X agency" staff, I may be terminated from the program. I understand that if I am unable to provide proof of engagement in 20 hours a week of supportive services or employment, I may be terminated from the program.

Exemptions: *Those over age 62 or individuals with handicaps as defined in 24 CFR 8.3 or developmental disabilities as defined in 24 CFR 578.3 may be exempt from the 20-hour requirement but must still engage in services at least every two weeks.*

Participant Authorization:

By signing below, I understand that I am agreeing to the supportive services requirements listed above. I understand that participation is a requirement of the program and that if I decline to sign the agreement I will not be enrolled in the housing program.

Participant Signature

Date

"X Agency" Representative Signature

Date

Representative's Printed Name

I _____

Permanent Supportive Housing Supportive Services Agreement

Participant Information:

Name:	Phone Number:
Social Security Number:	Date of Birth:

Services Agreement:

I understand that engaging in supportive services is now required for participation in a Permanent Supportive Housing Program at "X Agency". Permanent Supportive Housing is being limited to those with intensive service needs. If you no longer require supportive services, you may be terminated from the housing program.

I agree to abide by the supportive services requirements of this program and understand that failure to comply will result in termination from the program and possible eviction.

Roles and Responsibilities:

Program Responsibilities	Participant Responsibilities
• Provide you with a Supportive Services Specialist • Help you understand your lease and program agreements • Support you in exploring your needs, preferences and goals • Support you in creating and achieving an Individual Services Plan • Connect you with the services you want or need • Keep your information private • Treat you with respect	• Meet with your Supportive Services (SS) Specialist at least once a month • Work with your SS Specialist to identify your needs and preferences • Set and take steps towards your goals • Follow up on referrals and appointments • Turn in paperwork needed to verify participation in services, for recertification and income updates • Tell staff when you need help or your situation changes • Treat staff with respect

I agree to engage in creating an Individualized Services Plan, which will be tailored to my individual needs, and may include, but is not limited to:

Case Management	Financial Literacy Program
Peer Support Groups (such as NAMI, ASCEND, NA and AA meetings)	Parenting Education
Employment Services	Life Skills Education
Job Searching/Vocational Training/Job Mentoring	*Substance Use Treatment
Applying for Affordable Housing	*Mental Health Treatment
Volunteering	Other approved services

**Services related to these items cannot be required as they are disability-related*

I agree to meet with "X agency's" Supportive Services staff **at least monthly** to review progress on my Individualized Services Plan, with the goal of retaining housing.

I understand that if I miss two consecutive meetings with the "X agency's" Supportive Services staff, I may be terminated from the program.

Participant Authorization:

By signing below, I understand that I am agreeing to the supportive services requirements listed above. I understand that participation is a requirement of the program and that if I decline to sign the agreement I will not be enrolled in the housing program or, if already enrolled, may be terminated from the program.

Participant Signature

Date

"X agency" Representative Signature

Date

Representative's Printed Name

|

|

|

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THE CITY OF CANTON
POLICE DEPARTMENT
CHIEF JOHN GABBARD

September 22, 2026

Coordination and Noninterference with Local Public Safety Efforts

FY 2026 Continuum of Care Program Competition
Homeless Continuum of Care of Stark County OH-508

To Whom It May Concern:

On behalf of the City of Canton Police Department, I am writing to confirm that the Homeless Continuum of Care of Stark County (HCCSC), including its street outreach efforts, works collaboratively with local law enforcement and does not interfere with local efforts to advance public safety.

As Chief of Police for the City of Canton and a member of the HCCSC Board, I participate in the Continuum of Care's work to address homelessness in our community. My Board service provides an ongoing connection between local law enforcement and the agencies coordinating shelter, housing, and supportive services for people experiencing homelessness.

The Canton Police Department has partnered with the Continuum of Care's street outreach team in responding to encampments and engaging individuals experiencing unsheltered homelessness. This collaboration supports coordination between officers and outreach staff as they address public safety concerns and connect individuals with available services.

Based on this partnership, I affirm that HCCSC's efforts, including street outreach, are collaborative in nature and do not obstruct or interfere with the Canton Police Department's efforts to advance public safety. Our respective roles support a coordinated response to homelessness and the safety of individuals experiencing homelessness and the broader community.

Please accept this letter as documentation of our coordination and noninterference with local public safety efforts in support of HCCSC's FY 2026 Continuum of Care application.

Sincerely,

A handwritten signature in blue ink, appearing to read "John Gabbard", written over a circular blue stamp.

Chief Gabbard
Chief of Police

FY2026 Scoring Sheet

Project Title:	Date of Review/Scoring Meeting:
Lead Agency:	Individuals Participating in Review and Scoring for HCCSC:
Agency Contact Person:	
Application Type: ☐ New ☐ Renewal ☐ Transition Project Type: ☐ PH-PSH ☐ PH-RRH ☐ TH ☐ SSO – Standalone ☐ SSO – Street Outreach ☐ SSO – Coordinated Entry ☐ HMIS	

Threshold Requirements - All Projects		Yes	No
☐ Yes ☐ No Financial and Management Capacity Experience ☐ Yes ☐ No Agrees to submit project required certifications specified in this NOFO ☐ Yes ☐ No Population served meets program eligibility requirements as described in the Act, the Rule, and section III.G11 of this NOFO ☐ Yes ☐ No Agrees to participate in the local HMIS (Victim Service Providers must use a comparable database) ☐ Yes ☐ No Agrees to participate in the local Coordinated Entry Process including the selection of program participants consistent with the HCCSC's coordinated entry process. ☐ Yes ☐ No The project applicant will not engage in illegal racial discrimination consistent with the	Responses and assurances provided in the Local Application, reports (APR) submitted and accepted by HUD in the Sage HMIS Reporting Repository, HUD published CoC Spending Report, and monitoring will determine if the applicant has met threshold requirements		

requirements of 2 CFR 200.300(a). ☐ Yes ☐ No The project applicant will not operate drug injection sites or "safe consumption sites" in violation of 21 U.S.C. 856(a)(1), knowingly permit the use or distribution of illicit drugs on property under their control in violation of 21 U.S.C. 856(a)(2), or knowingly distribute drug paraphernalia in violation of 21 U.S.C. 863. This is consistent with the objectives outlined in Section III.B of this NOFO and is consistent with the requirements of 2 CFR 200.300(a). This certification is not a requirement that program participants must be sober in order to receive assistance, participate in treatment in order to receive assistance, or be evicted or exited from assistance for a first-time violation of a drug-related program policy or lease requirement.			
Financial Management, Capacity & Operational Plans- All Projects		Point Value	Points Awarded
<u>Management of Grant Funds and Funding Requirements – Renewal and Transition Projects Only</u> Score will be based on the project’s ability to fully spend funds awarded for use in operating periods ending in CY 2023, CY2024 or CY2025 and on timely submission of APRs since the beginning of CY2024 as reported in the SAGE HMIS Reporting Repository.	2 points will be awarded if funds were fully spent during the project’s 3 most recent complete operating years 1 point will be awarded if the APR was submitted on time for the 3 most recent complete operating years	Up to 3 points	
<u>Transition Workplan – Transition Projects Only</u> Score will be based on the detailed plan included in the local application to transition the project participants from the prior project type to the new project type within one year.	Up to 5 points will be awarded for comprehensive plans	Up to 5 points	
<u>New Project Workplan – New Projects Only</u> Score will be based on the detailed description included in the local application of the project’s workplan and goals of 60, 120, and 180 days after the grant start date.	Up to 5 points will be awarded for comprehensive plans	Up to 5 points	

Experience in effectively utilizing federal funds including experience leveraging Federal, State, local, and private sector funds. – New Projects Only Score based on answers provided in the local application.	0 points will be awarded if the organization does not have experience in utilizing federal funds or has used funds ineffectively 3 points will be awarded if the organization has experience in effectively utilizing federal funds	Up to 3 points	
	Subtotal Points from the section above.		
	Possible points from the section above: Renewal projects-3 points, Transition projects-8 points, New projects-8 points Score will be combined with total points from scoring of applicable project type ((TH, PSH, RRH, SSO-Standalone, SSO-Street Outreach, SSO-CE, HMIS)		

**Permanent Supportive Housing (PH-PSH), Rapid Rehousing (PH-RRH), Transitional Housing (TH),
Supportive Services Only (SSO) Standalone**
Performance Outcomes-All Projects

Criteria	Relevant Factors/Source of Evidence	Point Value	Points Awarded
Increasing earned income (i.e., employment income) Stayers Score will be based on % of project's adult participants who had succeeded in gaining or increasing earned income: Client Cash Income Change-Income Source from project by Start and Latest Status as reflected during the grant year covered by the project's most recent APR.	Source of data: Most recent APR (Q19a1) submitted and accepted by HUD in the Sage HMIS Reporting Repository, data from a comparable database attached to Local Project Application	3 points will be awarded if the project has tracked data through HMIS or comparable database Additional 3 points will be awarded if the performance outcome meets the metric of 20%	
Increasing earned income (i.e., employment income) Score will be based on % of project's adult participants who had succeeded in gaining or increasing earned income: Client Cash Income Change-Income Source from project by Start and Exit as reflected during the grant year covered by the project's most recent APR.	Source of data: Most recent APR (Q19a2) submitted and accepted by HUD in the Sage HMIS Reporting Repository, data from a comparable database attached to Local Project Application	5 points will be awarded if the project has tracked data through HMIS or comparable database Additional 5 points will be awarded if the performance outcome meets the metric of 25% as defined in the NOFO	
Minimizing returns to homelessness Score will be based on rate at which persons who exited to permanent housing destinations experienced additional spells of homelessness over a 12- month period as reported in HDX	Source of Data: HMIS or DV comparable database, data from a comparable database attached to Local Project Application	1 point will be awarded if the project has tracked data through HMIS or comparable database Additional 3 points will be awarded if the	

		performance outcome meets the metric of less than 7% as defined by HUD in the NOFO or Additional 1 point will be awarded if the performance outcome meets the metric of less than 11% as defined by HUD in the NOFO	
Successful Exits from Assistance Placement Score will be based on % of project participants who successfully exit from TH/RRH and % of project participants who exit from TH/RRH/PSH to unsubsidized housing.	Source of data: Most recent APR (Q23C) submitted and accepted by HUD in the Sage HMIS Reporting Repository, data from a comparable database attached to Local Project Application	1 point will be awarded if the project has tracked data through HMIS or comparable database Additional 2 points will be awarded if the performance outcome meets the successful (positive) exit metric of at least 50% as defined by HUD in the NOFO Additional 3 points will be awarded if at least 20% of program participant exits are to unsubsidized housing as defined by HUD in the NOFO Additional 1 point will be awarded if the rate	

		of unknown exit destination is less than 10% as defined by HUD in the NOFO	
Satisfaction of expectations for full occupancy and success in serving numbers projected Score will be based on average unit utilization as reflected in the project's most recent APR - TH/RRH/PSH Projects ONLY	Source of data: Most recent APR submitted and accepted by HUD in the Sage HMIS Reporting Repository, data from a comparable database attached to Local Project Application	1 point will be awarded if the project has tracked data through HMIS or comparable database Additional 2 points will be awarded if the performance outcome meets the metric of at least 85% as defined in by HUD in SAGE HMIS Repository	
		Subtotal Points from the section above.	
		Possible points from the section above: TH/RRH/PSH Projects-31 points, SSO Standalone-28 points. Not applicable to CE/HMIS, SSO-Street Outreach. Score will be combined with total points from scoring of applicable project type (TH, PSH, RRH, SSO Standalone)	

Transitional Housing (TH) - All Projects

Criteria	Relevant Factors/Source of Evidence	Point Value	Points Awarded
The project will provide and/or partner with other organizations to provide eligible supportive services that are necessary to assist program participants to obtain and maintain housing.	Scores will be based on answers provided in the Local Application	2	
The applicant has prior experience operating transitional housing or other projects that have successfully helped homeless individuals and families exit homelessness within 24 months.	Scores will be based on answers provided in the Local Application	1	
The applicant has previously operated or currently operates transitional housing or another homelessness project, or has a plan in place to ensure, that at least 50 percent of participants exit to permanent housing within 24 months and at least 50 percent of participants exit with employment income as reflected in HMIS or another data system used by the applicant.	Scores will be based on answers provided in the Local Application	1	
The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP.	Scores will be based on answers provided in the Local Application	1	
The proposed project will require program participants to take part in supportive services (e.g. case management, employment training, substance use treatment, etc.) in line with 24 CFR 578.75(h) by attaching a supportive service agreement (contract, occupancy agreement, lease, or equivalent). Note: This does not constitute a requirement that program participants must be sober in order to receive assistance, participate in treatment in order to receive assistance, or be evicted or exited from assistance for first time violation of drug related program policy or lease requirement.	Scores will be based on answers provided in the Local Application	5	
The project will evaluate participant connections to workforce development services and support by providing a structured workforce development program or creating a	Scores will be based on answers provided in the	2	

memorandum of understanding with a partner agency to offer the services.	Local Application		
The project will provide on-site substance use treatment including an on-site clinician providing substance abuse treatment services.	Scores will be based on answers provided in the Local Application	2	
The proposed project will <u>support</u> program participants to <u>ensure</u> participation in supportive services as required by 24 CFR 578.75(h) during their stay in Transitional Housing and include <u>20 hours per week</u> of services, activities, and/or employment that support health and wellness, housing stability, employment, and self-sufficiency (except those over age 62 or individuals with handicaps as defined in 24 CFR 8.3 or developmental disabilities as defined in 24 CFR 578.3	Scores will be based on answers provided in the Local Application	2	
Scores will be determined by comparing each project's expenses per participant charged to the CoC grant with the average of other projects that fall within a 10% range above or below that average.	Scores will be based on answers provided in the Local Application	1	
The project has an individualized service plan approach based on the primary population served (e.g., if the project primarily or exclusively serves families with children experiencing homelessness)	Scores will be based on answers provided in the Local Application 1 point will be awarded if the project identified a primarily population to be served. Additional 3 points awarded if the project demonstrates a strong plan for improving incomes, leveraging mainstream resources and combines housing assistance that aligns with the population served	Up to points 3	
	Subtotal Points from the section above. Possible points from the section above- 20		

	Points awarded in Financial Management/Capacity/Operational & Performance Outcomes sections.	
	Total Points Awarded (59 total possible points-TH)	
	Total Score (Points earned as a percentage of total points available to the project)	

**Permanent Housing: (PH-PSH), Rapid Rehousing (PH-RRH)-
All Projects**

Criteria	Relevant Factors/Source of Evidence	Point Value	Points Awarded
The type of housing proposed, including the number and configuration of units, will fit the needs of program participants. (PH-PSH Projects Only)	Scores will be based on answers provided in the Local Application	1	
The project demonstrates that the type of supportive services and assistance that will be offered to program participants will ensure that the participant is able to successfully obtain and retain permanent housing and in a manner that fits their needs (e.g. transportation, safety planning, enhanced case management, on-site behavioral healthcare). (PH-PSH Projects Only)	Scores will be based on answers provided in the Local Application 1 point will be awarded based on the supportive services offered. Additional 3 points will be awarded if the projects offers on-site behavioral healthcare.	4	
The project will be designed to serve individuals or families with a disability in accordance with 24 CFR 578.37(a)(1)(i) , disabled individuals or families as defined by section 401(10) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(10)and as defined in and/or elderly 55 and older. The units will prioritize these populations. (PH-PSH Projects Only)	Scores will be based on answers provided in the Local Application 1 point will be awarded if the project is designed to serve elderly individuals and/or individuals with a physical disability/impairment or a	1	

	developmental disability Additional 1 point will be awarded if 50% of the participants are 55 or over		
The project's tenant-based rental assistance will help individuals and families achieve self-sufficiency within a period of 24 months. (PH-RRH Projects Only)	Scores will be based on answers provided in the Local Application	1	
The project demonstrates that the type of supportive services and assistance (e.g., case management, substance use treatment, mental health treatment and employment assistance) that will be offered ensures that participants will be able to successfully obtain self-sufficiency and exit homelessness. (PH-RRH Projects Only)	Scores will be based on answers provided in the Local Application	1	
The project primarily or exclusively serves families with children experiencing homelessness in accordance with 24 CFR 578.93(b) and the project provides supportive services focused on improving incomes to pay rent, leverages funding from mainstream family service systems and combines housing assistance with childcare, parenting support, pregnancy-related and child healthcare, and education. (PH-RRH Projects Only)	2 points will be awarded if the project primarily or exclusively serves families with children. Additional 2 points will be awarded if the project demonstrates a strong plan for improving incomes, leveraging mainstream resources and combining housing assistance with family supports as described in the criteria.	4	
The proposed project demonstrates that it will require program participants to take part in supportive services (e.g. case management, life skills, substance use treatment) in line with 24 CFR 578.75(h) by attaching a supportive service agreement (contract, occupancy agreement, lease, or equivalent). Note: This does not constitute a requirement that program participants must be sober in order to receive assistance, participate in treatment in order to receive assistance, or be evicted or exited from assistance for first time violation of drug related program policy or lease requirement.	Scores will be based on answers provided in the Local Application	5	
Scores will be determined by comparing each project's expenses per participant charged to the CoC grant with the average of other projects that fall within a 10% range above or below that average.	Scores will be based on answers provided in the Local Application	1	

The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP.	Scores will be based on answers provided in the Local Application	1	
The applicant has past experience and proven performance operating homelessness projects where at least 50 percent of participants exit permanent housing within 24 months and at least 50 percent of participants exit with employment income. (PH-RRH Projects Only)	Scores will be based on answers provided in the Local Application	2	
The project has an individualized service plan approach based on the primary population served.	Scores will be based on answers provided in the Local Application 2 points will be awarded if the project identified a primarily population to be served. Additional 2 points awarded if the projects demonstrates a strong plan for improving incomes, leveraging mainstream resources and combines housing assistance that aligns with the population served	4	
	Subtotal Points from the section above. Possible points from the section above: PSH– 17 RRH - 19		
	Points awarded in Financial Management/Capacity/Operational & Performance Outcomes sections		
	Total Points Awarded (Total possible points PSH-51, RRH-53)		
	Total Score (Points earned as a percentage of total points available to the project)		

Supportive Services Only (SSO) Standalone-**All Projects**

Criteria	Relevant Factors/Source of Evidence	Point Value	Points Awarded
The Supportive Services project is necessary to assist people in exiting homelessness, addressing barriers to stable housing and increasing self-sufficiency and the Recipient will conduct an annual assessment of the service needs of the program participants.	Scores will be based on answers provided in the Local Application	1	
The proposed project has a strategy for providing supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services	Scores will be based on answers provided in the Local Application	2	
The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP.	Scores will be based on answers provided in the Local Application	1	
Scores will be determined by comparing each project's expenses per participant charged to the CoC grant with the average of other projects that fall within a 10% range above or below that average.	Scores will be determined by comparing each project's expenses per participant charged to the CoC grant with the average of other projects that fall within a 10% range above or below that average.	1	
The project has an individualized service plan approach based on the primary population served.	Scores will be based on answers provided in the Local Application 2 points will be awarded if the project identified a primarily population to be served. Additional 2 points awarded if the projects demonstrates a strong plan for improving incomes, leveraging mainstream funding and combines housing assistance that aligns with the population served	4	

	Subtotal Points from the section above. Possible points from the section above-9	
	Points awarded in Financial Management/Capacity/Operational & Performance Outcomes sections	
	Total Points Awarded (45 total possible points SSO-Standalone)	
	Total Score (Points earned as a percentage of total points available to the project)	

Supportive Services Only (SSO) Street Outreach-All Projects			
Criteria	Relevant Factors/Source of Evidence	Point Value	Points Awarded
The project will be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP.	Scores will be based on answers provided in the Local Application	1	
The proposed project has a strategy for providing supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services.	Scores will be based on answers provided in the Local Application	2	
The applicant has a history of partnering with first responders and/or law enforcement to engage people living in unsheltered locations and has a plan to cooperate with enforcement of local laws such as public camping	Scores will be based on answers provided in the Local Application	1	
The applicant has experience providing outreach services consistent with the activity description at 24 CFR 578.53(e)(13) and has demonstrated effectiveness at helping people successfully exit from places not meant for human habitation to emergency shelter, treatment programs, reunification with family, independent living, transitional housing or permanent housing programs.	Scores will be based on answers provided in the Local Application	1	
Scores will be determined by comparing each project's expenses per participant	Scores will be based on answers	1	

charged to the CoC grant with the average of other projects that fall within a 10% range above or below that average.	provided in the Local Application		
	Subtotal Points from the section above. Possible points from the section above- 6.		
	Points awarded in Financial Management/Capacity/Operational section		
	Total Points Awarded (14 total possible points SSO-Street Outreach)		
	Total Score (Points earned as a percentage of total points available to the project)		

SSO-Coordinated Entry (SSO-CE)-All Projects			
Criteria	Relevant Factors/Source of Evidence	Point Value	Points Awarded
The Coordinated Entry system is easily available and reachable for all persons within the CoC's geographic area who are seeking homelessness assistance. The system must also be accessible for persons with disabilities within the CoC's geographic area.	Scores will be based on answers provided in the Local Application	1	
There is a strategy for advertising that is designed specifically to reach households experiencing homelessness with the highest needs.	Scores will be based on answers provided in the Local Application	1	
There is a standardized assessment process.	Scores will be based on answers provided in the Local Application	1	
The project will ensure program participants are directed to appropriate housing and services that fit their needs.	Scores will be based on answers provided in the Local Application	1	
	Subtotal Points from the above section. Possible points from the section above-4.		

	Points awarded in Financial Management/Capacity/Operational section	
	Total Points Awarded (7 total possible points SSO-CE)	
	Total Score (Points earned as a percentage of total points available to the project)	

Homeless Management Information System (HMIS) - All Projects			
Criteria	Relevant Factors/Source of Evidence	Point Value	Points Awarded
HMIS funds will be expended in a way that furthers the CoC's HMIS implementation and ability to use HMIS as a proactive case management tool to promote treatment and recovery.	Scores will be based on answers provided in the Local Application	1	
HMIS collects all Universal Data Elements as set forth in the HMIS Data Standards.	Scores will be based on answers provided in the Local Application	1	
The ability of the HMIS to un-duplicate client records.	Scores will be based on answers provided in the Local Application	1	
The HMIS produces all HUD required reports and provides data as needed for HUD reporting (e.g., APR, quarterly reports, data for CAPER/ESG reporting) and other reports required by other federal partners.	Scores will be based on answers provided in the Local Application	1	
	Subtotal Points from the section above. Possible points from the section above-4.		
	Points awarded in Financial Management/Capacity/Operational section		
	Total Points Awarded (7 total possible points-HMIS)		
	Total Score (Points earned as a percentage of total points available to the project)		

Procedures for Inviting and Reviewing Applications for CoC funding

I. Development of CoC Priorities and Local Timeline, Application, and Scoring Form

Each year in preparation for HUD's release of the Notice of Funding Availability (NOFA) for Continuum of Care (CoC) grants, the Homeless Continuum of Care of Stark County (HCCSC) will take the following steps to prepare for a local application process designed to identify projects that the HCCSC will recommend for CoC grants:

- A. Identification of Funding Priorities. The HCCSC's System Performance Committee will review available data and data trends, identify gaps in the homeless system, and develop for the HCCSC Board's approval recommendations about CoC funding priorities for the year.
- B. Preparation of Timeline and Application Forms. The HCCSC's Recipient Approval and Evaluation Committee will establish a timeline for the local CoC grant competition that will determine competition deadlines for project applications that are being considered for inclusion in the Consolidated Application that the HCCSC will submit to HUD. In addition, the committee will prepare for Board approval one or more application forms to be used in the local competition and completed by all applicants for CoC funding, including any bonus funding that HUD may make available. Among other things, those forms will:
 1. Identify any criteria that an organization must satisfy to be considered for CoC funds if it has not been a previous recipient of CoC funds; and
 2. Include notice that a project's eligibility to apply for CoC funds may have to be reassessed following the release of the CoC NOFA if the NOFA announces any unanticipated changes in HUD's funding criteria or priorities or if relevant circumstances change significantly before the HCCSC submits its Consolidated Application to HUD.
- C. Preparation of Scoring Form. The Recipient Approval and Evaluation Committee will also prepare for Board approval one or more forms to be used in scoring and ranking projects that apply for CoC funds. As much as possible, those forms should base a project's scores and ranking on objective criteria, including the following:
 1. The project's success in satisfying performance measures adopted or recommended by HUD;
 2. The project's success in meeting system-wide and project-specific performance standards or targets;
 3. The extent to which a project satisfies priorities established by HUD or the HCCSC;
 4. The comparative stability of a project and its sponsoring organization and their capacity to administer the requested CoC grant;
 5. The ability of the project to obtain other sources of support to match and leverage its CoC funding;

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6. The extent to which the project and its sponsoring organization understand and effectively collaborate with the HCCSC by, among other things, participating in relevant committees and workgroups and providing timely notice of proposed additions to or changes in their policies, procedures, or services;
7. The adherence of the project to its own and system-wide rules governing access to and eligibility for the project, including Housing First, Fair Housing, and Equal Access policies; and

The extent to which project staff attend required professional development sessions and pursue other professional development opportunities.

- D. Solicitation of Feedback from HCCSC Members. The System Performance Committee and the Recipient Approval and Evaluation Committee will review their findings and preliminary recommendations with members and consider feedback received from the members before finalizing their recommendations to the Board on CoC funding priorities and CoC application and scoring forms.

II. The Application Workshop

Each year, the Collaborative Applicant will hold a workshop for prospective CoC grant applicants. In preparing for and conducting this workshop, the Collaborative Applicant will observe the following guidelines:

- A. Notice of Workshop. Before the annual pre-application workshop, the Collaborative Applicant will:

1. Place an advertisement about the workshop in the three newspapers of general circulation in Stark County; and
2. E-mail a notice of the workshop to all individuals on the HCCSC Members listserv.

- B. Workshop Agenda. At the workshop, the Collaborative Applicant will:

1. Review with attendees the application form that all applicants must complete in order to receive HCCSC endorsement to submit an application for CoC funding to HUD;
2. Discuss the procedures and timelines for submitting applications for the local competition;
3. Discuss any special rules applying to organizations that have not received CoC funding previously;
4. Discuss HCCSC priorities as approved by the HCCSC Board;
5. Review the form(s) that will be used to score applications;
6. Discuss any documents required to be submitted with the local application; and
7. Discuss any additional project requirements during the local competition such project presentations and/or project site visits.

III. The Local Application Process

- A. Publication of Application Deadline and Relevant Forms. Following Board approval of the application and scoring forms to be used in the local CoC competition, the Collaborative Applicant will publish an ad in each of the three newspapers of general circulation in Stark County. This ad, which may be the same ad described above that announces the application workshop (see section II.A. above), will describe the type(s) of new project(s) the HCCSC Board will be considering for funding. It will also announce the deadline for submitting applications and indicate where interested persons can find copies of the application and scoring forms.

The Collaborative Applicant will also:

1. Post a notice of the application deadline along with relevant application and scoring forms on the HCCSC's website; and
 2. Send an e-mail to all individuals on the HCCSC's Members listserv notifying them of the due date for applications and directing them to the HCCSC website for more information.
- B. Eligibility of Applications for Consideration. To be considered for CoC funding, applications for the local competition must be completed in their entirety and submitted along with any required attachments by the published due date.
- C. Application Scoring Process. The Recipient Approval and Evaluation Committee will review and score applications using the scoring form(s) approved by the HCCSC Board. In the reviewing and scoring process, the following guidelines will apply:
1. The Recipient Approval and Evaluation Committee may take into consideration, not only information submitted in or with the application, but also information derived from other sources, including but not limited to:
 - a. Recent Annual Performance Reports (APRs) and status reports submitted to the Collaborative Applicant by the applicant;
 - b. Recent financial statements and audits;
 - c. Recent project audits and monitoring reports and any responses to those audits or reports;
 - d. Recent on-site reviews of the applicant conducted by the Collaborative Applicant; and
 - e. HUD monitoring reviews and recipient responses.
 2. The Recipient Approval and Evaluation Committee may schedule a meeting with representatives of the applicant organization to solicit information beyond that submitted in the application and take that additional information into consideration when scoring the application.
 3. The Recipient Approval and Evaluation Committee may assign responsibility for reviewing and evaluating discrete portions of an application to particular committee members and rely on those

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evaluations in scoring the project on related criteria.

4. For each criterion listed on the scoring form, applications will receive a score based on a consensus reached by the members of the Recipient Approval and Evaluation Committee.
5. A project's final score on the application will be the total points earned by the project as a percentage of the total points available to the project. Points will be considered "available to a project" only if the scoring criterion on which those points are based can be applied to the project.

IV. Notice and Appeal of Committee Decisions on Applications

- A. Notice of Review Outcomes. Following the Recipient Approval and Evaluation Committee's review and scoring of each timely and complete project application, the Collaborative Applicant will send a copy of the project's scoring form to the applicant organization. In addition, the Collaborative Applicant will send a letter to the applicant organization indicating whether, based on its score, the Recipient Approval and Evaluation Committee will be recommending that the HCCSC Board approve the project for inclusion in the Priority Listing that the HCCSC will submit to HUD as part of its next Consolidated Application. In cases in which the committee decides against recommending a project for inclusion on the listing, the letter will explain the reasons why that recommendation was withheld, and, where appropriate, what the organization can do to improve its chances of receiving CoC funding in the future.
- B. Requests for Reconsideration of Score or Endorsement. Within 5 working days following its receipt of a project scoring form and the accompanying letter announcing the Recipient Approval and Evaluation Committee's decision to recommend or not recommend the project for inclusion on the Priority Listing, the applicant organization may submit a letter to the Collaborative Applicant requesting reconsideration, submitting supporting documentation where relevant, and outlining all the reasons why the committee should reconsider the project's scores and its omission from the Priority Listing.
- C. Response to Requests for Reconsideration. The Recipient Approval and Evaluation Committee will review all requests for reconsideration and respond to them through the Collaborative Applicant.

V. Development of Conditional and Final Priority Listings

- A. Approval of a Conditional Priority Listing by HCCSC Board. After the application appeals process has concluded, the Recipient Approval and Evaluation Committee will recommend to the HCCSC Board projects to be included in the Priority Listing that will be submitted to HUD as part of the HCCSC's next Consolidated Application. Barring unforeseen changes in funding criteria or priorities which HUD announces in the CoC Notice of Funding Availability (NOFA) for the year or significant changes in other relevant circumstances the conditional Priority Listing, if approved by the Board, will determine the projects included on the final Priority Listing.
- B. Notice of the Board's Decision. All applicants will receive notice in writing of the Board's decision regarding the projects to be included in the final Priority Listing after that decision is made.
- C. Review of NOFA for Possible Impact on Conditional Priority Listing. After HUD has issued its annual NOFA, the Collaborative Applicant will determine whether projects included on the conditional Priority Listing are eligible for funding and continue to meet HUD funding priorities as reflected in the NOFA. It will also determine whether enough eligible projects have applied to take advantage of all available

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CoC funds. In determining whether enough eligible projects have applied, the Collaborative Applicant will consider applications submitted for projects that were not approved for the conditional Priority Listing as well as applications for projects that were not recommended for full funding.

- D. Publication of Notice of HUD's NOFA. After HUD has issued its annual NOFA, the Collaborative Applicant will publish a public notice that will include:
1. Information about the local application process; and
 2. A request for additional proposals in the event that the most recent local competition yielded an insufficient number of eligible projects to take advantage of available CoC funding.
- E. Second Round of Applications. Following the solicitation of additional applications in accordance with Section D.2, the steps outlined in Section III will be repeated to review and score a second round of applications. In that event, the Collaborative Applicant, in consultation with the Recipient Approval and Evaluation Committee, will exercise its discretion to modify schedules and procedures as necessary to meet the deadline for submission of the final CoC Grant applications.

VI. Preparation of Final Application, Priority Listings, and rankings for Submissions to HUD

- A. Deadlines and Instructions for Submitting Final Applications.
1. Unless the NOFA or other changes in circumstances provide any reason to conclude that a project conditionally approved for inclusion on the Priority Listing should not be included in the final listing, the Collaborative Applicant will notify the project applicant of the NOFA's release to begin completing its application in e-snaps.
 2. All applicants notified must complete their applications in *e-snaps* in accordance with any instructions given by the Collaborative Applicant.
 3. In the following circumstances, the Collaborative Applicant will notify the project applicant to begin completing its application in e-snaps as soon as possible and will adjust the deadline for that application as necessary to meet HUD's deadline for submission of the Collaborative Application:
 - a. Changed circumstances or new information in the NOFA have given rise to questions that must be resolved about whether a project on the conditional Priority Listing should remain on the final listing; and
 - b. The Recipient Approval and Evaluation Committee did not endorse a project for funding until after the NOFA was issued.
- B. Final Review of Applications by Collaborative Applicant. As applications are submitted in e-snaps, the Collaborative Applicant will review the applications to ensure that they conform to the applications approved by the Recipient Approval and Evaluation Committee and that they are complete and, at least on their face, accurate and consistent. If an applicant is required to make any changes, the Collaborative Applicant will return the application via e-snaps with an email explaining needed changes and the deadline for making those changes.

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- C. Preparation of Final Priority Listing. It is the responsibility of the Recipient Approval and Evaluation Committee to develop for HCCSC Board approval:
1. A final list of the projects to be included on the Priority Listing submitted with the Consolidated Application; and
 2. Any other list of recommended projects that HUD requires Continuums to prepare as part of a competition for bonus funds available through the CoC Grant program.
- D. Ranking of Projects. It is also the responsibility of the Recipient Approval and Evaluation Committee to rank those projects, using a method developed by the Committee, reviewed by HCCSC members, and approved by the HCCSC Board each year.
- E. HCCSC Approval of the Consolidated Application. Before submitting the Consolidated Application to HUD, the Collaborative Applicant will solicit HCCSC Board approval for the application as a whole and for its ranking of individual applications. In requesting this approval, the Collaborative Applicant will:
1. Explain to the Board any instances in which the ranking of individual applications was based on factors other than application scores; and
 2. Provide an opportunity for the Board to ask questions, and, based on a majority vote, change the ranking.

VII. Reallocations

- A. Responsibility for Proposing Reallocations. The Collaborative Applicant and Recipient Approval and Evaluation Committee should consider the possibility of recommending that all or part of the CoC funding currently received by a project be reallocated for any good cause, including the following:
1. The project has consistently failed to meet performance standards established by HUD or the HCCSC;
 2. The Collaborative Applicant and HMIS Lead have been obliged to spend a disproportionate amount of time overseeing the project due to its repeated failures to:
 - a. Submit timely and accurate data and reports required by HUD or the HCCSC;
 - b. Follow other policies and procedures prescribed by HUD or the HCCSC; or
 - c. Cooperate with the efforts of the HCCSC to improve the performance of the project or the homeless system as a whole.
 3. The project has repeatedly underspent its CoC funding or otherwise mismanaged its CoC grant;
 4. HUD priorities or policies have changed, putting the project at risk of being defunded;
 5. HCCSC priorities or policies have changed with the result that the project no longer plays the role it previously did in promoting the HCCSC's strategies for ending homelessness;

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6. The project is unusually expensive compared with other projects of its type; or
7. Some or all the funds received by the project can be put to higher and better uses to achieve the HCCSC's goals for ending homelessness.

B. Process for Effecting Reallocations.

1. Notice to Current Recipient. In the event that the Collaborative Applicant and Recipient Approval and Evaluation Committee agree that the HCCSC should consider reallocating CoC funds from a current recipient, the Collaborative Applicant will provide prompt notice to the project. That notice should include:
 - a. The reasons for recommending that reallocation be considered; and
 - b. The amount recommended for possible reallocation.
2. Timing of Notice.
 - a. General Rule. Generally, notice to the current recipient should be provided before the local application process begins so that the ad announcing the start of the local competition (see section III. A. above) can include information about the amount of funding that may be available through reallocation.
 - b. Unusual Circumstances. Under unusual circumstance, the notice to the current recipient may be given after the start of the local competition. "Unusual circumstances" may include:
 - i. Information received from HUD after the start of the local competition that suggests that funding for the project may be in jeopardy; and
 - ii. The discovery of new facts and circumstances about the project or its sponsoring organization that call into serious question the ability of the project to fulfill its current commitments to HUD or to the HCCSC or manage additional CoC grants.
3. Reallocation Decisions. The Recipient Approval and Evaluation Committee will develop a final recommendation regarding proposed reallocations during the course of its review of all local applications for CoC funding. In developing this recommendation, the committee must take into consideration:
 - a. The current recipient's application or applications for continuing CoC funding, including, if it chooses to submit them after receiving notice of possible reallocation, its application for the entire amount of funding it has been receiving and its application for a sum reduced by the amount the Recipient Approval and Evaluation Committee has proposed to reallocate; and
 - b. All applications from new projects requesting all or part of the reallocated funds.
4. Appeal and Finalization of Reallocation Decisions. The process for appeal and finalization of reallocation decisions will be the same process outlined in section IV through VI for all other applications.

**FY2026 CoC Priority Listing
HCCSC Local Competition Selection Results**

Applicant	Application Type	Project Name	Component Type	Scored Percentage	Domestic Violence	Status	Rank	Reallocated Funds	Total Amount requested from HUD	Cumulative Amount
ICAN Housing	Renewal	West Park Apartments	PH-PSH	80.39%	No	Accepted	1	\$0	\$140,621	\$140,621
ICAN Housing	Renewal	Stark Accessible Housing	PH-PSH	80.39%	No	Accepted	2	\$0	\$209,751	\$350,372
Alliance for Children and Families	Renewal	B-FIRST	PH-PSH	76.47%	No	Accepted	3	\$0	\$161,797	\$512,169
ICAN Housing	Renewal	Shelter Plus Care SRA	PH-PSH	76.47%	No	Accepted	4	\$0	\$296,071	\$808,240
Alliance for Children and Families	Renewal	SOHO Bonus	PH-PSH	74.51%	No	Accepted	5	\$0	\$266,153	\$1,074,393
Alliance for Children and Families	Renewal	A-FIRST	PH-PSH	70.59%	No	Accepted	6	\$0	\$172,831	\$1,247,224
Stark Mental Health and Addiction Recovery	Renewal	Stark County Homeless Management Information System (HMIS)	HMIS	100.00%	No	Accepted	7	\$0	\$162,608	\$1,409,832
Stark Mental Health and Addiction Recovery	Renewal	Stark County Central Intake and Assessment (SCCIA)	SSO-CE	100.00%	No	Accepted	8	\$0	\$282,739	\$1,692,571
Stark Mental Health and Addiction Recovery	Renewal	Stark County Central Intake and Assessment (SCCIA) DV	SSO-CE	100.00%	Yes	Accepted	9	\$0	\$66,215	\$1,758,786
ICAN Housing	Transition	Supportive Transitional Opportunity Program (STOP)	TH	83.05%	No	Accepted	10	\$0	\$603,264	\$2,362,050
Alliance for Children and Families	Transition	SOHO 2015	TH	81.36%	No	Accepted	11	\$0	\$187,685	\$2,549,735
ICAN Housing	Transition	Gaining Independence through Transitional Assistance (GITA)	TH	79.66%	No	Accepted	12	\$0	\$92,953	\$2,642,688
TIER 2										
ICAN Housing	Transition	Gaining Independence through Transitional Assistance (GITA)	TH	79.66%	No	Accepted	12	\$0	\$252,245	\$2,894,933
Domestic Violence Project, Inc.	Transition	Hope Housing	TH	78.18%	Yes	Accepted	13	\$0	\$196,158	\$3,091,091
Stark Metropolitan Housing Authority	Renewal	Shelter Plus Care Gateway	PH-PSH	62.75%	No	Accepted	14	\$0	\$198,592	\$3,289,683
YWCA of Canton	Renewal	New Beginnings	PH-PSH	60.78%	No	Accepted	15	\$0	\$48,078	\$3,337,761
Stark Metropolitan Housing Authority	Renewal	Hunter House	PH-PSH	56.86%	No	Accepted	16	\$0	\$52,038	\$3,389,799
ICAN Housing	New	SSO- ICAN Street Outreach	SSO-Street Outreach	100.00%	No	Accepted	17	\$0	\$304,950	\$3,694,749
Refuge of Hope	New	RoH Street Outreach	SSO-Street Outreach	100.00%	No	Accepted	18	\$0	\$105,300	\$3,800,049
ICAN Housing	New	SSO - Workforce Development	SSO-Standalone	84.09%	No	Accepted	19	\$0	\$189,083	\$3,989,132
Alliance for Children and Families	New	Rising Up - DV	TH	81.36%	Yes	Accepted	20	\$0	\$440,000	\$4,429,132
Alliance for Children and Families	New	Shared Housing Park	TH	79.66%	No	Accepted	21	\$0	\$150,000	\$4,579,132
Alliance for Children and Families	New	Helping Hands	SSO-Standalone	75.00%	No	Accepted	22	\$0	\$253,500	\$4,832,632
Refuge of Hope	New	RoH SSO Shelter	SSO-Standalone	67.57%	No	Accepted	23	\$0	\$198,000	\$5,030,632
PROJECTS NOT RANKED										
Stark Housing Network, Inc.		FY 2026 CoC Planning Grant		N/A		Accepted	Not Ranked		\$223,442	\$5,254,074
YWCA of Canton	Renewal	STARR	PH-RRH	N/A		Fully Reallocated	Not Ranked	\$495,398	\$0	\$0
Stark Metropolitan Housing Authority	Renewal	Shelter Plus Care TRA	PH-PSH	N/A		Fully Reallocated	Not Ranked	\$519,283	\$0	\$0

Estimated Annual Renewal Demand (ARD) \$4,404,480

2026 HDX Competition Report

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

To Print this Workbook:

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

To Save This Workbook as a PDF:

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

On Accessibility, Navigability, and Printability:

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

For Questions:

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

2025 HDX Competition Report

2026 Competition Report - Summary

OH-508 - Canton, Massillon, Alliance/Stark County CoC

HDX Data Submission Participation Information

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

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

2025 HDX Competition Report

2026 Competition Report - LSA Summary & Usability Status

OH-508 - Canton, Massillon, Alliance/Stark County CoC

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

LSA Usability Status 2025

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

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

2026 Competition Report - SPM Data

OH-508 - Canton, Massillon, Alliance/Stark County CoC

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

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, and SH	977	70.0	61.0
1.2 Persons in ES-EE, ES-NbN, SH, and TH	1,029	78.5	62.0

2025 HDX Competition Report

2026 Competition Report - SPM Data

OH-508 - Canton, Massillon, Alliance/Stark County CoC

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

b. This measure is based on data element 3.917

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

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, SH, and PH (prior to “housing move in”)	1,088	257.4	125.0
1.2 Persons in ES-EE, ES-NbN, SH, TH, and PH (prior to “housing move in”)	1,145	258.3	125.0

2026 Competition Report - SPM Data

OH-508 - Canton, Massillon, Alliance/Stark County CoC

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

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

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

	Total # of Persons Exited to a PH Destination (2 Yrs Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
Metric	Count	Count	% of Returns	Count	% of Returns	Count	% of Returns	Count	% of Returns
Exit was from SO	71	1	1.4%	10	14.1%	2	2.8%	13	18.3%
Exit was from ES	563	74	13.1%	32	5.7%	52	9.2%	158	28.1%
Exit was from TH	30	1	3.3%	2	6.7%	3	10.0%	6	20.0%
Exit was from SH	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from PH	281	19	6.8%	9	3.2%	22	7.8%	50	17.8%
TOTAL Returns to Homelessness	945	95	10.1%	53	5.6%	79	8.4%	227	24.0%

2025 HDX Competition Report

2026 Competition Report - SPM Data

OH-508 - Canton, Massillon, Alliance/Stark County CoC

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

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

Please refer to PIT section for relevant data.

Metric 3.2 – Change in Annual Counts

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

Metric	Value
Universe: Unduplicated Total sheltered homeless persons	1,090
Emergency Shelter Total	1,028
Safe Haven Total	11
Transitional Housing Total	62

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OH-508 - Canton, Massillon, Alliance/Stark County CoC

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

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

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

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

Metric	Value
Universe: Number of adults (system stayers)	211
Number of adults with increased earned income	11
Percentage of adults who increased earned income	5.2%

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

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

Metric	Value
Universe: Number of adults (system stayers)	211
Number of adults with increased non-employment cash income	69
Percentage of adults who increased non-employment cash income	32.7%

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

Metric	Value
Universe: Number of adults (system stayers)	211
Number of adults with increased total income	78
Percentage of adults who increased total income	37.0%

Metric 4.4 – Change in earned income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	148
Number of adults who exited with increased earned income	23
Percentage of adults who increased earned income	15.5%

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

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

Metric	Value
Universe: Number of adults who exited (system leavers)	148
Number of adults who exited with increased non-employment cash income	20
Percentage of adults who increased non-employment cash income	13.5%

Metric 4.6 – Change in total income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	148
Number of adults who exited with increased total income	42
Percentage of adults who increased total income	28.4%

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

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

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

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

Metric	Value
Universe: Person with entries into ES-EE, ES-NbN, SH or TH during the reporting period.	965
Of persons above, count those who were in ES-EE, ES-NbN, SH, TH or any PH within 24 months prior to their entry during the reporting year.	317
Of persons above, count those who did not have entries in ES-EE, ES-NbN, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	648

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

Metric	Value
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1,137
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	375
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	762

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OH-508 - Canton, Massillon, Alliance/Stark County CoC

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

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

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

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

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

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

Metric	Value
Universe: Persons who exit Street Outreach	54
Of persons above, those who exited to temporary & some institutional destinations	24
Of the persons above, those who exited to permanent housing destinations	25
% Successful exits	90.7%

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

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

Metric	Value
Universe: Persons in ES-EE, ES-NbN, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	874
Of the persons above, those who exited to permanent housing destinations	393
% Successful exits	45.0%

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

Metric	Value
Universe: Persons in all PH projects except PH-RRH who exited after moving into housing, or who moved into housing and remained in the PH project	522
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	481
% Successful exits/retention	92.2%

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OH-508 - Canton, Massillon, Alliance/Stark County CoC

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

System Performance Measures Data Quality

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

Metric	All ES, SH	All TH	All PSH, OPH	All RRH	All Street Outreach
Unduplicated Persons Served (HMIS)	7	50	535	344	44
Total Leavers (HMIS)	7	50	535	344	44
Destination of Don't Know, Refused, or Missing (HMIS)	1	9	415	169	19
Destination Error Rate (Calculated)	14.3%	18.0%	77.6%	49.1%	43.2%

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2026 Competition Report - SPM Notes

OH-508 - Canton, Massillon, Alliance/Stark County CoC

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

Notes For Each SPM Measure

Measure		Notes
Measure 1	No notes.	
Measure 2	No notes.	
Measure 3	No notes.	
Measure 4	No notes.	
Measure 5	No notes.	
Measure 6	No Notes. Measure 6 was not applicable to CoCs in this reporting period.	
Measure 7	No notes.	
Data Quality	No notes.	

2025 HDX Competition Report

2026 Competition Report - HIC Summary

OH-508 - Canton, Massillon, Alliance/Stark County CoC

For HIC conducted in January/February of 2026

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current Non-VSP Beds in HMIS or Comparable Database	Total Year-Round, Current, Non-VSP Beds	Removed From Denominator: OPH EHV [†] Beds or Beds Affected by Natural Disaster*	Adjusted*** Total Year-Round, Current, Non-VSP Beds	Adjusted*** HMIS Bed Coverage Rate for Year-Round, Current Beds
ES	271	192	192	0	192	100.0%
SH	3	3	3	0	3	100.0%
TH	54	15	15	0	15	100.0%
RRH	225	189	189	0	189	100.0%
PSH	565	482	565	0	565	85.3%
OPH	9	9	9	0	9	100.0%
Total	1,127	890	973	0	973	91.5%

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2026 Competition Report

OH-508 - Canton, Massillon, A

For HIC conducted in January/

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current, VSP Beds in an HMIS-Comparable Database	Total Year-Round, Current, VSP Beds	Removed From Denominator: OPH EHV [†] Beds or Beds Affected by Natural Disaster ^{**}	Adjusted ^{***} Total Year-Round Current, VSP Beds	HMIS Comparable Bed Coverage Rate for VSP Beds
ES	271	79	79	0	79	100.00%
SH	3	0	0	0	0	NA
TH	54	39	39	0	39	100.00%
RRH	225	36	36	0	36	100.00%
PSH	565	0	0	0	0	NA
OPH	9	0	0	0	0	NA
Total	1,127	154	154	0	154	100.00%

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2026 Competition Report

OH-508 - Canton, Massillon, A

For HIC conducted in January/

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS-Comparable Database	Adjusted*** Total Year-Round, Current, Non-VSP and VSP Beds	HMIS and Comparable Database Coverage Rate
ES	271	271	271	100.00%
SH	3	3	3	100.00%
TH	54	54	54	100.00%
RRH	225	225	225	100.00%
PSH	565	482	565	85.31%
OPH	9	9	9	100.00%
Total	1,127	1,044	1,127	92.64%

2025 HDX Competition Report

2026 Competition Report - HIC Summary

OH-508 - Canton, Massillon, Alliance/Stark County CoC

For HIC conducted in January/February of 2026

1) † EHV = Emergency Housing Voucher

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

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

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

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

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

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

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

2026 Competition Report - PIT Summary
OH-508 - Canton, Massillon, Alliance/Stark County CoC
For PIT conducted in January/February of 2026

Submission Information

Date of PIT Count	Received HUD Waiver
1/25/2026	Not Applicable

Total Population PIT Count Data

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Emergency Shelter Total	241	236	247
Safe Haven Total	0	0	3
Transitional Housing Total	24	38	54
Total Sheltered Count	265	274	304
Total Unsheltered Count	65	101	94
Total Sheltered and Unsheltered Count*	330	375	398

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

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

Total People Experiencing Chronic Homelessness

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Total Sheltered Count	21	15	2
Total Unsheltered Count	2	2	0
Total	23	17	2

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

Type or clearly print the following information.

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

Applicant Organization:

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

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

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

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

39151700100, 39151700800, 39151701100, 39151701300, 39151710400, 39151711600, 39151714200, 39151715000

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

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

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

Estimated Funding Allocations

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

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

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

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

CoC-funded PSH, TH, SSO, and street outreach projects connect people in Opportunity Zones to housing, services, and employment resources, helping residents benefit from public and private investment.

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

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

Certification of Authorized Representative for the Applicant:

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

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

Prefix: _____ First Name: Marcie _____ Middle Initial: A _____ Last Name: Bragg _____ Suffix: _____

Title: Executive Director _____ Organization: Stark Housing Network, Inc. _____

Signature: Marcie Bragg _____ Date: 9/23/2026 _____

Continuum of Care (CoC) Program Compliance Acknowledgment to Advance Recovery

By initialing below, the Applicant certifies that it understands and agrees to comply with the following requirements for any housing project funded through the Continuum of Care (CoC) Program:

1. The Applicant shall not operate, support, or permit the operation of any drug injection site, supervised consumption site, or "safe consumption site" within any CoC-funded housing project. The Applicant shall not knowingly distribute drug paraphernalia on or off property under its control, knowingly permit the use, possession, or distribution of illicit drugs on property under its control, or engage in any such activities under the pretext of "harm reduction."
2. If the Continuum of Care determines that a CoC-funded housing project is in violation of any of the above requirements, the CoC may take corrective actions including, but not limited to: requiring a corrective action plan; reallocating funding; restricting eligibility for future CoC funding opportunities; and/or taking any other remedial action permitted under applicable federal, state, or local laws, regulations, or grant requirements.
3. The Applicant is encouraged to support and facilitate access to evidence-based substance use disorder treatment services, recovery support services, and recovery housing opportunities, whether provided directly or through referral to providers within or outside the Continuum of Care's geographic area.
4. Nothing in this policy shall be interpreted to restrict or prohibit CoC-funded housing projects from establishing program requirements that participants maintain sobriety or participate in substance use disorder treatment as a condition of assistance, where permitted by applicable law and program regulations.

By signing or initialing below, the Applicant acknowledges that it has read, understands, and agrees to comply with the requirements set forth in this statement.

Applicant Initials: _ _ _ _ Date: _ _ _ _