

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: NJ-510 - Lakewood Township/Ocean County CoC

1A-2. Collaborative Applicant Name: Ending Homelessness Group

1A-3. CoC Designation: CA

1A-4. HMIS Lead: NJHMFA

1B. Coordination and Engagement–Accountable Structure and Participation

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

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- Frequently Asked Questions

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

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

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

	Entity	Participated in CoC Meetings	Number of Board Members
1.	Affordable Housing Developer(s)	Yes	
2.	CDBG/HOME/ESG Entitlement Jurisdiction(s)	Yes	
3.	Certified Community Behavioral Health Clinic (CCBHC)	Yes	
4.	Community Mental Health Center (CMHC)	Yes	
5.	Disability Advocate(s)	Yes	
6.	Disability Service Organization(s)	Yes	
7.	Emergency Medical Services (EMS)/Crisis Response Team(s)	Yes	
8.	Employment Assistance Program(s) (e.g., Local Workforce Development, American Job Center)	Yes	
9.	Faith-based Organization(s)	Yes	1
10.	Homeless or Formerly Homeless Person(s)	Yes	1
11.	Hospital(s)	Yes	1
12.	Other Primary Healthcare Provider(s) (e.g., Federally Qualified Health Center, Healthcare for the Homeless)	Yes	
13.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	
14.	Law Enforcement	Yes	
15.	Local Court Systems, Including Specialty Courts (e.g., Mental Health Court, Drug Court, Care Court)	Yes	
16.	Local Government Staff/Official(s)	Yes	1

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

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

(limit 2,500 characters)

The Ocean County CoC ensures a transparent membership invitation process annually to solicit new membership. The Ocean HPAC uses effective communication strategies such as mass communications via email listserv and public posting on the Ocean HPAC website.

To promote transparency, the Ocean HPAC disseminates information regarding the invitation process through the website and the email listserv. These platforms provide clear instructions in PDF format of the eligibility criteria and application deadlines for any interest stakeholders to apply for membership. The Ocean County HPAC encourages all stakeholders to consider membership for all human/social service-related meetings including those not directly associate with the CoC that are in correlation with homeless system planning. At the first meeting of the new year, the Ocean HPAC announces an official request for new membership. All current HPAC members are encouraged to invite any agency that is interested or affiliated with the homelessness system planning process.

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

The Ocean HPAC value transparency and invites all stakeholders to provide feedback on the performance and the structure of the Ocean County CoC. The Ocean HPAC hold bi-monthly meetings that are open to all interested in attending. Membership in the Ocean HPAC is accepted on a rolling basis upon the submission of a request and approval at the next full body meeting. Ocean HPAC meeting notices are sent to membership via the email listserv and meeting dates are posted on the Ocean HPAC website in an accessible format that is accessible for those who may have a disability. All meetings for the Ocean HPAC are held virtually to ensure accessibility and access. Each agenda item for the full HPAC meeting is sent in advance for review and is discussed in an open forum to invite collaboration amongst stakeholders.

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.
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(limit 2,500 characters)

Upon release of the FY26 NOFO, the Ocean HPAC Executive Committee was made aware at the Executive Committee meeting on June 12th, 2026. The announcement to the public was made on June 14th, 2026, via the email listserv and public posting to the Ocean HPAC website along with the scoring tool that will be used to measure submitted proposals. Two technical assistance sessions were held on June 17th, 2026, and June 29th, 2026 that allowed all interested sites to receive answers to questions surrounding the local selection process. This technical assistance session was opened to current CoC-funded agencies and those interested that have not been previously funded. All significant dates were announced during the TA session and posted on the Ocean HPAC website. Interested agencies also were aware at the TA sessions of what the Ocean County CoC funding priorities were and the amount of funding that could be available. Proposed new and renewal projects submitted their applications via Survey Monkey Apply with a submission deadline of July 11th, 2026.

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)

In 2024, the Ocean HPAC adopted a 10-year strategic plan after seeing a 62% increase in homeless persons between 2020 through 2024. Ocean County's homeless population is in line with state, and nation, wide trends. Ocean County providers take steps to stem the flow of people becoming homeless, serve those currently experiencing homelessness, and create a system that is responsive and able to serve those that are facing homelessness. Ocean County's Strategic Plan identified the following strategies needed to adequately address the homelessness concerns:

- oRental Assistance Dedicated to Those Actively Experiencing Homelessness.
- oSupportive Services to Assist Those at Immediate Risk of Homelessness
- oDevelopment of Affordable Housing
- oDevelopment of a Coordinated Prevention System

The Ocean HPAC uses this strategic plan as a guide to address homelessness across the community and as a framework for discussion regarding system review.

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

1. Identifies the gap, using data or stakeholder feedback	Yes
2. The strategy to address the needs of all relevant subpopulations	Yes
3. Sets quantifiable performance measures	Yes

4. Identifies timelines for the completion of specific tasks	Yes
5. Identifies specific funding sources for planned activities	Yes
6. An individual or body responsible for overseeing implementation of specific strategies	Yes

1C. Coordination and Engagement

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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	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?	20%

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 the CoC is not a rural CoC

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

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

(limit 2,500 characters)

Ocean County CoC partners with the Department of Health who contracts with behavioral health facilities that allow immediate and direct access to mental and substance use care. Services are available to all those in need including adolescents and pregnant women. These networks include both inpatient and outpatient services that include physicians, nurses, licensed counselors, recovery specialists to aid in the rehabilitation of those that enroll in their programming. Ocean County also has a lasting partnership with New Hope Integrated Behavioral Healthcare; the statewide agency dedicate to the treatment of adults and youth affected with substance abuse issues. The agency provides all levels of recovery services, from inpatient, long term substance abuse treatment to outpatient services.

Ocean County has launched the “WE ALL MATTER” initiative that promotes the usage of the 988 hotline that is directly connection to one of our providers Bright Harbor Healthcare. The “WE ALL MATTER” initiative is in an extension the working being conducted through the collaborative Ocean County Suicide Mortality Review (OC-SMR). OC-SMR brings together community partners to study various trends related to suicide to identify gaps and bring forth innovative efforts for prevention.

Ocean HPAC includes a variety of nonprofit and PATH providers that also provide case management and linkage to other resources for those that are experiencing unsheltered homelessness.

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)

Ocean County partners with the Mental Health Association with the ROADS Community Peer Recovery Center. ROADS is an acronym for Rover, Opportunities, Acceptance, Dignity, and Support which is the framework that the program bases their model on. ROADS aims to foster a recovery-oriented culture and serve all members of the community effectively and respectfully, regardless of stage, phase, or recovery pathway. ROADS exhibits a solid commitment to ensuring individuals & family members are offered comprehensive information on choices and options, as well as encouraged and empowered to take control of their health, wellness, and recovery. Services and support that are offered through the ROADS include but are not limited to:

- oPeer Support Activities
- oRecovery Classes
- oCommunity Engagement
- oRecreation and Socialization

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

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

(limit 2,500 characters)

The CoC works closely with community based mental health providers (CMHP) in identifying the housing needs of persons with serious mental illness (SMI). CMHP has community support services (CSS) that provides intensive case management to those with SMI. The CSS program has a connection to NJ Division of Mental Health and Addiction Services (DMHAS) which has statewide rental assistance vouchers that are specifically accessible to program participants in CSS. The CSS team provides intensive case management, case coordination with probation officers, intensive outpatient programs, medical assisted treatment programs, and linkage to ongoing community resources.

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)

Bright Harbor Healthcare is one of the approved providers that receive referrals from the Recovery Court for continued treatment. Bright Harbor Healthcare offers Outpatient services that are geared toward the recovery and stabilization of their participants this includes outpatient detox and addiction treatment such as medication assisted treatment programs. The Ocean County Prosecutor's Office also created "Operation Helping Hand" that links individuals with substance use concerns.

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)

Bright Harbor Healthcare also provides supportive housing and is also a PATH provider. The Progressive Assistance to Transition from Homelessness (PATH) program specializes in the long-term care and stabilization of enrolled participants. The prioritizes case management, benefits enrollment, and linkage to community resources including housing assistance programs. BHH also offers internal supportive housing opportunities such the BEACH and the SHARE program. This program provides comprehensive support and aims to navigate their participants to enhance their independent living skills and focuses on Community Housing opportunities. Bright Harbor is an active member of the CoC and one of the CoC funded agencies. They participate in the CoC encampment taskforce and coordinated entry system as well as serve as the provider for code blue and code red in the community.

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)

Ocean CoC has a Psychiatric Emergency Screening Services (PESS) provider through Robert Wood Johnson (RWJ). As a PESS provider, RWJ is responsible for responding to an evaluating community member in mental health crisis. The PESS provider responds with emergency services or law enforcement agencies to community locations to evaluate people for safety and resource referral. If the person is a danger to themselves or others, they will be brought to a local ED to be evaluated.

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.	100
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)

The Ocean County CoC has a formal partnership with two PATH and CMHC providers, Preferred Behavior Health and Bright Harbor Healthcare. Ocean County CoC also has a relationship with the Mental Health Association of NJ in Ocean County.

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)

All CoC funded projects in Ocean County CoC have a requirement to maintain eligibility. Though the CoC does not have a provider that is a traditional sober living facility, the CoC funded providers have active partnerships with community sober living facilities, such as HOPE Sheds Light, for residential placement and substance recovery treatment.

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

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

(limit 2,500 characters)

The Ocean County CoC has a large of housing and supportive service providers to offer is clients that are in the process of transition from treatment into housing. These providers offer a wide range of services such as case management, housing support, certified peer recovery, and mental health support that are tailored to the individual needs of all tailored to the needs of each individual client. Warm hand offs include collaborative discussion through monthly Coordinated Entry case conferencing meetings, direct communication between various providers, and continuous follow-up to address any gaps or barriers in services. Housing planning/navigation is a part of both the intake and discharge planning across providers in the continuum. Ocean County CoC providers have included housing as a core part of their care coordination alongside their respective treatment planning so at the time of discharge, participants will have a stable transition out their respective programming.

1C-2. Supportive Services Investment.

	Number
1. Enter your CoC's FY 2026 Annual Renewal Demand (ARD).	\$970,097
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.	\$471,343
3. Percent of your CoC's FY 2026 ARD (from element 1 above) that is supportive services funding (from element 2 above).	49%

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.	\$72,922
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).	56%

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%
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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)

There is no community in Ocean County CoC that currently receives direct ESG funding. The State of NJ Department of Community Affairs (DCA) is the ESG recipient responsible for the Ocean County CoC region. DCA hosts public comment conference calls and provides an opportunity for community stakeholders to submit written comments related to their funding priorities and anticipated allocations per eligible activities. Ocean HPAC Executive Committee members participate in DCA mtgs to discuss local needs and funding priorities and identify ways state ESG funds can assist with local efforts. Ocean HPAC Executive Committee members also participated in specialized conference calls with DCA on the administration of ESG-CV funding and RRH-CV program, ensuring the RRH program utilized the coordinated entry process. DCA also requires applicants for ESG funds to submit a letter of support from the CoC as evidence that the project is in line with local policies & planning. The CoC participates in the DCA public comment opportunities and provides letters of support to projects seeking funding through the ESG program after careful evaluation of the agency and program. The CoC evaluates performance for all HMIS programs on a regular basis. This evaluation will include state funded ESG programs should projects be awarded funding in the future.

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)

Referrals for the CoC funded programming are provided through the Ocean County CoC Coordinated Entry program. The Ocean CoC coordinated entry program is designed to screen all households that are experiencing homelessness for both CoC-funded and non CoC-funded resources when available. All providers that encounter an individual currently experiencing homelessness direct their participants to the CE provider to be screened and placed on the prioritization list. As a client is selected for a housing opportunity, the coordinated entry provider connects the client or the referring case manager to open CoC housing provider and share the required documentation for the eligible clients.

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

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

(limit 2,500 characters)

The Ocean County CoC PIT data, including the final report, is posted publicly and shared with all our stakeholders. These stakeholders include local governments regarding their localized homelessness planning, specifically their Code Blue season preparation. The State of New Jersey requires municipalities with more than 10 unsheltered client nights on the night of the PIT count to design a Code Blue response each season. The Ocean County CoC also shares their System Performance data during its system planning and full HPAC meetings.

The Ocean County CoC Lead is the NJ HMFA, a unit within the State government that helps with the sharing of data for improvement. Ocean County CoC also shares information with the NJ Department of Community Affairs Office of Homelessness Prevention to assist in the coordination of state response to homelessness.

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)

Providers in the Ocean County CoC operate a variety of programming from State, Local, and Private funding. Each of these programming components have various data that are collected to measure program outcomes. Because of this, data for the programming has been integrated into the larger system planning. One example is the NJ Medicaid Housing Supports Program that required Care Management Organizations and Housing Supports Providers to utilize HMIS for participant tracking. This integration of health and housing services improves both care coordination and ensures that services are not being duplicated amongst other providers within the continuum.

The Rutgers Center for State Health Policy completed a project matching HMIS data to medicaid data over a 10 year period. Within the project they examined health system usage for individuals experiencing homelessness. Rutgers shared CoC level reports on population characteristics and healthcare usage with each CoC to support collaborative conversations between the CoC and local hospitals as a way of identifying effective interventions for high frequency users experiencing homelessness.

1C-6. Employment and Workforce Development Partnership.

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

(limit 2,500 characters)

The Ocean County CoC has a close relationship with the Ocean County Department of Workforce Development that offers employment resources. Clients that access CoC programming including housing and Coordinated Entry relate to the Workforce Development's contracted career and training services provider Ocean County PIC, Inc. Ocean County Pic is open to all Ocean County residents, regardless of eligibility for the Workforce Innovation and Opportunity Act.

The CoC holds an annual training on employment services offered by the Ocean County PIC (Workforce Investment Board provider) provider agencies to ensure the knowledge of employment & training services available in the community. The training focuses on services available, how to access services & reviews needs of those with special circumstances such as no permanent address, need to develop work skills, working with those with disabilities. Trainings with Ocean County PIC are held at full CoC meetings & with staff from Code Blue warming centers, to connect the unsheltered population to employment resources. The CoC exec committee is responsible for oversight of strategy implementation.

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)

The Ocean CoC has a total of three outreach and two PATH providers that cover the entire CoC region. Alongside the Ocean County Sheriff's Office, Toms River Police Department and the Ocean County Department of Corrections, these providers have established the encampment taskforce. The purpose of the Encampment Taskforce is to promote a coordinated, housing-focused response that balances public safety, service accessibility, and the dignity of individuals experiencing homelessness. Through rapid engagement, assessment, placement, and ongoing coordination, Ocean County aims to reduce the duration of encampments while maximizing opportunities for shelter and permanent housing solutions. This collaborative meets on a quarterly schedule to discuss trends, concerns, and identify solutions that have been presented.

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)

All case managers within the Ocean County CoC work with their participants to explore all housing resolutions including family reunification and other support networks that may be available. As participants complete their intakes and start discharge planning, case managers attempt to identify what levels of support that are present. In the event a client does not have any, the case manager works on strengthening their level of support. Many of the providers within the Ocean County CoC have been successful in reconnecting with clients to their family and friends and have allowed them to reside with them in their permanent housing placements.

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

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

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

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

(limit 2,500 characters)

The Ocean County CoC has a lasting and efficient partnership with the Ocean County Sheriff's Office, Toms River Police Department and the Ocean County Department of Corrections, these providers have established the encampment taskforce. The purpose of the Encampment Taskforce is to promote a coordinated, housing-focused response that balances public safety, service accessibility, and the dignity of individuals experiencing homelessness. Ocean County CoC also has the ARRIVE together program, a statewide initiative that pairs law enforcement with mental health professionals for behavioral health emergencies. Currently two municipalities, Brick and Toms River, alongside one of our CoC- funded agencies partner to safely deescalate behavioral health crises and connect with community-based treatment.

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)

There are currently no laws, policies, or practices that hinder the CoC's ability to quickly clear tents and encampments. The Ocean County CoC's Encampment Taskforce, a collaborative body, that includes the Ocean County Sheriff's Department, local law enforcement agencies, and the Ocean County CoC provider agencies have put together a comprehensive plan to address the encampments throughout the Ocean County CoC region. The Ocean County Encampment Strategic Response Protocol establishes a coordinated, countywide process for identifying, engaging, and resolving homeless encampments throughout Ocean County. The protocol was developed through collaboration among homeless service providers, county agencies, law enforcement, and community stakeholders to ensure a timely, humane, and housing-focused response to encampments, particularly during periods of increased activity. The protocol is guided by the following principles:

- Housing-focused and person-centered engagement
- Respect for the dignity and autonomy of all individuals
- Coordination among community stakeholders
- Timely intervention and service connection
- Public health and public safety considerations
- Data-informed decision making

The primary objective is to transition encampment residents into safe and appropriate shelter environments. Throughout the transition process, providers and law enforcement will work collaboratively to maintain public safety and support service engagement.

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)

There currently no laws that hinders Ocean County CoC ability to assist those that are experiencing homelessness and substance abuse. With programs such as ARRIVE together and the Encampment Taskforce, the Ocean County CoC can assess engagement and service clients as quickly as possible. In cases where it is needed, NJ law allows law enforcement to transport a person who is visibly intoxicated into treatment. However, the lasting partnership that the Ocean County CoC has with law enforcement has allowed providers to connect clients with treatment in an immediate fashion.

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)

There currently no laws that hinders Ocean County CoC ability to assist those that are experiencing homelessness and substance abuse. With programs such as ARRIVE together and the Encampment Taskforce, the Ocean County CoC can assess engagement and service clients as quickly as possible. In cases where it is needed, NJ law allows law enforcement to transport a person who is visibly intoxicated into treatment. However, the lasting partnership that the Ocean County CoC has with law enforcement has allowed providers to connect clients with treatment in an immediate fashion.

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

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

(limit 2,500 characters)

The Ocean County CoC does not currently maintain data tied to the status of overdose and illicit drug use in public spaces. As described above, the CoC and its partners are working with law enforcement when needed to provide service connection to any experiencing unsheltered homelessness who may need substance abuse treatment.

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)

There are currently no laws that hinder the CoC's ability to assist those experiencing homelessness and a mental health crisis. Because of the Arrive Together program and the statewide 988 Mobile Crisis Outreach Response Teams, the CoC can quickly assess and connect clients to services who may need them. In cases where it is needed, NJ law does allow for involuntary commitment due to danger to self, other, or property. There is a Psychiatric Emergency Screening Service that can be initiated by anyone including housing providers or other community members. The PESS team provides mobile outreach for individuals experiencing acute psychiatric distress. The team conducts outreach with the police so in the instance that someone meets criteria for the program but is not cooperative, they can be transported for involuntary hospitalization to receive assessment and treatment planning.

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)

The State of New Jersey aligns its sex offender tracking with federal Sex Offender Registration and Notification Act by updating state rules to match national minimum standards. NJ combines the federal rules with its Megan's Law framework. All CoC providers adhere to all Megan's Law requirements and encourage families who will serve in their housing programs to utilize the registry when identifying housing.

1C-11. Outreach Strategy.

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

(limit 2,500 characters)

The Ocean County CoC's geographic region includes suburban communities, a few urban districts, and some rural areas. The outreach strategy that the Ocean CoC employs includes mobile outreach units that are provided by formal street outreach providers include SAMSHA funded PATH teams, a faith-based PATH provider, and the Board of Social Services. There are also outreach engagements that are organized by nontraditional partners including hospitals, the Ocean County library, community-based organizations, and the faith-based community. All outreach teams work collaboratively in engagement and ensure there are minimum gaps in service. The teams utilize trauma-informed practices and ensure that all engagements are meaningful and dignified. In the event of encampment outreach, the Ocean County Sheriff's Department accompanies the outreach teams to ensure the safety of all parties.

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

		Written Agreement
1.	Child Care (including Child Care and Development Fund)	Yes
2.	Early Childhood Providers	Yes
3.	Early Head Start	Yes
4.	Home Visiting Program (including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	Yes
5.	Head Start	Yes
6.	Healthy Start	Yes
7.	Public Pre-K	Yes
8.	Tribal Home Visiting Program	No
	Other (limit 150 characters)	
9.		

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

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

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

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

(limit 2,500 characters)

All CoC-funded agencies that service families or youth up to 24 years of age must designate a staff person as their agency's "Youth Advocate" to ensure that:

1. All school-aged youth remain enrolled in school during periods of homelessness and/or during the transition into permanent housing.
2. All Youth Advocates gather the names of homeless school-aged youth and report the names to Regional Educational Services Commission.
3. All Youth Advocates inform homeless families of their children's educational rights under the McKinney-Vento Act and connect children with community services, including early childhood programs such as Head Start.
4. All Youth Advocates connect homeless families to their LEA McKinney-Vento Homeless Liaison or other designated staff people identified by the LEA.

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

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

(limit 2,500 characters)

The New Jersey Division of Children and Families (DCF) has local child welfare offices situated within each county in the state. The local offices are directly connected with the CoCs through a dedicated staff designee, Resource Development Specialist (RDS). The RDS and the assigned child welfare worker will coordinate support to assist in stabilizing households, specifically with youth transitioning out of foster/public welfare placements, with access to permanent housing.

The Foster Youth Initiative program provides youth with long term housing vouchers and DCF has funded youth service providers statewide to provide housing navigation and supportive services to any youth in FYI or FUP vouchers. The NJDCF developed the Keeping Families Together program that provides long term case management and state rental assistance vouchers to families with children who have open child welfare cases and in need of housing support, case management, linkage to substance abuse and recovery services. The FYI initiative is currently in Brick and has been operating over the last year.

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)

Within the Ocean County CoC, Ocean's Harbor House is the RHY funded provider. Ocean's Harbor House receives funding for their SHORE Transitional Living Program, Intensive Street Outreach and Drop-In Center, and Aftercare/Family Services. Ocean's Harbor House is an active participant in the Ocean HPAC collaborative body and works alongside the CoC to make sure all youth experiencing homelessness are connected to all resources available to them within the CoC.

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)

HABcore Ocean RRH17 OC is a current CoC funded Rapid Rehousing project that primarily services families with children.

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

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

(limit 2,500 characters)

In the successful administration of the HABcore Ocean RRH17 OC program, HABcore has a clear understanding for the need of adequate service planning and case management. HABcore also collaborates with a variety of community provider to provide wraparound services for its participants. One of the most instrumental partnerships include the Ocean County Workforce Development Board to connect their participants with job readiness and career readiness programs. Case Management staff assess families and provide on going support to connect them to education and employment training to increase their income. staff meet with families on a monthly basis to provide support in budgeting and financial management.

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)

HABCore assesses all its participants for their eligibility for various resources including mainstream services such as TANF. If the participants are determined to possibly be eligible, HABCore will assist the participant in the application process and assist in any documentation gathering that may be required for approval. HABcore supports families in connecting to the County Social Services office to apply for the benefits for which they are eligible. HABcore is a reputable agency within the Ocean County CoC that is familiar with all mainstream benefits and services to assist their participants in a success transition from Rapid Rehousing programming.

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)

HABcore supports its participants by designing an individualized service plan that is tailored needs of the household. Case managers hold regularly scheduled meetings as a part of their service agreements to maintain accountability that is outlined in their service plans. HABcore has an internal program, The Strengthening Families Initiative, that utilizes licensed clinical social workers and dedicated case managers to provide intensive and individualized parenting training. This initiative primarily highlights behavioral strategies that are geared to improve parent relationships and provide healthy household dynamics.

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)

In 2025, the NJ Dept of Community Affairs & NJ Dept of Veterans Affairs launched its Bringing Veterans Home Initiative with the goal of ending veteran homelessness in NJ. Garden State Home serves as the regional veteran coordinator and provides a full scope of diversion, short term emergency placements, case management & housing coordination. The program works with all SSVF & VA providers in the region & as of 7/1/26, NJ reached "functional zero" for veteran homelessness.

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)

Providence House is Ocean County's primary victim service provider and is currently as subsidiary of Catholic Charities Dioceses of Trenton. Providence House offers a full range of services to victims including a 24-hour hotline, crisis intervention, legal advocacy, safe housing, safety planning, and counseling support. Providence House operates through a trauma-informed model and centers its entire programming prioritizing victim safety and stability.

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)

Ocean County residents are served by the NJ Reentry Corporation Monmouth County to receive a range of services needed to reenter to the community. NJ Reentry specializes in comprehensive wraparound support including addiction and medical support, legal services, employment and education, and eligible benefits supports. The Ocean County Warden also actively participates in the Ocean County Encampment Taskforce collaborative and provides resource updates to his team at the County Correctional Jail

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

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

(limit 500 characters)

The Arc of Ocean County CoC offers specialized services for medically fragile residents including provider-home respite care. The State of New Jersey also operates a statewide respite care program that provide relief services that are in need.

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)

BoldAge PACE, is a Program of All-Inclusive Care for the Elderly. It is a Medicaid/Medicare program designed to help older adults get the care that they need in their homes/community. A PACE care team is made up of an 11-discipline interdisciplinary team that provides primary and specialty care, comprehensive social services, and daily support for the aging population. PACE is both the healthcare provider and the insurance provider.

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)

Bright Harbor Health Care's OMHS Housing Assistance Program is a program that prioritizes the chronically homeless population.

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)

BHH's Supportive Housing model brings behavioral health support directly to participants in their homes and community environments. Services are intentionally delivered in the participant's natural environment whenever appropriate so staff can address behavioral health, functional, independent living, and housing stability needs where they occur.

Supportive Housing is embedded within BHH's comprehensive behavioral health and healthcare system, allowing participants to access a broad continuum of services directly through the same organization. Based on individual need and program eligibility, this includes outpatient individual and group mental health treatment; psychiatric evaluation and medication management; 24/7 crisis response and crisis stabilization; substance use disorder assessment and treatment, co-occurring services, Medication Assisted Treatment (MAT), ambulatory withdrawal management, and peer recovery supports; and integrated primary care for acute, chronic, and preventive healthcare needs.

BHH can also address social and family needs that may directly affect behavioral health and housing stability through services such as The NOOK Community Food Access Program; Intensive Family Support Services (IFSS) for participants and families/caregivers; Recovery Café and peer supports; benefits and community resource linkage; HOPES perinatal services; and other specialized BHH programs based on the participant's individual needs.

Supportive Housing staff continually assess mental status, symptoms, functioning, capabilities, and barriers during face-to-face contacts. Participant needs are reviewed by the team, and interventions are modified when clinically indicated to prevent relapses, hospitalization, and housing destabilization.

BHH supports provided in the home/community may include symptom management, medication education and support, relapse-prevention planning, co-occurring disorder education, substance use/recovery support, crisis intervention, independent and daily living skills, healthcare advocacy, and coordination with treating clinicians.

Supportive Housing participants have access to on-call staff 24 hours per day, seven days per week during periods of stress or crisis. When needs exceed the scope of the Supportive Housing team, staff coordinate with other BHH clinical programs or external providers and maintain service linkage to support continuity of care.

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)

BHH uses a formal, ongoing assessment process to continually evaluate whether PSH remains an appropriate setting to safely and effectively meet each participant's needs.

Each Supportive Housing participant receives a Comprehensive Rehabilitation Needs Assessment (CRNA) with formal reassessment after six months and annually thereafter. Assessment is also ongoing throughout delivery service, including assessment of mental status and current needs during face-to-face contacts.

Assessment is whole-person and includes psychiatric symptoms and diagnosis, physical health and medical needs, medication, substance use, trauma history, crisis risk, activities of daily living and self-care, social and natural supports, finances and benefits, current and desired living arrangements, functional capabilities, and barriers to successful community integration.

Assessment findings are incorporated into an Individualized Rehabilitation Plan (IRP) developed with the participant. The IRP establishes individualized goals, measurable objectives, interventions, and supports and is formally reviewed at least every three months or sooner when the participant's needs or circumstances change.

Staff monitor changes in psychiatric, medical, cognitive, functional, substance use, safety, and daily living needs that may indicate the participant requires a different or more intensive level of care.

When PSH can no longer safely or effectively meet a participant's needs, Supportive Housing staff work collaboratively with the participant, treatment team, family or natural supports when appropriate, BHH clinical programs, and external providers to identify an appropriate higher level of care. Depending on the individual's needs, this may include inpatient or residential behavioral health or substance use treatment, a more intensive or supervised residential setting, assisted living, or another clinically appropriate level of care.

Transition planning addresses the participant's continuing behavioral health, medical, medication, financial, residential, and support needs and includes coordination with the receiving provider to promote continuity of care rather than simply terminating PSH services.

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)

BHH's readiness to transition from PSH is assessed throughout participation rather than only at discharge. Discharge and transition goals are individualized and incorporated into the participant's rehabilitation planning, with progress reviewed regularly with the participant. BHH policy specifically identifies achievement of individualized rehabilitation goals and no longer needing Supportive Housing services as a basis for successful discharge from the program.

Readiness is evaluated holistically and may include sustained housing stability; ability to manage activities of daily living; symptom stability and self-management; ability to manage healthcare and medications as applicable; income, benefits, budgeting, and rent management; employment or vocational progress; tenancy skills; transportation; natural and community supports; connection to ongoing healthcare and behavioral health services; and the participant's own housing preferences and goals.

Staff work with participants to identify remaining barriers to greater independence and use the individualized service plan to strengthen skills and support in those areas rather than moving someone from PSH solely because they have achieved stability.

When a participant is ready to transition, Supportive Housing staff assist with identifying housing consistent with the participant's preferences and long-term goals; housing eligibility and applications; rental assistance or other available housing resources; security deposits, utilities, and move-in needs when applicable; budgeting and tenancy skills; transportation; benefits; healthcare and behavioral health linkages; employment or vocational resources; and community and natural supports.

BHH coordinates with community providers and other systems serving the participant so necessary support can continue after transition. Discharge planning addresses continuing mental health, medication, financial, residential, and treatment needs to reduce the risk of housing loss following transition. Importantly, discharge from BHH Supportive Housing services is distinct from a participant's legal right to remain in an owned or leased residence. BHH policy expressly separates termination of Supportive Housing services from tenancy and applicable landlord/tenant protections.

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.	09/21/2026
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.	09/21/2026
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1D-3.	Reallocation—Reviewing Performance of Existing Projects.	
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	Describe:
1.	your CoC's reallocation process to reallocate from lower performing projects to create new high performing projects, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed,
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year,
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

1. The Ocean County CoC conducts a multi-step process annually to determine the effectiveness and compliance of each project funded through the CoC. This review process includes monitoring, performance outcome evaluation and local application process. The monitoring includes a review of compliance with HUD and CoC regulations/policies, implementation of local CoC best practices, fiscal administration and rate of returned funds. The performance review evaluates program outcomes tied to housing utilization, increasing housing income, ensuring PH stability for both clients remaining in and being discharged from programs. Projects demonstrating consistently poor performance, compliance concerns, or multiple years of underspent funds without clear effort to avoid underspending, are at risk for reallocation during the review and ranking process.

2.No, the CoC did not identify any project that was underspending.

3. The reallocated project AP14OC was a voluntary reallocation to a new project type.

4. N/A

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

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

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

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

	Enter the name of the HMIS Vendor your CoC is currently using.(limit 75 characters)	Foothold
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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)

N/A - there were not major methodology changes between the 2025 and 2026 Point in Time Count for Ocean County CoC.

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)

The Ocean County CoC street outreach providers that work collaboratively with local officials and law enforcement to quickly engage clients residing in encampments. Providers conduct outreach with the Ocean County Sheriff's Department to ensure safety and offer emergency placements through the Board of Social Services and connection to substance and mental health services when needed. The Ocean County Encampment Taskforce collaborated to design the four-step Encampment Strategic Response to disband encampments five to seven days from discovery. Starting in 2026, the Ocean County CoC collaborated with NJ HMFA to design a unique HMIS encampment program that will allow for increased encampment tracking from discovery to placement in 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.	19
2. Enter the reduction in the number of people in encampments during your evaluation period.	8

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)

Ocean County's CoC Encampment Taskforce worked closely with the local municipalities, law enforcement, outreach providers, Coordinated Entry, housing providers and County Staff and State staff to systematically reduce encampments in the community. The Encampment taskforce met on a weekly basis and coordinated the development of by-name lists and assessment of needs for every individual in the encampments. The outreach teams met regularly with individuals in the encampments to secure documents, connect them to benefits and move them into hotels until long term housing was identified. The outreach teams also supported individuals in applying for housing programs and coordinated their move to permanent housing. The taskforce worked closely with local law enforcement to help move all individuals to a safe hotel placement before clearing of the encampment site. The convening of the Ocean County Encampment Taskforce has led to significant improvements in engagement, tracking and service coordination for those residing in encampments.

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

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

(limit 2,500 characters)

The CoC has developed the Coordinated Prevention Strategic Plan that includes various resources including such as prevention assistance, legal assistance and other resources that may support households with housing stabilization. The Ocean County CoC collaborates with legal services, the Department of Human Services, Board of Social Services and other housing programs to ensure households at risk of homelessness are connected to supports. Additionally, the CoC recently secured funding through the NJ Office of Eviction Prevention for a Comprehensive Eviction Defense and Diversion program that provides low-income households facing eviction with free and quality access to both an attorney and resource navigator to connect them with necessary rental assistance and relocation support.

"The CoC is actively working to reduce first-time homelessness by implementing various strategies. The Coordinated Entry(CE) process not only focuses on connecting people to permanent housing but also works with those who would benefit from prevention services. They collaborate with prevention programs and participate in monthly case conferencing meetings. In FY22, the CoC proposed strategies such as strengthening the Ocean ResourceNet, identifying provider agencies offering prevention services, and increasing prevention/diversion resources. Ocean County implemented a Homeless Trust Fund in July 2023 to provide flexible funding for existing programs, rental assistance vouchers, supportive services, and prevention services. This fund aims to fill the gap in serving individuals previously ineligible for other services. In 2023, the CoC, through County funding, provided prevention funding to Family Promise of the Jersey Shore. This money was to be used to reduce the number of persons entering homelessness. FPJS has been using the funds to help people stay in their homes. The CE Agency has expanded its scope to include prevention assistance, and two CoC member agencies, HABcore and Just Believe, have received state funding to provide street outreach, mobile case management, low-barrier prevention services, and diversion assistance to those at risk of 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)

The primary strategy to reduce the length of time homelessness is through prioritization on the Coordinated Entry waitlist, case management and housing navigation services. The CoC's coordinated entry process prioritizes households with the highest vulnerability & longest histories of homelessness ensuring households with the longest histories get into housing as quickly as possible. While waiting for a housing opportunity to come up, all agencies are working cohesively to ensure clients have access to all documents and eligibility forms, so participants are housing. With Statewide Medicaid Housing Supports, Ocean County CoC has an increased number of housing navigators that assist with pre-tenancy support. Medicaid Housing Supports Program allows for medicaid eligible participants to connect with providers to receive assist with identifying housing opportunities and assistance with security deposits.

"1.The CoC is working to reduce the length of time homeless(LOT) through prioritization in the Coordinated Entry(CE) process. The CE agency (AHA), prioritizes households by CH status, vulnerability score and LOT homeless. The County utilized local ARP funds to fund a low barrier RRH program dedicated to serving the CH and unsheltered.

2.Through this prioritization households with the longest histories of homelessness are the first households connected to permanent housing opportunities including the county's RRH program. Additionally AHA has been working diligently to connect PH opportunities to the system working with Low Income Housing Tax Credit Projects, Affordable Housing Developers and Private landlords in addition to CoC funded PSH. The Permanent Housing Committee is also working to expand PH options connected to the system and is developing a comprehensive list of all PH opportunities in the region identifying the target population and the history of working with homeless populations.

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?	24.00%

Describe how you calculated the data for this response.

(limit 2,500 characters)

HMIS data was pulled for all Transitional Housing, PH Rapid Rehousing, PH – Permanent Supportive housing programs for 10/1/24-9/30/25. Because the reports included everyone enrolled during the period, records were filtered by discharge date so that only exits occurring within the reporting period were counted. Exits were then filtered using the HMIS Destination field to identify exits to the following unsubsidized permanent housing destinations: “Staying or living with family, permanent tenure”; “Staying or living with friends, permanent tenure”; “Rental by client, no ongoing housing subsidy”; “Owned by client, no ongoing housing subsidy”. The sum of the four destination totals was used as the numerator. The denominator was the total number of TH, RRH and PSH exits during the period to any destination. The measure was calculated by dividing the numerator by the denominator, producing the percent of program participants exiting TH, RRH and PSH collectively to unsubsidized housing.

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.	01/27/2026
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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	0	3	42	93.33%
2. Safe Haven (SH) beds	0	0	0	0.00%
3. Transitional Housing (TH) beds	12	12	0	100.00%
4. Rapid Re-Housing (RRH) beds	31	36	0	86.11%
5. Permanent Supportive Housing (PSH) beds	103	410	0	25.12%
6. Other Permanent Housing (OPH) beds	0	64	0	0.00%

2A-9a.	Partial Credit for Bed Coverage Rates of 84.99 Percent or Lower for Any Project Type in Question 2A-9.	
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	For each project type with a bed coverage rate that is 84.99 percent or lower in question 2A-9, describe:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type, and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

The Ocean County CoC has two low coverage rates. The ES coverage rate is 0.0%, and the PSH coverage is 25.1%. Because Ocean County does not have an active shelter, Ocean County expands their Code Red and Blue programming to cover the need within the community. The largest number of PSH beds not currently on the HIC are provided through the HUD VASH program, EHV, and a state funded program directed at child welfare involved families where the system involvement is due to lack of housing (Keeping Families Together KFT). These three programs are not currently mandated to enter information into HMIS. The Ocean County CoC has begun working with the KFT program to integrate the coordinated assessment into the program referral process in addition to direct referrals through the child welfare agency. As part of these conversations, the Ocean County CoC is exploring how these units can be integrated into HMIS. The Ocean County CoC's Data subcommittee will work closely with the community's new data analyst to review accurate & timely HMIS data entry. In collaboration with the lead HMIS agency (NJHMFA), the data subcommittee chair will be arranging meetings to address barriers identified by community agencies & coordinate the 1-1 HMIS trainings for staff. The Ocean County CoC Lead (EHG), the data analyst and data subcommittee will connect with state agencies to further discuss strategies to increase bed coverage in HMIS.

3A. Policy Initiatives

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

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

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

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

3A-2	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.
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Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?

No

4A. Attachments Screen For All Application Questions

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

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

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

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

Document Type	Required?	Document Description	Date Attached
01. 1C-1. List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment	Yes	List of TH/RRH/PS...	09/30/2026
02. 1C-1f. List of CoC Program Projects and Number of Units that require Substance Abuse Treatment	Yes	List of CoC Progr...	09/30/2026
03. 1C-3. Language from Project Supportive Service Agreements	Yes	Language from Pro...	09/30/2026
04. 1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety	Yes	Evidence of Coord...	09/30/2026
05. 1D-1. Local Competition Scoring Tool	Yes	Local Competition...	09/30/2026

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

Attachment Details

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

Attachment Details

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

Attachment Details

Document Description: Language from Project Supportive Service Agreements

Attachment Details

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

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description: FY 2026 HDX Competition Report

Attachment Details

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

Attachment Details

Document Description:

Attachment Details

Document Description: Your CoC's Policy or Statement to Advance
Recovery

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/24/2026
1B. Coordination and Engagement–Accountable Structure and Participation	09/29/2026
1C. Coordination and Engagement	09/29/2026
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

1C-1

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

- 1)HABCore: Capstan II FY26 (PSH)
- 2) HABCore: Rapid Rehousing RRH17OC FY26 Renewal (RRH)
- 3)HABCore: Ocean Leasing Transition Grant
- 4)Family Promise of the Jersey Shore: Family Promise Transitional Housing(TH)
- 5)Bright Harbor Healthcare: Renewal Residence (DV)

1C-1f

List of CoC Program Projects and Number of Units that Require Substance Abuse Treatment

Tier	Rank	Score	Organization Name	Project or Award Name	Project Type	Units	Substance Abuse Required
1	2	95	HABCore, Inc.	Capstan II FY26	PH	5	5
1	3	94	HABCore, Inc.	HABcore Rapid Rehousing RRH17OC FY26 Renewal	PH	5	5
1	4	94	Ocean Mental Health Services dba Bright Harbor Healthcare	OMHS Housing Assistance Program	PH	3	3
Tier 1/2	5	98	HABCore, Inc.	HABcore Ocean Leasing Transition Grant	PH	18	18
	7	93	Family Promise of the Jersey Shore	Family Promise Transitional Housing	TH	4	4
2	8	100	Ocean Mental Health Services dba Bright Harbor Healthcare	Renewal Residence-DV	TH	6	6

1C-3

Language from Project Supportive Service Agreements

- 1) HABcore
- 2) Family Promise of the Jersey Shore
- 3) Bright Harbor Healthcare
- 4) AHA (Sub-recipient)



Participant Service Agreement

Housing and Supportive Services

Program Name	
Participant Name	
Participant Address	
BHH Case Manager/Representative	

Program: ☐ PSH ☐ TH ☐ RRH ☐ Joint TH-RRH ☐ SSO ☐ Other: _____

Agreement Date: _____

Review Date (if applicable): _____

1. Purpose of Agreement

Bright Harbor Healthcare (BHH) and the participant agree to work together toward safe, stable housing and the participant's individualized goals. BHH will provide or coordinate the services identified in this Agreement. The participant agrees to remain actively involved in the services selected below and to work with BHH staff on an individualized housing and service plan.

This Service Agreement is separate from the participant's lease or rental agreement unless specifically stated otherwise in writing.

Participant Initials: _____

2. Services

BHH staff and the participant will identify the services that are appropriate based on the participant's needs, goals, and eligibility. Check all services that are part of the participant's current service plan:

- ☐ Case management/service coordination through scheduled meetings with BHH staff
- ☐ Housing search, placement, housing stabilization, and/or landlord communication
- ☐ Development and review of an individualized Housing Stability Plan or service plan
- ☐ Benefits and entitlement assistance
- ☐ Employment assistance, job readiness, education, and/or vocational support
- ☐ Financial literacy, budgeting, and money-management skills
- ☐ Independent living and daily living skills
- ☐ Transportation assistance and/or transportation planning
- ☐ Food and other basic-needs resources
- ☐ Physical healthcare connection and coordination
- ☐ Behavioral healthcare connection, counseling, and/or psychiatric services
- ☐ Substance use disorder treatment and/or recovery supports
- ☐ Recovery housing referral or connection, when appropriate
- ☐ Legal services and/or advocacy
- ☐ Crisis intervention and safety planning
- ☐ Tenant education, tenancy support, and housing advocacy
- ☐ Connection to community activities, natural supports, and other community resources
- ☐ Other: _____

The checked services identify the services in which the participant agrees to actively engage. The service plan may be updated as needs change and/or goals are met. Any changes will be reviewed with the participant.

Participant Initials: _____

3. Participant Agrees To:

As a condition of participation in the supportive services provided through this program, I agree to:

- Participate in initial and ongoing assessments and reviews of my needs, goals, and progress.
- Work with BHH staff to develop, review, and update my Housing Stability Plan, service plan, or other individualized plan.
- Attend scheduled meetings and appointments related to the services checked above, or contact staff when I cannot attend.
- Maintain reasonable contact with program staff and respond to outreach related to my housing and service plan.
- Work toward the goals we identify together and discuss barriers with staff when I am having difficulty participating.
- Provide accurate information and documentation reasonably needed to determine or maintain program eligibility and coordinate services.
- Follow the terms of my lease or occupancy agreement and applicable program requirements.

I understand that active participation means working with BHH on the services and goals that apply to me.

Participant Initials: _____

4. BHH will:

- Treat me with dignity and respect and involve me in decisions about my services and goals.
- Provide or coordinate the services checked in this Agreement, subject to program eligibility and availability.
- Explain program expectations, available services, and any significant changes that affect my participation.
- Work with me to identify barriers if I am having difficulty engaging in services and make reasonable efforts to help me re-engage.
- Protect the confidentiality of my information as required by law and BHH policy.
- Help connect me to appropriate healthcare, behavioral health, substance use disorder treatment, recovery supports, employment, benefits, legal, and community resources when those services are part of my plan.
- Provide information about participant rights and BHH's grievance process.
- Provide services without discrimination in accordance with applicable federal and state law and BHH policy.
- Maintain the privacy and confidentiality of my information in accordance with applicable law and BHH policy.

BHH Staff Initials: _____

5. Treatment, Recovery, and Participant Choice

BHH will encourage and provide participants opportunities to access appropriate behavioral healthcare, substance use disorder treatment, recovery supports, and recovery housing when needed. When these services are identified as part of the participant's service plan, BHH and the participant will work together toward the agreed-upon referral, connection, treatment, or recovery goal.

Participation in a specific clinical treatment or recovery service will only be required when permitted by the applicable program and clearly identified as a program requirement.

Participant Initials: _____

6. Participant Engagement

If I miss appointments, lose contact with the program, or am otherwise having difficulty participating in the services we agreed upon, BHH will make reasonable efforts to contact me, assist with barriers preventing engagement, and help me re-engage. This may include changing meeting arrangements, revising goals, making different referrals, or adjusting the service plan when appropriate.

I understand that continued failure to participate in required supportive services may affect my continued participation in the program. BHH will explain any potential consequence and applicable grievance or appeal rights prior to termination.

Participant Initials: _____

7. Housing Safety and Participant Protections

BHH administers programming consistent with applicable participant protections. Assistance will not be denied on the basis of, or as a direct result of, a participant being or having been a victim of domestic violence, dating violence, sexual assault, or stalking when the participant otherwise qualifies for the program. BHH will follow applicable confidentiality and safety requirements.

Participant Initials: _____

8. Agreement Review

BHH staff and the participant will review this Agreement and the individualized service plan as required by the program and whenever needs or goals change. Reviews will include documentation of progress, barriers, continued service needs, housing stability, and opportunities for greater independence or transition to other permanent housing and community supports when appropriate.

Participant Initials: _____

9. Participant Acknowledgment

By signing below, I acknowledge that BHH staff reviewed this Agreement with me. I had the opportunity to ask questions. I understand which services are currently part of my plan, what is expected of me, and what I can expect from BHH. I understand that my service plan may change as my needs and goals change, and that changes will be reviewed with me.

Participant Name	
Participant Signature	
BHH Representative Name/Title	
BHH Representative Signature	

Participant Date: _____ **BHH Representative Date:** _____



Affordable Housing Alliance - Homeless Services Program
CLIENT SERVICE PARTICIPATION AGREEMENT

_____ has been found eligible, or conditionally eligible, for assistance through the AHA Homeless Services Program based on information provided to the Program.

1. This Client Contract does not guarantee payment to a landlord or vendor. Payment is contingent upon program approval, available funding, completed documentation, unit approval when required, and a written agreement between the Program and the landlord, vendor, or approved provider.
2. The Program provides temporary housing assistance. Rental assistance may be approved for up to six months, with case-by-case extensions not exceeding twelve months total when needed for housing placement, stabilization, and retention.
3. AHA may pay 100% of approved rent for months 1-3. Beginning in month 4, the participant is generally required to contribute 30% of verified household income toward rent, with AHA paying the remaining approved portion during the approved assistance period, unless otherwise approved by the Program or funder.
4. The participant agrees to provide true, complete, and accurate information regarding household composition, income, assets, housing status, expenses, and any other information needed to determine eligibility or continued assistance. The participant must immediately report any changes in income, household members, employment, benefits, address, phone number, email, housing status, or other circumstances affecting eligibility or rent contribution.
5. Only household members approved by the Program and listed on the application, lease, occupancy agreement, or approved housing documentation may reside in the assisted unit.
6. The participant agrees to participate in required case management during the approved assistance period. This may include scheduled check-ins, meetings, phone calls, home visits, reassessments, document reviews, budget reviews, housing stability planning, and other activities required by the Program.
7. The participant agrees to participate in financial counseling and/or financial education when assigned. This may include reviewing income and expenses, developing a realistic budget, understanding rent responsibilities, planning for rent payments after assistance ends, addressing arrears or debt, connecting to benefits or income supports, and identifying steps needed to maintain housing stability.
8. The participant agrees to work with case management to develop and follow a realistic housing stability plan. The participant also agrees to pay any required tenant rent portion on time and comply with the lease, occupancy agreement, shared housing agreement, or other approved housing arrangement.
9. Failure to provide required documentation, attend required check-ins, participate in reassessments, participate in financial counseling or housing stability planning, pay the required tenant portion, or comply with program requirements may result in adverse notice, suspension of assistance, or termination from the Program, subject to notice and appeal rights.
10. False statements, misleading information, failure to report changes, or misuse of assistance may result in denial, termination, repayment requirements, or referral for further action as allowed by program policy and applicable law.
11. By signing below, I certify that I have reviewed this Client Contract with program staff. I understand my responsibilities and agree to comply with program requirements.

Case Manager Signature

Applicant Signature

Date

Date

FAMILY PROMISE OF THE JERSEY SHORE

Transitional Housing Program

SERVICE PARTICIPATION AGREEMENT

Head of Household: _____
Assigned Unit/Room: _____
Case Manager: _____
Effective Date: _____ Anticipated Review Date: _____

1. Purpose and Scope

This Service Participation Agreement ("Agreement") is entered into between Family Promise of the Jersey Shore ("Family Promise") and each adult participant signing individually and, where applicable, on behalf of minor children in the household ("Participant"). Every adult household member age 18 or older must sign this Agreement.

The Transitional Housing Program is designed to provide families experiencing homelessness with a safe, temporary place to stabilize while working toward permanent housing. The program combines transitional housing, intensive case management, housing navigation, income and employment support, financial education, connection to mainstream benefits, and Rapid Re-Housing assistance when eligible and available.

The goal of the Program is permanent housing. Transitional housing is not intended to become a permanent residence. Housing search and permanent housing planning begin at enrollment and continue throughout participation.

This is a service participation and program occupancy agreement. It is not intended to replace any separate lease, occupancy agreement, funding agreement, or other document that may be required. Family Promise will administer the Program in accordance with applicable grant requirements, program policies, and participant rights.

2. Housing and Program Services

Based on household needs, eligibility, funding, and availability, Family Promise may provide or coordinate:

- Temporary transitional housing at the Program housing site.
- An individualized Housing Stability Plan and regular case management.
- Housing search, landlord engagement, application assistance, housing inspections, move-in coordination, and landlord mediation.
- Housing-related financial assistance, security deposit and/or utility deposit assistance when the household is eligible and funding permits.
- Employment and income-development assistance, benefits navigation, budgeting, financial literacy, and credit-building support.
- Transportation assistance and referrals for childcare, school supports, healthcare, behavioral health, substance use treatment, legal services, food resources, and other community services.
- Life-skills support, including tenancy responsibilities, household management, meal preparation, conflict resolution, and preparation for independent housing.
- Housing-retention and stabilization services after permanent housing placement, as permitted by the project and funding source.

Services and financial assistance are subject to eligibility, grant rules, funding availability, and individual household need. Enrollment does not guarantee a specific amount or duration of rental assistance or a particular permanent housing placement.

3. Participant Contribution and Financial Responsibilities

Participant Contribution. The household may be required to contribute approximately 30% of adjusted household income toward program housing costs or other required housing contribution, as determined by Family Promise under the applicable funding rules and written program procedures. The exact amount will be documented separately and reviewed when household income changes.

- Provide complete and truthful documentation of all household income, benefits, employment, and household composition.
- Report changes in income, employment, benefits, or household composition to the Case Manager within 10 business days, or sooner when required by the funding source.

- Pay the required participant contribution by the established due date.
- Participate in budgeting and financial planning designed to prepare the household for permanent housing expenses.
- Work with the Case Manager to develop a realistic plan for future rent, utilities, food, transportation, childcare, debt, and other household expenses.
- Be financially responsible for intentional or negligent damage caused by household members or approved guests, to the extent permitted by law and applicable program requirements.

4. Case Management and Housing Stability Plan

Active engagement with case management is a central component of this housing intervention. Each family will develop an individualized Housing Stability Plan addressing the barriers that contributed to homelessness and the steps necessary to obtain and maintain permanent housing.

Participants agree to:

- Meet with the assigned Case Manager at least weekly during the transitional housing phase unless the Case Manager approves a different schedule based on household circumstances.
- Participate honestly in assessments, goal setting, progress reviews, and housing planning.
- Maintain reasonable communication with Program staff and respond to calls, texts, emails, or written notices concerning the Program.
- Work on agreed-upon goals between meetings and provide requested documentation within the timeframe discussed with the Case Manager.
- Discuss barriers openly so staff can assist with problem-solving, referrals, and warm handoffs to appropriate community providers.
- Participate in permanent housing search activities from the beginning of enrollment rather than waiting until the end of the transitional housing stay.

Family Promise recognizes that plans must be individualized. Case management will be strengths-based, trauma-informed, and focused on reducing barriers to permanent housing.

5. Employment, Income, Benefits, and Self-Sufficiency

The Program is designed to increase household stability and the ability to sustain permanent housing. Work-eligible adults will be expected to actively address employment and income goals identified in their Housing Stability Plan. Participants who are unable to work will be assisted in identifying appropriate benefits, disability income, or other resources.

- Participate in employment assessment, job search, workforce development, education, or training when appropriate.
- Apply for and maintain eligible mainstream benefits such as SNAP, TANF/Work First New Jersey, Medicaid, SSI/SSDI, WIC, childcare assistance, and other available resources.
- Work with staff to identify unnecessary or unsustainable expenses and develop a household budget.
- Address transportation, childcare, credit, debt, legal, health, behavioral health, or other barriers that interfere with housing stability.
- Provide verification of progress when reasonably requested for case management, grant compliance, or eligibility purposes.

6. Permanent Housing and Permanent Housing Responsibilities

Permanent housing planning begins immediately upon enrollment. The Participant understands that the purpose of the transitional housing placement is to provide stability while Family Promise and the household work together toward permanent housing.

- Cooperate with reasonable housing searches, applications, landlord contacts, and unit viewings consistent with the household's Housing Stability Plan.
- Provide documents needed for housing applications, including identification, income documentation, references, and other required records.
- Communicate promptly regarding landlord responses, application approvals or denials, and changes in housing preferences or barriers.
- Work with staff to identify housing that is financially sustainable after assistance ends.
- Once permanently housed, comply with the lease and work with Family Promise on housing-retention and stabilization planning when services are available.

Rental assistance may be adjusted over time based on household need, income, grant requirements, and the written assistance plan. Family Promise will explain any participant contribution and changes to assistance.

7. Program housing site Community and Housing Responsibilities

The Program housing site is a shared, family-centered campus. Participants are expected to help maintain a safe, respectful, sanitary, and peaceful environment for children, families, staff, volunteers, and visitors.

- Treat other participants, staff, volunteers, service providers, and visitors respectfully. Threats, harassment, intimidation, violence, or conduct that creates an immediate safety risk are prohibited.

- Maintain the assigned room, cabin, apartment, bathroom, and any shared spaces used by the household in a clean and sanitary condition.
- Follow posted health, fire, emergency, kitchen, waterfront, recreation, parking, and facility safety requirements.
- Do not tamper with smoke detectors, fire extinguishers, locks, security equipment, or other safety devices.
- Immediately report maintenance concerns, hazards, damage, pests, plumbing problems, or other facility issues to staff.
- Respect quiet hours and the privacy and reasonable enjoyment of other families.
- Use shared kitchens, dining areas, community rooms, recreational spaces, outdoor areas, and other common spaces only in accordance with posted rules and staff direction.
- Do not permit an individual to reside in the unit or stay overnight unless that person is an approved household member or has written authorization from Family Promise.
- Smoking or vaping is permitted only in designated areas, if any, and never inside residential or shared buildings.
- Comply with all applicable Program policies concerning prohibited conduct, illegal activity, weapons, and safety.

8. Children and Parental/Guardian Responsibilities

Parents and legal guardians remain responsible for the care, supervision, safety, conduct, education, and needs of their minor children at all times. Family Promise residential or case management staff do not replace parental supervision.

- Children may not be left unsupervised except where a written Program policy specifically permits age-appropriate independence.
- Parents/guardians must ensure children follow applicable campus and safety rules.
- School-aged children should maintain school enrollment and attendance, with Family Promise assisting with McKinney-Vento coordination and educational stability when appropriate.
- Medications, cleaning supplies, and other potentially dangerous items must be stored safely and out of children's reach.
- Parents/guardians must immediately address medical emergencies by calling 911 or obtaining appropriate medical care and notify Program staff as soon as reasonably possible.
- Any safety concern involving a child must be reported promptly to Program staff.

9. Health, Behavioral Health, Substance Use, and Medication

Family Promise will help participants connect to healthcare, mental health, substance use treatment, and recovery resources when requested or identified as a need. Participants are encouraged to follow treatment plans developed with their licensed providers.

Prescribed medications, including medications used in medication-assisted treatment, will not by themselves disqualify a participant. All medications must be stored safely. Conduct involving illegal activity, possession of illegal substances on Program property, or behavior that creates a direct safety threat will be addressed under applicable Program safety and corrective-action procedures.

10. Inspections, Maintenance, and Access

Family Promise may conduct scheduled inspections of Program housing to address health, safety, sanitation, maintenance, grant compliance, and property protection. Except in emergencies or when otherwise permitted by law or a separate occupancy agreement, reasonable notice will be provided. Participants must cooperate with lawful and reasonable access requirements.

Emergency entry may occur when staff reasonably believe immediate access is necessary to protect life, health, safety, or property, subject to applicable law and Program procedures.

11. Communication and Reporting Changes

Participants must keep Family Promise informed of significant changes affecting eligibility, safety, housing, or the service plan. This includes changes in income, employment, household members, contact information, benefits, permanent housing opportunities, and significant barriers affecting participation.

If a Participant cannot attend an appointment or complete an agreed task by the established deadline, the Participant should contact the Case Manager as soon as possible so the plan can be reviewed and reasonable assistance or accommodation can be considered.

12. Confidentiality, HMIS, and Coordination of Services

Family Promise will maintain participant information in accordance with applicable privacy and confidentiality requirements. Because this project is integrated with the Ocean County Continuum of Care, information required for enrollment, services, outcomes, and reporting may be entered into the Homeless Management Information System (HMIS) in accordance with applicable HUD, CoC, and privacy requirements.

Participants may be asked to sign releases allowing Family Promise to coordinate with landlords, schools, healthcare or behavioral health providers, the Board of Social Services, DCF, legal providers, Coordinated Entry, and other service partners. Except where disclosure is otherwise permitted or required by law, information will be shared according to applicable consent and confidentiality requirements.

13. Nondiscrimination and Reasonable Accommodation

Family Promise provides services in a professional and nondiscriminatory manner and will not discriminate on the basis of any characteristic protected by applicable federal or New Jersey law. Participants may request a reasonable accommodation related to a disability or other protected need. Family Promise will review requests in accordance with applicable law, funding requirements, and Program policy.

14. Corrective Action and Program Concerns

Family Promise's goal is to resolve concerns while preserving housing stability whenever possible. When a Program requirement is not being met, staff may use progressive interventions appropriate to the circumstances, including verbal coaching, written notice, a case conference, an individualized corrective action or safety plan, referrals to additional supports, or other reasonable interventions.

Serious conduct involving an immediate threat to health or safety, violence, significant property destruction, or other circumstances requiring urgent action may result in immediate safety measures and review consistent with applicable law, HUD/CoC requirements, and Program policy.

15. Grievance and Review Process

Participants may raise concerns about services or Program decisions without retaliation. A Participant may submit a verbal or written grievance to the Program Supervisor, request a review meeting, and receive information regarding the outcome and any further review available under Program or funding requirements. Family Promise will provide the current grievance procedure upon request and when required as part of an adverse Program decision.

16. Length of Participation and Exit from Transitional Housing

The anticipated transitional housing stay is individualized and is expected to be approximately three to six months under the current project design, although actual length may vary based on household need, permanent housing availability, eligibility, funding, and applicable program requirements.

Participation may end when the household moves to permanent housing, voluntarily withdraws, no longer meets applicable eligibility requirements, reaches the end of available assistance, or is terminated in accordance with applicable Program procedures. Family Promise will work with the household on an exit and housing-stability plan whenever practicable.

17. Program Responsibilities

Family Promise agrees to:

- Treat the family with dignity and respect and provide services in a professional manner.
- Explain Program expectations, participant contributions, available services, and significant changes affecting participation.
- Provide individualized, housing-focused case management and begin permanent housing planning promptly.
- Assist the household with connections to community resources and mainstream benefits based on identified needs.
- Maintain appropriate confidentiality and data security.
- Provide reasonable opportunities for participants to communicate concerns and request accommodations.
- Monitor progress toward permanent housing and adjust the Housing Stability Plan as family circumstances change.

18. Acknowledgment

By signing below, each adult Participant acknowledges that they have reviewed this Agreement, have had the opportunity to ask questions, understand the expectations of the Transitional Housing Program, and agree to participate in good faith in the housing stabilization and permanent housing process. The Participant also acknowledges that Program assistance is subject to eligibility, funding, grant requirements, and applicable policies.

HOUSEHOLD MEMBERS

Relationship	Name	Signature (age 18+)	Date

PROGRAM REPRESENTATIVE

Staff Name	Staff Signature	Date

EMERGENCY CONTACT

Name	Relationship	Phone



HABcore, Inc. Supportive Services Agreement

I, _____ agree to accept supportive services

from HABcore Supportive Housing Coordinators as a requirement of participating in HABcore's Housing Program.

Services include, but are not limited to the following:

- Individual assessment & development of Individualized Service Plan;
- Assistance with the location and stabilization of housing;
- Tenant/landlord mediation as needed;
- Service referral and coordination;
- Advocacy;
- Linkage with community resources;
- Assistance in obtaining entitlements;
- Supportive counseling;
- Crisis intervention;
- Development of social skills;
- Access to Supportive Housing Coordinator by phone # _____
- Bolstering natural support networks.

Name (Print)

Signature

Date

Supportive Housing Coordinator (Print)

Signature

Date



Your Responsibilities

You must follow all Rules in your Program Handbook, occupancy agreement and any lease associated with the property.

Participation in the transitional housing organization's program

- You must seek employment, education, or training when appropriate.
- You must participate in assessment and case management services.
- You must seek appropriate permanent housing.

HABcore's Right to Transfer or Terminate You from the Program

HABcore Transitional Housing Program can TRANSFER you to another provider/program.

- You must receive at least 15 days' oral and written notice of the transfer date and the reason for the transfer. However, in the case of an emergency transfer, this does not apply.
- You can be transferred through direct arrangements with other shelter or housing organizations or with HABcore.
- You can be transferred when you consent to the transfer.
- You can be transferred without your consent if:

HABcore Transitional Housing Program identifies and secures a placement that more appropriately meets your medical, mental health, behavioral, or rehabilitative service needs; or

You do not comply with the rules and responsibilities of the HABcore program.

HABcore Transitional Housing Program can TERMINATE your services.

- You can be terminated from HABcore Transitional Housing Program if you:

Violate rules in the Program Handbook

Violate terms of any occupancy agreement or lease.

Fail to participate in services as required by HUD.

Case Management Requirements

You are required to meet regularly with your assigned Supportive Housing Coordinator (SHC). Please see your Program Handbook for specific expectations. You will develop a Individualized Service Plan with your Supportive Housing Coordinator, listing short- and long-term service goals. You have the right to and are encouraged to participate and provide input into the creation of these goals.

You must follow the plan and must follow up on all referrals made by your SHC and other team members.

If your service plan requires you to meet with other treatment providers such as substance abuse counselors or mental health counselors, etc. these meetings and participation in treatment will be mandatory.



If your plan includes attendance at weekly substance abuse educational groups, individual substance abuse counseling sessions, and Narcotics Anonymous (NA) or Alcoholics Anonymous (AA) meetings, such attendance is mandatory.

You must be honest and truthful with your SHC and provide truthful and accurate information to the best of your knowledge regarding your progress. Knowingly making any false or misleading statements or misrepresentations or providing forged or counterfeit documents is a violation of these Program Rules.

Financial Planning

You will be asked to submit documentation of all forms of income, if documentation is not already on file. Income is considered to be but is not limited to: employment (full time and part time), Supplemental Security Income (SSI), Social Security Disability Income (SSDI), Temporary Assistance for Needy Families (TANF), child support, unemployment benefits, Supplement Nutrition Assistance Program (SNAP) benefits or food stamps.

Please see Program Handbook for Rent Calculation Worksheet and expectations.

Education, Employment Training, or Employment

If your service plan goals include either education (such as General Education Development (GED) classes, literacy development, or parenting skills classes) or employment training (such as nursing training or daycare aide classes), you will be expected to follow up on any recommendations or referrals to appropriate trainings or programs.

Permanent or Supportive Housing Search

HABcore appreciates your participation in finding housing that suits your needs. Please see the accompanying Notice of Property Denial for expectations.

Signed Acknowledgment

I acknowledge that I have received, understand, and accept the Service Expectations of the program.

Program Participant Signature

Printed Name

Date

Staff Member's Signature and Printed Name

Date

Staff Member's Title

1C-10

Evidence of Coordination and Non-Interference with Local Efforts to Advance Public
Safety
Ocean County Sherriff's Office Letter

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF

THOMAS J. DELLANE
UNDERSHERIFF

JON G. LOMBARDI
UNDERSHERIFF



TELEPHONE
732-929-2044

FAX NUMBER
732-349-1909

WEBSITE
sheriff.co.ocean.nj.us

120 HOOPER AVENUE • P.O. BOX 2191 • TOMS RIVER, N. J. • 08754-2191

September 24, 2026

U.S. Department of Housing and Urban Development
Office of Community Planning and Development

**RE: Evidence of Coordination and Non-Interference with Local Efforts to Advance
Protecting Public Safety, FY 2026 Continuum of Care Program Competition**

To Whom It May Concern:

I am writing on behalf of Ocean County Sheriff's Office in my capacity as County Sheriff to confirm our working relationship with the Ocean County Continuum of Care (CoC), NJ-510, in support of the FY 2026 CoC Program application.

The Ocean County Sheriff's Office is committed to protecting life and property. We are dedicated to affording all citizens with law enforcement excellence and shall perform our duties in a proficient and effective manner. While performing the customary services of the Sheriff, we remain ready to strengthen and enhance all other law enforcement organizations. We acknowledge that the aptitude needed to effectively complete our mission is based on collective joint deference and dependability shared between the Sheriff's Office, federal, state, county and municipal agencies, and the citizens we serve. As professionals, we are obligated to enforce the laws in a just and unbiased approach, while realizing the statutory and judicial limitations of police authority. In accomplishing our goal of excellence law enforcement, we will steadfastly protect the constitutional rights of every person. Our agency has worked with the CoC over the past year; the Ocean County Sheriff's Department has been collaboratively with the CoC to address encampment within Ocean County.

Based on our experience, I can confirm the following:

1. **General cooperation.** The CoC cooperates with Ocean County Sheriff's Office and has not interfered with or impeded our efforts to advance public safety in our community. The CoC also supports first responders in connecting people experiencing homelessness to services.
2. **Encampments.** The CoC has coordinated with our agency on outreach to individuals living in encampments and on connecting them to shelter, housing, and services and the CoC has not obstructed our efforts to address tents and encampments on public property.
3. **Illicit drug use.** The CoC has coordinated with our agency to connect individuals who use illicit drugs to treatment and related services and the CoC has not obstructed our efforts to reduce public drug use.



SPECIAL ASSISTANCE/ACCOMMODATIONS, please call (732) 349-2010 (V/TTD).

4. **Danger to self or others.** The CoC has cooperated with our agency in connecting individuals to evaluation, crisis response, or treatment under applicable state and local standards and the CoC has not obstructed the application of those standards.
- 5 **Information sharing.** The CoC and its projects have cooperated with our agency on information sharing consistent with the Sex Offender Registry and Notification Act (SORNA) and applicable law and to our knowledge, the CoC has not impeded such information sharing.

An example of our continued partnership coordination includes the *Encampment Strategic Response Plan*. The Ocean County Encampment Strategic Response Protocol establishes a coordinated, countywide process for identifying, engaging, and resolving homeless encampments throughout Ocean County. The protocol was developed through collaboration among homeless service providers, county agencies, law enforcement, and community stakeholders to ensure a timely, humane, and housing-focused response to encampments, particularly during periods of increased activity. The protocol is guided by the following principles:

- Timely intervention and service connection
- Public health and public safety considerations
 - Person-centered engagement
- Respect for the dignity and autonomy of all individuals
- Coordination among community stakeholders
- Data-informed decision making

I am available to answer questions about this letter and can be reached at mmastronardy@oceancountynj.gov.

Sincerely,



Michael G. Mastronardy
Ocean County Sheriff

1D-1

Local Competition Scoring Tool

NJ-510 Ocean County Continuum of Care

2026 Local Competition Scoring Tool - RENEWAL projects

Agency Name: _____

Project Name: _____

Project Type: _____

DV Focused Project? _____

OBJECTIVE CRITERIA - System Performance & Project Monitoring	Result	Possible Score	Score
System Performance			
1. Program operates at least 90% capacity		10	
2. 85% of households are receiving some form of income		10	
3a. 20% of project stayers have increased their earned income		10	
3b. 20% of project stayers have increased their non-employment income		5	
4a. 25% of project leavers have increased their earned income		10	
4b. 20% of project leavers have increased their non-employment income		5	
5. 85% of households are connected to mainstream benefits, including healthcare		10	
6a. 85% of households will remain in or will exit to permanent housing		10	
6b. 20% of households will exit to unsubsidized permanent housing		5	
7. 90% of households exiting permanent housing will not return to homelessness		10	
HMIS Data Quality and Compliance			
1. Program data quality is not less than 2% for any universal data element?		10	
2. Project meets all data compliance categories - program application matches bed inventory, data is entered within 48 hours, all annual updates are completed, agency is entering accurate permanent housing move in dates		15	
General Program Implementation			
1. Did the agency attend at least 60% of the 2025 full HPAC meetings?		5	
2. Organization utilizes a consumer feedback survey and/or other means of collecting client feedback?		3	
3. Agency staff attend HMIS training at least annually?		2	
4. Project policies outline a clear appeal's process that includes both admission and termination as well as a way for participants to address concerns/grievances?		1	
Program Prioritization, Referrals and Eligibility			
1. All new clients that entered the program in 2025 came through Coordinated Entry?		5	
2. CE ONLY - Program serves all Counties within CoC region, referrals are received within 5 business days with no eligibility issues.		14	
3. All clients are eligible based on homeless status		5	
4. For PSH, all clients are eligible based on having a disabling condition		5	
5. If project is dedicated to the chronically homeless, all clients are eligible based on documentation?		5	
6. All client files contained are required documentation - HMIS consent, HQS inspection, rent reasonableness, lease, rent calculation?		10	
Supportive Services			
1. Agency creates individualized service plans and showed documentation of supportive services being provided?		3	
Financial Review			
1. Agency policies show adequate internal financial controls?		3	
2. Agency conducts at least quarterly drawdowns		5	
3. Based on the most recent APR, the project utilized at least 85% of HUD funding		5	
4. Agency maintained backup documentation for all funding provided through budget line items in the grant?		4	
5. Based on the most recent APR, adequate match is being provided by the project		5	
6. Agency maintains backup documentation for all match required for the grant		10	
Program and Organization Oversight			
1. The project submitted the most recent APR to HUD within the 90 days window		5	
2. Program has all required program administration documentation including code of ethics on file with HUD, grant agreement and environmental review?		5	

3. Agency/program does not have any outstanding HUD or agency financial audit findings?		5	
LOCAL APPLICATION		Possible Score	Score
Target Population - All Projects			
1. % of clients who belong to one or more vulnerable subpopulation (chronically homeless, substance use, mental health, age 55+, developmentally disabled, physical disability)		5	
Service Provision - All projects			
1. Are supportive services a requirement for program participation?		10	
2. Are there substance abuse treatment services available on-site for this project?		5	
3. Do the supportive services and assistance that will be offered ensure that the participant is able to successfully obtain and retain permanent housing?		5	
Moving On Efforts - PSH RENEWALS ONLY			
1. Applicant tries to move clients on from CoC vouchers. Maximum points if PSH has positive exits to other non-CoC permanent housing.		5	
Domestic Violence Projects ONLY			
1. Applicant clearly demonstrates how the project will improve the safety of victims of domestic violence entering the project.		5	
Project Budget and Application Submission			
1. Budget items correlate with program design, goals and performance		3	
2. Project's cost effectiveness - per household cost is less than average (up to 5 points), per household is comparable to average (up to 3 points), per household cost is more than average (1 point or less)		5	
3. The project has been ranked within Tier 1 for the CoC for the last 3 competitions.		5	
4. Timeliness, organization and detail of application and budget		2	

Renewal Project Scoring	Possible Score	Final Score	Final Percentage
Objective Criteria - System Performance	85	0	0%
Objective Criteria - Project Monitoring	130	0	0%
Local Application	50	0	0%
Total	265	0	0%

NJ-510 Ocean County Continuum of Care

2026 Local Competition Scoring Tool - NEW projects

Agency Name: _____

Project Name: _____

Project Type: _____

DV Focused Project? _____

THRESHOLD REVIEW		Response
1. Is the project an eligible HUD component under the FY2026 CoC Competition?		
2. Does the organization agree to become a member of the HPAC?		
3. Does the program agree to participate in Coordinated Entry?		
4. Does the program agree to participate in HMIS or a comparable database for Domestic Violence programs?		
LOCAL APPLICATION - New Projects		Possible Score
Overall Scope and Service Provision - All new projects projects		
1. Applicant Provides a complete and concise description that addresses the entire scope of the proposed project. In order to receive full points, the narrative must address the entire scope of the project, including a clear picture of the community/target population(s) to be served, the plan for addressing the identified needs/issues of the CoC community/target population(s), and projected outcome(s).	20	
2. Applicant provides A) depth and breadth of experience providing similar housing services to the homeless; and B) Depth and breadth of experience providing similar supportive services to the homeless	10	
3. Applicant demonstrates a plan for rapid implementation of the program; the project narrative must document how the project will be ready to begin housing the first program participant within 6 months of the award.	5	
4. The project is necessary to assist people in exiting homelessness and increasing self-sufficiency.	10	
5. The project demonstrates that supportive services are a requirement of the program.	10	
6. Are there substance abuse treatment services available on-site for this project?	5	
7. Do the supportive services and assistance that will be offered ensure that the participant is able to successfully obtain and retain permanent housing?	10	
New Transitional Housing Projects ONLY		
1. The project will provide and/or partner with other organizations to provide eligible supportive services that are necessary to assist program participants to obtain and maintain housing.	5	
2. The applicant has previously operated or currently operates a transitional housing or another homelessness project, or has a plan in place to ensure that at least 50% of participants exit within 24 months and at least 50% exit with employment income.	5	
3. The project demonstrates that it will provide 20 hours per week of customized services for each participant. The 20 hours a week may be reduced proportionately for participants who are employed and does not apply to participants over age 62 or who have a physical or development disability.	10	
New Supportive Services Only Projects ONLY		
1. The project has a strategy for providing supportive services to eligible program participants including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services.	10	
2. OUTREACH ONLY - The applicant has a history of partnering with first responders and law enforcement to engage people living in places not meant for human habitation to access emergency shelter, treatment programs reunifications with family, transitional housing or independent living. The applicant will cooperate, assist, and not interfere or impede with law enforcement to enforce local laws such as public camping and public drug use laws.	5	
New Permanent Housing Projects (PSH & RRH) ONLY		
1. Project is dedicated to families with children.	5	
2. RRH ONLY - Applicant has previously operated homelessness projects where at least 50% of participants exit within 24 months and at least 50% of participants exit with employment income.	5	
New Domestic Violence Projects Only		
1. Applicant clearly demonstrates how the project will improve the safety of victims of domestic violence entering the project.	5	
Project Budget and Application Submission - All New Projects		
1. Budget items correlate with program design, goals and performance	5	

2. Project's cost effectiveness - per household cost is less than average (up to 5 points), per household is comparable to average (up to 3 points), per household cost is more than average (1 point or less)	5	
3. The project will be supplemented with resources from other public or private sources which may include mainstream health, social and employment programs such as Medicare, Medicaid, SSI, and SNAP.	5	
4. Timeliness, organization and detail of application and budget	5	

New Project Scoring	Possible Score	Final Score	Final Percentage
Overall Scope and Service Provision	70	0	0%
Project Type Specific Points	50	0	0%
Project Budget and Application Submission	20	0	0%
Total	140	0	0%

1D-2c

Local Competition Selection Results

[illegible]

2A-8b

FY 2026 HDX Competition Report

2026 HDX Competition Report

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

To Print this Workbook:

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

To Save This Workbook as a PDF:

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

On Accessibility, Navigability, and Printability:

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

For Questions:

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

2025 HDX Competition Report

2026 Competition Report - Summary

NJ-510 - Lakewood Township/Ocean County CoC

HDX Data Submission Participation Information

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

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

2025 HDX Competition Report

2026 Competition Report - LSA Summary & Usability Status

NJ-510 - Lakewood Township/Ocean County CoC

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

LSA Usability Status 2025

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

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

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, and SH	599	80.9	1.0
1.2 Persons in ES-EE, ES-NbN, SH, and TH	618	84.9	2.0

2025 HDX Competition Report

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

b. This measure is based on data element 3.917

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

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, SH, and PH (prior to “housing move in”)	810	659.2	383.5
1.2 Persons in ES-EE, ES-NbN, SH, TH, and PH (prior to “housing move in”)	829	649.1	371.0

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

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

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

	Total # of Persons Exited to a PH Destination (2 Yrs Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
Metric	Count	Count	% of Returns	Count	% of Returns	Count	% of Returns	Count	% of Returns
Exit was from SO	10	1	10.0%	0	0.0%	0	0.0%	1	10.0%
Exit was from ES	15	0	0.0%	1	6.7%	5	33.3%	6	40.0%
Exit was from TH	2	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from SH	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from PH	45	2	4.4%	0	0.0%	2	4.4%	4	8.9%
TOTAL Returns to Homelessness	72	3	4.2%	1	1.4%	7	9.7%	11	15.3%

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

Please refer to PIT section for relevant data.

Metric 3.2 – Change in Annual Counts

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

Metric	Value
Universe: Unduplicated Total sheltered homeless persons	619
Emergency Shelter Total	600
Safe Haven Total	0
Transitional Housing Total	20

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

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

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

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

Metric	Value
Universe: Number of adults (system stayers)	24
Number of adults with increased earned income	0
Percentage of adults who increased earned income	0.0%

2025 HDX Competition Report

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

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

Metric	Value
Universe: Number of adults (system stayers)	24
Number of adults with increased non-employment cash income	13
Percentage of adults who increased non-employment cash income	54.2%

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

Metric	Value
Universe: Number of adults (system stayers)	24
Number of adults with increased total income	13
Percentage of adults who increased total income	54.2%

Metric 4.4 – Change in earned income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	11
Number of adults who exited with increased earned income	0
Percentage of adults who increased earned income	0.0%

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

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

Metric	Value
Universe: Number of adults who exited (system leavers)	11
Number of adults who exited with increased non-employment cash income	6
Percentage of adults who increased non-employment cash income	54.6%

Metric 4.6 – Change in total income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	11
Number of adults who exited with increased total income	6
Percentage of adults who increased total income	54.6%

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

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

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

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

Metric	Value
Universe: Person with entries into ES-EE, ES-NbN, SH or TH during the reporting period.	636
Of persons above, count those who were in ES-EE, ES-NbN, SH, TH or any PH within 24 months prior to their entry during the reporting year.	81
Of persons above, count those who did not have entries in ES-EE, ES-NbN, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	555

2025 HDX Competition Report

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

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

Metric	Value
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	769
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	99
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	670

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

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

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

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

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

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

Metric	Value
Universe: Persons who exit Street Outreach	344
Of persons above, those who exited to temporary & some institutional destinations	60
Of the persons above, those who exited to permanent housing destinations	68
% Successful exits	37.2%

2025 HDX Competition Report

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

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

Metric	Value
Universe: Persons in ES-EE, ES-NbN, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	564
Of the persons above, those who exited to permanent housing destinations	133
% Successful exits	23.6%

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

Metric	Value
Universe: Persons in all PH projects except PH-RRH who exited after moving into housing, or who moved into housing and remained in the PH project	83
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	82
% Successful exits/retention	98.8%

2025 HDX Competition Report

2026 Competition Report - SPM Data

NJ-510 - Lakewood Township/Ocean County CoC

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

System Performance Measures Data Quality

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

Metric	All ES, SH	All TH	All PSH, OPH	All RRH	All Street Outreach
Unduplicated Persons Served (HMIS)	644	20	102	350	540
Total Leavers (HMIS)	415	8	9	166	330
Destination of Don't Know, Refused, or Missing (HMIS)	354	0	0	3	0
Destination Error Rate (Calculated)	85.3%	0.0%	0.0%	1.8%	0.0%

2025 HDX Competition Report

2026 Competition Report - SPM Notes

NJ-510 - Lakewood Township/Ocean County CoC

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

Notes For Each SPM Measure

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

2025 HDX Competition Report

2026 Competition Report - HIC Summary

NJ-510 - Lakewood Township/Ocean County CoC

For HIC conducted in January/February of 2026

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current Non-VSP Beds in HMIS or Comparable Database	Total Year-Round, Current, Non-VSP Beds	Removed From Denominator: OPH EHV [†] Beds or Beds Affected by Natural Disaster*	Adjusted*** Total Year-Round, Current, Non-VSP Beds	Adjusted*** HMIS Bed Coverage Rate for Year-Round, Current Beds
ES	45	0	3	0	3	0.0%
SH	0	0	0	0	0	NA
TH	12	12	12	0	12	100.0%
RRH	36	31	36	0	36	86.1%
PSH	410	103	410	0	410	25.1%
OPH	64	0	64	64	0	NA
Total	567	146	525	64	461	31.7%

2025 HDX Competition Report

2026 Competition Report

NJ-510 - Lakewood Township/(

For HIC conducted in January/

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current, VSP Beds in an HMIS-Comparable Database	Total Year-Round, Current, VSP Beds	Removed From Denominator: OPH EHV [†] Beds or Beds Affected by Natural Disaster ^{**}	Adjusted ^{***} Total Year-Round Current, VSP Beds	HMIS Comparable Bed Coverage Rate for VSP Beds
ES	45	42	42	0	42	100.00%
SH	0	0	0	0	0	NA
TH	12	0	0	0	0	NA
RRH	36	0	0	0	0	NA
PSH	410	0	0	0	0	NA
OPH	64	0	0	0	0	NA
Total	567	42	42	0	42	100.00%

2025 HDX Competition Report

2026 Competition Report

NJ-510 - Lakewood Township/(

For HIC conducted in January/

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS-Comparable Database	Adjusted*** Total Year-Round, Current, Non-VSP and VSP Beds	HMIS and Comparable Database Coverage Rate
ES	45	42	45	93.33%
SH	0	0	0	NA
TH	12	12	12	100.00%
RRH	36	31	36	86.11%
PSH	410	103	410	25.12%
OPH	64	0	0	NA
Total	567	188	503	37.38%

2025 HDX Competition Report

2026 Competition Report - HIC Summary

NJ-510 - Lakewood Township/Ocean County CoC

For HIC conducted in January/February of 2026

1) † EHV = Emergency Housing Voucher

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

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

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

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

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

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

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

2026 Competition Report - PIT Summary

NJ-510 - Lakewood Township/Ocean County CoC

For PIT conducted in January/February of 2026

Submission Information

Date of PIT Count	Received HUD Waiver
1/27/2026	Not Applicable

Total Population PIT Count Data

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Emergency Shelter Total	508	511	620
Safe Haven Total	0	0	0
Transitional Housing Total	8	7	6
Total Sheltered Count	516	518	626
Total Unsheltered Count	37	59	52
Total Sheltered and Unsheltered Count*	553	577	678

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

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

Total People Experiencing Chronic Homelessness

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Total Sheltered Count	89	135	186
Total Unsheltered Count	20	24	33
Total	109	159	219

3A-1

HUD-2996 Certification for Opportunity Zone Preference Points

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

Type or clearly print the following information.

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

Applicant Organization:

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

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

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

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

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

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

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

Estimated Funding Allocations

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

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

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

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

The projects supported through the CoC Program Budget target persons experiencing homelessness, including unsheltered homelessness in their communities. The projects will provide permanent, affordable housing and services to ensure connection to housing and community resources in the opportunity zones.

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

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

Certification of Authorized Representative for the Applicant:

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

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

Prefix: MS. First Name: Kathryn Middle Initial: Last Name: Colhoun Suffix:

Title: Board Chair Organization: Ending Homelessness Group/ Ocean HPAC Chair

Signature: Kathryn Colhoun Date: 9/30/2026

3A-DP

Your CoC's Policy or Statement to Advance Recovery

- 1) CoC Statement
- 2) CoC Funded Agency Certifications
 - a) HABCore, Inc.
 - b) Family Promise of the Jersey Shore
 - c) Bright Harbor Healthcare

Ocean County Homeless Prevention and Assistance Coalition

Executive
Committee

September 25, 2026

Kathryn Colhoun

Ocean Partnership for
Children

Katie Macchiaverna

OCDHS

Elizabeth Golla

FPOJS

Michelle Griffith

Ocean Advisory
Board

Mark Harding

Soldier On

Kim Santora

Contact

John Brady

OCBSS

Sherri Ruggieri

CHLP

Richelle Corbo

OCC

Lauren Shellock

RWJBH

Statement to Advance Recovery

Purpose:

The Ocean County Homelessness Prevention and Assistance Coalition works to ensure that people who experience homelessness or are at imminent risk of homelessness will have access to community resources to resolve their immediate housing crisis and facilitate transition from homelessness to stability in permanent housing as rapidly as possible.

Our commitment:

1. **Connect people to treatment and recovery services.** The CoC will work with local behavioral health providers, health care systems, and recovery organizations so that people experiencing homelessness can access substance use treatment, mental health care, and recovery supports, including through coordinated entry and street outreach.
2. **Strengthen partnerships.** The CoC will maintain working relationships with behavioral health and treatment providers, hospitals, community recovery organizations, peer support organizations, and others to improve referrals and continuity of care.
3. **Support recovery in CoC-funded projects.** The CoC encourages CoC-funded projects to offer or connect participants to treatment and recovery services, including on-site or linked treatment, peer support, and case management.
4. **Encourage participant engagement.** The CoC encourages projects to engage participants in services that support recovery and self-sufficiency, and to offer them consistently and respectfully.
5. **Support people through setbacks.** The CoC will encourage projects to help participants return to treatment and services after a relapse or a difficult period, and to avoid unnecessary exits into homelessness.
6. **Track and improve.** The CoC will review data on housing stability, returns to homelessness, and access to treatment, and will discuss progress with partners at least annually.

Implementation

The CoC Board will share this statement with all CoC-funded project recipients and partner agencies and will review it annually.

Approved by:


Kathryn Colhoun, Chair

Ocean HPAC

**Ocean County Continuum of Care
Certification to Advance Recovery**

The Ocean County Continuum of Care is committed to helping people experiencing homelessness achieve stability, health and recovery. We recognize that substance use disorders are factors that may contribute to homelessness and so recovery should be encouraged through all CoC funded projects. For this reason, the CoC is asking all CoC funded providers to certify the following:

- CoC-funded housing projects will not operate drug injection sites or “safe consumption sites”, knowingly distribute drug paraphernalia on or off property under its control, knowingly permit the use or distribution of illicit drugs on property under its control, or conduct any of these activities under the pretext of “harm reduction”; and
- All CoC-funded projects should encourage and provide opportunity for households to receive substance use disorder treatment and recovery housing, when needed.

By signing this certification, the agency is acknowledging that:

- The Ocean County Continuum of Care will not restrict or prohibit CoC-funded housing projects that require program participants to be sober or to participate in treatment as a condition of assistance; and
- If an organization has signed this form, but does not adhere to the certifications listed above, it will be evaluated by the CoC Executive Committee for continuation of its Continuum of Care funding.

Agency Certification:

Agency _____ Name: _____
Family promise of the Jersey Shore

Names _____ of _____ CoC _____ Funded _____ Projects: _____
Family Promise Transitional housing project

Elizabeth Golla

Name _____ Signature _____

Executive Director

Title _____ Date 9/24/26

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Agency Certification:

Agency Name: Ocean Mental Health Services dba Bright Harbor Healthcare_____

Names of CoC Funded Projects: OMHS Housing Assistance Program; Bridge to Home Housing Navigation; Renewal Residence-DV_____

Kelli Chiarello, LCSW, LCADC_____
Name

Kelli Chiarello, LCSW, LCADC _
Signature

Chief Development Officer_____
Title

*9/23/2026*_____
Date

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- If an organization has signed this form, but does not adhere to the certifications listed above, it will be evaluated by the CoC Executive Committee for continuation of its Continuum of Care funding.

Agency Certification:

Agency Name: Affordable Housing Alliance

Names of CoC Funded Projects: NJ-510 Ocean County

Randi Moore

Name

Chief Executive Officer

Title



Signature

9/23/2026

Date

**Ocean County Continuum of Care
Certification to Advance Recovery**

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- If an organization has signed this form, but does not adhere to the certifications listed above, it will be evaluated by the CoC Executive Committee for continuation of its Continuum of Care funding.

Agency Certification:

Agency Name: HABcore Inc.

Names of CoC Funded Projects: HABcore Ocean Leasing AP14OC, HABcore Rapid Re-housing RRH17 OC, Capstan II

Steve Heisman



Name

Signature

CEO

9-25-26

Title

Date