

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: FL-511 - Pensacola/Escambia, Santa Rosa Counties CoC

1A-2. Collaborative Applicant Name: Opening Doors Northwest Florida Inc.

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Opening Doors Northwest Florida Inc.

1B. Coordination and Engagement–Accountable Structure and Participation

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

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

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

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

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

	Entity	Participated in CoC Meetings	Number of Board Members
1.	Affordable Housing Developer(s)	Yes	1
2.	CDBG/HOME/ESG Entitlement Jurisdiction(s)	Yes	4
3.	Certified Community Behavioral Health Clinic (CCBHC)	Yes	1
4.	Community Mental Health Center (CMHC)	Yes	1
5.	Disability Advocate(s)	Yes	0
6.	Disability Service Organization(s)	Yes	0
7.	Emergency Medical Services (EMS)/Crisis Response Team(s)	Yes	0
8.	Employment Assistance Program(s) (e.g., Local Workforce Development, American Job Center)	Yes	1
9.	Faith-based Organization(s)	Yes	0
10.	Homeless or Formerly Homeless Person(s)	Yes	2
11.	Hospital(s)	Yes	0
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)	Yes	0
16.	Local Government Staff/Official(s)	Yes	5

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	2
21.	Mental Illness Advocate(s)	Yes	0
22.	Organization(s) led by and serving people with disabilities	Yes	0
23.	Other homeless subpopulation advocate(s)	Yes	0
24.	Other nonprofit homeless assistance provider(s)	Yes	0
25.	Other social service provider(s)	Yes	0
26.	Public Housing Agencies	Yes	1
27.	Recovery Housing or Sober Living Provider(s)	Yes	0
28.	School Administrators/Homeless Liaison(s)	Yes	1
29.	School District(s)	Yes	1
30.	Street Outreach Team(s)	Yes	5
31.	Substance Abuse Advocate(s)	Yes	0
32.	Substance Abuse Service Organization(s)	Yes	2
33.	Universities	Yes	0
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	No	
40.	State Sexual Assault Coalition	No	
41.	Youth Advocate(s)	Yes	0
42.	Youth Homeless Organization(s)	Yes	0
43.	Youth Service Provider(s)	Yes	0
44.	Other Homeless Assistance Provider(s)	Yes	0
45.	Local Business or Chamber of Commerce or a Member of a Business Improvement District	Yes	1
	Other: (limit 50 characters)		
46.	n/a		
47.	n/a		

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)

FL-511 maintains an open and transparent process for inviting new members from Escambia and Santa Rosa Counties to participate in the Continuum of Care.

Membership information and instructions for joining are publicly available on the Opening Doors Northwest Florida website. Membership is open to individuals and organizations interested in preventing and ending homelessness, regardless of whether they receive CoC Program funding.

FL-511 promotes membership year-round and conducts outreach at least annually. The CoC distributes quarterly email invitations and membership information to community partners and prospective members. CoC representatives also participate in community meetings and events where they explain the CoC's work, describe opportunities for participation, and invite individuals and organizations to join.

Leadership Council members, existing CoC member organizations, and community partners also help share information about CoC membership through their professional and community networks.

Interested organizations and individuals can access membership information through the public website or contact the CoC for help joining. Through its public website, recurring email outreach, community events, and partner networks, FL-511 offers multiple publicly accessible opportunities each year for new members to learn about and join the CoC.

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)

FL-511 uses multiple methods to solicit and consider input regarding CoC performance, strategies, service gaps, and priorities from people with lived experience, service providers, public agencies, community organizations, and other stakeholders throughout Escambia and Santa Rosa Counties.

People receiving services provide direct feedback through client/customer satisfaction surveys and engagement at community events. Provider and partner feedback is also collected through post-training surveys, technical-assistance discussions, CoC meetings, committees, and other stakeholder engagement.

FL-511 conducts Gaps and Needs Assessment activities to obtain structured input on unmet needs, available resources, system barriers, and priorities for improvement. The CoC also uses the annual Point-in-Time (PIT) Count and Housing Inventory Count (HIC) processes to engage outreach teams, shelters, housing providers, local governments, and other partners while assessing homelessness, system capacity, and gaps in available housing and services.

Community initiatives and events provide additional opportunities for engagement. These include Real Change activities in partnership with Escambia County, You-Count/I-Count Homeless Connect activities associated with the PIT Count, and Operation HOPE Day events in Escambia and Santa Rosa Counties. These activities bring together people experiencing or at risk of homelessness, service providers, public agencies, and community partners and provide opportunities to identify barriers, service needs, and gaps directly from those interacting with the homeless-response system.

Formal opportunities for input include CoC General Membership, Leadership Council, and committee meetings; strategic planning activities; public comment on planning documents; and communication through the CoC website, email/listserv, social media, and community outreach.

FL-511 considers information from lived experience and customer feedback, provider surveys, Gaps Analysis activities, PIT/HIC data, community events, system performance data, stakeholder discussions, and committee work when evaluating performance and setting priorities. Findings inform strategic planning, system-improvement activities, community partnerships, and local funding priorities.

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)

FL-511 maintains a transparent process for accepting and considering proposals from organizations that have not previously received CoC Program funding, including faith-based organizations.

Before the local Notice of Funding Opportunity is released, FL-511 hosts a “Grant Camp” to provide technical assistance on the CoC Program, eligible activities, application requirements, organizational capacity, and expectations for administering federal funds. This allows prospective applicants, including new and faith-based organizations, to assess their readiness before deciding to apply.

The local competition is publicly announced through the CoC website, membership listserv, and the CoC Communications Committee, which is chaired by Escambia County’s governmental liaison. CoC planning staff also conduct targeted outreach to community and faith-based organizations that may have the capacity to address identified homelessness needs.

Competition materials are made publicly available, including the local NOFO guide, competition priorities, reallocation policies, application requirements, letters of intent, timelines, scoring tools, and other instructions. Public announcements make clear that organizations do not need to be previous CoC Program recipients to apply.

All eligible proposals are reviewed using the same published scoring criteria and objective review tools. A diverse review panel, drawn from CoC member organizations and community stakeholders with experience in HUD-funded programs, local government, CoC governance, and lived experience of homelessness, considers applications. Reviewers follow conflict-of-interest and recusal requirements.

Through advance training, public notice, targeted outreach, publicly available application materials, objective scoring criteria, and an independent review process, FL-511 provides new and faith-based organizations a transparent and equitable opportunity to compete for CoC Program funding.

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)

1. **Data-Defined Gap:** FL-511 identified a system gap in moving households from homelessness to permanent housing. FY2025 LSA data show 1,070 households/1,476 people served, an average of 122 cumulative days homeless, and only 30% of exiting households reaching permanent destinations. The 2026 PIT identified 423 unsheltered persons, including 214 of 248 chronically homeless persons. The Gaps Analysis also identified delays between assessment, referral, and placement, along with navigation, documentation, transportation, waitlist, eligibility, and provider-coordination barriers.
2. **Relevant Subpopulations:** The plan addresses adults and families with children; sheltered and unsheltered households; persons experiencing chronic homelessness; Veterans; youth; survivors of domestic violence; persons with disabilities, serious mental illness, or substance-use disorders; and households facing transportation, income, documentation, communication, or other housing barriers.
3. **Measurable Targets:** Consistent with the FL-511 FY2026 Action Plan, the CoC's FY2026 system targets are to reduce length of time homeless by 10–15%; increase permanent housing exits to 80%+; reduce average time from Coordinated Entry referral to housing move-in to 30–45 days; increase successful housing placements from CE referrals by 15%; and reduce delays between assessment, referral, and housing placement by 10%. These targets directly measure progress in improving system flow and moving households more quickly from homelessness to permanent housing
4. **Task Timelines:** FL-511 will conduct monthly case conferencing, HMIS data-quality review, and CE referral-to-move-in monitoring; quarterly system-performance and provider-outcome reviews; and annual project evaluation, ranking, funding, and reallocation decisions.
5. **Specific Funding Sources:** HUD CoC Program, Emergency Solutions Grant (ESG), Florida Challenge Grant, and TANF, coordinated with other federally funded homeless-assistance programs as applicable.
6. **Accountable Owner/Body:** Opening Doors Northwest Florida, as Lead Agency, will coordinate implementation, HMIS monitoring, CE performance, and reporting. The FL-511 CoC Leadership Council will oversee system performance, provider outcomes, project review, funding decisions, and reallocation.

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

1C. Coordination and Engagement

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

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- Frequently Asked Questions

1C-1.	Treatment and Recovery Services—On-site Substance Use Treatment Availability.	
	You must upload the List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment attachment to the 4A. Attachments Screen.	
	What percent of your TH/RRH/PSH projects have substance use treatment available on site?	43%

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

(limit 2,500 characters)

N/A

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

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

(limit 2,500 characters)

FL-511 uses a coordinated behavioral-health network that combines clinical treatment providers with homeless-service, recovery, housing, and peer-support partners. Lakeview Center is a key clinical partner and CoC-funded permanent supportive housing provider. Lakeview offers outpatient mental-health counseling, psychiatry and medication management, medication-assisted treatment for opioid use disorder, intensive outpatient substance-use treatment, individual/group/family counseling, 24/7 crisis response, and connections to detoxification, residential, and inpatient care when a higher level of care is needed.

CoC partners extend these services. Bright Bridge Ministries operates AA, NA, and other recovery groups and has formal MOUs with LifeView/Lakeview–Road to Recovery and Escambia County EMS Coordinated Opioid Recovery (CORE), supporting referrals to clinical treatment and opioid-recovery services. Ministry Village at Olive offers addiction-support groups and Charis House residential recovery. Waterfront Rescue Mission operates its LifeBuilder addiction-recovery program and connects shelter guests with partner agencies. Re-Entry Alliance Pensacola provides case management, substance-use recovery/peer support, and connections to mental-health/PTSD and healthcare services.

90Works connects veterans and other eligible households to behavioral-health resources, including Lakeview, and its SSG Fox suicide-prevention services address risks including mental-health conditions, substance-use disorders, homelessness, and other crises. Endeavors' Pensacola veteran programs provide case management, peer support, and mental-health referrals. FavorHouse provides confidential counseling, support groups, safety planning, and 24/7 crisis intervention for survivors of domestic violence. Catholic Charities provides case management and referrals when behavioral-health or other needs are identified.

Opening Doors and Coordinated Entry connect participants to these partners based on need and appropriate level of care, while HMIS, case conferencing, street outreach, housing programs, and community events such as I-Count strengthen coordination. This network allows FL-511 to pair housing assistance with psychosocial supports, recovery services, suicide-prevention resources, medication management, and outpatient mental-health and substance-use treatment rather than expecting one homelessness provider to deliver the full continuum of care.

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)

Continuum of Care FL-511, led by Opening Doors Northwest Florida (ODNWFL), partners with community-based, behavioral health, substance-use, healthcare, and faith-based organizations to connect individuals experiencing homelessness with peer support, recovery services, and recovery navigation. Through Coordinated Entry and ongoing case management, individuals are assessed for behavioral health and substance-use needs and connected to appropriate services based on their circumstances and level of need.

FL-511 partners with organizations such as Lakeview Center, Overflow Health Alliance, Oxford House, Banyan Treatment Center, Community Health Northwest Florida, and faith-based ministries that provide recovery-oriented services, peer support, treatment referrals, mentoring, and assistance navigating community resources. Oxford House and other recovery-focused partners provide opportunities for individuals in recovery to benefit from peer relationships, shared experiences, accountability, and sober living environments.

Faith-based partners are an important component of the recovery network. Churches and ministries provide trusted relationships, mentoring, transportation, practical assistance, encouragement, and connections to treatment and recovery resources. These relationships are especially valuable for individuals who may be hesitant to engage with traditional service systems. ODNWFL's Coordinated Entry and case management processes support recovery navigation by helping participants identify appropriate services, make referrals, obtain identification and benefits, address barriers to treatment, and maintain connections with providers during housing stabilization. ODNWFL also works with Offensive Corp., which utilizes individuals with lived experience and certified peer counselors for street outreach and engagement. This peer-based approach helps build trust and connect individuals to appropriate services and recovery resources.

When appropriate, individuals are linked to substance-use treatment, crisis services, behavioral healthcare, recovery housing, peer support, and other community resources. FL-511 recognizes peer support and recovery navigation as important components of housing stability. By incorporating lived-experience support, recovery-focused organizations, behavioral health providers, healthcare partners, and faith-based organizations into the homelessness response system, CoC helps individuals move beyond crisis toward sustained recovery.

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)

FL-511 identifies individuals experiencing serious mental illness through Coordinated Entry assessments, street outreach, emergency shelter and housing-provider engagement, behavioral-health referrals, crisis response, and ongoing case management across Escambia and Santa Rosa Counties. Staff assess self-reported behavioral-health needs, functional barriers, disability, current treatment connections, crisis history, and other factors affecting housing stability and refer individuals for further clinical assessment when needed.

Lakeview Center is a key behavioral-health partner serving both counties. Its Florida Assertive Community Treatment (FACT) team provides intensive community-based services for individuals with serious mental illness who need significant support to remain safely in the community. The multidisciplinary FACT team includes psychiatry, nursing, counseling, case management, substance-use treatment, and vocational services and delivers care in community settings to reduce barriers to treatment.

Individuals experiencing an acute crisis may also be connected to Lakeview's 24/7 Mobile Response Team or Central Receiving Facility, which serves adults in Escambia and Santa Rosa Counties. Following assessment or stabilization, participants may be connected to psychiatric care, medication management, outpatient treatment, substance-use services, case management, residential treatment, or other appropriate levels of care.

FL-511 coordinates these behavioral-health resources with housing interventions, including CoC-funded permanent supportive housing, Coordinated Entry, outreach, benefits assistance, and housing navigation. Lakeview's Housing First supportive-housing model also provides supportive counseling, psychosocial rehabilitation, medication monitoring, independent-living skills, and linkage to treatment.

This coordinated approach allows FL-511 to identify individuals with serious mental illness, connect them to intensive and appropriate treatment, and pair behavioral-health care with housing and supportive services needed to promote long-term stability.

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)

FL-511 partners with Lakeview Center, which serves Escambia and Santa Rosa Counties. Lakeview provides intensive outpatient substance-use treatment in coordination with Escambia County Adult Drug Court and operates the regional Central Receiving Facility for Baker Act and Marchman Act screening, stabilization, and referral to appropriate treatment. FL-511 coordinates housing and supportive-service connections for individuals involved in these systems.

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)

FL-511 coordinates with Lakeview Center across Escambia and Santa Rosa Counties to connect individuals involved with specialty courts, court-ordered treatment, or civil commitment with housing and supportive services that promote stability and independence.

Lakeview provides the behavioral-health component of the partnership, including substance-use treatment connected with Escambia County Adult Drug Court, crisis assessment through the regional Central Receiving Facility, psychiatric and outpatient behavioral-health services, medication management, recovery supports, and higher levels of care when needed. Lakeview also operates permanent supportive housing within FL-511, strengthening the connection between treatment and housing.

FL-511 complements these services through Coordinated Entry, street outreach, housing navigation, benefits assistance, referrals, and connections to available shelter and permanent housing resources. When an individual receiving Lakeview services is experiencing homelessness or housing instability, the partners can coordinate appropriate housing and supportive-service connections while Lakeview addresses behavioral-health and recovery needs.

Court-ordered treatment can provide additional structure and continuity for individuals who meet applicable legal criteria. FL-511 does not initiate or enforce court orders; instead, it leverages the treatment structure already established through Lakeview and the courts by coordinating housing and supportive services around the individual's treatment and recovery needs. This helps prevent treatment or court involvement from becoming disconnected from the individual's housing plan.

Following crisis stabilization, treatment, or court involvement, coordination focuses on maintaining engagement with behavioral-health care while addressing barriers to independence such as housing, income and benefits, employment, transportation, and ongoing supportive-service needs.

By linking Lakeview's treatment, recovery, crisis, and court-connected services with FL-511's housing resources and Coordinated Entry system, the partnership supports continuity of care, housing stability, recovery, and movement toward greater independence.

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

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

(limit 500 characters)

FL-511 partners with 211 Northwest Florida, the local 988 crisis center, and Lakeview Center, which operates the Mobile Response Team, Central Receiving Facility, and other crisis services serving Escambia and Santa Rosa Counties. Through Coordinated Entry, street outreach, and case management, FL-511 connects individuals experiencing homelessness to 24/7 crisis support, mobile response, crisis assessment, stabilization, and follow-up behavioral health care.

1C-1f.	Treatment and Recovery Services—Availability of Units for Persons Reporting Chronic Substance Use.	
	You must upload the List of CoC Program Projects and the Number of Units that require Substance Abuse Treatment attachment to the 4A. Attachments Screen.	
	Identify the number of CoC Program-funded units that require program participant engagement in substance abuse treatment services as a condition of continued participation in the program in accordance with 24 CFR 578.75.	28

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

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

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

(limit 500 characters)

CoC FL-511 partners with Community Health Northwest Florida, its local PATH provider.

Its attached letter of support documents PATH and homeless services collaboration.

Community Health's CEO serves on the CoC Leadership Council; its PATH team and clinic at Waterfront Rescue Mission actively participate in the CoC. Lakeview Center

also participates through its Vice President of Clinic Services on the Opening Doors

board and Director of Intake Services on the CoC Leadership Council.

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)

FL-511 identified four new CoC Program projects that will operate sober housing consistent with 24 CFR 578.93(b)(5): Bright Bridge Ministries' A Bright Bridge to Stable Housing; Ministry Village at Olive's Charis House; Re-Entry Alliance Pensacola's New Horizons Village 2; and Waterfront Rescue Mission. Each maintains written drug- and alcohol-free housing requirements and provides recovery-oriented supports.

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)

FL-511 coordinates across Escambia and Santa Rosa Counties with the behavioral health, crisis, recovery, specialty court, and treatment providers identified above to ensure housing needs are addressed as part of treatment, stabilization, and recovery.

When a partner identifies that an individual is homeless or at risk of homelessness, the individual is connected directly to Coordinated Entry (CE), homelessness prevention, housing navigation, or an appropriate housing provider. When possible, referrals occur before discharge from crisis stabilization, treatment, court-connected programming, or other settings so housing instability can be addressed before the individual enters or returns to homelessness.

Warm handoffs may include direct provider-to-provider referrals, assistance completing CE, transportation coordination, help obtaining identification and benefits, housing applications, case conferencing, and follow-up to confirm connection with the receiving provider. When permitted, partners share information needed to coordinate services and resolve barriers that could delay housing placement.

For example, FL-511 coordinates with Lakeview Center so individuals receiving FACT, outpatient behavioral-health or substance-use treatment, crisis services, or court-connected treatment can be linked to CE and housing resources while continuing care. FL-511 also coordinates with 211 Northwest Florida/988 and crisis-response partners to connect individuals in crisis to treatment while identifying housing needs. Recovery-oriented housing providers, including Bright Bridge Ministries, Ministry Village at Olive's Charis House, Re-Entry Alliance Pensacola's New Horizons Village, and Waterfront Rescue Mission, provide additional housing pathways for individuals needing recovery-supportive environments.

For households at imminent risk of homelessness, FL-511 uses prevention, diversion, benefits, and community resources to preserve housing when possible. For those already homeless, CE connects them to shelter and available housing interventions.

This coordinated approach helps prevent gaps between treatment and housing and supports continued stability after placement.

1C-2.	Supportive Services Investment.
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	Number
1. Enter your CoC's FY 2026 Annual Renewal Demand (ARD).	\$837,774
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.	\$950,568
3. Percent of your CoC's FY 2026 ARD (from element 1 above) that is supportive services funding (from element 2 above).	113%
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.	\$987,882

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).

231%

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)

FL-511 consults with ESG funding entities and ESG-funded providers throughout the planning, allocation, implementation, and evaluation of ESG resources serving Escambia and Santa Rosa Counties.

For State ESG funds, the Florida Department of Children and Families Office on Homelessness contracts with Opening Doors Northwest Florida, the FL-511 Lead Agency, which administers ESG locally and subcontracts with Bright Bridge Ministries, Catholic Charities of Northwest Florida, FavorHouse of Northwest Florida, Waterfront Rescue Mission, and its own ESG-funded activities. FL-511 consults with funded providers through monthly subcontractor meetings, a dedicated project-applicant workgroup, mini-monitorings, site visits, monthly HMIS technical assistance, APR and performance reviews, and direct discussions about service gaps, eligible activities, referrals, implementation barriers, and emerging needs. FL-511 also reviews feedback from program participants regarding ESG-funded services.

FL-511 separately consults with Escambia County, the ESG entitlement jurisdiction within the CoC geography. Escambia County receives its own ESG allocation and has met with CoC leadership and program staff while developing its ESG program to discuss homelessness trends, existing resources, Coordinated Entry, HMIS, service gaps, priority populations, and opportunities to align County ESG investments with CoC strategies. This consultation will continue as the County finalizes and implements its allocation process.

Provider performance, participant feedback, HMIS, Coordinated Entry, PIT/HIC, monitoring findings, APR results, and Gaps Analysis data help identify unmet needs and inform future ESG priorities and allocation decisions. This process helps coordinate State ESG resources with Escambia County entitlement ESG funds, reduce duplication, and align investments with needs across the two-county homeless-response system.

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)

Continuum of Care FL-511, led by Opening Doors Northwest Florida (ODNWFL), coordinates with emergency shelter providers to ensure individuals and families experiencing homelessness have access to immediate shelter while being connected to longer-term housing and supportive services. Shelter providers serve as important access points to the CoC's Coordinated Entry (CE) system and are encouraged to connect eligible individuals to ODNWFL for assessment, prioritization, and housing referrals.

ODNWFL maintains communication with shelter partners to identify individuals and families who may need Rapid Re-Housing (RRH), Bridge Housing, Transitional Housing (TH), Permanent Supportive Housing (PSH), homelessness prevention, or other community resources. Shelter staff and ODNWFL case managers work together to obtain necessary documentation, complete referrals, address barriers, and support transitions from emergency shelter to stable housing.

ODNWFL is also partnered with Waterfront Rescue Mission (WRM) through Emergency Shelter (ES) Tokens funded through CoC's Street Outreach activities. Tokens provide individuals engaged through street outreach with access to emergency shelter when appropriate. Outreach staff coordinate with WRM to connect unsheltered individuals to available shelters while continuing engagement and assessing their housing and supportive-service needs. Shelter utilization is documented through required sign-in and HMIS processes to support accountability and continuity of care.

Shelter providers also help identify individuals who may not otherwise access the formal homelessness response system. ODNWFL's outreach and CE staff maintain relationships with shelter personnel and other community partners to facilitate warm handoffs and ensure individuals are connected to the appropriate next step.

Through Coordinated Entry, shelter partnerships, street outreach, ES Tokens, HMIS, case management, and the Housing By-Name List, FL-511 works to ensure emergency shelter is not an endpoint but a bridge to appropriate housing assistance, supportive services, and 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)

CoC FL-511 uses PIT, HIC, HMIS, and System Performance data to inform planning, evaluation, and coordination across Escambia and Santa Rosa Counties. Opening Doors Northwest Florida, as Collaborative Applicant and HMIS Lead, shares aggregate and appropriately de-identified information with state and local government partners to identify needs, evaluate service gaps, guide funding priorities, and measure progress. PIT data describe the number and characteristics of people experiencing homelessness. HIC data identify shelter and housing inventory and HMIS bed coverage. HMIS data show service utilization, referrals, and housing outcomes. System Performance Measures assess length of time homeless, first-time homelessness, returns to homelessness, income growth, and successful housing placements. FL-511 shares findings through reports, presentations, CoC meetings, and planning discussions with the Florida Department of Children and Families, Escambia County, Santa Rosa County, and municipal partners. These discussions inform outreach, shelter, housing, prevention, and health and behavioral health coordination. Opening Doors also exchanges information with local law enforcement, as permitted by law, to identify people experiencing homelessness who are transported into the CoC's service area following discharge from facilities outside Escambia and Santa Rosa Counties. Partners use this information to identify discharge patterns and unmet service needs. Opening Doors works with the CoCs serving the originating communities and the discharging facilities to improve advance notification, verify receiving services and available placements, and arrange coordinated referrals and warm handoffs. This collaboration seeks to prevent discharge into homelessness and maintain continuity of care across jurisdictions. Public and general planning reports use aggregate or appropriately de-identified data. Identifiable information is shared only as permitted by applicable law, HMIS privacy and security policies, and required consent or other authorization. Victim service provider information receives applicable confidentiality protections. For grant monitoring and reimbursement, Opening Doors provides only necessary and authorized documentation of eligible services and expenditures. Staff review records for identifying information, use secure transmission methods, and refer unusual disclosure requests to the HMIS Lead.

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)

FL-511 uses information from partner agencies alongside HMIS to identify unmet needs, improve referrals, reduce duplication, and coordinate care across Escambia and Santa Rosa Counties.

Waterfront Rescue Mission uses MissionTracker for shelter and transitional housing records. Waterfront has granted Opening Doors access to extract its HMIS dataset for upload into the CoC's HMIS. Opening Doors is implementing this integration to improve information about participants' current placements, reconcile enrollment and exit records, and reduce duplicate or conflicting referrals. Staff will validate imported records and resolve discrepancies with Waterfront.

Opening Doors partners with United Way of West Florida, the local 211 operator, to identify requests for assistance, unmet needs, and available resources.

Referrals and information from the Escambia and Santa Rosa school districts' McKinney-Vento offices help identify families experiencing homelessness and coordinate housing assistance with educational supports.

Community Health Northwest Florida, a Federally Qualified Health Center, and Lakeview Center, a behavioral health provider, provide referrals and authorized information about care needs and discharge plans. Staff review this information alongside HMIS enrollment and housing records to identify individuals needing follow-up and coordinate the next service connection. This supports continuity between treatment, shelter, housing, and ongoing care.

Opening Doors also works with the Escambia County Sheriff's Office and Pensacola Police Department. Encounter and referral information helps outreach teams engage individuals disconnected from services and identify people transported into the area following discharge from facilities outside the CoC. Opening Doors coordinates with originating CoCs and facilities to improve discharge planning and arrange connections to receiving providers.

FavorHouse uses Osmium, an HMIS-comparable database, to protect confidential survivor records. Aggregate information informs service planning without entering identifiable survivor records into the community-wide HMIS.

Information exchanges follow applicable law, privacy policies, and required consent or other authorization. These sources help FL-511 coordinate services and improve continuity of care.

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)

FL-511 partners with workforce development, education, and employment-service organizations across Escambia and Santa Rosa Counties to connect individuals experiencing homelessness with employment, training, credentials, and career pathways that increase earned income and support housing stability. CareerSource Escarosa is a longstanding CoC organizational member and serves as the Local Workforce Development Board and One-Stop Career Center operator for Escambia and Santa Rosa Counties. Through CareerSource, participants can access career planning, job-search assistance, WIOA-funded occupational training, on-the-job training, employer connections, and other workforce services.

FL-511 also maintains connections with Pensacola State College, George Stone Technical College, and Locklin Technical College, expanding access to postsecondary education, vocational training, industry credentials, and career pathways in healthcare, skilled trades, culinary arts, and other occupations. Additional CoC partners provide specialized workforce supports. Endeavors operates the Homeless Veteran Reintegration Program, providing career counseling, résumé development, job placement, on-the-job training, and supportive services for veterans experiencing homelessness. Bright Bridge Ministries operates the Fresh Start Culinary Program, providing vocational and employment-readiness training. Waterfront Rescue Mission provides work-readiness and employment programming, including its Jump Start pathway. Goodwill Gulf Coast and Truck Driver Institute of Florida are also CoC member organizations that provide employment, education, occupational training, or credentialing services.

FL-511 uses these partnerships to connect participants with specific workforce pathways based on their goals and barriers. A participant may be referred to CareerSource for WIOA-funded training or employer placement; Pensacola State College, George Stone, or Locklin for credentialing; Truck Driver Institute for commercial driving training; Bright Bridge for culinary training; Endeavors for veteran-specific employment services; or Goodwill Gulf Coast and Waterfront Rescue Mission for job-readiness and employment supports. Housing and case-management staff can then coordinate employment goals with transportation, benefits, documentation, and other supports needed to obtain and sustain employment.

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)

Continuum of Care FL-511, through Opening Doors Northwest Florida (ODNWFL) and Team H.O.P.E. Street Outreach, works collaboratively with law enforcement, first responders, emergency services, and community partners to increase positive interactions with individuals experiencing homelessness. Outreach staff build relationships with local law enforcement and first responders so that individuals encountered during calls for service can be connected to appropriate CoC resources rather than relying solely on enforcement or emergency responses. ODNWFL outreach staff respond to referrals and collaborate with law enforcement, including local police and sheriff's departments, to engage individuals where they are and provide information about shelter, Coordinated Entry, healthcare, behavioral health, substance-use treatment, and housing resources. When appropriate, first responders make warm referrals to outreach staff for continued engagement and follow-up. Team H.O.P.E. also brings community partners together to strengthen communication, identify individuals who may be disconnected from services, and coordinate appropriate responses. Outreach staff use trauma-informed and relationship-based approaches to build trust, address immediate needs, and reduce barriers to accepting assistance. When individuals are willing to engage, outreach staff help connect them to the CoC's Coordinated Entry process, emergency shelter, ES Tokens through Waterfront Rescue Mission, behavioral health and crisis services, benefits, and housing programs. For individuals with behavioral health or substance-use needs, outreach staff coordinate with appropriate providers and crisis resources. This collaborative approach promotes positive, respectful interactions between people experiencing homelessness and first responders while increasing awareness and utilization of CoC services. The goal is to ensure that encounters with law enforcement and first responders become opportunities for connection, engagement, and pathways toward 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)

Continuum of Care FL-511, led by Opening Doors Northwest Florida (ODNWFL), recognizes family and natural support networks as important resources in helping individuals and families exit homelessness and maintain housing stability. Through Coordinated Entry, street outreach, shelter partnerships, and case management, participants are asked about available family, friends, and other supportive relationships that may provide a safe and appropriate housing or support option.

When reunification is identified as an appropriate goal, case managers work with participants to locate and contact family or other supportive individuals, assess the safety and feasibility of reunification, and address barriers that may prevent the individual from reconnecting with their support network. Case managers may assist with communication, transportation planning, identification and documentation, benefit connections, and referrals to services in another geographic area.

ODNWFL and CoC-funded providers coordinate with community partners, faith-based organizations, transportation resources, shelters, and service providers to help facilitate reunification when appropriate. When a participant has identified a safe destination outside the FL-511 geographic area, staff of Escambia County funded Project Reconnect can assist with connecting the participant to housing and mainstream resources in the receiving community and coordinating a warm handoff whenever possible.

For individuals living in CoC-funded housing, case management and housing navigation may include strengthening relationships with family and other positive supports when consistent with the participant's goals and safety.

Providers encourage participants to develop support networks that can contribute to long-term stability while respecting participant choice, confidentiality, and housing program requirements.

FL-511 views reunification as one component of a broader housing stability strategy. When safe and appropriate, reconnecting individuals with family and natural supports can reduce isolation, strengthen community connections, and provide additional resources that support successful transitions from homelessness to stable housing.

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?	No	

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)

CoC FL-511 works directly with law enforcement and first responders across Escambia and Santa Rosa Counties. The Opening Doors Executive Director communicates frequently with senior leaders of the Escambia County Sheriff's Office, Pensacola Police Department, Milton Police Department, and Santa Rosa County Sheriff's Office. These relationships allow the CoC and law enforcement to discuss conditions in public spaces, coordinate responses, and connect people experiencing homelessness with services. Letters of support documenting these partnerships are included in the required attachment. CoC Street Outreach teams dispatch with law enforcement to engage people living in encampments. Outreach staff coordinate the homeless services response by assessing needs and connecting individuals with Coordinated Entry, shelter, health care, behavioral health care, and housing resources. Opening Doors also works with Community Health Northwest Florida, including its PATH program and clinic at Waterfront Rescue Mission, and with Lakeview Center to support connections to care. The CoC cooperates with lawful local public safety efforts and does not interfere with law enforcement operations. First responders retain responsibility for immediate safety and emergency decisions; CoC partners assist by engaging individuals, arranging service connections, and coordinating follow-up. Regular communication between the Executive Director, law enforcement leaders, and outreach teams helps address public safety concerns while giving people experiencing homelessness a path to appropriate services.

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)

FL-511 operates across Escambia and Santa Rosa Counties under Florida Statute §125.0231, which prohibits counties and municipalities from authorizing or allowing regular public camping or sleeping on public property. The City of Pensacola also prohibits unauthorized camping on public property, and Santa Rosa County prohibits camping in county parks except in designated, permitted areas. These policies support timely removal of tents and encampments from public property but can hinder homelessness-response efforts when individuals are displaced before shelter, treatment, or housing can be arranged.

FL-511 has responded by coordinating outreach and service connection in locations where unsheltered individuals congregate. Team H.O.P.E. Street Outreach engages individuals in encampments and other places not intended for habitation and connects them to Coordinated Entry, emergency shelter, behavioral-health and substance-use services, benefits, and housing navigation. In Escambia County, the CoC works with Pensacola Police Department Community Response Specialists and community partners to connect individuals encountered in public spaces with shelter and services. FL-511 also participates in Real Change Escambia initiatives addressing unsheltered homelessness and encampments.

The CoC has expanded alternatives to continued public camping through shelter and housing resources, including emergency shelter access, Bridge Housing, transitional housing, and housing navigation. When individuals are not immediately able or willing to enter housing, outreach teams continue engagement rather than ending services after an encampment is cleared. FL-511 will leverage public-camping laws by encouraging local governments and law enforcement to coordinate with outreach before or during planned clearances whenever feasible so individuals can be offered shelter, treatment, Coordinated Entry, and housing resources. To mitigate restrictive effects, FL-511 will maintain access to homeless services regardless of enforcement involvement, re-engage individuals who relocate, and use outreach and case conferencing to prevent clearance from simply shifting people to another unsheltered location.

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)

Continuum of Care FL-511 continues to identify and engage individuals experiencing unsheltered homelessness, including individuals residing in tents, vehicles, makeshift structures, and other outdoor locations throughout Escambia and Santa Rosa Counties. The 2026 Point-in-Time Count identified 1,155 people experiencing homelessness across the FL-511 geography, demonstrating an ongoing need for effective street outreach and housing interventions.

Encampments in the FL-511 area are generally dispersed rather than limited to one large, permanent site. Locations and the number of individuals present can change frequently due to weather, law-enforcement activity, property access, displacement, and movement of individuals seeking safer or more accessible locations. Because of this fluidity, Team H.O.P.E. Street Outreach and CoC partners maintain ongoing engagement rather than relying solely on a one-time count.

ODNWFL coordinates with local governments, law enforcement, first responders, emergency shelters, healthcare and behavioral health providers, faith-based organizations, and community partners to identify and engage people living unsheltered. Outreach staff work to establish relationships, assess immediate needs, provide basic resources, and connect individuals to Coordinated Entry, emergency shelter, healthcare, behavioral health and substance-use services, benefits, and housing assistance.

The CoC also utilizes Emergency Shelter Tokens through Waterfront Rescue Mission to provide emergency shelter access for individuals engaged through street outreach when appropriate. ODNWFL's street outreach efforts are designed to increase engagement with people who may be disconnected from traditional services and to create pathways from unsheltered homelessness to shelter, housing, and supportive services.

FL-511 is also expanding outreach capacity in areas that are difficult to access by vehicle, including e-bicycle-based outreach in Santa Rosa County. The goal is to improve identification and HMIS documentation of unsheltered individuals, strengthen engagement, and connect people living in tents and other outdoor settings to appropriate housing and services.

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)

FL-511 serves Escambia and Santa Rosa Counties, where law enforcement responds to unlawful possession, distribution, and related controlled-substance activity under Florida law. Locally, the community also uses outreach, crisis-response, and behavioral-health practices intended to connect individuals using illicit drugs in public with treatment, shelter, housing, and other services when appropriate.

A key beneficial local practice is Opening Doors Northwest Florida's partnership with the Pensacola Police Department Community Response Specialists (CRS). CRS staff regularly coordinate with Opening Doors, Coordinated Entry (CE), street outreach, behavioral-health providers, and other community partners. A CRS maintains a satellite presence at Opening Doors, allowing individuals encountered in public spaces to be connected quickly to shelter, substance-use and mental-health treatment, housing navigation, family reunification, employment resources, and other supports.

FL-511 also coordinates with Lakeview Center's Central Receiving Facility and Crisis Stabilization Unit. These resources provide behavioral-health and substance-use screening, stabilization, and referral options when treatment or crisis intervention is more appropriate than repeated emergency-department or justice-system involvement.

Opening Doors further deploys mobile outreach to locations where unsheltered homelessness and public substance use may occur. Outreach staff can provide CE access, housing navigation, and referrals for treatment and supportive services while maintaining continued engagement with individuals who are not yet ready to accept assistance.

FL-511 will leverage these beneficial practices by strengthening communication among law enforcement, outreach, CE, Lakeview, housing providers, and other treatment partners; maintaining rapid referral pathways; and reviewing service-connection and housing outcomes to identify gaps.

Restrictive enforcement practices can hinder engagement when individuals are displaced from known outreach locations, incarcerated for short periods, or lose contact with service providers. FL-511 will mitigate these effects by maintaining access to CE and housing assistance following law-enforcement contact, re-engaging individuals through outreach, coordinating referrals after crisis or justice-system involvement, and ensuring that declining services at one encounter does not prevent future access to the homeless-response system.

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)

FL-511 continues to see the effects of overdose and illicit drug use across Escambia and Santa Rosa Counties, particularly among people experiencing unsheltered homelessness and people with co-occurring mental health conditions and substance use disorders

Escambia County has developed a targeted response through its Coordinated Opioid Recovery (CORE) program, which uses EMS and clinical staff to connect individuals with opioid-use disorder to medication-assisted treatment, counseling, recovery supports, and other services. CORE works with Community Health Northwest Florida and Lakeview Center to move people from overdose or crisis contact into ongoing treatment. Community Health Northwest Florida also provides behavioral-health care, social-service navigation, mobile healthcare, and services for people experiencing homelessness, with CORE access available in both Pensacola and Milton.

Homeless service providers are also part of this response. Bright Bridge Ministries coordinates with CORE, Lakeview/Road to Recovery, and Community Health Northwest Florida for overdose prevention, treatment referrals, transportation, case management, and recovery support. Waterfront Rescue Mission also serves as a location where people experiencing homelessness can access Community Health Northwest Florida's CORE services.

Overdose and public drug use remain active concerns in the CoC. The local response is not limited to law enforcement or emergency medical calls. EMS, healthcare providers, behavioral-health providers, shelters, and homeless-service agencies work together to connect people to treatment and recovery services when they encounter them in crisis or in public spaces.

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)

FL-511 operates within Florida's Mental Health Act ("Baker Act"), including Fla. Stat. §394.463, which permits involuntary examination when statutory criteria are met. This includes circumstances in which, because of mental illness, there is a substantial likelihood that without care or treatment an individual will cause serious bodily harm to self or others in the near future, as evidenced by recent behavior.

This framework benefits FL-511 by establishing a clear crisis-response standard while preserving less restrictive interventions when appropriate. Opening Doors Northwest Florida and CoC partners do not independently order involuntary examinations. When Coordinated Entry, outreach, or partner staff identify a behavioral-health safety concern, staff match the response to the level of risk. Individuals experiencing distress may be connected to 988 or Lakeview Center's Mobile Response Team (MRT), which provides 24/7 telephone and in-person crisis intervention in Escambia and Santa Rosa Counties. Immediate threats of serious harm, suicide, violence, or medical emergency are referred to 911 or appropriate emergency responders.

Lakeview Center's Central Receiving Facility (CRF) is the designated regional entry point for adults in Escambia and Santa Rosa Counties who may require Baker Act or Marchman Act screening. The CRF provides crisis assessment and connects individuals to the appropriate level of stabilization, inpatient, or follow-up care.

FL-511 will leverage these beneficial practices by maintaining clear referral pathways among outreach, Coordinated Entry, MRT, law enforcement, the CRF, behavioral-health providers, and housing programs. Whenever clinically and legally appropriate, partners will use voluntary, community-based, and mobile crisis interventions before more restrictive responses.

Restrictive interventions can disrupt housing engagement, treatment relationships, and continuity of services. FL-511 will mitigate these effects by re-engaging individuals following crisis stabilization or hospitalization; reconnecting them to housing navigation, behavioral-health care, and supportive services; maintaining CE access; and coordinating with providers to reduce repeated cycling among homelessness, emergency departments, inpatient care, and law enforcement. When involuntary examination is required for immediate safety, FL-511's role is to support continuity of housing and services before and after the crisis.

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)

FL-511 operates within federal Sex Offender Registration and Notification Act (SORNA) requirements, Florida sexual-offender/predator registration laws, and PromisSE HMIS privacy and security requirements. Florida law requires qualifying registrants to provide residence and other identifying information to designated authorities, and FDLE maintains the statewide public registry. FL-511 therefore relies on FDLE and appropriate law-enforcement agencies as the authoritative sources for registration and location information rather than using HMIS as a parallel registry.

These practices benefit the CoC by providing an established method to verify registration requirements and location restrictions when they may affect a proposed housing placement. When registration status is relevant to housing eligibility or placement, FL-511 and participating providers will verify information through FDLE or the appropriate law-enforcement authority and coordinate as needed to identify lawful housing options.

At the same time, HMIS privacy requirements restrict unnecessary disclosure of client-level information, including location information. PromisSE information sharing will remain limited to uses and disclosures authorized by law and described in the applicable Privacy Notice. When consent is required, FL-511 will obtain an appropriate Release of Information. Unusual, disputed, or legally compelled requests for HMIS information will be referred to the HMIS Lead and, when necessary, legal/privacy review before disclosure.

FL-511 will leverage beneficial registry and notification practices by maintaining clear procedures for verification through FDLE, coordinating with law enforcement when necessary, and training providers to distinguish publicly available registry information from confidential HMIS data. Restrictive privacy requirements will be addressed through properly executed releases, need-to-know information sharing, and legally authorized disclosure pathways rather than broad disclosure of HMIS records.

FL-511 will also work with housing providers to identify lawful housing alternatives when registration or residency requirements limit a particular placement, helping prevent those restrictions from unnecessarily interrupting Coordinated Entry, housing navigation, or supportive-service access.

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)

Continuum of Care FL-511, led by Opening Doors Northwest Florida (ODNWFL), uses a coordinated, community-based outreach strategy to identify and engage individuals and families experiencing homelessness throughout Escambia and Santa Rosa Counties. The strategy combines dedicated street outreach, Coordinated Entry, emergency shelters, healthcare and behavioral health providers, faith-based organizations, law enforcement, first responders, and community partners to reach people wherever they are experiencing a housing crisis.

Team H.O.P.E. (Homeless Outreach Partnership and Engagement) serves as a key component of the CoC's street outreach strategy. Outreach staff conduct proactive outreach in known areas where unsheltered individuals congregate or reside, including encampments, wooded areas, parks, vehicles, and other locations. Outreach is relationship-based and trauma-informed, allowing staff to build trust over time and engage individuals who may be reluctant or unable to access traditional services.

The CoC works closely with faith-based partners, shelters, food programs, healthcare providers, behavioral health organizations, and other community organizations that frequently encounter people experiencing homelessness. These partners provide referrals and help identify individuals and families who may otherwise remain disconnected from the homelessness response system. ODNWFL also coordinates with law enforcement and first responders to facilitate warm handoffs to outreach staff when individuals are encountered during calls for service.

Outreach staff assess immediate needs and connect individuals to Coordinated Entry, emergency shelter, ES Tokens through Waterfront Rescue Mission, healthcare, behavioral health and substance-use treatment, benefits, and housing assistance. Individuals are assisted with completing the Connect Form and entering the appropriate CE process so they can be assessed and connected to available housing interventions.

Because homelessness is mobile and conditions change frequently, FL-511 uses ongoing outreach rather than relying solely on annual counts. Outreach activities are conducted across both counties and adapted to emerging locations, weather conditions, community referrals, and identified service gaps. The CoC continues to strengthen outreach capacity and partnerships to ensure individuals and families, including those who are unsheltered or difficult to reach, have meaningful opportunities to connect with services and

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)	No
5.	Head Start	Yes

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

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

1.	McKinney-Vento Liaison(s) (including State Education Agency (SEA) or Local Education Agency (LEA))	Yes
2.	School District(s)	Yes
3.	General Education Development (GED) Program(s)	Yes
4.	Community College(s)	Yes
5.	Technical College(s)	Yes
6.	Other Post-Secondary Education Provider(s)	Yes

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

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

(limit 2,500 characters)

FL-511's written policy establishes a two-county process to inform families and youth of their educational and early-learning rights and connect them with appropriate services in Escambia and Santa Rosa Counties.

The policy requires ESG- and CoC-funded providers serving households with children, pregnant persons, parenting youth, or unaccompanied youth to identify education and early-learning needs during intake, assessment, case management, or housing stabilization. Staff must inform eligible households of available educational services and protections, make appropriate referrals, assist with enrollment barriers, and document the notification and referral in the participant record.

For Early Head Start and Head Start, providers inform eligible families that children experiencing homelessness may qualify regardless of income, make direct referrals, and assist with applications, documentation, transportation, and other barriers.

For Early Learning Coalition and VPK services, providers connect families to the appropriate Early Learning Coalition for Escambia or Santa Rosa County, including School Readiness, child care resource and referral, and Voluntary Prekindergarten. Staff assist families with the Florida Early Learning Family Portal and required eligibility documentation when needed.

For school-age children and unaccompanied youth, providers inform households of rights under the McKinney-Vento Homeless Assistance Act, Title IX, Part A, including immediate enrollment, school-of-origin protections, transportation when applicable, removal of enrollment barriers, equal access to educational services, and assistance from the local school district homeless liaison. Families are referred to the appropriate Escambia County Public Schools or Santa Rosa County District Schools McKinney-Vento liaison. FL-511 incorporates these requirements into provider orientation, technical assistance, and monitoring so educational rights are communicated consistently across the CoC.

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)

Continuum of Care FL-511, led by Opening Doors Northwest Florida (ODNWFL), collaborates with child welfare, foster care, education, and community service partners to identify and support youth transitioning from public systems of care who may be at risk of homelessness. Key partners include Families First Network, Catholic Charities, FL Department of Children & Families, and both Escambia and Santa Rosa County School Districts. Through these partnerships, ODNWFL and CoC providers work to identify youth approaching adulthood who may need housing, transportation, benefits, employment assistance, education support, behavioral healthcare, or other services to successfully transition to independent living. Partners can make referrals to the CoC when a young person is experiencing or at risk of homelessness, allowing the youth to access Coordinated Entry and be connected to appropriate housing and supportive services. ODNWFL works with Families First Network and other child welfare partners to support communication and warm handoffs as youth transition out of foster care or other systems of care. When appropriate, case managers assist with obtaining identification, applying for benefits, securing transportation, connecting to healthcare and behavioral health services, and developing a plan for stable housing and community support. Catholic Charities, Children's Home Society and other community partners provide additional assistance with basic needs, housing navigation, supportive services, and connections to community resources. Faith-based and community partnerships provide trusted relationships and practical support that can help youth remain connected to positive adults and community resources during transition. ODNWFL also collaborates with Escambia and Santa Rosa County School Districts to identify students experiencing housing instability and connect them with appropriate resources. School partnerships are particularly important for identifying youth and families before a housing crisis escalates and for coordinating services that support educational stability. FL-511's approach emphasizes early identification, prevention, coordinated referrals, and continued support rather than waiting until a young person becomes literally homeless. By connecting child welfare, schools, housing providers, and community organizations, the CoC works to create a coordinated transition to stable housing and adulthood for youth leaving public systems of care.

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)

Continuum of Care FL-511, led by Opening Doors Northwest Florida (ODNWFL), coordinates with youth-serving providers to identify and support young people experiencing or at risk of homelessness. Key Rye funded partners include Children's Home Society, which provides youth street outreach and transitional housing services, and Lutheran Social Services, which provides youth street outreach and an emergency shelter for unaccompanied youth. These providers serve as important access points to the CoC's homelessness response system. Their outreach teams engage youth who may be disconnected from traditional services, including youth experiencing unsheltered homelessness, housing instability, or unsafe living situations. Providers coordinate with ODNWFL and other community partners to connect eligible youth to Coordinated Entry, emergency shelter, transitional housing, permanent housing resources, healthcare, behavioral health services, education, employment, and other supportive services.

ODNWFL works to facilitate warm handoffs between youth-focused programs and the broader CoC system while recognizing the specialized needs of unaccompanied youth. Youth are connected to appropriate age services and assisted with documentation, benefits, transportation, education, employment, life skills, and housing navigation. Case managers and outreach workers maintain communication with partner providers to support continuity of care as youth transition between outreach, emergency shelter, transitional housing, and permanent housing.

Lutheran Social Services' emergency shelter provides an important immediate intervention for unaccompanied youth who need a safe place to stay while their longer-term housing and service needs are assessed. Children's Home Society's outreach and transitional housing programs provide additional pathways toward stability and independent living.

FL-511 also coordinates with schools, child welfare partners, healthcare and behavioral health providers, faith-based organizations, and other community resources to address the underlying barriers that contribute to youth homelessness. Through coordinated outreach, referrals, case management, and housing navigation, the CoC works to ensure youth-serving providers are integrated into the larger homelessness response system and that young people have a pathway from crisis to safe, stable housing.

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)

FL-511 identifies Catholic Charities of Northwest Florida's non-DV RRH, FavorHouse of Northwest Florida's DV-RRH, and 90Works' DV-TH and non-DV TH projects. Each primarily or exclusively serves families with children in response to an identified CoC need and operates consistent with 24 CFR 578.93(b), including applicable federal nondiscrimination and fair-housing requirements.

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)

FL-511's family-focused RRH and TH projects incorporate income growth into housing stabilization planning so families can increasingly sustain rent after assistance ends.

Catholic Charities of Northwest Florida provides case management, employment services, financial counseling, and referrals to community resources. Families develop individualized plans that identify unmet needs and barriers to stability, and case managers connect them with employment, education, benefits, and other resources that can increase household income. Catholic Charities publicly identifies employment services and RRH as core services.

FavorHouse's DV-RRH model uses individualized, survivor-centered housing plans. As part of its program model, FavorHouse has an Economic Empowerment Advocate who leads a free weekly Zoom workshop covering money management, budgeting, building or repairing credit, and identity theft. The workshop is open to the public, and FavorHouse's RRH participants also have access to its broader Economic Empowerment Program.

90Works' TH projects use intensive case management and life-skills services, including job readiness, budgeting, money management, and connections to employment resources. Its housing programs are designed to help families move toward self-sufficiency and higher incomes.

These projects also have formal partnerships and connect participants to FL-511 workforce partners, including CareerSource Escarosa, which serves Escambia and Santa Rosa Counties and provides career planning, job-search assistance, occupational training, WIOA-supported services, employer connections, and employment supports. CareerSource Escarosa participants can be referred to local technical and postsecondary training partners when they need credentialing or occupational training for the career they are pursuing.

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)

FL-511's four proposed new CoC family projects—submitted by Catholic Charities of Northwest Florida, FavorHouse of Northwest Florida, and 90Works—will leverage established mainstream family-service systems and existing organizational partnerships to support housing stability for families with children. The applicants are experienced federal and state grant recipients/subrecipients with established systems for coordinating housing assistance with public benefits, workforce services, and family supports. Catholic Charities currently administers TANF-funded homelessness prevention for households with children at or below 200% of the federal poverty level in Escambia and Santa Rosa Counties. Its proposed CoC project will build on this existing experience by coordinating CoC housing assistance with TANF, CareerSource Escarosa, and other mainstream benefits available to eligible families.

FavorHouse will leverage its existing Florida DCF-Office of Domestic Violence funding and related survivor-service resources alongside its proposed DV CoC project. These resources may support housing advocacy, rental and utility assistance, moving expenses, and other needs for survivors who may not be eligible for CoC-funded assistance, while also connecting families to childcare, employment, education, healthcare, and other mainstream supports.

90Works will use its established referral relationships to connect eligible families in its proposed CoC projects to TANF, SNAP, Medicaid, SSI/SSDI, childcare assistance, schools, workforce services, transportation supports, and other public benefits.

These existing funding relationships and service-system connections allow the proposed CoC projects to supplement HUD-funded housing assistance with mainstream family resources rather than relying on CoC funding alone.

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)

FL-511's proposed family projects will combine housing assistance with childcare, parenting support, pregnancy-related and child healthcare, and education through established service models and community partnerships. Although the CoC projects are new, Catholic Charities of Northwest Florida, FavorHouse of Northwest Florida, and 90Works are experienced providers with histories of serving families experiencing housing instability, poverty, domestic violence, and related barriers.

Catholic Charities will pair housing assistance with twice-monthly case management and referrals to childcare, transportation, workforce education, healthcare, SNAP, WIC, and other family supports. Its longstanding emergency-assistance model already combines housing and utility assistance with assessment, financial counseling, and referrals to community resources.

FavorHouse will combine DV housing assistance with services for survivors and their children, including childcare and education referrals, parenting and counseling supports, healthcare connections, and economic empowerment. FavorHouse has served Escambia and Santa Rosa Counties since 1980 and has longstanding experience providing shelter, child-focused services, counseling, legal advocacy, and financial-empowerment programming to survivors and families.

90Works will integrate housing assistance with childcare resources, parenting support, pregnancy-related and child healthcare, school and educational connections, and case management. Its prior Healthy Families programming included prenatal health, parenting education, positive discipline, child educational activities, and community-resource navigation, and the organization maintains longstanding experience in rapid rehousing and homelessness prevention.

Case managers will coordinate these services with each household's housing plan so parents can maintain employment and education, children can remain connected to school and early learning, and family health and stability are addressed alongside 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)

FL-511 coordinates with the Department of Veterans Affairs and veteran-serving organizations through a VA By-Name List and Coordinated Entry. ODNWFL works with Priority Veteran, 90Works, and Volunteers of America (VOA) to identify veterans experiencing homelessness, coordinate referrals, and connect them to housing, benefits, healthcare, and supportive services. This collaboration supports timely outreach, case conferencing, and housing placement.

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)

FL-511 partners with FavorHouse of Northwest Florida, Pensacola Dream Center, and Survivor-Led Solutions to support survivors of domestic violence, sexual assault, stalking, trafficking, and other safety threats. These partners provide or connect survivors to confidential shelter, housing, safety planning, legal advocacy, counseling, and other supportive services, while coordinating with the CoC through referrals and survivor-centered service planning.

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)

FL-511 partners with Re-Entry Alliance Pensacola to prevent homelessness among individuals returning from prisons, jails, and court-ordered programs. Through Coordinated Entry and re-entry services, the partnership connects individuals without stable housing to bridge/transitional housing, case management, benefits, employment support, behavioral-health services, and housing navigation before or following release.

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)

FL-511 partners with Community Health Northwest Florida, the area's Federally Qualified Health Center with a Healthcare for the Homeless program. The program provides primary healthcare, mobile medical and dental services, chronic-disease support, and care coordination for people experiencing homelessness. Social workers and case managers also connect participants with behavioral health, housing, benefits, and other resources needed to stabilize complex medical 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)

FL-511 partners with the Council on Aging of West Florida and the Area Housing Commission to serve older adults experiencing homelessness. Through Coordinated Entry, individuals are connected to permanent housing and aging-specific supports, including case management, transportation, nutrition, in-home services, caregiver support, and other resources that help older adults remain safely housed and age in place.

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)

FL-511 has Permanent Supportive Housing projects operated by Lakeview Center, 90Works, and Opening Doors Northwest Florida that prioritize individuals and families experiencing chronic homelessness through the CoC's Coordinated Entry process and established PSH order of priority, with preference given to households with the longest histories of homelessness and the most severe service needs.

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)

Lakeview Center's Permanent Supportive Housing project serves chronically homeless individuals and families in housing located on the Lakeview campus. Participants have access to on-site mental health and substance use treatment through Lakeview's integrated behavioral healthcare system. Available services include mental health counseling, psychiatric services, medication management, and substance use treatment. Supportive counseling, psychosocial rehabilitation, medication monitoring, and case management help participants address behavioral health needs and maintain housing stability. Services are coordinated based on each participant's assessed needs, with connections to crisis services and more intensive levels of care when necessary. Locating housing on the Lakeview campus reduces transportation barriers and places participants near treatment providers. Coordination between housing staff and behavioral health providers supports continuity of care, follow-up, and adjustments to services as participants' needs change. This integration helps participants maintain stable housing while accessing mental health treatment and substance use recovery services.

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)

Lakeview Center's Permanent Supportive Housing project has a policy for assessing whether participants need a higher level of care when behavioral health, medical, or functional needs exceed the support available through PSH. The policy guides ongoing assessment, clinical reassessment, referral, and coordination of care. Through ongoing assessment and case management, staff monitor changes in psychiatric symptoms, substance use, medication needs, daily functioning, and repeated crises. When these indicators suggest a need for additional care, staff coordinate with Lakeview's clinical providers to reassess the participant and determine the appropriate treatment or residential setting. Depending on assessed needs, referrals may include crisis stabilization, residential mental health or substance use treatment, or another appropriate care setting. For participants needing assistance with daily living or ongoing medical support, staff assess whether assisted living or another supportive residential setting is appropriate. Staff coordinate referrals and transitions with the participant and receiving provider, maintain communication to support continuity of care, and plan for return to permanent housing when appropriate.

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)

The PSH projects identified in 1C-19 follow a policy for assessing participants' readiness to move to unsubsidized or other permanent housing. Staff assess housing stability, income and benefits, ability to manage rent and household responsibilities, independent living skills, medical and behavioral health needs, available natural and community supports, and continued need for intensive supportive services. Assessments incorporate participant goals, housing preferences, and willingness to transition. Participants assessed as ready for a less intensive housing setting receive individualized transition planning. Assistance may include affordability review, housing search, applications, landlord coordination, income and benefits planning, and connections to ongoing community-based services. Planning considers whether the proposed housing and available supports can sustain the participant's long-term stability. Participants who continue to need PSH-level assistance are not expected to move solely because a project is changing or ending. Providers work to identify appropriate permanent housing and continued supportive services based on assessed needs. FL-511 is strengthening and standardizing implementation of move-on assessment policies across providers so decisions are documented, participant-centered, and focused on preventing displacement and maintaining long-term housing stability.

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.	09/29/2026
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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.	09/29/2026
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1D-2c.	Local Competition Selection Results for All Projects.	
	You must upload the Local Competition Selection Results attachment to the 4A. Attachments Screen.	

	Does your attachment include: 1. Project Names, 2. Project Scores, 3. Project Rank, 4. Project Status—Accepted, Rejected, Reduced Reallocated, Fully Reallocated, 5. Amount Requested from HUD, and 6. Reallocated Funds +/-.	Yes
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1D-2d.	Projects Rejected/Reduced—Notification Outside of e-snaps.	
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1.	Did your CoC reject or reduce any project application(s) submitted for funding during its local competition?	Yes
2.	If you selected 'Yes' for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	09/23/2026
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes

1D-2e.	Projects Accepted—Notification Outside of e-snaps.	
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	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	09/23/2026
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1D-3.	Reallocation—Reviewing Performance of Existing Projects.	
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	Describe:
1.	your CoC's reallocation process to reallocate from lower performing projects to create new high performing projects, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed,
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year,
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

FL-511 reviews existing projects during its local competition to determine whether renewal, reduction, or reallocation will best improve outcomes and address community needs. Competition priorities, reallocation policies, and scoring criteria are publicly available. The Ranking and Review Committee evaluates applications using published scoring tools and follows conflict-of-interest and recusal requirements. The review considers project performance, monitoring findings, and alignment with the CoC Strategic Plan and identified service gaps. Relevant measures include housing outcomes, length of time homeless, returns to homelessness, utilization, and compliance, as applicable. Projects with weaker performance or activities that are less responsive to current needs are considered for reallocation. The Committee presents recommendations to the CoC Leadership Council for public discussion and approval. During this year's competition, FL-511 identified three existing PSH renewal projects for reallocation: FY24 90WORKS PSH, Housing First 2024-2025, and iCare PSH 2024. The review determined that the clients served in these programs would be better served through a Transitional Housing program.

FL-511 reallocated \$364,618 from these projects to PPD Mobile Outreach, MVO Charis House 2, MVO Tender Hearts Caring Hands, Team HOPE Street Outreach, REAP New Horizons Village 2, 90Works Transition TH Project, and Endeavors SSO FY2026.

The Committee evaluated the proposed replacement projects using published criteria to assess their capacity, proposed outcomes, and responsiveness to Strategic Plan priorities and identified gaps. The Leadership Council approved the final reallocation recommendations and Priority Listing. Providers coordinate transition planning for affected participants to maintain appropriate housing and supportive services and prevent displacement.

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)	WellSky Community Services
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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.	Multiple CoCs
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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)

Between the 2025 and 2026 unsheltered PIT counts, FL-511 made several implementation changes intended to improve coverage and data quality. Community participation in the 2025 count was limited, while the 2026 count included broader involvement from local street outreach teams and other community partners.

In 2026, FL-511's largest shelter and day shelter also participated more directly in the PIT process by providing their data to the CoC rather than limiting participation to specific survey periods conducted at their facilities. This improved access to information about individuals experiencing homelessness who were connected to those locations during the count period.

FL-511 also expanded the timing of unsheltered counting activities. In addition to daytime outreach, several teams conducted evening count activities between approximately 5:00 p.m. and 9:00 p.m. This allowed teams to reach locations and individuals who may have been missed during daytime-only outreach.

These changes expanded geographic and temporal coverage, increased participation from providers with direct knowledge of people experiencing homelessness, and reduced the likelihood that individuals were missed because of limited survey windows or daytime-only engagement. As a result, FL-511 considers the 2026 PIT count more comprehensive and reflective of local unsheltered homelessness than the 2025 count. Any increase or change in the reported unsheltered count should therefore be interpreted in part as the result of improved implementation and coverage, rather than solely as a change in the number of people experiencing unsheltered homelessness.

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)

During the evaluation period, FL-511 worked with street outreach teams, local governments, law enforcement, shelters, behavioral-health providers, faith-based organizations, and other community partners to reduce the number of people residing in encampments by increasing engagement and connecting individuals to safer shelter and housing options.

Opening Doors Northwest Florida and Team H.O.P.E. conducted outreach in known encampments, wooded areas, vehicles, and other locations not intended for habitation. Outreach staff focused on building relationships, assessing immediate needs, connecting individuals to Coordinated Entry, and providing housing navigation and referrals to emergency shelter, behavioral-health and substance-use services, healthcare, benefits, and other supportive services.

FL-511 also used available emergency shelter resources, including Emergency Shelter Tokens through Waterfront Rescue Mission, to provide immediate alternatives to unsheltered locations while individuals continued working with outreach and housing-navigation staff.

When local governments or other partners identified encampments requiring intervention, FL-511 and community providers coordinated outreach and service connections before and during transitions whenever possible. This approach was intended to reduce displacement from one unsheltered location to another and maintain contact with individuals who were not immediately able to enter permanent housing.

The CoC also supported community efforts to develop additional alternatives for people living outdoors. Offensive Corp. has worked toward development of an organized site for women experiencing homelessness, creating another potential pathway for continued engagement and supportive services for individuals who may not immediately access traditional shelter or permanent housing.

FL-511's encampment strategy emphasizes sustained outreach, Coordinated Entry, shelter access, housing navigation, and connections to health and supportive services rather than displacement alone. These actions are intended to reduce the number of individuals remaining in encampments while improving pathways to temporary and permanent housing.

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.	5
2. Enter the reduction in the number of encampments during your evaluation period.	2

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.	500
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2. Enter the reduction in the number of people in encampments during your evaluation period.	200
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2A-4c.	Reduce Encampments—Plans to Reduce Encampments.
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If there has been no reduction in encampments or persons in encampments in your CoC, describe the plans your CoC has to participate in efforts to reduce these numbers.

(limit 2,500 characters)

n/a

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)

FL-511 plans to decrease first-time homelessness by strengthening early identification, prevention, diversion, and connections to mainstream resources before households enter the homeless response system.

Through Coordinated Entry, community referrals, and partnerships with schools, healthcare and behavioral-health providers, child welfare, veteran-serving organizations, faith-based organizations, and other community agencies, FL-511 will identify households experiencing housing instability as early as possible. Priority attention will be given to households facing eviction, loss of income, utility shutoff, discharge from institutions or treatment, youth exiting foster care, veterans, and families experiencing other housing crises.

Opening Doors Northwest Florida and partner agencies will connect at-risk households to homelessness-prevention resources, diversion/problem-solving assistance, emergency financial support when available, mainstream benefits, employment resources, transportation, healthcare, behavioral-health services, and other community supports. Case managers and Coordinated Entry staff will work with households to address barriers that could result in housing loss, including past-due rent or utilities, lack of identification, limited income, benefit interruptions, and transportation needs.

FL-511 will also strengthen discharge and referral relationships with institutions and systems that serve people at elevated risk of homelessness so that housing needs can be identified before discharge whenever possible. Warm handoffs to prevention, housing, and supportive-service resources will be used to reduce the likelihood that individuals exit directly into homelessness.

The CoC will use HMIS, Coordinated Entry data, case conferencing, and partner feedback to identify patterns in first-time homelessness, unmet prevention needs, and populations or geographic areas experiencing increased housing instability. FL-511 will use findings to improve referral pathways, target outreach, and strengthen partnerships with agencies that can intervene before homelessness occurs.

When homelessness cannot be prevented, FL-511 will rapidly connect households to shelter, Rapid Re-Housing, and other housing resources to shorten the episode and reduce the likelihood of recurring homelessness.

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)

FL-511 plans to reduce the length of time individuals and families remain homeless by improving the speed and coordination of assessment, referral, housing navigation, and placement through Coordinated Entry (CE), the Housing By-Name List (BNL), case conferencing, street outreach, and stronger provider accountability.

The CoC uses its System Performance Measures and HMIS data to monitor length of time homeless and identify delays in the housing process. The most recent performance data provide a baseline of approximately 106 days, which FL-511 will use to measure progress and identify avoidable delays.

Through CE, households are assessed, prioritized, and referred to appropriate housing resources based on eligibility and need. The BNL and formal and informal case conferencing are used to actively review households awaiting housing, identify barriers, assign next steps, and prevent referrals from remaining inactive. Housing providers are expected to communicate referral decisions and identified barriers promptly so that case managers can resolve issues or pursue another appropriate housing option.

FL-511 will strengthen document readiness and housing navigation by helping households obtain identification, income and benefit verification, disability documentation when required, and other materials needed for housing placement. Staff will also connect participants to mainstream benefits, employment resources, transportation, behavioral-health care, and other services that may remove barriers to housing.

For people experiencing unsheltered homelessness, Team H.O.P.E. Street Outreach will provide continued engagement and connections to CE, emergency shelter, shelter tokens, behavioral-health services, benefits, and housing resources. Outreach and shelter providers will be encouraged to connect participants to housing-focused services as early as possible.

FL-511 will review HMIS, CE, BNL, referral, and System Performance Measure data to identify delays between assessment, referral, acceptance, and move-in. Persistent barriers will be addressed through case conferencing, technical assistance, provider coordination, and system-level problem-solving. The goal is to reduce unnecessary time in shelter and unsheltered homelessness and move households into stable housing as quickly as possible.

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?	46.00%

Describe how you calculated the data for this response.

(limit 2,500 characters)

FL-511 used HMIS exit records for January 1–December 31, 2025, to calculate the percentage of participants exiting Transitional Housing (TH), Rapid Re-Housing (RRH), and Permanent Supportive Housing (PSH) to unsubsidized housing. The calculation included participants of all ages, including household members, who exited during the reporting period.

Of 704 total participant exits, 321 had one of these HMIS Exit Destination responses: staying or living with family, permanent tenure; staying or living with friends, permanent tenure; rental by client, no ongoing housing subsidy; or owned by client, no ongoing housing subsidy. Dividing 321 by 704 and multiplying by 100 produced 45.6%, rounded to 46%.

All TH, RRH, and PSH projects in FL-511's HMIS were included; none were excluded. The projects included in the calculation are listed below.

FL511 - 90Works - HUD - Project90 [Permanent Supportive Housing]

- FL511 - Bright Bridge - Level 2 - Challenge [Transitional Housing] [C-Program]
- FL511 - Bright Bridge - Level 3 [Transitional Housing]
- FL511 - Catholic Charities - Challenge [Rapid Rehousing] [C-Housing]
- FL511 - Catholic Charities - Challenge PLUS Initiative 1 [Rapid Rehousing]
- FL511 - Catholic Charities - Challenge PLUS Initiative 2 [Rapid Rehousing]
- FL511 - Children's Home Society - RHY [Transitional Housing]
- FL511 - EComfort - Challenge Unsheltered [Rapid Rehousing]
- FL511 - Lakeview Center - HUD - Housing First [Permanent Supportive Housing]
- FL511 - Opening Doors - Challenge [Rapid Rehousing] [C-Housing]
- FL511 - REAP - Max-Well Respite Center [Transitional Housing]
- FL511 - REAP - Re-Entry Program [Transitional Housing]
- FL511 - United Way Priority Veteran [Rapid Rehousing]
- FL511 - Volunteers of America - VA GPD [Transitional Housing]
- FL511 - Opening Doors - Challenge BASE PLUS [Rapid Rehousing]
- FL511 - Opening Doors - ESG-Annual [Rapid Rehousing]

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.	01/26/2026
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2A-8a.	HIC and PIT Count Data—HDX 2.0 Submission Date.	
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	Did your CoC submit its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count data in HDX 2.0 by April 30, 2026, 8:00 p.m. EDT?	Yes
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2A-8b.	Longitudinal System Analysis (LSA) Data—HDX 2.0 Submission Date.	
	You must upload your CoC's FY 2026 HDX Competition Report to the 4A. Attachments Screen.	

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

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds	Adjusted Total Year-Round, Current VSP Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
1. Emergency Shelter (ES) beds	146	45	93	48.69%
2. Safe Haven (SH) beds	0	0	0	0.00%
3. Transitional Housing (TH) beds	481	0	197	40.96%
4. Rapid Re-Housing (RRH) beds	222	0	222	100.00%
5. Permanent Supportive Housing (PSH) beds	228	0	25	10.98%
6. Other Permanent Housing (OPH) beds	12	0	12	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)

Over the next 12 months, FL-511 will increase HMIS/comparable database bed coverage to at least 85% for Emergency Shelter (ES), Transitional Housing (TH), and Permanent Supportive Housing (PSH). Current inventory requires coverage of 163 ES, 409 TH, and 194 PSH beds—70, 212, and 169 additional beds, respectively. Targets will be recalculated if inventory changes.

For ES and TH, Opening Doors is integrating Waterfront Rescue Mission's MissionTracker data into HMIS. Waterfront has granted system access to extract and upload the HMIS dataset. The HMIS Lead will map projects and inventories, test imports, validate enrollment and exit records, resolve errors and duplicates, and establish recurring uploads. Beds will count as covered only after staff verify compliance with applicable HMIS requirements.

Opening Doors will identify other uncovered ES and TH beds by provider and offer targeted onboarding, training, technical assistance, and executive-level engagement. Victim service providers will maintain comparable database participation; their ES beds currently have 100% coverage.

For PSH, Opening Doors is working with the VA to onboard all HUD-VASH beds and ensure accurate reporting. The CoC Governance HMIS Committee has issued a corrective action to Opening Doors, as lead agency, requiring accurate reporting of all PSH beds. Opening Doors will reconcile provider inventories with HMIS records, assist with onboarding and data entry, and validate completeness and accuracy. The Committee will receive quarterly progress reports and updates on unresolved gaps until the corrective action is resolved.

In the first quarter, the HMIS Lead will confirm uncovered inventories, document provider commitments, and test Waterfront imports. Subsequent quarters will focus on recurring uploads, onboarding, and coverage validation. Opening Doors will continue providing free HMIS licenses, training, and technical assistance.

The HMIS Lead will report coverage, milestones, and barriers to the HMIS/CE Committee quarterly. The Committee will recommend corrective actions and elevate persistent gaps to the Leadership Council for provider engagement and system-level support. Quarterly reviews will measure progress toward 85% for each project type and adjust implementation to close remaining gaps.

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?	No
2.	Do you expect to use at least 50% of the proposed activities/projects in Opportunity Zones Census Tracts?	No

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	FL-511 List of TH...	09/30/2026
02. 1C-1f. List of CoC Program Projects and Number of Units that require Substance Abuse Treatment	Yes	FL-511 SUDs Treat...	09/30/2026
03. 1C-3. Language from Project Supportive Service Agreements	Yes	FL-511 Project Su...	09/30/2026
04. 1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety	Yes	FL-511 1C-10_Resp...	09/30/2026
05. 1D-1. Local Competition Scoring Tool	Yes	FL-511 CoC Compet...	09/30/2026

06. 1D-2c. Local Competition Selection Results	Yes	FL-511 Priority L...	09/30/2026
07. 2A-8b. FY 2026 HDX Competition Report	Yes	FL-511 HDX Compet...	09/30/2026
08. 3A-1. HUD-2996 Certification for Opportunity Zone Preference Points	No		
09. 3A-2a. Project List for Other Federal Statutes	No		
10. 3A-DP. Your CoC's Policy or Statement to Advance Recovery	No		
11. Other	No		

Attachment Details

Document Description: FL-511 List of TH-PH Projects with On-Site SUDs Tx

Attachment Details

Document Description: FL-511 SUDs Treatment Project Units

Attachment Details

Document Description: FL-511 Project Supportive Service Agreements

Attachment Details

Document Description: FL-511 1C-10_Response_Public Safety Non-Interference

Attachment Details

Document Description: FL-511 CoC Competition Scoring Tool and Rubric

Attachment Details

Document Description: FL-511 Priority Listing Selection Results

Attachment Details

Document Description: FL-511 HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

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

FL-511 Continuum of Care

Escambia and Santa Rosa Counties

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

Project Name	On-Site Treatment Provider
Ministry Village at Olive Charis House	Ministry Village at Olive
REAP New Horizons Village	Re-Entry Alliance Pensacola
A Bright Bridge to Stable Housing: Rapid Rehousing Serving Escambia and Santa Rosa Counties	Community Health Northwest Florida (C.O.R.E.)

FL-511 Continuum of Care

Escambia and Santa Rosa Counties

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

The providers identified below confirmed that their projects require participant engagement in substance-abuse treatment services as a condition of continued program participation.

Provider	Project	Number of Units
Ministry Village at Olive	Ministry Village at Olive - Charis House	15
Re-Entry Alliance Pensacola	REAP New Horizons Village	10
Bright Bridge Ministries	A Bright Bridge to Stable Housing: Rapid Rehousing Serving Escambia and Santa Rosa Counties	3
Total		28



Rules to ensure your success at Bright Bridge Ministries His Place Shelter

1. Sobriety is non-negotiable. No illegal drugs, methadone, medical marijuana, CBD, kratom, certain prescriptions including narcotics, and/or some over the counter medications, alcohol, or weapons allowed.
2. You will first meet with a caseworker to complete the intake process.
3. You have 90 minutes to comply with a drug test once asked and cannot leave the day room.
4. Treat everyone with dignity and respect. No harassment, terrorizing, bullying, foul language, or pornography.
5. If you No-call, No-show you will be asked to leave.
6. You may only lay or sit on your assigned bunk.
7. Do not lend or give your personal belongings to anyone without management approval, including money.
8. You are responsible for your own hygiene and are to clean up after yourself.
9. Management & Resident Advisors (with management approval) reserve the right to conduct random searches, drug tests, and breathalyzer checks.
10. Smoking is only permitted in the outside area. Do not leave cigarette butts on ground. No vaping or smoking in building. No smoking between 10pm and 4am Sun-Thur, 11pm-4am Fri-Sat.
11. No pets allowed.
12. Level 1 curfew is 6pm. (Management can approve late check-in)
13. Level 2 curfew is 10pm. (Management can approve late check-in)
14. Quiet time is 10pm to 6am Sun-Thur. 11pm to 6am Friday and Saturday
15. You can eat only in designated areas at posted time. No food or cooking in dorms.
16. Level 1 residents are to remain in designated Level 1 areas unless meeting with Caseworker, going to/from the dining hall or classes.
17. We are not responsible for the loss of any of your personal belongings. If something does go missing, report to staff immediately as thievery is not tolerated.
18. You must wear a shirt and pants/shorts in common areas, dorms, walking to/from the shower. Shower shoes must be worn in showers.
19. You will be assigned chores, and they must be completed daily.
20. You need to attend a minimum of 4 life skills or recovery classes per week.
21. Plan transportation needs 24 hours in advance with a Shelter Driver.
22. House meetings are mandatory. Must have a current work schedule to miss.
23. Must have employment or be actively searching for employment daily.
24. Resident agrees to adhere to Case Plan Agreement and keep it current.
25. Resident understands that a minimum of 72 hours notice is required in order to be reimbursed any prepaid Program Fees before leaving the program to stable housing. I understand that I must exit in complete Good Standing, including following all program rules and notifying Shelter Manager and Case Manager of intent to exit and date of exit (again, with a minimum of 72 hours notice).



Shelter Rules Agreement

I, _____ have read the His Place Shelter Rules and agree to live by them in the His Place Shelter. I understand that a minimum of 72 hours notice is required in order to be reimbursed any prepaid Program Fees when I move to Stable Housing. I understand that I must exit in complete Good Standing, including following all program rules and notifying Shelter Manager and Case Manager of intent to exit and date of exit (again, with a minimum of 72 hours notice).

Signature

Date



His Place Shelter
2600 W Strong St.
Pensacola, FL 32505

Media Consent Form

I, _____ consent for my image and name to be used at Bright Bridge Ministries, on social media, and/or published in a newspaper/newsletter noting achievements that I have accomplished while at Bright Bridge Ministries. The achievements may include new employment, promotion, certification, completion of a Bright Bridge Ministries class, etc.

Signature

Date



His Place Shelter
2600 W Strong St.
Pensacola, FL 32505

Medication Disclosure

Please list all medications you are currently taking including “over the counter” medications. No Controlled Substances are allowed.

I understand that if I do not disclose any and all medications I am currently taking and I test positive on a random drug screen for any unlisted, illicit, or banned substances, I will be dismissed from Bright Bridge Ministries His Place Shelter immediately.

List of Medications

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

Signature

Date



His Place Shelter
2600 W Strong St.
Pensacola, FL 32505

At Will Tenancy Agreement

I, _____, understand that I am a tenant at will. This means the staff may dismiss me from the shelter at any time for any actions or attitudes on my part that they may deem as sufficient cause. This includes but is not limited to relapse, causing drama, inappropriate relationships, using unreported prescription drugs, not actively looking for work, etc

I understand that this means I can be dismissed at any time. I understand that I will need to take my belongings with me when dismissed. If I cannot, they will be stored on property for a maximum of 72 hours, and I will need to make arrangements with Bright Bridge Ministries to pick them up. After 72 hours, Bright Bridge Ministries will consider it as a donation.

Signature

Date



His Place Shelter
2600 W Strong St.
Pensacola, FL 32505

Permission to Communicate with Courts/Municipalities

I, _____, consent for Bright Bridge Ministries to communicate with my probation officer, courts, police officers, and agencies authorized by the courts supervising me.

Signature

Date



His Place Shelter
2600 W Strong St.
Pensacola, FL 32505

Release From Liability

I, _____, recognize my need for shelter assistance and hereby apply for admission to Bright Bridge Ministries His Place Shelter.

I understand that Bright Bridge Ministries is a faith-based non-profit dedicated to assisting me in this transition and will be instrumental in helping me achieve self-sufficiency, life skills, a financial plan, and drug and alcohol recovery.

I agree for myself, my heirs, or assignees, to hold Bright Bridge Ministries free and harmless from any and all liabilities in connection to any personal injury, accidental death, or loss or damage to my personal property during my residence at Bright Bridge Ministries.

Signature

Date



His Place Shelter
2600 W Strong St.
Pensacola, FL 32505

[Sex Offender Warrant\(s\) Check](#)

I, _____, hereby authorize Bright Bridge Ministries to conduct an N.C.I.C. warrant check and hereby declare I am not a registered sex offender, nor have I ever been charged or convicted of **ANY** sexual assault charges.

Applicants with active warrants or previous sex offenses will NOT be admitted to Bright Bridge Ministries.

Signature

Date



His Place Shelter
2600 W Strong St.
Pensacola, FL 32505

Drug/Alcohol Testing

I, _____, understand that I will be subject to routine breathalyzer monitoring and random drug screening. I agree to use a breathalyzer and show results to staff upon every re-entry to shelter. I understand that sometimes a urinalysis test will be requested and that failure to provide a urinalysis within 90 minutes from the time of the request will constitute a positive result and/or failure to comply.

Any attempts to alter or manipulate the results of a drug screen will result in an immediate dismissal from Bright Bridge Ministries His Place Shelter.

If you think a false positive on your drug screen has occurred, you may request a second test. At the discretion of staff, a fee of \$10.00 for the second drug screen may be charged. Staff may also request you complete a second or third screening at their discretion.

A positive test will result in immediate dismissal and a 90-day ban from Bright Bridge Ministries His Place Shelter.

In the event of a false positive due to medications, client may be required to submit for outside lab test - at cost to client - due within 48 hours of potential false positive or at staff discretion.

Signature

Date



His Place Shelter
2600 W Strong St.
Pensacola, FL 32505

[Tenant Landlord Exemption](#)

[Chapter 83](#)

[Non-Residential Tenancies](#)

[Florida Statute 83.001-83.251](#)

I, _____, a resident at Bright Bridge Ministries acknowledge that I do not have the same Landlord-Tenant relations rights as I would in a Residential Lease Agreement. I further acknowledge that I do not have the same legal recourse in the Florida eviction process, and that I must vacate Bright Bridge Ministries property immediately if asked to do so. Failure to comply will result in forcible eviction by law enforcement officials and may result in legal charges.

Signature

Date



Substance use disorder resident agreement

I _____ understand that as a Substance Use Disorder resident I am required to meet with my Caseworker monthly, attend 4 recovery classes per week (AA, NA, CA, etc).

If I am taking MAT (Medication-Assisted Treatment) medication. Medication needs to be locked away in a personal lock box in a secure area.

I understand that recovery classes can be attended at Bright Bridge Ministry or nearby with proof of class attendance.

I understand that I must follow all rules and procedures at Bright Bridge Ministries.

Signature

Date



New Horizons Pallet Shelter Village Handbook

“Stability Today, Success Tomorrow.”

1. Welcome

- Welcome to **New Horizons Pallet Shelter Village Transitional Program**. This community exists to provide everyone with a **safe, stable, and supportive environment** as you transition toward independence. Our goal is to create a space of **Respect, Dignity, Structure, and Opportunity**. This is your introduction handbook. Each guest will receive this **New Horizons Pallet Shelter Village Transitional Program Rules and Regulations Handbook**.

2. Mission & Values

- **Mission:** To provide a safe transitional Pallet Shelter Community that supports returning citizens and individuals experiencing homelessness as they rebuild their lives.
- **Values:** Respect, Accountability, Empowerment, Dignity, Structure, Opportunity and, Second Chances.

3. Resident Rights

All residents have the right to:

- Safe, clean, and private pallet shelter space.
- Respectful treatment from staff and peers.
- Access to case management and supportive services.
- Freedom from discrimination, harassment, and violence.
- Access to drug and alcohol counseling.
- Access to mental health counseling.

4. Resident Responsibilities

Residents are expected to:

- Follow all program rules and policies set out in the **New Horizons Pallet Shelter Village. rules and regulations book.**
- Treat others with respect at all times.
- Keep their individual homes and belongings clean and orderly.
- Participate in community chores and keep common areas neat and clean.
- Participate in case management and service planning.
- Respect quiet hours and community standards.
- Take accountability for actions and choices.
- It's your responsibility to find a job within thirty days.
- It's your responsibility to ask staff question if you don't understand something.
- **It is your responsibility to inform staff if your pallet shelter needs maintenance. Do not try to fix anything for any reason. If you are caught, this will result in immediate dismissal.**

5. Daily Living Guidelines

- **Check-In & Curfew:** All residents must return to the property by **11:30 PM nightly**, unless excused for work or a verified program-related activity.
- **Quiet Hours:** 10:00 PM – 7:00 AM.
- **Visitors & Guests:**
 1. **No overnight guests** are allowed.
 2. **No outside guests** may enter the **New Horizons Pallet Shelter Village.** without staff approval.
 3. Residents are responsible for the behavior of any approved visitors.
- **Cleanliness & Chores:**
 1. Each resident is responsible for keeping the **inside and outside of their assigned pallet shelter clean.**
 2. A **chore list will be rotated weekly** to ensure all residents help maintain all common areas, including bathrooms, laundry, and outdoor spaces.
 3. Residents must complete chores on schedule. Failure to do so may result in a warning. **Subsequent failure will result in dismissal from the program.**
 4. **Random Inspections** will be conducted to ensure cleanliness and safety standards are met. There should be no nails, screws, thumb tack, or any holes put in the walls. (Adhesive tape is the only exception) No unauthorized changing of the receptacles, you are supplied with enough electricity sockets **(Any unauthorized changes to the outside or inside structures will result in automatic dismissal from the program)**
 5. **No excessive amount of personal property in your pallet shelter:** to include clothing, shoes, books, food, or storage bins. You are only allowed two storage bins under your bed. The rest of your belongings have place.
- **Hygiene Trailer Rules (Restrooms & Showers)**
 1. Respect others' privacy — no loitering in or around the hygiene trailer.

2. Limit showers to **15 minutes** to allow fair use for all residents.
3. Clean up after yourself — dispose of trash, used products, and towels properly.
4. “REAP” is not responsible for your personal belongings. Do not leave personal belongings in the trailer.
5. Absolutely no smoking, drug or alcohol use or storage in the hygiene trailer.
6. Report any damages, clogs, or unsafe conditions immediately to staff

6. Cooking Policy

- The **only approved cooking device** on the property is a **microwave** and **mini refrigerator**
- **Hot plates, grills, toaster ovens, air fryers, or open flames are strictly prohibited.**

7. Program Fees and Time in the Program

- Residents are required to pay _____ **per month** as a transitional program fee.
- Payments are due on the **1st of each month**.
- Residents who fall behind in payments more than one month must meet with staff to create a payment plan or face termination from the program.
- Failure to make payments or establish a plan will result in program dismissal. We are here to help you with a Hand-UP Not a Hand- OUT. Your payment is to teach you to get into the habit of paying your bills on time.
- Residents have a three months’ time limit to complete the program. The executive director can extent the time limit if deemed necessary.

8. Safety & Security

- **Substance-Free Zone:** Drugs, alcohol, and paraphernalia are not permitted on property.
- **Weapons:** Any type of weapon is strictly prohibited.
- **Searches/Inspections:** May be conducted of any pallet shelter unit at any time of the day or night for safety reasons of everyone.
- **Emergencies:** Residents must follow all staff instructions during emergencies.
- **Random Drug Test:** There will be random drug testing for the safety and well-being of the people that reside in a pallet shelter.
- **No Smoking:** No Smoking Cigarettes, or Vaping in the pallet shelters for any reason.
- **No blocking the heater or ant vents for any reason.**
- **No visitors or other people in your Pallet shelter for any reason.**

9. Case Management & Participation

- Weekly check-ins with a case manager are required.
- Residents must participate in all **New Horizons Pallet Shelter Village** programs which may include:
 - Employment or job readiness programs;
 - Substance abuse treatment;
 - Educational opportunities;

- Life skills workshops;
 - Drug and Alcohol counseling, if needed;
 - Identification and social security cards are mandatory;
- Missed appointments without valid reason may result in warnings or incident report.

10. Program Agreement & Housing Status

- **New Horizons Pallet Shelter Village Transitional Program** provides **temporary, transitional housing** as part of our transitional program.
- **This is not rental property.** Residents are participants in a program, not tenants under landlord/tenant law.
- Continued participation is based on compliance with program rules and active engagement in case management.
- **Residents may be asked to leave the program at any time** for violations of community standards, non-participation, or safety concerns.
- Everyone is expected to leave **peacefully and without incident** if discharged from the program, if not, the police will be called immediately. (No Exceptions.).
- **You must keep your pallet shelter inside and outside area clean at all times.**

11. Rules, Violations & Consequences

Minor Violations (examples: missed curfew, loud noise, untidy Pallet Shelter, missed chores, not keeping the hygiene trailer clean.)

- Step 1: Verbal Warning
- Step 2: Written Warning
- Step 3: Possible exit from program
- **Major Violations will constitute Immediate removal from the program (examples: violence, threats, drug use, weapons, overnight or unapproved guests, tampering with electrical or cooking devices, repeated refusal to comply with cleanliness/inspection policies, failing to program, and not programming, smoking cigarettes in the pallet shelter or Hygiene Trailer, violating any of the safety and security rules)**

12. Community Building

- Monthly community meetings give residents a voice in shaping the **New Horizons Pallet Shelter Village.**
- Residents will rotate **community chores** to ensure fairness and upkeep of the property.
- Residents may take on **leadership roles** (peer mentors, community reps).
- Activities and workshops encourage growth, healing, and trust.
- Monthly case management team meeting.
- Each Resident must help maintain the cleanliness of the hygiene trailer.

13. Resident Agreement

By signing below, I acknowledge that:

- I am a participant in the **New Horizons Pallet Shelter Village**. Transitional Housing Program.
- I will read all the rules and regulations of the **New Horizons Pallet Shelter Village**. and the pallet program
- I understand this is **not a rental property** and I have no tenant rights under landlord/tenant law, and I am a guest of the **New Horizons Pallet Shelter Village**.
- I may be asked to leave the **New Horizons Pallet Shelter Village**. at any time if I fail to comply with rules, disrupt the community, or refuse to participate in programs that are part of the program.
- I agree to follow the rules, complete chores, respect others, pay required housing fees, and work toward my goals as part of the **New Horizons Pallet Shelter Village**.
- I fully agree and understand that the **New Horizons Pallet Shelter Village** is a transitional program to help me transition to independence and self-sufficiency.
- I fully understand that squatters' rights under the law does not apply to me while I am a resident at the **New Horizons Pallet Shelter Village**.
- I further understand that if I am asked to leave the **New Horizons Pallet Shelter Village**. I will leave without incident.
- I also have waived all my rights to involve the courts or to take any legal action if I am asked to leave the **New Horizons Pallet Shelter Village**.
- I fully understand that the **New Horizons Pallet Shelter Village**. is not responsible for any of my personal possession or prescription medication that are taken from the shelter unit.

Resident/Guest Name: _____

Signature: _____

Date: _____

Staff Witness: _____

Revised on November 10, 2025



RE-ENTRY ALLIANCE PENSACOLA (REAP)

New Horizons Village

Program Participant Supportive Service Agreement

1. Program Purpose

REAP will designate six to ten units at New Horizons Village for participants receiving supportive services to participate in the New Horizons Village substance abuse program classes. The program provides housing support, case management, substance abuse education, personal recovery plans, and assistance with personal goals that promote stability and independence.

REAP is committed to treating participants with dignity, offering encouragement, and helping them overcome challenges. Participants are expected to take an active role in their progress.

2. Mandatory Substance Abuse Class

I understand that attendance and participation in a REAP-approved substance abuse education class are mandatory conditions of continued participation in this program. I agree to attend scheduled sessions and complete the class requirements.

If illness, employment, transportation, disability, or another barrier prevents attendance, I will notify REAP as soon as possible. REAP will work with me to arrange an approved make-up session, accommodation, or alternative when appropriate. Any adjustment will be documented in my service plan.

3. Conditions for Continued Participation

To remain in the program, I agree to:

- Attend and complete the required substance abuse education class.
- Meet with my assigned case manager or supportive services staff according to my agreed schedule.
- Help develop and follow an individual service plan, including realistic goals for housing stability, recovery, employment, benefits, or other identified needs.
- Notify staff when I cannot attend an appointment and cooperate in rescheduling it.
- Follow the written New Horizons Village rules provided to me, including safety, visitor, and property-care requirements.
- Keep my unit reasonably clean and sanitary and report maintenance concerns promptly.
- Treat participants, staff, volunteers, and visitors respectfully. Violence, threats, harassment, theft, and intentional property damage are prohibited.
- Follow my personal recovery plan.

- Refrain from possessing, using, selling, or distributing illegal drugs on the property. Take prescribed medication only as directed and store it safely.
- Communicate honestly with staff about barriers and changes that affect my participation.

Progress will be reviewed based on my participation, circumstances, and agreed goals. Difficulty reaching a goal will be addressed through support and review of my service plan.

4. REAP's Responsibilities

REAP agrees to explain program expectations, provide or coordinate supportive services, monitor progress, and help address barriers to participation. REAP will protect participant information according to applicable confidentiality requirements.

Lawfully prescribed medication, including medication for substance use treatment, will not by itself be treated as a program violation.

5. When Program Conditions Are Not Met

If I do not meet program conditions, REAP will review the concern with REAP staff and consider the circumstances. When appropriate, REAP will provide a written corrective action plan stating:

- The condition that has not been met.
- The support available and steps needed to correct it.
- The deadline for completing those steps.
- The possible consequences of continued noncompliance.

Repeated unexcused absences, refusal to participate, or serious violations may result in termination from the program, subject to applicable law and funding requirements.

Before termination, REAP will provide written reasons and an opportunity to request review by a staff member who was not directly involved in the decision. Immediate safety concerns may require emergency action consistent with applicable law.

6. Participant Acknowledgment

I have read this agreement, or it has been read to me. I have had the opportunity to ask questions and understand the conditions for continued participation, including the mandatory substance abuse education class.

I have received a copy of this agreement and the Village rules.

Participant Signature: _____

Date: _____

REAP Staff Signature: _____

Date: _____



Sheriff Chip W. Simmons

ESCAMBIA COUNTY SHERIFF'S OFFICE

COURTESY

INTEGRITY

PROFESSIONALISM

June 30th, 2026

U.S. Department of Housing and Urban Development

Re: Letter of Support for Opening Doors Northwest Florida, Lead Agency for Continuum of Care FL-511 – FY 2026 HUD Continuum of Care Notice of Funding Opportunity

To Whom It May Concern:

On behalf of the Escambia County Sheriff's Office, I am pleased to provide this letter of strong support for Opening Doors Northwest Florida in its role as the Lead Agency for Continuum of Care FL-511 and its application under the Fiscal Year 2026 HUD Continuum of Care Notice of Funding Opportunity (NOFO).

The Escambia County Sheriff's Office recognizes that homelessness is not solely a housing issue or a law enforcement issue, but a complex community challenge requiring coordinated, data-driven, and housing-focused solutions. Over the past year, Opening Doors has demonstrated exceptional leadership in strengthening collaboration among local governments, law enforcement, behavioral health providers, healthcare systems, veteran organizations, emergency shelters, and housing providers to improve outcomes for individuals and families experiencing homelessness.

Our deputies routinely encounter individuals living in unsheltered locations who face significant barriers related to serious mental illness, substance use disorders, chronic health conditions, disabilities, and long histories of homelessness. Through its coordinated Street Outreach, Coordinated Entry, and Homeless Management Information System (HMIS), Opening Doors has created a community response that allows law enforcement officers to connect individuals to services and housing opportunities rather than relying solely on enforcement actions.

The Sheriff's Office particularly values Opening Doors' commitment to:

- Reducing unsheltered homelessness through coordinated, housing-focused street outreach.
- Utilizing Coordinated Entry to ensure equitable, consistent, and needs-based access to housing resources.
- Strengthening collaboration among law enforcement, behavioral health providers, healthcare organizations, and homeless service providers.



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www.escambiaso.com

- Leveraging HMIS data to identify service gaps, measure system performance, and improve community outcomes.
- Prioritizing permanent housing solutions that reduce repeat interactions with emergency responders and the criminal justice system.
- Expanding partnerships that improve public safety while preserving the dignity of individuals experiencing homelessness.

Our office has observed the positive impact of these coordinated efforts in improving communication between agencies, reducing duplication of services, facilitating referrals to housing and treatment resources, and increasing opportunities for individuals experiencing homelessness to stabilize and exit homelessness permanently.

The Escambia County Sheriff's Office is committed to continuing its partnership with Opening Doors Northwest Florida by participating in coordinated outreach efforts, supporting multidisciplinary responses to unsheltered homelessness, sharing information where appropriate and permitted by law, participating in community planning efforts, and identifying opportunities to improve outcomes for individuals whose homelessness contributes to repeated interactions with law enforcement.

The FY 2026 HUD Continuum of Care NOFO emphasizes system collaboration, reducing unsheltered homelessness, improving equity, strengthening partnerships across public systems, and increasing permanent housing outcomes. We believe Opening Doors Northwest Florida has established the collaborative leadership necessary to advance these priorities throughout Escambia and Santa Rosa Counties.

We strongly support Opening Doors Northwest Florida as the Lead Agency for FL-511 and respectfully encourage HUD to give favorable consideration to its FY 2026 Continuum of Care application.

Thank you for your consideration.

Sincerely,



Sheriff Chip W. Simmons

Escambia County Sheriff's Office



711 N Hayne St
Pensacola, FL 32501

850-435-1900
pensacolapolice.com

OFFICE OF THE CHIEF OF POLICE

June 29, 2026

U.S. Department of Housing and Urban Development

Re: Letter of Support for Opening Doors Northwest Florida, Lead Agency for Continuum of Care FL-511 – FY 2026 Continuum of Care Notice of Funding Opportunity

To Whom It May Concern:

On behalf of the Pensacola Police Department, I am pleased to provide this letter of strong support for Opening Doors Northwest Florida in its role as the Lead Agency for Continuum of Care FL-511 and its application for funding under the U.S. Department of Housing and Urban Development's Fiscal Year 2026 Continuum of Care (CoC) Notice of Funding Opportunity (NOFO).

The Pensacola Police Department recognizes that homelessness is a complex community issue that requires coordinated, housing-focused solutions built upon strong partnerships between law enforcement, local government, behavioral health providers, healthcare organizations, housing providers, and homeless service agencies. Opening Doors Northwest Florida has provided exceptional leadership in bringing these partners together to create an effective regional response that improves outcomes for individuals experiencing homelessness while enhancing public safety and quality of life throughout our community.

Recognizing the importance of proactive engagement, the Pensacola Police Department has made a significant investment by assigning dedicated personnel to work with individuals experiencing homelessness. These staff members collaborate closely with Opening Doors Northwest Florida and other Continuum of Care partners to identify individuals living unsheltered, build trusting relationships, and connect them with housing opportunities, behavioral healthcare, medical services, veteran resources, and other supportive services. This collaborative approach has strengthened our ability to address homelessness through engagement and problem-solving rather than enforcement whenever appropriate.

Our commitment to this partnership extends beyond field operations. A representative from the Pensacola Police Department serves the FL-511 Continuum of Care Leadership Council, actively participating in strategic planning, policy development, and regional coordination efforts. This participation ensures that public safety perspectives are integrated into the Continuum of Care's planning process while strengthening communication and collaboration among law enforcement, local governments, and community service providers.

Eric Winstrom, Chief of Police

We have witnessed firsthand the positive impact of Opening Doors' leadership in coordinating Street Outreach, Coordinated Entry, and the Homeless Management Information System (HMIS). These coordinated efforts provide a structured process for assessing vulnerability, prioritizing individuals with the greatest needs, and connecting them to permanent housing and supportive services. This system-based approach has improved coordination among partner agencies while helping reduce repeated interactions between individuals experiencing homelessness and emergency response systems.

The Pensacola Police Department also values Opening Doors' commitment to data-informed decision-making, continuous system improvement, and expanding partnerships that address the underlying causes of homelessness. Together, we are creating a more effective response that supports both community safety and long-term housing stability.

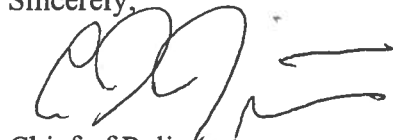
The FY 2026 HUD Continuum of Care NOFO emphasizes reducing unsheltered homelessness, strengthening cross-system collaboration, improving access to permanent housing, and utilizing coordinated, evidence-based approaches to improve system performance. We believe Opening Doors Northwest Florida has demonstrated exceptional leadership in each of these priority areas and has built a Continuum of Care that serves as a model for regional collaboration.

The Pensacola Police Department remains committed to working alongside Opening Doors Northwest Florida and our community partners to expand coordinated outreach efforts, strengthen public safety partnerships, and improve housing outcomes for individuals and families experiencing homelessness throughout Escambia and Santa Rosa Counties.

It is without reservation that the Pensacola Police Department supports Opening Doors Northwest Florida's FY 2026 HUD Continuum of Care funding application and respectfully requests favorable consideration by the U.S. Department of Housing and Urban Development.

Thank you for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Eric Winstrom", with a stylized flourish at the end.

Chief of Police
Pensacola Police Department



FL-511 FY2026 HUD CoC NOFO
Ranking & Review Committee Scoring Rubric

Date Issued: July 10, 2026

Scored Evaluation (100 Points)

1. Organizational Capacity & Experience (20 Points)

Reviewer Considerations

- Experience serving homeless populations
- Experience managing state/federal grants
- Financial stability
- Administrative infrastructure
- Staff qualifications

Score	Description
17-20	Exceptional experience and demonstrated success
13-16	Strong capacity with minor gaps
9-12	Adequate capacity
5-8	Limited experience
0-4	Significant concerns

2. Program Design & Effectiveness (25 Points)

Reviewer Considerations

- Clearly defined activities
- Evidence-based practices
- Realistic service model
- Housing-focused approach
- Measurable outcomes

Score	Description
21-25	Excellent program design
16-20	Strong design
11-15	Adequate design
6-10	Weak design
0-5	Poorly developed proposal

3. CoC Strategic Plan Alignment (15 Points)

The RFP specifically requires alignment with the FL-511 Strategic Plan.

Reviewer Considerations

- Supports strategic priorities
- Advances system-level outcomes
- Reduces homelessness
- Increases housing stability
- Coordinates with broader homeless response system

Score	Description
13-15	Strong alignment
10-12	Good alignment
7-9	Moderate alignment
4-6	Minimal alignment
0-3	No clear alignment

4. HMIS Participation & Data Quality Capacity (10 Points)

Reviewer Considerations

- Current HMIS participation
- Data quality history
- Reporting capacity
- Staff HMIS expertise
- Commitment to compliance

Score	Description
9-10	Excellent HMIS capacity
7-8	Strong capacity
5-6	Adequate capacity
3-4	Limited capacity
0-2	Significant concerns

5. Coordinated Entry Participation (10 Points)

The RFP requires participation in Coordinated Entry and referral management.

Reviewer Considerations

- Current CE participation
- Referral acceptance process
- CE integration
- Housing navigation approach
- Collaboration with partners

Score	Description
9-10	Fully integrated
7-8	Strong participation
5-6	Adequate participation
3-4	Limited participation
0-2	Minimal commitment

6. Budget & Cost Effectiveness (10 Points)

Reviewer Considerations

- Reasonableness of costs
- Cost per household served
- Administrative costs minimized
- Budget narrative clarity
- Leveraging other resources

Score	Description
9-10	Highly cost effective
7-8	Cost effective
5-6	Reasonable
3-4	Questionable costs
0-2	Poor budget design

7. Match & Resource Leveraging (5 Points)

Reviewer Considerations

- Match exceeds minimum requirement
- Multiple funding sources
- In-kind support
- Community partnerships

Score	Description
5	Exceptional leveraging
4	Strong leveraging
3	Meets requirements
2	Minimal leveraging
0-1	Weak match strategy

Bonus Priority Points (Up to 5 Points)

These points may be awarded for proposals that strongly support CoC priorities.

Priority Area	Points
Unsheltered homelessness response	+1
Street Outreach	+1
Rapid Rehousing	+1
Behavioral health integration	+1
Demonstrated collaboration across multiple providers	+1

Elements of Individual Reviewer Score Sheet

Category	Points Available Score
Organizational Capacity	20
Program Design	25
Strategic Alignment	15
HMIS Capacity	10
Coordinated Entry	10
Budget	10
Match	5
Bonus Priority Points	5
TOTAL	100

Funding Recommendation

- ☐ Highly Recommended (90-100)
- ☐ Recommended (80-89)
- ☐ Recommended if Funding Available (70-79)
- ☐ Not Recommended (<70)

Reviewer Comments:

CoC FL-511 Competitive Grant Scoring Sheet

Reviewer: _____

Agency/Project Reviewed: _____

Date of Review: _____

Criteria	Score
Organizational Capacity & Experience	
Program Design & Effectiveness	
CoC Strategic Plan Alignment	
HMIS Participation and Data Quality	
Coordinated Entry Participation	
Budget & Cost Effectiveness	
Match & Resource Leveraging	
Bonus Priority Points	
Total	

Signature of Reviewer: _____



Agency Name	Project Name	Application	Funded by Reallocation (Yes or No)	Component	Requested	Recommended Funding	Status	Average Percentage Score	Rank	Tier
Opening Doors Northwest Florida Inc.	FL511 CoC Planning FY2026	Planning	No	Planning	\$ 147,060.00	\$ 147,060.00	Accepted	100	Not Ranked	Not Ranked
Opening Doors Northwest Florida Inc.	FL511 Coordinated Entry FY2026	Renewal	No	SSO-CE	\$ 327,475.00	\$ 327,475.00	Accepted	100	1	Tier 1
Opening Doors Northwest Florida Inc.	FL511 HMIS FY2026	Renewal	No	HMIS	\$ 145,681.00	\$ 145,681.00	Accepted	100	2	Tier 1
Pensacola Police Department	PPD Mobile Outreach	New Non-DV	Yes	SO	\$ 56,514.40	\$ 44,373.00	Accepted	100	3	Tier 1
Ministry Village at Olive	MVO Charis House 2	New Non-DV	Yes	TH	\$ 50,500.00	\$ 50,500.00	Accepted	100	4	Tier 2
Ministry Village at Olive	MVO Tender Hearts Caring Hands	New Non-DV	Yes	SSO	\$ 28,000.00	\$ 22,000.00	Accepted	100	5	Tier 2
Opening Doors Northwest Florida Inc.	Team HOPE Street Outreach	New Non-DV	Yes	SO	\$ 152,500.00	\$ 35,000.00	Accepted	95	6	Tier 2
Re-Entry Alliance Pensacola	REAP New Horizons Village 2	New Non-DV	Yes	TH	\$ 75,000.00	\$ 50,000.00	Accepted	95	7	Tier 2
90Works, Inc.	90Works Transition TH Project	New Non-DV	Yes	TH	\$ 200,000.00	\$ 75,000.00	Accepted	90	8	Tier 2
Endeavors	Endeavors SSO FY2026	New Non-DV	Yes	SSO	\$ 530,695.70	\$ 87,745.00	Accepted	90	9	Tier 2
Re-Entry Alliance Pensacola	REAP Taking it to the Streets	New Non-DV	No	SO	\$ 100,000.00	\$ 75,000.00	Accepted	94	10	Tier 2
Bright Bridge Ministries	Bright Bridge Rapid Rehousing	New Non-DV	No	RRH	\$ 351,960.00	\$ 100,000.00	Accepted	90	11	Tier 2
Catholic Charities of Northwest Florida	Catholic Charities Rapid Rehousing	New Non-DV	No	RRH	\$ 525,030.00	\$ 125,000.00	Accepted	90	12	Tier 2
Waterfront Rescue Mission	Waterfront Rescue Mission SSO	New Non-DV	No	SSO	\$ 423,912.00	\$ 200,000.00	Accepted	95	13	Tier 2
FavorHouse of Northwest Florida Inc.	New Beginning: RRH	New DV	No	RRH	\$ 437,800.00	\$ 369,790.00	Accepted	100	14	Tier 2
90Works, Inc.	90Works TH DV Project	New DV	No	TH	\$ 205,251.00	\$ 205,251.00	Accepted	100	15	Tier 2
90Works, Inc.	FY24 90WORKS PSH	Renewal	No	PSH	\$ -	\$ -	Eliminated		Not Ranked	Not Ranked
Lakeview Center, Inc.	Housing First 2024-2025	Renewal	No	PSH	\$ -	\$ -	Eliminated		Not Ranked	Not Ranked
Opening Doors Northwest Florida Inc.	ICARE PSH 2024	Renewal	No	PSH	\$ -	\$ -	Eliminated		Not Ranked	Not Ranked

Approved by FL-511 Leadership Council Vote: September 22, 2026