

## **Before Starting the CoC Application**

The CoC Consolidated Application consists of three parts, the CoC Application, the CoC Priority Listing, and all the CoC's project applications that were either approved and ranked, or rejected. All three must be submitted for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for reviewing the following:

1. The FY 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2018 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.
6. Questions marked with an asterisk (\*), which are mandatory and require a response.

## **1A. Continuum of Care (CoC) Identification**

### **Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1A-1. CoC Name and Number:** OH-500 - Cincinnati/Hamilton County CoC

**1A-2. Collaborative Applicant Name:** Strategies to End Homelessness, Inc.

**1A-3. CoC Designation:** UFA

**1A-4. HMIS Lead:** Strategies to End Homelessness, Inc.

## 1B. Continuum of Care (CoC) Engagement

**Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1B-1. CoC Meeting Participants. For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.**

Organization/Person Categories	Participates in CoC Meetings	Votes, including selecting CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	No
Local Jail(s)	Yes	No
Hospital(s)	Yes	No
EMS/Crisis Response Team(s)	Yes	No
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	No
Public Housing Authorities	Yes	No
CoC Funded Youth Homeless Organizations	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	No
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	No
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes
LGBT Service Organizations	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Mental Illness Advocates	Yes	Yes
Substance Abuse Advocates	Yes	Yes

<b>Other:(limit 50 characters)</b>		
Healthcare for the Homeless Organization	Yes	Yes
Veteran's Administration	Yes	Yes
Shelter Diversion Provider	Yes	Yes

**1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 2,000 characters)**

- 1) The CoC operates in an open & inclusive manner. Community input is solicited through 8 public workgroups, inclusive community processes & regular meetings. The CoC board includes a wide array of perspectives from organizations who work to end homelessness. Voting members include people with lived experience of homelessness, prevention, shelter/outreach, housing providers (CoC, ESG, HOPWA, RHY, VAWA & non-federally funded), healthcare, advocacy, agency executives, & government leaders. The UFA engages with other systems (child welfare, criminal justice, workforce development, faith-based, etc.), local funders, business people & additional government leaders to bring their perspective into the CoC & extend the reach of local priorities.
- 2) The CoC communicates to the public in a variety of ways with monthly workgroup meetings & email listserve being the most effective. Each year the CoC conducts several surveys to solicit community feedback on specific strategies or processes. STEH also uses its agency website and social media to share information with the full geographic area. All workgroups & community meetings are open to the public & have a chair that can directly report information to the CoC Board & STEH. This has proven to be an effective two-way communication strategy.
- 3) This CoC is built on a frame work of community input & process; soliciting information from the community is always a priority. CoC surveys & information gathered at community meetings inform the work of the UFA as well as the decisions made by the CoC Board. As an example, in 2018, the CoC completely rewrote the scoring criteria for the prioritization of CoC projects, as a result of community feedback that overwhelmingly stated that the historical process was outdated. Additionally, responsiveness to the community at large has resulted in positive relationships with neighborhoods, allowing the CoC to expand several PSH projects and expand efforts to end homelessness.

**1B-2.Open Invitation for New Members. Applicants must describe:**

- (1) the invitation process;**
  - (2) how the CoC communicates the invitation process to solicit new members;**
  - (3) how often the CoC solicits new members; and**
  - (4) any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.**
- (limit 2,000 characters)**

- 1) CoC membership is defined as those assembled & participating in the most recent CoC prioritization event. However, the CoC welcomes new members to join & begin attending monthly workgroups & community meetings at any time during the year. The invitation process happens through official UFA communication (email newsletter, social media) or as the result of a direct meeting/phone call when a new member is identified. The UFA or other members can extend invitations.
- 2) CoC shares info on the UFA’s website, social media pages & via email to the CoC listserve. The UFA regularly presents on CoC resources to City Council & County Commissioners carried on public access TV, & has a presence in local newspaper, TV, & radio stations to ensure that a broad range of people are aware of CoC resources. The CoC consistently explains the community process & how others can get involved.
- 3) As a UFA, STEH is responsible for soliciting new members & CoC applicants during the annual CoC prioritization process. While this only happens once per year, membership to CoC workgroups & other community meetings is always open & those meeting dates are always available to the public on the UFA website. Additionally, STEH offers a CoC General Orientation training 2x per year to educate the community & new organizations about CoC resources, regulations, priorities, processes & strategic planning.
- 4) Including people with lived experience of homelessness in the CoC is very important & an evolving process: The UFA works closely with the youth lead agency to develop CoC expertise in members of the Youth Advisory Board; homeless & formerly homeless youth serve on the Youth Workgroup & the YHDP RFP Selection Committee. Building youth CoC leaders is a priority & this focus has expanded to other homeless populations. People with lived experience serve on the CoC Board; The UFA facilitates focus groups with housing/shelter clients throughout the year & informs them how they can get involved.

**1B-3.Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals. (limit 2,000 characters)**

- 1) The UFA notifies the community that they are accepting project proposals via the CoC email listserve, UFA website, UFA Facebook page & through announcement on a regional e-newsletter. UFA regularly presents on CoC resources to City Council & County Commissioners & has a presence in local newspapers & on TV/Radio stations. These presentations often explain funding availability & accessibility as well as how others can get involved. Applicants are required to submit initial proposals to the UFA via email; new applicants submit an “Intent to Apply” form, which provides the necessary project information to the UFA. This year, 2 applicants submitted forms, but did not move forward because their projects did not align with NOFA priorities for new projects.
- 2) The rank/review process for project inclusion is competitive. All projects that submit the proposal forms & are eligible under the NOFA, are included in the process. The UFA presents a CoC General Orientation to the public on the CoC & the local funding process (4/10/18). The CoC Board finalizes the annual scoring criteria & presents it to the community, including the full CoC (7/27/18).

Results of the scoring process & applicants required to present at the Community Prioritization Event are publically announced via email & posting to UFA website (8/17/18). Results of the Community Prioritization Meeting, as well as the final list of accepted project & prioritization, are announced via email & posting to the UFA website (8/31/18). Applicants are informed of reduction &/or rejection via direct email from the UFA & applicants are informed of acceptance via public email & posting to the UFA website (8/31/18).

3) Once the NOFA is released, an open invitation & timeline is emailed to full CoC including funded & non-funded people/organizations (6/28/18), the funding opportunity is posted to social media (7/12/2018) & shared via the Greater Cincinnati Nonprofit News e-newsletter (7/19/2018).

# 1C. Continuum of Care (CoC) Coordination

**Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.**

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Funding Collaboratives	Yes
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	
Programs funded by faith based entities	Yes

**1C-2. CoC Consultation with ESG Program Recipients. Applicants must describe how the CoC:**  
**(1) consulted with ESG Program recipients in planning and allocating ESG funds; and**  
**(2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients.**  
**(limit 2,000 characters)**

1. OH-500 has 2 Consolidated Plan jurisdictions & ESG recipients – the City of Cincinnati & Hamilton County. Strategies to End Homelessness (STEH), the CoC UFA, administers ESG funds on behalf of both jurisdictions & interacts with them on a regular basis. Both jurisdictions have voting seats on the CoC board

& participate in strategic planning, setting goals/objectives, reviewing gaps analysis & overseeing the local allocation of both ESG & CoC funds. Annually STEH consults with the City & County to make recommendation on how to strategically allocate ESG funds & upon acceptance of both jurisdictions, the recommendation is brought to the CoC Board for final approval. ESG funds are typically targeted where local funding is the scarcest – emergency shelter operations/services, homelessness prevention & RRH.

2. Both the Cincinnati & Hamilton County jurisdictions are included in the evaluation strategies of ESG projects. STEH reports performance through annual CAPERs, and the ESG shelter funding allocation is a competitive community meeting, where better outcomes equal more funding. STEH shares system performance data & HIC/PIT data with both jurisdictions in the context of full CoC board communication. Both jurisdictions have funded STEH to lead the effort to end homelessness & look to the CoC as the expert in preventing & ending homelessness. STEH coordinates with the City of Cincinnati, Hamilton County, & CoC board to complete the homeless sections of the Consolidated Plan & both jurisdictions submit exactly the same content to HUD. Both jurisdictions coordinate annual updates with STEH. Additionally, STEH has a seat on the City’s Community Development Advisory Committee, ensuring that CDBG & HOME are coordinated with CoC & ESG, & that the interests of the homeless population are represented. In addition, CoC Board membership includes seats for each of the activities funded with ESG locally- Shelter, Shelter Diversion & RRH.

**1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Did the CoC provide Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?** Yes to both

**1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)?** Yes

**1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. Applicants must describe:**

- (1) the CoC’s protocols, including the existence of the CoC’s emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and**
  - (2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.**
- (limit 2,000 characters)**

1) The Coordinated Entry System (CES) completes initial screening & connects clients to safety planning & protective shelter when needed. YWCA, the primary victim service provider also assists with safety planning & services when clients in other projects experience domestic violence, dating violence, sexual assault



or stalking (henceforth, DV/DV/SA/ST). The CES ensures clients in victim service projects are not excluded from resources. In alignment with best practices of victim-centered voluntary service models, clients can opt in or out of services. In 2018, YWCA & family shelter providers implemented Risking Connection, a trauma-informed (TIC) care module that emphasizes supportive, non-judgmental relationships to empower clients to make the best decisions for themselves & their families. Adopting a complete TIC approach changed the culture of the agencies, resulting in improved services to clients. CoC Emergency Transfer Plan allows for victims of DV/DV/SA/ST to request an emergency transfer; all providers have been trained on the plan.

2) The CoC maximizes client choice by having diverse supportive housing projects including victim-service options. CES matches clients with project types based on an initial assessment + other supporting documentation. CES policy ensures that clients decide how much information they share & a refusal of services is not met with retribution. Survivors are prioritized for all CoC housing which are required to protect PII & YWCA protects confidentiality with a comparable HMIS database hosted securely on their own network, sharing only aggregate data with the CoC.

YWCA's scope of work leverages multiple funding sources for benefit to the CoC- emergency shelter, housing options, legal services, DV prevention resources, & TIC services for all survivors in the CoC's geographic region. They manage: \$411,257- CoC/ESG; \$322,095- DOJ JAG & VAWA; \$160,000- HHS; \$1.1 million- DOJ OVW (multi-yr.).

**1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)**

1&2) The CoC hosts a training series for CE partners & homeless service providers that includes topics such as DV, Trauma Informed Care (TIC) & Motivational Interviewing, choosing topics that enable direct service providers to better understand/serve clients. In the last year, the family providers, CoC staff, & Coordinated Entry staff participated in an intense, 3-day TIC training to ensure best practice in programming; the CoC coordinated a community training on the CoC Emergency Transfer Plan; YWCA provided a 2-hour training on domestic violence screening & safety planning for CoC & ESG funded agencies; YWCA provided specific training on intimate partner violence & serving survivors of domestic violence, dating violence, sexual assault, & stalking to CoC agencies that identified the need; CoC Workgroups discusses best practices in serving DV survivors & community resources available to assist.

Each year, YWCA trains thousands of service providers on issues related to best practices for DV survivors, including DV dynamics, trauma-informed care, legal needs of survivors, & best practices in working with underserved survivors (i.e., LGBTQ, immigrant & disability populations). When it is more appropriate for a non-victim service provider to house a DV survivor, YWCA assists with safety planning activities as needed. Additionally, YWCA staff participate in 5 different CoC workgroups, allowing for greater sharing of best practices for DV survivors among all CoC providers.

**1C-3b. Applicants must describe the data the CoC uses to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking, including data from a comparable database. (limit 2,000 characters)**

The CoC, in partnership w/ YWCA, examines data from multiple sources to assess the scope of community need related to DV/DV/SA/ST. The following data sources are used regularly: homeless data from HMIS & victim service comparable data base, Ohio data from the Ohio Attorney General, & national statistics from the National Alliance for Safe Housing & the National Network to End DV. The full coverage HMIS & a strong comparable database allows for a real-time view of homeless clients who may benefit from housing/services provided by a designated victim service provider. Local data from the Ohio Attorney General provides detail on rates of DV within the CoC’s geographic region which is broader than what is available in the HMIS. National statistics inform local policies & practices as well as best practices in CES for survivors.

YWCA regularly reports aggregate data to the CoC for performance reviews & they submit de-identified data from the comparable database part of the CE process, which has been tailored to maintain the confidentiality of clients. Analyzing this data helps to identify gaps in supportive housing available to singles, families & youth who could benefit from specific victim service resources. Per CoC data collected from July 2016-June 2018, 10% of the homeless population reported a history of DV with 26% of that group reporting victimization in the last 3 months. 70% of those reporting DV were women. At YWCA, the CES scored 81 households into TH or RRH project types that were unable to be matched due to a lack of availability. This need was corroborated with data collected through the DV Crisis Hotline in 2017, which revealed that 233 callers were referred to other shelters because the DV shelter was full, largely due to a lack of housing options that meet the safety needs of survivors. Collectively, this data was used to strategically plan for the needs of DV survivors in the DV Bonus applications.

**1C-4. DV Bonus Projects. Is your CoC Yes applying for DV Bonus Projects?**

**1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.**

SSO Coordinated Entry	<input type="checkbox"/>
RRH	<input checked="" type="checkbox"/>
Joint TH/RRH	<input checked="" type="checkbox"/>

**1C-4b. Applicants must describe:  
 (1) how many domestic violence survivors the CoC is currently serving**

**in the CoC’s geographic area;  
(2) the data source the CoC used for the calculations; and  
(3) how the CoC collected the data.  
(limit 2,000 characters)**

1) From January to August 2018, YWCA used CoC/ESG funds to serve 503 survivors (adults & children) who were currently fleeing domestic violence, dating violence, sexual assault, or stalking. For the same period and across the full CoC, 787 additional participants (adults & children) reported DV with 19% (151) reporting that they were currently homeless because they were fleeing a domestic violence situation. DV is linked to child abuse/neglect fatalities, as 50-70% of abusers also abuse children, making DV-specific interventions imperative for reducing fatalities for both adults & children. YWCA provides targeted services for both adults and children recovering from the trauma of abuse. In total this calendar year, 1290 people served in the CoC reported DV in their history.

2) Data sources for calculations above include: a) the HMIS comparable database using a report on active clients between January & August 2018, provided by YWCA; b) HMIS data from all non-victim service providers within the CoC using a report on active clients between January & August 2018, pulled by Strategies to End Homelessness (UFA).

3) With 100% HMIS participation, all homeless projects track their data in the HMIS & YWCA collects data on a comparable database in the same manner, allowing for ease in combining aggregate numbers from each system. All projects collect data on DV history & if the current episode of homelessness is a result of fleeing a DV situation. Strategies to End Homelessness has access to this data for all non-victim service projects & used that access to collect data for this application. YWCA provided aggregate data on victim service projects to Strategies to End Homelessness for use in this application.

**1C-4c. Applicants must describe:**

**(1) how many domestic violence survivors need housing or services in the CoC’s geographic area;  
(2) data source the CoC used for the calculations; and  
(3) how the CoC collected the data.  
(limit 2,000 characters)**

1) According to the CES Prioritization List in early Sept. 2018, 68 DV survivors are active on the list without a housing offer & are in need of housing with services specific to remaining safe. Of these, 48 are singles & 20 are households with minor children. Following CoC policies that outline the range of VI-SPDAT scores most appropriate for housing interventions, 41 scored into TH, 46 scored into RRH & 21 scored into PSH (break down doesn’t equal 68 because score ranges overlap between housing interventions). Self-resolution of homelessness for survivors is not always possible because their support networks have been broken as a result of the power & control exerted from the abuser. Supportive housing is a necessary next step after homelessness for this population.

2) The data for these calculations is from the CES & specifically from the VI-SPDAT assessments administered to all individuals in shelter & those sleeping unsheltered. The VI-SPDAT is the assessment tool adopted by the CoC which is used to provide an initial quantification of vulnerabilities, including domestic violence.

3) All data was collected in HMIS or the victim services comparable data

system. CoC & ESG funded agencies are required to participate in CES. Shelter & outreach providers are trained in how to administer the VI-SPDAT & enter the data into HMIS. Strategies to End Homelessness has access to this data for all non-victim service projects & used that access to collect data for this application. YWCA provided aggregate data on victim service projects to Strategies to End Homelessness for use in this application.

**1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:**

- (1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;**
  - (2) quantify the unmet need for housing and services for DV survivors;**
  - (3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and**
  - (4) describe how the CoC determined the unmet need for housing and services for DV survivors.**
- (limit 3,000 characters)**

1) In 2017, YWCA referred 233 DV Crisis Hotline callers to other non-DV shelters because the DV shelter was full. Adequate housing options for survivors allow providers to quickly move survivors out of shelter, decreasing shelter stay & increasing the availability of DV shelter to survivors. So far in 2018, 55% of callers to the DV hotline had high lethality indicators, suggesting that they could not be safely housed in the community without DV-specific interventions for safety. Additionally, in the OH500 FY16 operating year (7/1/17-6/30/18) 81 households scored into TH or RRH project types, but were unable to be matched due to a lack of options that met their unique safety needs. Overall, DV households had long stays in shelter w/ limited options for safe housing exits, which increased the rate of exit to either friends/family or back to an abusive situation.

2) Unmet need is quantified at a minimum of 81 households & 194 beds with an average household size of 2.4, per data presented above from the FY16 CoC operating year. The data reported in 1C-4b outlines the scope of need from the full CoC so far in 2018 & data reported in 1C-4c reports numbers only in early September of 2018. Those data sets present 2 different views of the system both showing significant need for more resources for DV survivors. YWCA currently operates the following housing for homeless DV survivors: RRH- 9 units, TH- 50 units, TH/RRH- 13 units. The minimum 81 units of housing identified only accounts for clients who entered DV shelter & therefore completed a VI-SPDAT. YWCA began assessing all DV hotline callers on their housing needs in June 2018 improve data collection that will be used to continuously asses this gap.

3) Data sources include: a) VI-SPDAT data collected through the CES was used to quantify unmet need; b) YWCA analysis of the records of shelter participants who were not matched to CoC housing – looking at their rates of exit to PH & recidivism with a detailed review of exits to friends and family who returned back to the DV shelter with addition episodes of abuse.

4) To determine unmet need, the CoC used CES data from the FY16 operating year as well as participant record analysis provided by YWCA. 81 households scored into TH or RRH but were not matched to housing because of the lack of resources. This is described as a minimum for more than one reason: a) the CoC data is showing an increase in DV occurrences over the last year. Review is currently under way to see if this an accurate portrayal of need or the

outcome of better data collection; b) 233 crisis hotline callers had to go to general shelter & it is unclear how many of those participants were truly in need of DV specific housing interventions; c) Data collection regarding survivors who are actively fleeing but have not yet completed a VI-SPDAT is on-going, but does show a need for more supportive housing opportunities.

**1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors. (limit 2,000 characters)**

The CoC is applying for 60 units of housing under the DV Bonus to increase targeted capacity & rapidly rehouse survivors of DV/DV/SA/ST. CES funds are not needed as implementation is in alignment with DV standards & processes have been tailored to maintain confidentiality & meet the unique needs of the project types & each client.

1) TH-RRH: 50 units (38 RRH; 12 TH) & 120 beds. Survivors who may not be able to enter shelter due to safety concerns can access TH immediately. TH, a best practice, effectively meets safety needs of survivors with high lethality indicators & site based TH allows added safety of security cameras & on site staff. 55% of DV hotline callers were screened positive for high lethality. After TH, clients access RRH as a means of reestablishing PH in the community. YWCA will operate this project with extensive experience, adequate capacity & is a leader in the CoC.

2) RRH: 15 units & 22 beds of scattered site RRH. This project aims to integrate DV best practices into the full CoC. YWCA will provide support to the agency selected to administer this project thus increasing their reach in meeting the needs of DV survivors across the entire CoC.

Paying less than FMR for rent & participant turnover will expand the request of 60 units to meet the presumed need of 81 households. Without safe & affordable housing options for survivors, shelter stays become longer, reducing the system's ability to respond to the immediate needs of people in crisis. Survivors are at the greatest risk of severe abuse & death when attempting to leave their abuser, so adequate inventory of DV beds is critical to keeping survivors safe. 70-80% of female homicides are preceded by DV & most occur within 2 months of attempted separation. Survivors who are being stalked by their abusers may not be able to be safely housed in the community without extensive, DV-specific supports. 76% of women murdered by an intimate partner were stalked first.

**1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:**

- (1) rate of housing placement of DV survivors;**
- (2) rate of housing retention of DV survivors;**
- (3) improvements in safety of DV survivors; and**
- (4) how the project applicant addresses multiple barriers faced by DV survivors.**

**(limit 4,000 characters)**

TH-RRH: YWCA is the largest provider of services for survivors of DV in Greater Cincinnati, is the sole provider of specialized DV shelter/housing & holds the Victim Service seat on the CoC Board. Their Executive VP has also

been a co-chair since January 2016, showing extensive leadership in strategic planning & improving the CoC's HMIS. Programmatically, they have operated residential DV programs for 40+ years, complying with VAWA regulations related to confidentiality & adhering to best practices designed to prioritize safety & confidentiality. Their service model centers around victim empowerment, voluntary engagement & trauma informed care practices. YWCA administers more than \$2 million in funds dedicated to providing shelter, services & housing to survivors & undergoes regular fiscal & programmatic monitoring for CoC, VAWA, FVPSA, HHS, and the Office on Violence Against Women funded projects. 1) July 2016-June 2018: YWCA had a 69% housing placement rate for DV survivors, low outcomes largely due to the lack of housing options that meet the safety needs for the population. 2) July 2016-June 2018 across YWCA projects, 82% of survivors housed in PH projects & 92% of those in TH projects retained housing. 3) In addition to enhanced security systems in place at site based TH facilities, safety improvements for all DV survivors available through this project will include: a) Safety Planning & Lethality Screening- this is an ongoing, collaborative activity designed to keep all household members safe at school, home, & work. Plans are updated regularly as safety needs/risks change over time. Victims are screened for lethality risk using the Maryland Lethality Assessment, identified by DOJ as a promising practice to reduce DV homicide, Court Advocacy/Accompaniment to prepare survivors for civil/criminal court, explain legal process, provide information about crime victim rights, & accompany survivors to court as needed; b) Assistance with registering survivors to receive updates on abusers who have been incarcerated; c) Staff trained in protecting the confidentiality of survivors when using technology or in data collection. 4) The TH-RRH project will address multiple barriers for DV survivors through voluntary, evidence-based, trauma-informed services, including: Case management & Advocacy for education, financial, housing, medical, mental health & legal needs; Hospital Accompaniment/medical advocacy for survivors of sexual assault & abuse; Therapeutic & supportive services for children who have been traumatized by their exposure to DV.

RRH: Strategies to End Homelessness (STEH), UFA is the recipient of more than 50 CoC grants, the HMIS lead & develops & manages the regional CES. They are contracted by both consolidated plan jurisdictions to allocate & administer CoC, HOPWA, ESG & local funds. STEH has extensive experience in developing transparent, community-centered allocation processes to identify high performing providers. They manage contractual relationships with more than 20 organizations with a focus on programmatic best practice & financial compliance. 1) July 2016-June 2018: CoC data from literally homeless projects (excluding victim service data provided above) shows that the majority of people who reported DV are women & women who experienced DV exited to PH at a rate of 32% while 47% of women with no history of DV exited to PH. Lower rates of placement into PH for DV survivors can be attributed to a lack of DV-specific resources, as described throughout the application. 2) Housing retention for DV survivors is 84%, compared to 87% for the general population. 3&4) Improvements in safety of survivors & strategies to address the multiple barriers faced by DV survivors will align with the best practice outlined above for YWCA. YWCA will partner with the agency identified to administer the RRH as an innovative approach to integrate expertise into the general CoC, expanding the reach of best practice.

**1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC’s geographic areas:**

- (1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;**
- (2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and**
- (3) Indicate whether the CoC has a move on strategy. The information should be for Federal Fiscal Year 2017.**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?
Cincinnati Metropolitan Housing Authority	32.00%	Yes-Both	Yes

**If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.**

**1C-5a. For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 2,000 characters)**

Not applicable. OH-500 has an established relationship with the local Public Housing Administration, the Cincinnati Metropolitan Housing Authority. Strategies to End Homelessness, the UFA, currently administers 500 homeless preference Housing Choice Voucher (HCV) referrals each year on behalf of the full CoC.

**1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)?** Yes

**Move On strategy description. (limit 2,000 characters)**

The CoC has an established Move-On strategy centering around a strong partnership w/ the local PHA, Cincinnati Metropolitan Housing Authority (CMHA). It began in 2014 w/ homeless preference being applied to 25 housing choice vouchers (HCV); currently STEH, on behalf of the CoC, administers the

homeless referral process for 500 HCVs per year. This “Coordinated Exit” strategy enables participants to move-on from a CoC supportive housing subsidy when services are stable but a rental subsidy is still needed. This strategy has increased turnover in PSH, allowing for more people to be housed, with no negative impact on recidivism. Local preference is given to PSH exits but referrals from RRH, TH, Shelter Diversion & homeless Veteran programs are also eligible. This partnership is a national best practice showing true commitment between systems that are working to end homelessness. In the last fiscal year, 1,265 households moved into HCV subsidized housing, 32% were CoC referrals.

STEH also verifies homelessness for households moving into CMHA owned buildings through the Asset Management program. HMIS data is used to verify homeless status & eligibility extends to people in shelter or sleeping in a place not meant for human habitation. 8% of new intakes in the asset management program were homeless prior to entry.

Several CoC-funded partners develop affordable housing alongside their CoC projects. These agencies are able to transfer CoC participants into their non-CoC funded housing & ensure ongoing stability at no cost to the CoC. Over the Rhine Community Housing, Tender Mercies & Excel Development have helped grow this move-on strategy for PSH participants & Lighthouse Youth & Family Services has done the same for youth.

**1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT). Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals and their families experiencing homelessness. (limit 2,000 characters)**

The CoC has made intentional efforts to ensure compliance with HUDs final rule on Equal Access in funded projects. In 2009, the CoC began requiring emergency shelters to adopt policies ensuring equal access to all, regardless of self-identified gender identity. However, 4 years ago, it was reported to STEH that a transgender woman was denied access to shelter specifically because she was trans. This was immediately identified as a symptom of agency policy & values not being communicated or implemented by direct service staff. As a result of this unacceptable situation, the CoC increased local requirements to include all agency staff receive LGBTQ cultural competency training by an approved entity or through the local expert, Lighthouse Youth & Family Services (LYFS). LYFS began their Safe & Supported program in 2014 as a HUD pilot in ending LGBTQ youth homelessness & they continue to lead this movement & expand their reach to agencies serving adults over age 24. The training is offered directly to agencies for full staff, small groups, or as a free CoC training for the community.

LGBTQ youth with lived experience of homelessness were critical in the development of strategies to end youth homelessness as outlined in the YHDP funded comprehensive community plan. The CoC has seen the positive impact of creating space for people with lived experience at decision making tables & continues to prioritize this voice which we know will change the landscape & help ensure all CoC partners can appropriately address the needs of the LGBTQ community & their families.



All CoC partners are required to comply with the approved anti-discrimination policy. It is publically posted on the STEH website & is accessible to all. Additionally, the CoC facilitates Equal Access trainings on the final rule, discusses requirements & implementation at CoC Workgroup meetings, & provides 1-on-1 technical assistance from the STEH compliance experts during each annual monitoring visit.

**1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.**

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	Yes

**1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.**

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Engaged/educated local business leaders:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input checked="" type="checkbox"/>
No strategies have been implemented:	<input type="checkbox"/>
Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

**1C-8. Centralized or Coordinated Assessment System. Applicants must:**  
**(1) demonstrate the coordinated entry system covers the entire CoC geographic area;**  
**(2) demonstrate the coordinated entry system reaches people who are least likely to apply homelessness assistance in the absence of special outreach;**

**(3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and (4) attach CoC’s standard assessment tool. (limit 2,000 characters)**

CES operates in compliance with CPD-17-01

1) OH500 operates a full coverage CES, spanning the geographic area & coordinating access to prevention/diversion, shelter, housing & exits to PHA subsidies. Central Access Point (CAP), a phone hotline serving as the virtual front door to prevention assistance & shelter, advertises in all public/charter schools, libraries, hospitals & large social service agencies across the County. Outreach teams cover the geographic area w/ specialized services for veterans, youth, mental health & those residing in the downtown area. Outreach is conducted 7 days a week. Shelter & Outreach projects have designated staff trained to administer the VI-SPDAT to all sheltered & unsheltered participants. VI-SPDAT data is entered in HMIS for inclusion on the Community Prioritization List.

2) CES screens in, not out. Strategies include: CAP works with case managers & other supports advocating for participants who aren’t able to apply for assistance on their own; a mobile app (Street Reach Cincy) enables the public to inform the CoC of homeless camps or people sleeping unsheltered, making immediate service connections via CAP; CES review panel examines VI-SPDAT outcomes that don’t represent the reality of participants’ barriers or when a participant is not able to complete the survey.

3) Housing Priorities: TH-1) Household (HH) w/ longest history of homelessness; 2) HH w/ no/low income. RRH-1) HH with highest VI-SPDAT score & length of time homeless; 2) HH with no/low income; 3) HH w/ no history of RRH utilization. PSH- All beds categorized as Dedicated PLUS (DP) & CoC policy reflects a combination of DP order & HUD Notice CPD 16-11. Chronic is highest priority. CoC expectation is for all shelters to focus on identifying PH options on day 1 & CoC resources are reserved for those who cannot self-resolve. PSH is immediately available to the chronically homeless who are willing to accept housing.

4) Attached- Diversion tools & VI-SPDATs

## 1D. Continuum of Care (CoC) Discharge Planning

**Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1D-1. Discharge Planning–State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).**

Foster Care:	<input type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

**1D-2. Discharge Planning Coordination. Applicants must indicate whether the CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).**

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

# 1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

## Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:**

- (1) objective criteria;**
- (2) at least one factor related to achieving positive housing outcomes;**
- (3) a specific method for evaluating projects submitted by victim services providers; and**
- (4) attach evidence that supports the process selected.**

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	Yes

**1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:**

- (1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and**
- (2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.**

**(limit 2,000 characters)**

1) In the FY18 process, the CoC instituted a new CoC Competition Scorecard increasing scored metrics from 5 to 29. Severity of needs & vulnerabilities were a critical component of the local CoC competitive rank & review process this year. Specifically, the provision of housing/services to the following populations were considered in reviewing & ranking projects: % of chronically homeless; % of veterans; % of youth age 18-24; % families with minor children; % of parenting youth age 18-24 with minor children; % persons fleeing/attempting to flee DV; participants w/no income at entry; participants w/ 2 or more physical/mental health conditions at entry; % entered from street or other locations not meant for human habitation.

2) CoC's competitive rank & review process does emphasize project performance & outcomes, more than a participant's severity of need as listed above. However, the CoC operates a full-coverage Coordinated Entry System (CES) which systematically prioritizes those with severe needs & vulnerabilities. CoC projects are not individually responsible for identifying eligible participants beyond target subpopulations. The systematic prioritization of referrals is consistent with community approved CoC policies & projects are expected to

house all matches from the CES. The CoC Competition Scorecard awarded points to projects that were most successful in moving CES matches into their housing project, thus incentivizing housing projects to provide truly low barrier services & to continue working with households with high vulnerabilities.

**1E-3. Public Postings. Applicants must indicate how the CoC made public:**

- (1) objective ranking and selection process the CoC used for all projects (new and renewal);**
- (2) CoC Consolidated Application—including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and**
- (3) attach documentation demonstrating the objective ranking, rating, and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available, that legibly displays the date the CoC publicly posted the documents.**

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	<input checked="" type="checkbox"/>	CoC or other Website	<input checked="" type="checkbox"/>
Email	<input checked="" type="checkbox"/>	Email	<input checked="" type="checkbox"/>
Mail	<input type="checkbox"/>	Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>	Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input checked="" type="checkbox"/>	Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>	Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>

**1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC’s ARD between the FY 2014 and FY 2018 CoC Program Competitions.**

**Reallocation: No**

**1E-4a. If the answer is “No” to question 1E-4, applicants must describe how the CoC actively reviews performance of existing CoC Program-funded projects to determine the viability of reallocating to create new high performing projects. (limit 2,000 characters)**

In the FY18 process, the CoC instituted a new Competition Scorecard increasing scored metrics from 5 to 29. Severity of needs & vulnerabilities, project performance & outcomes, & financial/monitoring data was all included in the rank & review process. The scoring process shows a significant improvement in reviewing project performance & commitment from the CoC to

improve system performance.

Additionally, the CoC transitioned most of its non-permanent housing capacity in previous competitions where HUD allowed TH projects to renew as PSH or RRH without penalty. Because of this, we do not meet the 20% reallocation threshold. The majority of CoC funds awarded between FY14 & FY18 directly fund Permanent Housing. The CoC reallocates funding in every CoC competition totaling more than \$6.9 million since FY14 but these reallocations primarily represent a transfer of bed capacity & funding from low performing PH projects to new or higher performing PH projects.

What is unseen in this competition is the reallocation work happening at the local level in communities where the lead agency is a Unified Funding Agency. FY15 was the first operating year that OH-500 operated as a UFA & due to it being a transition year, we were unsuccessful in implementing a reallocation process & returned a significant amount of CoC funding back to HUD. However, because CoC resources are desperately needed, the CoC was committed to improving efficiency & effectiveness in program implementation & spending. The CoC Board developed & adopted recapture & reallocation policies that resulted in more the \$1.3 million being reallocated in the FY16 operating year. OH-500 successfully expending more than 99% of its renewal grant in FY16. Totaling the amount of reallocation identified in this competition (\$1,533,694) and the amount reallocated by the UFA in FY16 year (\$1,353,440), OH-500 reallocated 17% of its ARD in FY16- showing great improvement.

**1E-5. Local CoC Competition. Applicants must indicate whether the CoC:**  
**(1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline—attachment required;**  
**(2) rejected or reduced project application(s)—attachment required; and**  
**(3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline—attachment required. :**

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	Yes

## **2A. Homeless Management Information System (HMIS) Implementation**

**Intructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2A-1. Roles and Responsibilities of the CoC and HMIS Lead. Does your CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Attachment Required.** Yes

**2A-1a. Applicants must:**  
**(1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and**  
**(2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).**

1) Pages 2-3 & 7-8 following attachments page #'s - upper right corner in RED font. 2) Contract for Service. Also included is a HMIS transition summary outlining the timeline of implementation and future CoC & HMIS lead roles.

**2A-2. HMIS Policy and Procedures Manual. Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required.** Yes

**2A-3. HMIS Vender. What is the name of the HMIS software vendor?** Partnership Center, Ltd.

**2A-4. HMIS Implementation Coverage Area. Using the drop-down boxes, applicants must select the HMIS implementation Coverage area.** Single CoC

**2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type:**  
**(1) total number of beds in 2018 HIC;**  
**(2) total beds dedicated for DV in the 2018 HIC; and**

**(3) total number of beds in HMIS.**

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	701	72	629	100.00%
Safe Haven (SH) beds	15	0	15	100.00%
Transitional Housing (TH) beds	296	60	236	100.00%
Rapid Re-Housing (RRH) beds	1,258	37	1,221	100.00%
Permanent Supportive Housing (PSH) beds	2,351	0	2,351	100.00%
Other Permanent Housing (OPH) beds	26	0	26	100.00%

**2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months. (limit 2,000 characters)**

Not applicable- the CoC has 100% bed coverage in the HMIS.

**2A-6. AHAR Shells Submission: How many 2017 Annual Housing Assessment Report (AHAR) tables shells did HUD accept?** 12

**2A-7. CoC Data Submission in HDX. Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy)** 04/27/2018



## 2B. Continuum of Care (CoC) Point-in-Time Count

### Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy).** 01/23/2018

**2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).** 04/27/2018

## 2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

**Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC’s sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC’s sheltered PIT count results.  
 (limit 2,000 characters)**

The only change to the 2018 PIT count was a project categorization change which resulted in the CoC adding 15 safe haven beds to its sheltered inventory. Due to changes in the VA funded Grant and Per Diem program, 15 beds changed from Transitional Housing to Safe Haven under their “low demand” project model. This did not result in a change to the system’s overall inventory.

**2C-2. Did your CoC change its provider coverage in the 2018 sheltered count?** No

**2C-2a. If “Yes” was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.**

Beds Added:	0
Beds Removed:	0
Total:	0

**2C-3. Presidentially Declared Disaster Changes to Sheltered PIT Count. Did your CoC add or remove emergency shelter, transitional housing, or Safe Haven inventory because of funding specific to a Presidentially declared disaster, resulting in a change to the CoC’s 2018 sheltered PIT count?** No

**2C-3a. If “Yes” was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.**

Beds Added:	0
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Beds Removed:	0
Total:	0

**2C-4. Changes in Unsheltered PIT Count Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct and unsheltered PIT count in 2018, select Not Applicable.** No

**2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count?** Yes

**2C-5a. If “Yes” was selected for question 2C-5., applicants must describe: (1) how stakeholders serving youth experiencing homelessness were engaged during the planning process; (2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and (3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count. (limit 2,000 characters)**

1) The CoC held planning meetings with the local Youth Advisory Board (YAB) to identify improvement strategies for the unsheltered youth PIT count. As part of the full outreach strategy, the CoC has a dedicated Youth Outreach Program (YOP) that works year round to identify & engage unsheltered youth. Additionally, YOP staff met individually with youth experiencing homelessness to gather input for PIT planning. This information was also discussed at the CoC Homeless Outreach Workgroup & implemented in the final PIT plans.

2) Street outreach is conducted 7 days a week across the geographic area by 4 specific teams – youth, mental health (PATH), Veterans & Block-by-Block (covering the downtown business area). The UFA facilitates data sharing & coordination between the teams & coverage strategies are discussed regularly to identify unsheltered youth. There is a real-time list of active or recently active homeless camps maintained by the outreach teams & this list combined with planning meetings with the YAB informed locations for the night of the count. Outreach teams also engage with local businesses & community members to identify locations.

3) In 2018, a youth representative was assigned to each of the 7 PIT teams on the night of the count; this was a mix of YOP staff & young people with lived experience of homelessness. The CoC’s Youth Program Coordinator & youth leads from the YAB continue to develop strategies to engage youth in system change work & are currently planning for a more youth driven 2019 count.

**2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count:**

- (1) individuals and families experiencing chronic homelessness;**
- (2) families with children experiencing homelessness; and**
- (3) Veterans experiencing homelessness.**

**(limit 2,000 characters)**

The UFA is responsible for PIT data from the HMIS but the Homeless Outreach Group (HOG) is the CoC workgroup responsible for the annual unsheltered PIT count. The workgroup includes people with lived experience & representatives from all street outreach teams, CES, homeless advocates, police, Ohio Department of Transportation, emergency assistance & homeless service providers.

1) Most of the chronically homeless (CH) population are singles sleeping unsheltered. HOG leadership was responsible for identifying the strategy that would ensure all CH were counted on the night of the PIT. Outreach teams informed this population about the scheduled count in advance & delivered food/supplies to camps on the night of the PIT. Shelter data is collected in HMIS & is accessible for reporting CH data.

2) Family homelessness providers helped plan & execute the 2018 PIT. Their input & outreach workers' knowledge of encampments in the geographic area ensured that the count covered all locations known to be resting places of homeless families. The PIT leaders had a plan in place for immediate access to shelter if families with minor children were encountered. The overwhelming majority of homeless families reside in shelter without ever being unsheltered & this data is recorded in & accessible from HMIS.

3) The CoC & the VA coordinate for the PIT as well as for ongoing outreach strategies. All GPD providers are on HMIS & their data was included in the 2018 PIT. The 2018 unsheltered count found 3 veterans who were all connected to VA resources & with active housing offers through GPD, SSVF or VASH. Data on sheltered veterans is collected in the HMIS & accessible for PIT reporting.

The 2019 PIT planning process will more directly focus on the voice of people with lived experience specifically with families & the chronically homeless via focus groups & one-on-one conversations.

## 3A. Continuum of Care (CoC) System Performance

### Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.**

Number of First Time Homeless as Reported in HDX.	4,086
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### 3A-1a. Applicants must:

- (1) describe how the CoC determined which risk factors the CoC uses to identify persons becoming homeless for the first time;**
- (2) describe the CoC’s strategy to address individuals and families at risk of becoming homeless; and**
- (3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time. (limit 2,000 characters)**

1) Local risk factors include zero income, previous evictions, limited education, 2+ moves within the last 30 days, criminal convictions, & family size, mirroring households that enter shelter. Additionally, previous episodes of homelessness greatly increase the risk of re-entering homelessness. The CoC identified these risk factors through analysis of HMIS data, consulting with service providers, focus groups with clients, & peer-reviewed literature on risk factors for first-time homelessness. Risk factors are reviewed regularly & strategies adapt to the needs of the system.

2) Prevention resources are implemented in a variety of ways in the CoC: a) Resources for at-risk households (eviction/utility/food assistance, etc.) are coordinated with emergency assistance providers using non-HUD funding; b) Shelter Diversion strategies are managed within the CoC & implemented by the centralized intake phone hotline & the shelter providers when a household presents for emergency shelter. Funding for shelter diversion offers services & limited financial assistance to assist households to stabilize in housing. CoC lead has actively worked to identify non-HUD resources for Diversion (state, city, United Way) but there is not enough funding to meet the need. Because ESG funding is used in the program, eligibility is defined by federal regulation; c) Youth Pilot- implementation of youth specific prevention/diversion strategies that includes creative case management to help stabilize housing with safe & appropriate natural supports while continuing services to maintain PH; d) Foundation funding has been secured for Aftercare for all families that exit homelessness & for when a households with a previous episode of homelessness presents for shelter again; e) CoC focus on building system partnerships that feed into homelessness, specifically criminal justice, child welfare, education & healthcare.

3) Strategies to End Homelessness in coordination with the CoC Board.

**3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must:**  
**(1) provide the average length of time individuals and persons in families remained homeless (i.e., the number);**  
**(2) describe the CoC’s strategy to reduce the length-of-time individuals and persons in families remain homeless;**  
**(3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and**  
**(4) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the length of time individuals and families remain homeless.**  
**(limit 2,000 characters)**

- 1) Average LOT homeless: persons in ES/SH- 48; Persons in ES/SH/TH- 64.
- 2) Strategies to reduce the LOT homeless are shared between shelter/outreach & housing providers. Coordination between these system components is critical to improve performance. Strategies include: a) identification of housing resources outside of the CoC; b) expectation that shelter providers be housing focused & begin exit planning with clients immediately upon entry into homelessness; c) CoC review of CES performance data on a project & system level. The CES team is able to see all intake & housing data for CES matches & reviews it regularly at CoC workgroups; d) the annual CoC Competition rank & review process evaluated individual projects on how quickly they got people into housing & points were awarded to highest performers. This data is also reviewed monthly with CoC workgroups; e) Length of stay in shelter is a performance measure that affects funding in the annual ESG allocation process; f) Because the CoC has a low number of documented chronic homelessness, this population has immediate access to housing when willing to accept. Chronically homeless individuals/families and those with the longest experiences of homelessness are highest priority for referral in the CES.
- 3) Individuals/families with longest LOT homeless are identified by utilizing a system of "Homeless Certificates": a verification via the HMIS that calculates LOT based on encounters with Street Outreach/stays in shelter. The CES can access this data & considers LOT homeless & VI-SPDAT scores when matching people to housing; households with the longest LOT homeless are highest priority. Third-party verification of homelessness is used when HMIS data is not available.
- 4) Strategies to End Homelessness in coordination with the CoC Board.

**3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:**  
**(1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and**  
**(2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations.**

Percentage
------------

Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	49%
Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	98%

**3A-3a. Applicants must:**

**(1) describe the CoC’s strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and (2) describe the CoC’s strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.**

**(limit 2,000 characters)**

1) Housing focused service strategies are expected in ES/SH/TH/RRH. Exit planning begins at intake with a focus on connections to community supports, integrating long-term services into housing plans immediately. Homeless programs are connected to the limited affordable housing resources available outside of the CoC & CoC housing is prioritized for the most vulnerable. CoC offers annual trainings for providers to ensure best practice is housing case management. Clients have choice in their housing plans but ES/SH/TH/RRH are not considered to be long-term & this is discussed with clients during service meetings. Regular analysis of project outcomes results in development of new strategies & recent analysis has identified that across all sub-populations, permanent exits to friends/family are actually very temporary with a high rate of recidivism within 2 years. The CoC is piloting new aftercare strategies to make post-exit services available to households exiting to friends/family, to test if added support increases permanency. Affordable housing development is ongoing & the CoC is represented at the City’s newly formed affordable housing committee.

2) Participants in PSH are the most vulnerable in the community & as a means of creating a strong support network, are immediately connected to community supports to supplement CoC case management services. Developing this network increases the likelihood of connecting to benefits, increasing income & maintaining housing. The CoC emphasizes the importance of continued assessments to identify service need & participants who are ready to move-on. The CoC does not incentivize exits before clients are ready but providers are expected to utilize other long-term affordable/subsidized housing options after services are stabilized. The CoC & PHA have a move-on strategy prioritizing 500 HCVs to people exiting CoC Housing; PSH is top priority for this resource. 3&4)Strategies to End Homelessness in coordination w/ CoC Board

**3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.**

	Percentage
Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX	6%

**3A-4a. Applicants must:**

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**(1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;**  
**(2) describe the CoC’s strategy to reduce the rate of additional returns to homelessness; and**  
**(3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the rate individuals and persons in families returns to homelessness.**  
**(limit 2,000 characters)**

- 1) Over the last year, the CoC has greatly improved the analysis of HMIS data & the process has produced insights into common factors present in recidivism. This analysis combined with information collected from participant focus groups & the experiences from service providers, has helped the CoC identify new interventions to decrease returns. What we know: a) across sub-populations, more than 1 episode of homelessness increases the likelihood of future homelessness; b) men are more likely to recidivate than women); c) exits to friends/family are at high risk of recidivism; d) Transition age youth report using shelter as a primary mechanism to access services; e) Households with at least \$1,000/month in income are at lower risk of recidivism as compared to those without income.
- 2) The CoC agrees that a low rate of recidivism is critical to ending homelessness. Services should focus on stability once the CoC project ends & recidivism metrics are considered as a high point metric in the CoC’s annual rank & review process. Strategies include: a) Identifying the first-time homeless & focusing on rapid exit from homelessness with short-term financial assistance & services; b) Increasing resources for services to extend after exit. Family providers have developed a consistent aftercare strategy offering post-services to all families exiting shelter & housing. Additionally, CES now connects returning families to aftercare specialist before making a referral into shelter: c) Youth strategies focus on stabilizing relationships with client-identified natural supports. And, YHDP innovation will enable youth to maintain access to supportive services & reengage when housing is at risk; d) DedicatedPLUS PSH providing flexibility to prioritize high utilizers who may not yet meet the requirements to be deemed CH; e) Move-on strategy enables exits from CoC projects to access subsidized housing quickly.
- 3) Strategies to End Homelessness in coordination with the CoC Board

**3A-5. Job and Income Growth. Applicants must:**

**(1) describe the CoC’s strategy to increase access to employment and non-employment cash sources;**  
**(2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and**  
**(3) provide the organization name or position title that is responsible for overseeing the CoC’s strategy to increase job and income growth from employment.**  
**(limit 2,000 characters)**

- 1) The CoC works with providers to increase income for participants. Earned & non-employment income were metrics scored in the local CoC competition rank & review process; projects with the highest performance were awarded the most points. In early 2018, the UFA & several service providers started a CoC-wide Employment Forum to increase access to employment resources with a goal of integrating consistent employment strategies into all service delivery.



Through strong partnership with community lead agency in SOAR services, all CoC clients can access their resources & Hamilton Co. Job & Family Services (child welfare) is an active CoC partner collaborating with the UFA to increase benefits access for families & youth.

2) Effective partnerships include: WIOA for job training/transportation; City of Cincinnati programs-a) Homeless to Work- connecting non-profits, the local parks & others to provide homeless with employment b) Employment Pipeline-providing supportive employment to homeless clients c) GeneroCity513-providing transportation to & from job sites to panhandlers & homeless persons; CityLink providing job training & on-going employment support to RRH clients; dedicated child welfare workers connect families & youth to benefits quickly. The UFA recently formed a partnership with Amazon to make employment connections to their distribution facilities in the area. Amazon has hosted job fairs at shelters & other centralized locations that are accessible to CoC participants. Additionally, they have assisted participants with transportation in the first few months of employment to ease the burden & improve retention rates. The partnership will help inform the framework best practice in partnering with local employers. The Employment Forum is addressing systemic & client-level barriers to employment by continuously creating new partnerships & increasing access to employment.

3) Strategies to End Homelessness in coordination with the CoC Board.

**3A-6. System Performance Measures Data** 05/20/2018  
**Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017 (mm/dd/yyyy)**

## 3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

### Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 3B-1. DedicatedPLUS and Chronically Homeless Beds. In the boxes below, applicants must enter:**
- (1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and**
  - (2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.**

Total number of beds dedicated as DedicatedPLUS	1,636
Total number of beds dedicated to individuals and families experiencing chronic homelessness	0
<b>Total</b>	<b>1,636</b>

**3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written standards for all CoC Program-funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing? Attachment Required.** Yes

**3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.**

History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of previous homeless episodes	<input checked="" type="checkbox"/>
Unsheltered homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad credit or rental history	<input type="checkbox"/>
Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

**3B-2.2. Applicants must:**

- (1) describe the CoC’s current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;**
- (2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and**
- (3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.**  
**(limit 2,000 characters)**

1) The CoC aims to prevent as many families as possible from becoming homeless but when homelessness occurs, shelter providers are housing focused & begin exit planning immediately. HMIS data is regularly examined & case managers/agency leadership meet with UFA & CES staff to discuss barriers to achieving the 30-day goal. CES connects approximately 80% of families who need RRH to RRH, so there is immediate focus on identifying housing & tailoring a service plan to empower families in move into PH quickly. Building & strengthening landlord partnerships are high priorities & the CoC facilitates a landlord forum to bring landlords & agency staff together as a means of sharing information, building relationships & improving housing access to homeless families. This has been an effective way to educate landlords on the CoC programs as well as the benefits of Housing First & to share methods of conflict resolution/problem-solving when working with homeless families. Additionally, the CoC maintains a database that allows landlords to post available housing units & housing specialists can access the portal to quickly connect families to housing.

2) All family providers have undergone thorough Trauma Informed Care training through the Risking Connection curriculum. They also focus on multi-generational service approaches, providing tailored services to children as a means of increasing education access & ending the cycle of homelessness. Families access eligible benefits via a dedicated JFS worker & are directly connected to other community services as needed. Additionally, the family providers offer aftercare support to all households providing supportive services & limited financial resources if housing destabilizes.

3) Strategies to End Homelessness in coordination with the CoC Board & the Family Housing Partnership.

**3B-2.3. Antidiscrimination Policies. Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent supportive housing (PSH and RRH) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status, or disability when entering a shelter or housing.**

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	<input checked="" type="checkbox"/>
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	<input checked="" type="checkbox"/>
CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input checked="" type="checkbox"/>
CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	<input checked="" type="checkbox"/>
CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	<input type="checkbox"/>

**3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth Experiencing Homelessness. Applicants must indicate whether the CoC’s strategy to address the unique needs of unaccompanied homeless youth includes the following:**

Human trafficking and other forms of exploitation	Yes
LGBT youth homelessness	Yes
Exits from foster care into homelessness	Yes
Family reunification and community engagement	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs	Yes

**3B-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC’s current strategy to prioritize unaccompanied youth based on their needs.**

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
Unsheltered Homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad Credit or Rental History	<input type="checkbox"/>

**3B-2.6. Applicants must describe the CoC's strategy to increase:  
 (1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and  
 (2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources.  
 (limit 3,000 characters)**

1) The CoC has prioritized improving the youth system since 2016. OH-500 is a YHDP community with a HUD approved Comprehensive Community Plan (CCP) to end youth homelessness. Annually, unaccompanied youth between the ages of 18 & 24 account for about 12% of the homeless population but the CoC housing inventory has only 2% of its capacity dedicated to the population. The CCP, locally called KEYS to A Future Without Youth Homelessness (KEYS) outlines a progressive engagement strategy that will dramatically increase the number of youth who can access housing & services, with a multi-system focus on preventing & ending youth homelessness. The cornerstones of the plan center around the following, all which improve efficiency of current & new resources: a)developing formal partnership with community/system partners to make sure that youth can access existing resources; b)focus on homelessness diversion; c) progressive engagement services & financial

assistance which starts with a provision of the “lightest touch” with intensity of the intervention driven by the need of each youth; & d)consistent services provided by dedicated youth team, extending even after housing has been stabilized. Young people with lived experience of homelessness were clear when they said, “The housing isn’t broken but your services are.” KEYS outlines strategies that provide specific, culturally competent services under a positive youth development framework & this shift is expected to increase positive performance outcomes while decreasing the overall cost of assisting a youth in their move to stable housing. In 2017, 277 young people were able to access rapid re-housing & after full implementation of KEYS, its anticipated that housing will be available for more than 600 youth; this is a result of increased funding & more cost effective strategies.

2) Unsheltered youth can access all of the housing & service resources listed above & available in the youth system. With targeted shelter diversion/prevention strategies as well increased housing capacity, the length of stay in shelter will decrease which will ensure that emergency shelter resources are available to unsheltered youth who want them. However, young people will remain eligible for housing even if unwilling to go into shelter. The CoC currently has four street outreach programs, including one that is dedicated to serving unsheltered homeless youth, but the youth dedicated service team will improve the service delivery model of these street outreach services & will be more equipped to address the range of barriers that unsheltered youth may have.

**3B-2.6a. Applicants must:**

**(1) provide evidence the CoC uses to measure both strategies in question 3B-2.6. to increase the availability of housing and services for youth experiencing homelessness;**

**(2) describe the measure(s) the CoC uses to calculate the effectiveness of the strategies; and**

**(3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC’s strategies.**

**(limit 3,000 characters)**

1) The CoC is able to measure effectiveness of current youth programming through analysis of HMIS data & this will continue as KEYS strategies are implemented & brought to scale. KEYS is operating as a HUD demonstration project & the CoC will be tracking the effectiveness of innovation. The CoC has designed a Continuous Quality Improvement (CQI) process that consistently reviews outcomes & makes revisions to strategy, policy, & data collection as needed. The CoC has always been committed to improving system performance & is focused on improving outcomes on the HUD defined metric. The following outcomes will be measured by using our HMIS data: a) number of unaccompanied youth experiencing unsheltered homelessness; b) length of time a youth remains homeless; c) extent to which youth leave homelessness return to homelessness; d) overall reduction in the number of homeless youth; e) number of individuals who become homeless for the first time; f) Successful housing placement or retention in PH destination.

2) To calculate effectiveness, KEYS will be measured in accordance with HUD’s System performance metrics outlined above. Additionally, the CoC has the RHY Safe & Appropriate Elements (socio-emotional wellbeing, perception of safety,

positive connections, education, employment) & the USICH Criteria & Benchmarks for ending youth homelessness – proving that the system makes homeless rare, brief, & one-time.

3) These metrics assess progress in different ways. Outcomes were selected as part of the YHDP community calls & they are in alignment with how the federal partners determined success. The CQI team will review data quality & outcomes regularly & measures of success will be revised as needed.

**3B-2.7. Collaboration–Education Services. Applicants must describe how the CoC collaborates with:**

- (1) youth education providers;**
  - (2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);**
  - (3) school districts; and**
  - (4) the formal partnerships with (1) through (3) above.**
- (limit 2,000 characters)**

1)Project Connect (PC), the LEA & school district for the area, helps the CoC engage with smaller schools that may not have fulltime staff dedicated to homeless students. The CoC is collaborating with charter schools serving non-traditional students. These partnerships developed under YHDP identified a previously unseen population of Transition Aged Youth at risk of homelessness; many of whom didn't graduate from traditional school but are working towards GED's. PC is an active participant in the CoC & has a voting seat on the CoC Board, assisting in strategic planning to increase education access to children/youth. PC is a collaborative partner in managing 500 HCV referrals under the Move-on initiative. PC coordinates educational programs, protects students from discrimination & addresses issues for families & youth. They coordinate with SEAs on behalf of the CoC. The CoC is focused on implementing data sharing with the schools as well as connecting them to CES. All youth experiencing homelessness will be identified & included on the by-name list to ensure access to appropriate resources.

2)The CoC has a formal partnership with the National Center for Homeless Education as technical assistance provided under YHDP. This has helped the UFA & Lead Agency engage in strategic planning with education providers, school districts & the LEA to determine action steps for data sharing & consistent services between systems. PC is a voting member of the CoC Board, identified as a formal partnership in the governance charter. The Children & Youth Taskforce meets monthly to improve the lives of children & youth impacted by the trauma of homelessness. Membership includes: 4C for Children, Children's Home, Children's Hospital, Early Learning Centers, Preschool Promise, Family Nurturing Center, PC, United Way, University of Cincinnati, UpSpring, homeless service providers & community members.

**3B-2.7a. Applicants must describe the policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services.**  
**(limit 2,000 characters)**

The CoC requires that all projects inform families & youth of educational

resources when entering a shelter or housing project. CoC & ESG funded projects are required to have a designated staff person working to make educational resources known to participants & to work to connect interested participants to those services. Strategies to End Homelessness (STEH) confirms knowledge of this requirement from all CoC partners as a part of completing annual project applications. Additionally, as the UFA, STEH enters into funding agrees with all subrecipients requiring that they establish policies & practices that are consistent with & do not restrict the exercise of rights provided by subtitle B of Title VII of the McKinney-Vento Act as amended & other laws related to the provision of education & related services to individuals & families experiencing homelessness. Every subrecipient receives at least an annual monitoring that includes review of all policies for consistency with the subaward & all federal, state & local requirements. The monitoring then tests the implementation of the policies & procedure. The UFA provides technical assistance as needed.

The CoC collaborates with the Local Education Agency (LEA) & the Runaway & Homeless Youth (RHY) funded agency to inform & disseminate resources & best practice to all partners & both the LEA & RHY agency are voting members of the CoC Board.

**3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select “Yes” or “No”. Applicants must select “Yes” or “No”, from the list below, if the CoC has written formal agreements, MOU/MOA’s or partnerships with providers of early childhood services and support.**

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	Yes
Head Start	No	No
Early Head Start	No	No
Child Care and Development Fund	No	No
Federal Home Visiting Program	No	Yes
Healthy Start	No	No
Public Pre-K	Yes	Yes
Birth to 3 years	No	Yes
Tribal Home Visting Program	No	No
Other: (limit 50 characters)		

**3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD). (limit 2,000 characters)**

1) Identify- The CoC has an active Veteran Workgroup that meets monthly, is chaired by veteran leadership & includes representatives from the local &

regional VA's. The veteran dedicated outreach team & all veteran projects enter data into the HMIS, which enables comprehensive & complete identification of every homeless veteran. A Veteran Leadership Team develops collaborative CoC/VA policies, reviews status of the USICH criteria & benchmarks & manages the active veteran by-name list with the larger CoC workgroup.

2) Assess- All homeless projects dedicated to serving veterans are connected to the CoC's CES. As the first point of contact to the CES, veterans who are homeless or at risk of homelessness contact the Central Access Point (CAP) hotline & an initial screening is completed to determine eligibility for prevention & housing resources. Each caller is assessed using a common tool & CAP coordinates with the VA to determine Veteran status & medical eligibility before making a placement. All Veterans are offered permanent housing when they call CAP but can also be referred in to GPD transitional housing. Veterans that walk into shelter instead of calling CAP are assessed with the same tool & provided with the same offer of permanent housing.

3) Refer- The CoC & VA are strong partners coordinating to ensure resources are effectively targeted to those who need them. In the last year, CES has expanded its services to VA programs, now making placements into GPD, SSVF & HUD-VASH. In 2018, the CoC & VA partnered to bring local leaders together to permanently house 45 veterans in 45 days, then exceeded the goal by housing 56 veterans in 45 days. This accomplishment is the result of strategic system development that identifies, assesses & refers veterans to appropriate housing resources – actions consistent with an effective & efficient system.

**3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC?** Yes

**3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness?** Yes

**3B-3.4. Does the CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?** Yes

**3B-5. Racial Disparity. Applicants must:** Yes  
**(1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless assistance;**  
**(2) if the CoC conducted an assessment, attach a copy of the summary.**



**3B-5a. Applicants must select from the options below the results of the CoC’s assessment.**

People of different races or ethnicities are more or less likely to receive homeless assistance.	<input checked="" type="checkbox"/>
People of different races or ethnicities are more or less likely to receive a positive outcome from homeless assistance.	<input checked="" type="checkbox"/>
There are no racial disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
The results are inconclusive for racial disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>

**3B-5b. Applicants must select from the options below the strategies the CoC is using to address any racial disparities.**

The CoC’s board and decisionmaking bodies are representative of the population served in the CoC.	<input type="checkbox"/>
The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	<input type="checkbox"/>
The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	<input type="checkbox"/>
The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups	<input checked="" type="checkbox"/>
The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	<input type="checkbox"/>
The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	<input checked="" type="checkbox"/>
The CoC has staff, committees or other resources charged with analyzing and addressing racial disparities related to homelessness.	<input type="checkbox"/>
The CoC is educating organizations, stakeholders, boards of directors for local and national non-profit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	<input type="checkbox"/>
The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	<input checked="" type="checkbox"/>
The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	<input checked="" type="checkbox"/>
The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	<input checked="" type="checkbox"/>
Other:	<input checked="" type="checkbox"/>

## 4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

**Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:**
- (1) assists persons experiencing homelessness with enrolling in health insurance; and**
  - (2) assists persons experiencing homelessness with effectively utilizing Medicaid and other benefits.**

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	No	No
Non-Profit, Philanthropic:	No	No
Other: (limit 50 characters)		
Federally Qualified Health Center	Yes	Yes

- 4A-1a. Mainstream Benefits. Applicants must:**
- (1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits;**
  - (2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and**
  - (3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy for mainstream benefits. (limit 2,000 characters)**

1) The CoC collaborates with community experts to ensure participants have access to apply & receive mainstream benefits. Health Insurance: The Cincinnati Health Network oversees HRSA resources, sits on the CoC Board & runs freestanding & shelter-based clinics employing benefit navigators to work with the homeless. University of Cincinnati Medical Center is a CoC partner serving a high number of homeless individuals/families with the ability to use presumptive determination for Medicaid. The HMIS integrates Medicaid applications into the system, enabling applications to be submitted directly Hamilton County Job & Family Services (JFS). Freestore Foodbank provides the largest capacity of SOAR resources to the CoC, with services available to people experiencing homelessness. Non-Cash benefits: The UFA partners with

JFS to directly connect families with TANF resources & JFS has dedicated staff to work with homeless families to ensure access to other resources; Freestore Foodbank's benefits outreach program works with all partners to ensure access to food assistance.

- 2) The CoC hosts community training from benefit experts to ensure staff are knowledgeable about resources. UFA staff ensures all projects understand the SOAR program & have a full scope of resources available in the community. The CoC shares system data on a regular basis to highlight success & identify areas of improvement – current data shows 95% of households exit a PH project with health insurance & 62% exit with non-cash benefits. 79% of people exiting shelter have health insurance & 38% are connected to non-cash-benefits. Outcomes from shelter are expected to be lower as the CoC is committed to decreasing the LOT homeless; so applications for benefits happen in shelter but receipt of benefits occurs in housing.
- 3) Strategies to End Homelessness in coordination with the CoC Board.

**4A-2.Housing First: Applicants must report:**

- (1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and**
- (2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.**

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	45
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.	44
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	98%

**4A-3. Street Outreach. Applicants must:**

- (1) describe the CoC's outreach;**
- (2) state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;**
- (3) describe how often the CoC conducts street outreach; and**
- (4) describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)**

1) OH-500 has 4 outreach teams with specific expertise: Youth, Mental Health (PATH), Veterans Administration, & Block-by-Block (covering only the Cincy Central Business District). The UFA facilitates coordination of the teams & data sharing between them & CES. The CoC is also responsible for publicizing community services & through an annual outreach plan ensures that community centers, disability service agencies, schools, hospitals & agencies serving non-English speakers know how to access homeless services. They are trained on

how to use the Central Access Point (CAP), a homeless hotline that connects people in a housing crisis with appropriate resources such as: outreach services, prevention/diversion, shelter or Veteran housing.

2) Street outreach covers 100% of the CoC's geographic area.

3) Street outreach is conducted 7 days a week. The 4 teams coordinate on their coverage strategies & meet at least monthly to discuss trends in the unsheltered population & to strategize about getting people off the street & into housing. The PATH team leads the initiative & maintains a real-time list of all active & recent locations. They also have regular office hours at the Homeless Coalition to increase engagement with the population.

4) Coverage is planned at the monthly CoC Homeless Outreach Workgroup. This group is essential for identifying those least likely to seek out services. Outreach teams are highly respected & system partners connect with them directly to make connections when needed. CAP also works with case managers & other supports advocating for participants who aren't likely to ask for assistance on their own; a mobile app (Street Reach Cincy) enables the public to inform the CoC of homeless camps or people sleeping unsheltered, making immediate service connections via CAP. The local PATH team has been identified as one of the highest performers in the state of Ohio & leads the effort to connect all people sleeping unsheltered with resources.

**4A-4. Affirmative Outreach. Applicants must describe:**

**(1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability; and**

**(2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above. (limit 2,000 characters)**

1) OH-500 is committed to fair housing & affirms its commitment through policies & procedures adopted by the CoC. The "front door" to the system is the CES Central Access Point (CAP), a hotline for homeless individuals/families that connects people in need of prevention/shelter diversion, emergency shelter & housing resources to the most appropriate service providers. The UFA manages the CES & implemented a CAP outreach strategy that ensures the following systems are aware of homeless services: Hamilton County Disability Services, public libraries, hospitals, public/private schools & the Cincinnati Association for the Blind. The CoC facilitates Equal Access trainings on the final rule, discusses requirements & implementation at CoC Workgroup meetings, & provides 1-on-1 technical assistance from the STEH compliance experts during each annual monitoring visit. Specific training on LGBTQ cultural competencies is required & offered directly to agencies for full staff, small groups, or as a free CoC training for the community.

2) The CoC's UFA manages the CES & implemented a CAP outreach strategy that ensures those with limited English proficiency are aware of CAP & able to be engaged for CAP telephone assessments. The CoC works with Santa Maria Community Services to assist with the Spanish-speaking population & local providers partner with services such as Global to Local Language Solutions & Affordable Language Services to provide translation services as needed. CAP phone specialists are trained to utilize TTY to expand access to the hearing-impaired & deaf community. CAP can also be accessed via text message. The

CES utilizes the Language Line call center to assist with translation services over the phone & CE looks forward to implementing the Spanish VI-SPDAT when it is finalized & considered official by its creator, OrgCode.

**4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.**

	2017	2018	Difference
RRH beds available to serve all populations in the HIC	1,215	1,258	43

**4A-6. Rehabilitation or New Construction Costs. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction?** No

**4A-7. Homeless under Other Federal Statutes. Is the CoC requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other Federal statutes?** No

## 4B. Attachments

**Instructions:**

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site:  
<https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource>

Document Type	Required?	Document Description	Date Attached
1C-5. PHA Administration Plan–Homeless Preference	No	PHA Administratio...	09/12/2018
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	Centralized or Co...	09/12/2018
1E-1. Objective Criteria–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes	Objective Criteri...	09/13/2018
1E-3. Public Posting CoC-Approved Consolidated Application	Yes	Public Posting - ...	09/17/2018
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	Public Posting - ...	09/12/2018
1E-4. CoC's Reallocation Process	Yes	CoC's Reallocatio...	09/12/2018
1E-5. Notifications Outside e-snaps–Projects Accepted	Yes	Notifications Out...	09/12/2018
1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced	Yes	Notifications Out...	09/13/2018
1E-5. Public Posting–Local Competition Deadline	Yes	Public Posting - ...	09/13/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	CoC - HMIS Govern...	09/13/2018
2A-2. HMIS–Policies and Procedures Manual	Yes	HMIS - Policies a...	09/13/2018
3A-6. HDX–2018 Competition Report	Yes	HDX - 2018 Compet...	09/12/2018
3B-2. Order of Priority–Written Standards	No	Order of Priority...	09/12/2018

3B-5. Racial Disparities Summary	No	Racial Disparitie...	09/13/2018
4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
Other	No		
Other	No		
Other	No		

## **Attachment Details**

**Document Description:** PHA Administration Plan - Homeless Preference

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Centralized or Coordinated Assessment Tool

## **Attachment Details**

**Document Description:** Objective Criteria - Rate, Rank, Review, and Selection Criteria

## **Attachment Details**

**Document Description:** Public Posting - CoC Approved Consolidated Application

## **Attachment Details**



**Document Description:** Public Posting - Local Competition Rate, Rank, Review & Selection Criteria

## **Attachment Details**

**Document Description:** CoC's Reallocation Process

## **Attachment Details**

**Document Description:** Notifications Outside e-snaps - Projects Accepted

## **Attachment Details**

**Document Description:** Notifications Outside e-snaps - Projects Rejected or Reduced

## **Attachment Details**

**Document Description:** Public Posting - Competition Deadline

## **Attachment Details**

**Document Description:** CoC - HMIS Governance (contracts)

## **Attachment Details**

**Document Description:** HMIS - Policies and Procedures Manual

## **Attachment Details**

**Document Description:** HDX - 2018 Competition Report

## **Attachment Details**

**Document Description:** Order of Priority - Written Standards

## **Attachment Details**

**Document Description:** Racial Disparities Summary

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## Submission Summary

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

Page	Last Updated
<b>1A. Identification</b>	09/11/2018
<b>1B. Engagement</b>	09/13/2018
<b>1C. Coordination</b>	09/13/2018
<b>1D. Discharge Planning</b>	09/11/2018
<b>1E. Project Review</b>	09/13/2018
<b>2A. HMIS Implementation</b>	09/13/2018
<b>2B. PIT Count</b>	09/13/2018
<b>2C. Sheltered Data - Methods</b>	09/13/2018
<b>3A. System Performance</b>	09/13/2018
<b>3B. Performance and Strategic Planning</b>	09/17/2018
<b>4A. Mainstream Benefits and Additional Policies</b>	09/13/2018
<b>4B. Attachments</b>	09/17/2018

FY2018 CoC Application	Page 52	09/17/2018
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**Submission Summary**

No Input Required



# STRATEGIES TO END HOMELESSNESS

## **1. PHA Administrative Plan – Homeless Preference**

1. Cincinnati Metropolitan Housing Authority Admissions and Continued Occupancy Policy
2. Cincinnati Metropolitan Housing Authority Administrative Plan: Local Preferences



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## ADMISSIONS & CONTINUED OCCUPANCY POLICY

| 07/01/~~2017~~2018

Effective:

their maximum effect within the community. Preferences are used to establish the order of placement on the waiting list. Every applicant must still meet CMHA's Resident Selection Criteria (described later in this policy) before being offered a unit.

1. When selecting a family for a unit with accessible features, CMHA will give a preference to applicant families with disabilities who can benefit most from the unit's features. First preference will be given to current resident families needing a transfer to an accessible unit, and second preference will be given to applicant families. If no family needing accessible features can be found for a unit with accessible features, CMHA will house a family that does not need the unit features. This housing offer is subject to the requirement in Section III - Tenant Selection and Assignment Plan, under which a non-disabled family in an accessible unit can be required to move so that a family needing the unit features can be housed.
2. Police officers and their families who may not otherwise be eligible for occupancy in public housing may be admitted in order to increase the presence of security for residents in a CMHA community.
3. Notwithstanding any other provision of this Admissions and Continued Occupancy Policy, each tenant living in a property at the time CMHA takes legal title to the property will have the right to become a public housing tenant in the dwelling unit the tenant occupies on the date CMHA takes legal title, provided (1) the tenant family income is within the income limits for admission to the public housing program on the day the tenant family signs the public housing lease; and (2) the tenant family is determined to be eligible based on other CMHA admission criteria; and the tenant's household composition meets CMHA guidelines.
4. Preferences will be granted to applicants who are otherwise qualified and who, at the time of moving onto the site-based waiting list and meet the definitions of the preferences described below.

**F. Local Preferences and Unit Selection**

1. **Site-based Waiting List Choice:** Local preferences will be used in conjunction with CMHA's site based waiting list(s). Applicants may choose as many sites as they would like for placement on its site-based waiting list.
2. **Local Preference and Points Allocation:** The local preferences in effect are as follows:

Preference	Points
<b>Victims of involuntary displacement by government</b>	<b>32 Points</b>



agency or natural disaster – These individuals will <del>supercede</del> <b>supersede</b> the point system and move to the top of the waiting list due to the exigent situation. These will also include individuals who are participants in the Housing Choice Voucher Program that move from their HCV subsidized unit/HCV participant due to the unit's failed HQS and/or abatement from the program	
Victims of domestic violence - referral from YWCA, Women Helping Women, or Third-Party Social Service Agency	9 Points
Victims of domestic violence – Self certification only	4 Points
Referral from Local Homeless Coalition	4 Points
Veteran preference	9 Points
Full-time students (Head/Co-Head of Household with 3 <sup>rd</sup> party verification from the school)	3 Points
Working Families, Disabled Families or Elderly	3 Points
Family Unification (see below/to be defined) and/or youths aging out of foster care who are between the ages of 18-24.	2 Points
Good Neighbor Program Completion	2 Points

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3. **Definitions of Preferences:**

- a. Definition of Working Family Preference: The *Working Family Preference* is given to households where the Head or Co-Head of Household is employed at the time of application and at the time of admission.
- b. Definition of Homeless: An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
  - (1) Sleeping in a place not designed for or ordinarily used as a regular sleeping accommodation
  - (2) Or Living in a shelter (designated to provide temporary living arrangements
  - (3) Or exiting an institution with no subsequent residence identified\_ where they resided for 90 days or less AND were residing in emergency shelter or place not meant for human habitation immediately before entering institutio
- c. Definition of Veteran: In the selection of tenants for dwelling units, CMHA shall give preference, (as among applicants equally in need and eligible for occupancy of the dwelling unit), to families of veterans and persons serving in the

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<b>Annual PHA Plan</b> <i>(Standard PHAs and Troubled PHAs)</i>	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires: 02/29/2016
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**Purpose.** The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families.

**Applicability.** Form HUD-50075-ST is to be completed annually by **STANDARD PHAs or TROUBLED PHAs**. PHAs that meet the definition of a High Performer PHA, Small PHA, HCV-Only PHA or Qualified PHA do not need to submit this form.

**Definitions.**

- (1) **High-Performer PHA** – A PHA that owns or manages more than 550 combined public housing units and housing choice vouchers, and was designated as a high performer on both of the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments if administering both programs, or PHAS if only administering public housing.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, or at risk of being designated as troubled, that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceeds 550.
- (3) **Housing Choice Voucher (HCV) Only PHA** - A PHA that administers more than 550 HCVs, was not designated as troubled in its most recent SEMAP assessment and does not own or manage public housing.
- (4) **Standard PHA** - A PHA that owns or manages 250 or more public housing units and any number of vouchers where the total combined units exceeds 550, and that was designated as a standard performer in the most recent PHAS or SEMAP assessments.
- (5) **Troubled PHA** - A PHA that achieves an overall PHAS or SEMAP score of less than 60 percent.
- (6) **Qualified PHA** - A PHA with 550 or fewer public housing dwelling units and/or housing choice vouchers combined, and is not PHAS or SEMAP troubled.

<b>A.</b>	<b>PHA Information.</b>																								
A.1	<p>PHA Name: <u>Cincinnati Metropolitan Housing Authority</u> PHA Code: <u>OH004</u>          PHA Type: <input checked="" type="checkbox"/> Standard PHA <input type="checkbox"/> Troubled PHA          PHA Plan for Fiscal Year Beginning: (MM/YYYY): <u>07/2018</u>          PHA Inventory (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above)          Number of Public Housing (PH) Units <u>5,346</u> Number of Housing Choice Vouchers (HCVs) <u>11,728</u> Total Combined Units/Vouchers <u>17,074</u>          PHA Plan Submission Type: <input checked="" type="checkbox"/> Annual Submission <input type="checkbox"/> Revised Annual Submission</p> <p><b>Availability of Information.</b> PHAs must have the elements listed below in sections B and C readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official website. PHAs are also encouraged to provide each resident council a copy of their PHA Plans.</p> <p><input type="checkbox"/> <b>PHA Consortia:</b> (Check box if submitting a Joint PHA Plan and complete table below)</p> <table border="1" data-bbox="149 1417 1594 1696"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) in the Consortia</th> <th rowspan="2">Program(s) not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>Lead PHA:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program		PH	HCV	Lead PHA:											
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				PH	HCV																				
Lead PHA:																									
<b>B.</b>	<b>Annual Plan Elements</b>																								

## CHAPTER 4

### ESTABLISHING PREFERENCES AND MAINTAINING THE WAIT LIST

[24 CFR Part 5, Subpart D; 982.54(d)(1), 982.204, 982.205, 982.206]

#### PHILOSOPHY

It is CMHA's objective to ensure that families are placed in the proper order on the wait list and selected from the wait list for admissions in accordance with the policies in this Administrative Plan. By maintaining an accurate wait list, CMHA will be able to perform the activities which ensure that an adequate pool of qualified applicants will be available so that program funds are used in a timely manner.

#### **A. WAIT LIST POLICY [24 CFR 982.204]**

CMHA uses a wait list for admission to its Housing Choice Voucher Tenant-Based Assistance Program. CMHA also maintains a wait list for each Project Based Voucher Contract.

Except for Special Admissions, Ports and applicants for Project-Based Vouchers, applicants will be selected from the CMHA HCV wait list in accordance with policies and preferences and income targeting requirements defined in this Administrative Plan. For Special Admissions, each agency that is authorized to refer families for the vouchers for their program will determine the preference among their pool of applicants.

CMHA will maintain information that permits proper selection from the wait list.

The wait list contains the following information for each applicant listed:

Applicant name(s);

Family unit size (number of bedrooms per CMHA subsidy standards);

Date and time of application;

Qualification for any local preference;

Racial or ethnic designation of the head of household;

Annual (gross) family income; and

Number of persons in family.

#### **B. LOCAL PREFERENCES [24 CFR 982.207]**

CMHA will offer public notice when changing its preference system and the notice will be publicized using the same guidelines as those for opening and closing the wait list. Applicants must claim eligible preference(s) at the time of application to the wait list.

## Chapter 4

Except for Special Admissions, applicants for Housing Choice Voucher Program assistance will be taken from the Housing Choice Voucher Program wait list in order of the following local preferences:

- Families that have been designated as eligible for assistance under HUD's Disaster Housing Assistance Program (DHAP). \*\* 50 points
- Referrals of disabled persons referred by Living Arrangements for the Developmentally Disabled (LADD) up to 150 referrals.\*\* 35 points
- Referrals of disabled persons referred by the Center for Independent Living Options (CILO) up to 75 referrals.\*\* 35 points
- HUD funded Family Unification Program (FUP) Voucher.\*\*35 points
- Canceled voucher preference for applicant families whose vouchers were recalled due to insufficient funding. 75 points
- Displaced preference for voucher families who have been terminated from the program as a result of insufficient funding. 80 points
- Displaced preference for Asset Management/LIPH families in a hard to house situation or due to demo/disposition of units.\*\* 80 points
- Referral from Asset Management/LIPH when a family or individual cannot be housed because of extenuating circumstances.\*\* 45 points
- Referral from Strategies to End Homelessness up to 500 referrals.\*\* 30 points
- Veteran preference. 35 points
- Youths aging out of foster care age 18-24: Youth who can verify that they were residents of a state-run foster care system within twelve months of the onset of adulthood or emancipation up to 30 referrals\*\* 30 points

CMHA will admit families who qualify under the Extremely Low Income limit to meet the income-targeting requirement, regardless of preference.

\*\*Referrals will be accepted from CMHA Special Admissions, CMHA's Asset Management/LIPH, DHAP, HUD funded FUP, Youths Aging Out of Foster Care, LADD, HUD VASH, Strategies to End Homelessness, CILO and Families referred from the regular PHA voucher wait list, regardless of whether the regular PHA voucher wait list is open or closed, consistent with 24 CFR 982.206 (c).

### **C. SPECIAL ADMISSIONS [24 CFR 982.54(d)(e), 982.203]**

CMHA admits a limited number of families under a Special Admissions procedure. Special Admissions families will be admitted outside of the regular wait list process. They do not have to qualify for any preferences, nor are they required to be on the program wait list. CMHA maintains separate records of these admissions.



# STRATEGIES TO END HOMELESSNESS

## 3. Centralized or Coordinated Assessment Tools

### Phase 1: Homelessness Prevention Strategies

- A. STEH Targeted Shelter Diversion Eligibility Screening
- B. Youth Shelter Diversion Screening Tool
  - The Youth Shelter Diversion Screening Tool is a Cincinnati/Hamilton County pilot project associated with the *KEYS to a Future Without Youth Homeless* Plan, the HUD approved local Youth Homelessness Demonstration Project Coordinated Community Plan. Lessons learned from this pilot project will be applied to the current Shelter Diversion program, as well as other community initiatives.

### Phase 2: Coordinated Access to CoC and ESG Housing

- A. Coordinated Assessment Tool: Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT) for Individuals
- B. Coordinated Assessment Tool: Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT) for Families
- C. Coordinated Assessment Tool: Transition Age Youth - Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT) for Youth

### Phase 3: Coordinated Exit and Move-On

- A. Coordinated Exit: CMHA HCV Homeless Preference Referral Form

## STEH Targeted Shelter Diversion Eligibility Screening

<b>VESTA ID:</b>		<b>Date:</b>	
------------------	--	--------------	--

### Homelessness Prevention Minimum Eligibility

Household must meet all of the following criteria:

- At imminent risk of homelessness:
  - ✓ Losing primary nighttime residence within 21 days
  - ✓ No subsequent residence identified
  - ✓ Lacks financial resources /support networks needed to obtain other housing
- Income at or below 30% AMI
- Currently living in Hamilton County
- Must have place to stay while working with program to secure other housing
- Is willing to participate in case management
- Verified there is not an active homeless certificate, shelter stay, HPRP assistance, or shelter diversion assistance in the past 12 months

#### A. Household Income (Check **ONE** that applies to the household.)

- No Income.....10 points
- Income at or below 15% AMI.....5 points

Chart is income **per month**

Family Size	1	2	3	4	5	6	7	8
15% of AMI	\$685	\$783	\$881	\$979	\$1,058	\$1,138	\$1,215	\$1,294

SCORE (0-10):

#### B. Re-Housing Challenge Factors (Check all that apply to any adult household member.)

- Eviction in last five years.....3 points
- Convictions likely to impact housing (drug, sex crime, arson, etc).....3 points

SCORE (0-6):

#### C. High Risk of Homelessness Factors (Check all that apply to any adult household member.)

- Have stayed/slept in two or more places in last 30 days.....10 points
- Have not been employed in last 6 months or are currently receiving SSDI/ SSI for self or minor child .....5 points
- Have children under two years of age and/or pregnant.....5 points
- No high school diploma/ GED.....5 points
- Have 4 or more total household members.....5 points
- Head of household is age 24 or under.....5 points

SCORE (0-35):

#### C. Eligibility Determination

- Approved: score of **23** points or more
- Not Approved

**TOTAL SCORE (0-51):**

Staff Signature		Date	
-----------------	--	------	--

**Override Approval** I approve override for this household. **Justification is attached.**

Public ID: \_\_\_\_\_

Assessor: \_\_\_\_\_

Date: \_\_\_\_\_

**DIVERSION SCREENING**

1. Where did you sleep last night?

---

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2. What issues exist with you remaining in your current housing situation? How can those issues be resolved?

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---

3. Is it possible/safe to stay in your current housing unit? What resources would you need to do that?

---

---

---

4. What other housing options do you have for the next days or weeks?

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---

Diversion is appropriate for youth. Continue on to page 2.

Diversion is not appropriate for youth. Begin shelter intake.

S A F E T Y  O F  L O C A T I O N	4				
	3				
	2				
	1				
		1 (not strong)	2 (moderately strong)	3 (strong)	4 (very strong)

**STRENGTH OF RELATIONSHIP**

Name: \_\_\_\_\_

Contact Info: \_\_\_\_\_

CM Contacted: \_\_\_\_\_

Name: \_\_\_\_\_

Contact Info: \_\_\_\_\_

CM contacted: \_\_\_\_\_

Name: \_\_\_\_\_

Contact Info: \_\_\_\_\_

CM contacted: \_\_\_\_\_

Name: \_\_\_\_\_

Contact Info: \_\_\_\_\_

CM contacted: \_\_\_\_\_

Will having a youth stay with me jeopardize my current housing stability? \_\_\_\_\_

Youth can stay in my residence for \_\_\_\_\_ (days/weeks/months)

Youth will connect with Youth Outreach Program \_\_\_\_\_



**DIVERSION PROVIDER INTERVIEW FORM – YOUTH OUTREACH PROGRAM**

I can provide youth with the following (check all that apply):

- A bed to sleep in
- Running water
- Access to bathroom
- Access to shower
- Access to Breakfast
- Access to Lunch
- Access to Dinner
- Access to Laundry
- Access to internet
- Access to computer
- Transportation
- Help with job search assistance
- Help with finding an apartment
- Help with re-enrolling in school/applying to college
- Help with daily living skills (cooking, budgeting, paying bills, house cleaning)

I need assistance with the following:

Rental Assistance Plan: \_\_\_\_\_

Utilities Assistance Plan: \_\_\_\_\_

Money for groceries Plan: \_\_\_\_\_

Grocery Assistance Plan: \_\_\_\_\_

Assistance with communication / talking without arguing  
Plan: \_\_\_\_\_

Getting approval from landlord/parent/property owner to have youth stay with me  
Plan: \_\_\_\_\_

What would need to change in order for the youth to stay with me indefinitely:

---

---

---

---

**YOUTH OUTREACH PROGRAM - CASE PLAN CONFERENCING TOOL**

Date of Meeting: \_\_\_\_\_

**Diversion Provider**

I will provide:

I will receive assistance with:

Youth will leave house by \_\_\_\_\_ into \_\_\_\_\_

**Support Provider**

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

I will provide the following:

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

I will provide the following:

**Youth Case Plan**

I will do the following:

I will need assistance with:

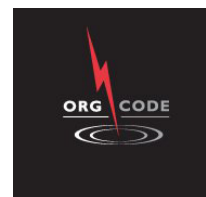
**Vulnerability Index -  
Service Prioritization Decision Assistance Tool  
(VI-SPDAT)**

**Prescreen Triage Tool for Single Adults**

**AMERICAN VERSION 2.01**

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SOLUTIONS**



## Welcome to the SPDAT Line of Products

The Service Prioritization Decision Assistance Tool (SPDAT) has been around in various incarnations for over a decade, before being released to the public in 2010. Since its initial release, the use of the SPDAT has been expanding exponentially and is now used in over one thousand communities across the United States, Canada, and Australia.

More communities using the tool means there is an unprecedented demand for versions of the SPDAT, customized for specific client groups or types of users. With the release of SPDAT V4, there have been more current versions of SPDAT products than ever before.

### VI-SPDAT Series

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) was developed as a pre-screening tool for communities that are very busy and do not have the resources to conduct a full SPDAT assessment for every client. It was made in collaboration with Community Solutions, creators of the Vulnerability Index, as a brief survey that can be conducted to quickly determine whether a client has high, moderate, or low acuity. The use of this survey can help prioritize which clients should be given a full SPDAT assessment first. Because it is a self-reported survey, no special training is required to use the VI-SPDAT.

#### **Current versions available:**

- VI-SPDAT V 2.0 for Individuals
- VI-SPDAT V 2.0 for Families
- VI-SPDAT V 1.0 for Youth

All versions are available online at

[www.orgcode.com/products/vi-spdatt/](http://www.orgcode.com/products/vi-spdatt/)

### SPDAT Series

The Service Prioritization Decision Assistance Tool (SPDAT) was developed as an assessment tool for front-line workers at agencies that work with homeless clients to prioritize which of those clients should receive assistance first. The SPDAT tools are also designed to help guide case management and improve housing stability outcomes. They provide an in-depth assessment that relies on the assessor's ability to interpret responses and corroborate those with evidence. As a result, this tool may only be used by those who have received proper, up-to-date training provided by OrgCode Consulting, Inc. or an OrgCode certified trainer.

#### **Current versions available:**

- SPDAT V 4.0 for Individuals
- SPDAT V 2.0 for Families
- SPDAT V 1.0 for Youth

Information about all versions is available online at

[www.orgcode.com/products/spdat/](http://www.orgcode.com/products/spdat/)

## SPDAT Training Series

To use the SPDAT, training by OrgCode or an OrgCode certified trainer is required. We provide training on a wide variety of topics over a variety of mediums.

The full-day in-person SPDAT Level 1 training provides you the opportunity to bring together as many people as you want to be trained for one low fee. The webinar training allows for a maximum of 15 different computers to be logged into the training at one time. We also offer online courses for individuals that you can do at your own speed.

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- Motivational Interviewing
- Objective-Based Interactions

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## Administration

<b>Interviewer's Name</b>	<b>Agency</b>	
_____	_____	
<b>Survey Date</b>	<b>Survey Time</b>	<b>Survey Location</b>
DD/MM/YYYY ___/___/____	___:___	_____

## Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only “Yes,” “No,” or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

## Basic Information

<b>First Name</b>	<b>Nickname</b>		
_____	_____		
<b>In what language do you feel best able to express yourself?</b> _____			
<b>Date of Birth</b>	<b>Age</b>	<b>Social Security Number</b>	<b>Consent to participate</b>
DD/MM/YYYY ___/___/____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

**SCORE:**

## A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

- Shelters
- Transitional Housing
- Safe Haven
- Outdoors**
- Other (specify):**

**Refused**

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

**SCORE:**

2. How long has it been since you lived in permanent stable housing? \_\_\_\_\_

Refused

3. In the last three years, how many times have you been homeless? \_\_\_\_\_

Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

**SCORE:**

## B. Risks

4. In the past six months, how many times have you...

a) Received health care at an emergency department/room? \_\_\_\_\_

Refused

b) Taken an ambulance to the hospital? \_\_\_\_\_

Refused

c) Been hospitalized as an inpatient? \_\_\_\_\_

Refused

d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? \_\_\_\_\_

Refused

e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? \_\_\_\_\_

Refused

f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? \_\_\_\_\_

Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

**SCORE:**

5. Have you been attacked or beaten up since you've become homeless?  Y  N  Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.

**SCORE:**

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?  **Y**  N  Refused

IF "YES," THEN SCORE 1 FOR **LEGAL ISSUES**.

SCORE:

8. Does anybody force or trick you to do things that you do not want to do?  **Y**  N  Refused

9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?  **Y**  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF EXPLOITATION**.

SCORE:

### C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?  **Y**  N  Refused

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?  Y  **N**  Refused

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR **MONEY MANAGEMENT**.

SCORE:

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?  Y  **N**  Refused

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY**.

SCORE:

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Y  **N**  Refused

IF "NO," THEN SCORE 1 FOR **SELF-CARE**.

SCORE:

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?  **Y**  N  Refused

IF "YES," THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS**.

SCORE:



## D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?  Y  N  Refused
16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Y  N  Refused
17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?  Y  N  Refused
18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Y  N  Refused
19. When you are sick or not feeling well, do you avoid getting help?  Y  N  Refused
20. *FOR FEMALE RESPONDENTS ONLY:* Are you currently pregnant?  Y  N  N/A or Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH**.

SCORE:

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?  Y  N  Refused
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern?  Y  N  Refused
- b) A past head injury?  Y  N  Refused
- c) A learning disability, developmental disability, or other impairment?  Y  N  Refused
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

IF THE RESPONDENT SCORED 1 FOR **PHYSICAL HEALTH** AND 1 FOR **SUBSTANCE USE** AND 1 FOR **MENTAL HEALTH**, SCORE 1 FOR **TRI-MORBIDITY**.

SCORE:

**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

SINGLE ADULTS

AMERICAN VERSION 2.01

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?  Y  N  Refused

26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.** **SCORE:**

27. **YES OR NO:** Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?  Y  N  Refused

**IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.** **SCORE:**

### Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/1	<b>Score: Recommendation:</b> 0-3: no housing intervention 4-7: an assessment for Rapid Re-Housing 8+: an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	/2	
B. RISKS	/4	
C. SOCIALIZATION & DAILY FUNCTIONS	/4	
D. WELLNESS	/6	
<b>GRAND TOTAL:</b>	/17	

### Follow-Up Questions

<b>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</b>	place: _____ time: ___ : ___ or _____
<b>Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?</b>	phone: (____) _____ - _____ email: _____
<b>Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

## Appendix A: About the VI-SPDAT

The HEARTH Act and federal regulations require communities to have an assessment tool for coordinated entry - and the VI-SPDAT and SPDAT meet these requirements. Many communities have struggled to comply with this requirement, which demands an investment of considerable time, resources and expertise. Others are making it up as they go along, using “gut instincts” in lieu of solid evidence. Communities need practical, evidence-informed tools that enhance their ability to satisfy federal regulations and quickly implement an effective approach to access and assessment. The VI-SPDAT is a first-of-its-kind tool designed to fill this need, helping communities end homelessness in a quick, strategic fashion.

### The VI-SPDAT

The VI-SPDAT was initially created by combining the elements of the Vulnerability Index which was created and implemented by Community Solutions broadly in the 100,000 Homes Campaign, and the SPDAT Prescreen Instrument that was part of the Service Prioritization Decision Assistance Tool. The combination of these two instruments was performed through extensive research and development, and testing. The development process included the direct voice of hundreds of persons with lived experience.

The VI-SPDAT examines factors of current vulnerability and future housing stability. It follows the structure of the SPDAT assessment tool, and is informed by the same research backbone that supports the SPDAT - almost 300 peer reviewed published journal articles, government reports, clinical and quasi-clinical assessment tools, and large data sets. The SPDAT has been independently tested, as well as internally reviewed. The data overwhelmingly shows that when the SPDAT is used properly, housing outcomes are better than when no assessment tool is used.

The VI-SPDAT is a triage tool. It highlights areas of higher acuity, thereby helping to inform the type of support and housing intervention that may be most beneficial to improve long term housing outcomes. It also helps inform the order - or priority - in which people should be served. The VI-SPDAT does not make decisions; it informs decisions. The VI-SPDAT provides data that communities, service providers, and people experiencing homelessness can use to help determine the best course of action next.

### Version 2

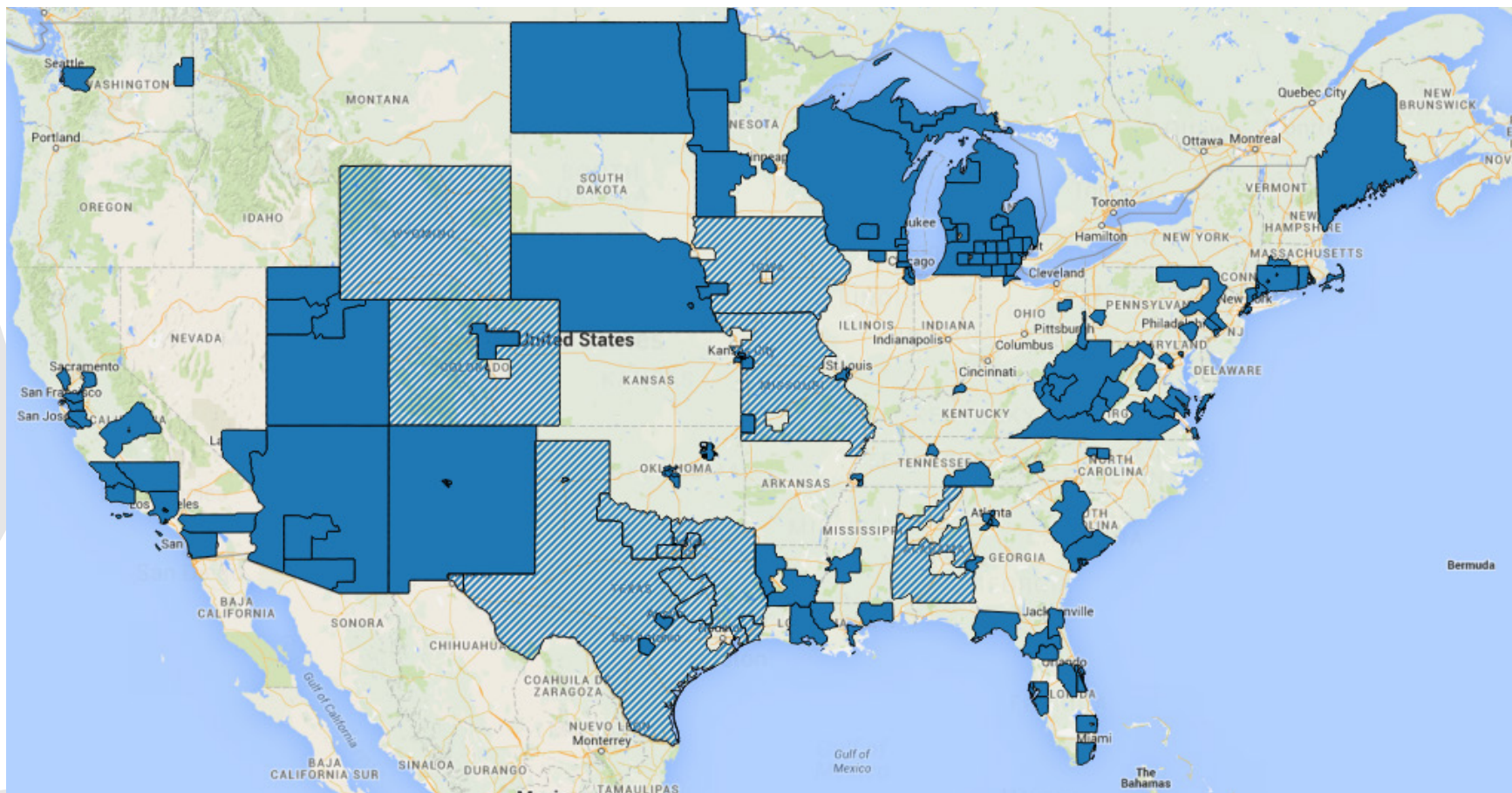
Version 2 builds upon the success of Version 1 of the VI-SPDAT with some refinements. Starting in August 2014, a survey was launched of existing VI-SPDAT users to get their input on what should be amended, improved, or maintained in the tool. Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.

You will notice some differences in Version 2 compared to Version 1. Namely:

- it is shorter, usually taking less than 7 minutes to complete;
- subjective elements through observation are now gone, which means the exact same instrument can be used over the phone or in-person;
- medical, substance use, and mental health questions are all refined;
- you can now explicitly see which component of the full SPDAT each VI-SPDAT question links to; and,
- the scoring range is slightly different (Don't worry, we can provide instructions on how these relate to results from Version 1).

## Appendix B: Where the VI-SPDAT is being used in the United States

Since the VI-SPDAT is provided completely free of charge, and no training is required, any community is able to use the VI-SPDAT without the explicit permission of Community Solutions or OrgCode Consulting, Inc. As a result, the VI-SPDAT is being used in more communities than we know of. It is also being used in Canada and Australia.



A partial list of continua of care (CoCs) in the US where we know the VI-SPDAT is being used includes:

**Alabama**

- Parts of Alabama Balance of State

**Arizona**

- Statewide

**California**

- San Jose/Santa Clara City & County
- San Francisco
- Oakland/Alameda County
- Sacramento City & County
- Richmond/Contra Costa County
- Watsonville/Santa Cruz City & County
- Fresno/Madera County
- Napa City & County
- Los Angeles City & County
- San Diego
- Santa Maria/Santa Barbara County
- Bakersfield/Kern County
- Pasadena
- Riverside City & County
- Glendale
- San Luis Obispo County

**Colorado**

- Metropolitan Denver Homeless Initiative
- Parts of Colorado Balance of State

**Connecticut**

- Hartford
- Bridgeport/Stratford/Fairfield
- Connecticut Balance of State
- Norwalk/Fairfield County
- Stamford/Greenwich
- City of Waterbury

**District of Columbia**

- District of Columbia

**Florida**

- Sarasota/Bradenton/Manatee, Sarasota Counties
- Tampa/Hillsborough County
- St. Petersburg/Clearwater/Largo/Pinellas County
- Tallahassee/Leon County
- Orlando/Orange, Osceola, Seminole Counties
- Gainesville/Alachua, Putnam Counties
- Jacksonville-Duval, Clay Counties
- Palm Bay/Melbourne/Brevard County
- Ocala/Marion County
- Miami/Dade County
- West Palm Beach/Palm Beach County

**Georgia**

- Atlanta County
- Fulton County
- Columbus-Muscogee/Russell County
- Marietta/Cobb County
- DeKalb County

**Hawaii**

- Honolulu

**Illinois**

- Rockford/Winnebago, Boone Counties
- Waukegan/North Chicago/Lake County
- Chicago
- Cook County

**Iowa**

- Parts of Iowa Balance of State

**Kansas**

- Kansas City/Wyandotte County

**Kentucky**

- Louisville/Jefferson County

**Louisiana**

- Lafayette/Acadiana
- Shreveport/Bossier/Northwest
- New Orleans/Jefferson Parish
- Baton Rouge
- Alexandria/Central Louisiana CoC

**Massachusetts**

- Cape Cod Islands
- Springfield/Holyoke/Chicopee/Westfield/Hampden County

**Maryland**

- Baltimore City
- Montgomery County

**Maine**

- Statewide

**Michigan**

- Statewide

**Minnesota**

- Minneapolis/Hennepin County
- Northwest Minnesota
- Moorhead/West Central Minnesota
- Southwest Minnesota

**Missouri**

- St. Louis County
- St. Louis City
- Joplin/Jasper, Newton Counties
- Kansas City/Independence/Lee's Summit/Jackson County
- Parts of Missouri Balance of State

**Mississippi**

- Jackson/Rankin, Madison Counties
- Gulf Port/Gulf Coast Regional

**North Carolina**

- Winston Salem/Forsyth County
- Asheville/Buncombe County
- Greensboro/High Point

**North Dakota**

- Statewide

**Nebraska**

- Statewide

**New Mexico**

- Statewide

**Nevada**

- Las Vegas/Clark County

**New York**

- New York City
- Yonkers/Mount Vernon/New Rochelle/Westchester County

**Ohio**

- Toledo/Lucas County
- Canton/Massillon/Alliance/Stark County

**Oklahoma**

- Tulsa City & County/Broken Arrow
- Oklahoma City
- Norman/Cleveland County

**Pennsylvania**

- Philadelphia
- Lower Marion/Norristown/Abington/Montgomery County
- Allentown/Northeast Pennsylvania
- Lancaster City & County
- Bristol/Bensalem/Bucks County
- Pittsburgh/McKeesport/Penn Hills/Allegheny County

**Rhode Island**

- Statewide

**South Carolina**

- Charleston/Low Country
- Columbia/Midlands

**Tennessee**

- Chattanooga/Southeast Tennessee
- Memphis/Shelby County
- Nashville/Davidson County

**Texas**

- San Antonio/Bexar County
- Austin/Travis County
- Dallas City & County/Irving
- Fort Worth/Arlington/Tarrant County
- El Paso City and County
- Waco/McLennan County
- Texas Balance of State
- Amarillo
- Wichita Falls/Wise, Palo Pinto, Wichita, Archer Counties
- Bryan/College Station/Brazos Valley
- Beaumont/Port Arthur/South East Texas

**Utah**

- Statewide

**Virginia**

- Richmond/Henrico, Chesterfield, Hanover Counties
- Roanoke City & County/Salem
- Virginia Beach
- Portsmouth
- Virginia Balance of State
- Arlington County

**Washington**

- Seattle/King County
- Spokane City & County

**Wisconsin**

- Statewide

**West Virginia**

- Statewide

**Wyoming**

- Wyoming Statewide is in the process of implementing

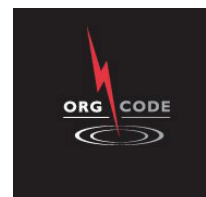
**Vulnerability Index -  
Service Prioritization Decision Assistance Tool  
(VI-SPDAT)**

**Prescreen Triage Tool for Families**

**AMERICAN VERSION 2.0**

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1 (800) 355-0420 [info@orgcode.com](mailto:info@orgcode.com) [www.orgcode.com](http://www.orgcode.com)

**COMMUNITY  
SOLUTIONS**



## Welcome to the SPDAT Line of Products

The Service Prioritization Decision Assistance Tool (SPDAT) has been around in various incarnations for over a decade, before being released to the public in 2010. Since its initial release, the use of the SPDAT has been expanding exponentially and is now used in over one thousand communities across the United States, Canada, and Australia.

More communities using the tool means there is an unprecedented demand for versions of the SPDAT, customized for specific client groups or types of users. With the release of SPDAT V4, there have been more current versions of SPDAT products than ever before.

### VI-SPDAT Series

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) was developed as a pre-screening tool for communities that are very busy and do not have the resources to conduct a full SPDAT assessment for every client. It was made in collaboration with Community Solutions, creators of the Vulnerability Index, as a brief survey that can be conducted to quickly determine whether a client has high, moderate, or low acuity. The use of this survey can help prioritize which clients should be given a full SPDAT assessment first. Because it is a self-reported survey, no special training is required to use the VI-SPDAT.

#### **Current versions available:**

- VI-SPDAT V 2.0 for Individuals
- VI-SPDAT V 2.0 for Families
- VI-SPDAT V 2.0 for Youth

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## Administration

<b>Interviewer's Name</b>	<b>Agency</b>
_____	_____
<b>Survey Date</b>	
DD/MM/YYYY ____/____/____	

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- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

## Basic Information

<b>PARENT 1</b>	<b>First Name</b>	<b>Nickname</b>
	_____	_____
	<b>In what language do you feel best able to express yourself?</b> _____	
	<b>Age</b>	<b>Last 4 digits of Social Security Number</b>
	_____	_____
	<b>Consent to participate</b>	
	<input type="radio"/> Yes <input type="radio"/> No	
<b>PARENT 2</b>	<input type="checkbox"/> No second parent currently part of the household	
	<b>First Name</b>	<b>Nickname</b>
	_____	_____
	<b>In what language do you feel best able to express yourself?</b> _____	
	<b>Age</b>	<b>Last 4 digits of Social Security Number</b>
	_____	_____
	<b>Consent to participate</b>	
	<input type="radio"/> Yes <input type="radio"/> No	
<b>IF EITHER HEAD OF HOUSEHOLD IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.</b>		
		<b>SCORE:</b>
		<b>0</b>

## Children

1. How many children under the age of 18 are currently with you? \_\_\_\_\_  Refused
2. How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed? \_\_\_\_\_  Refused
3. **IF HOUSEHOLD INCLUDES A FEMALE:** Is any member of the family currently pregnant?  Y  N  Refused
4. Please provide a list of children's names and ages:

**First Name**

**Age**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

IF THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD AGED 11 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR **FAMILY SIZE**. **SCORE:**

IF THERE ARE TWO PARENTS WITH 3+ CHILDREN, AND/OR A CHILD AGED 6 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR **FAMILY SIZE**. **0**

## A. History of Housing and Homelessness

5. Where do you and your family sleep most frequently? (check one)
  - Shelters
  - Transitional Housing
  - Safe Haven
  - Outdoors**
  - Other (specify):** \_\_\_\_\_
  - Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1. **SCORE:**

**0**

6. How long has it been since you and your family lived in permanent stable housing? \_\_\_\_\_ Years  Refused
7. In the last three years, how many times have you and your family been homeless? \_\_\_\_\_  Refused

IF THE FAMILY HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1. **SCORE:**

**0**

## B. Risks

8. In the past six months, how many times have you or anyone in your family...

- a) Received health care at an emergency department/room?  Refused
- b) Taken an ambulance to the hospital?  Refused
- c) Been hospitalized as an inpatient?  Refused
- d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?  Refused
- e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told them that they must move along?  Refused
- f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between?  Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

SCORE:

0

- 9. Have you or anyone in your family been attacked or beaten up since they've become homeless?  Y  N  Refused
- 10. Have you or anyone in your family threatened to or tried to harm themselves or anyone else in the last year?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.

SCORE:

0

- 11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live?  Y  N  Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.

SCORE:

0

- 12. Does anybody force or trick you or anyone in your family to do things that you do not want to do?  Y  N  Refused
- 13. Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.

SCORE:

0

## C. Socialization & Daily Functioning

14. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money?  Y  N  Refused

15. Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?  Y  N  Refused

**IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 FOR MONEY MANAGEMENT.**

**SCORE:**

0

16. Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled?  Y  N  Refused

**IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.**

**SCORE:**

0

17. Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Y  N  Refused

**IF "NO," THEN SCORE 1 FOR SELF-CARE.**

**SCORE:**

0

18. Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted?  Y  N  Refused

**IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.**

**SCORE:**

0

## D. Wellness

19. Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family?  Y  N  Refused

20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Y  N  Refused

21. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you or anyone in your family?  Y  N  Refused

22. Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Y  N  Refused

23. When someone in your family is sick or not feeling well, does your family avoid getting medical help?  Y  N  Refused

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.**

**SCORE:**

0

## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past?  Y  N  Refused

25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

0

26. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern?  Y  N  Refused

b) A past head injury?  Y  N  Refused

c) A learning disability, developmental disability, or other impairment?  Y  N  Refused

27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

0

28. *IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH:* Does any single member of your household have a medical condition, mental health concerns, **and** experience with problematic substance use?  Y  N  N/A or Refused

IF "YES", SCORE 1 FOR **TRI-MORBIDITY**.

SCORE:

0

29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking?  Y  N  Refused

30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **MEDICATIONS**.

SCORE:

0

31. *YES OR NO:* Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced?  Y  N  Refused

IF "YES", SCORE 1 FOR **ABUSE AND TRAUMA**.

SCORE:

0

## E. Family Unit

32. Are there any children that have been removed from the family by a child protection service within the last 180 days?  Y  N  Refused
33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY LEGAL ISSUES.

SCORE:

0

34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation?  Y  N  Refused
35. Has any child in the family experienced abuse or trauma in the last 180 days?  Y  N  Refused
36. **IF THERE ARE SCHOOL-AGED CHILDREN:** Do your children attend school more often than not each week?  Y  N  N/A or Refused

IF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 36, SCORE 1 FOR NEEDS OF CHILDREN.

SCORE:

0

37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that?  Y  N  Refused
38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY STABILITY.

SCORE:

0

39. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that?  Y  N  Refused
40. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...
- a) 3 or more hours per day for children aged 13 or older?  Y  N  Refused
- b) 2 or more hours per day for children aged 12 or younger?  Y  N  Refused
41. **IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER:** Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that?  Y  N  N/A or Refused

IF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 41, SCORE 1 FOR PARENTAL ENGAGEMENT.

SCORE:

1

## Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	0 /2	<b>Score: Recommendation:</b> 0-3 no housing intervention 4-8 an assessment for Rapid Re-Housing 9+ an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	0 /2	
B. RISKS	0 /4	
C. SOCIALIZATION & DAILY FUNCTIONS	0 /4	
D. WELLNESS	0 /6	
E. FAMILY UNIT	1 /4	
<b>GRAND TOTAL:</b>	<b>1 /22</b>	

## Follow-Up Questions

<b>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</b>	place: _____ time: __ : __ or <b>Night</b>
<b>Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?</b>	phone: (____) _____ - _____ email: _____
<b>Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

## Appendix A: About the VI-SPDAT

The HEARTH Act and federal regulations require communities to have an assessment tool for coordinated entry - and the VI-SPDAT and SPDAT meet these requirements. Many communities have struggled to comply with this requirement, which demands an investment of considerable time, resources and expertise. Others are making it up as they go along, using “gut instincts” in lieu of solid evidence. Communities need a practical, evidence-informed way to satisfy federal regulations while quickly implementing an effective approach to access and assessment. The VI-SPDAT is a first-of-its-kind tool designed to fill this need, helping communities end homelessness in a quick, strategic fashion.

### The VI-SPDAT

The VI-SPDAT was initially created by combining the elements of the Vulnerability Index which was created and implemented by Community Solutions broadly in the 100,000 Homes Campaign, and the SPDAT Prescreen Instrument that was part of the Service Prioritization Decision Assistance Tool. The combination of these two instruments was performed through extensive research and development, and testing. The development process included the direct voice of hundreds of persons with lived experience.

The VI-SPDAT examines factors of current vulnerability and future housing stability. It follows the structure of the SPDAT assessment tool, and is informed by the same research backbone that supports the SPDAT - almost 300 peer reviewed published journal articles, government reports, clinical and quasi-clinical assessment tools, and large data sets. The SPDAT has been independently tested, as well as internally reviewed. The data overwhelmingly shows that when the SPDAT is used properly, housing outcomes are better than when no assessment tool is used.

The VI-SPDAT is a triage tool. It highlights areas of higher acuity, thereby helping to inform the type of support and housing intervention that may be most beneficial to improve long term housing outcomes. It also helps inform the order - or priority - in which people should be served. The VI-SPDAT does not make decisions; it informs decisions. The VI-SPDAT provides data that communities, service providers, and people experiencing homelessness can use to help determine the best course of action next.

### Version 2

Version 2 builds upon the success of Version 1 of the VI-SPDAT with some refinements. Starting in August 2014, a survey was launched of existing VI-SPDAT users to get their input on what should be amended, improved, or maintained in the tool. Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.

You will notice some differences in Version 2 compared to Version 1. Namely:

- it is shorter, usually taking less than 7 minutes to complete;
- subjective elements through observation are now gone, which means the exact same instrument can be used over the phone or in-person;
- medical, substance use, and mental health questions are all refined;
- you can now explicitly see which component of the full SPDAT each VI-SPDAT question links to; and,
- the scoring range is slightly different (Don't worry, we can provide instructions on how these relate to results from Version 1).





## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

### FAMILIES

AMERICAN VERSION 2.0

A partial list of continua of care (CoCs) in the US where we know the VI-SPDAT is being used includes:

- Parts of Alabama Balance of State
- **Arizona**
  - Statewide
- **California**
  - San Jose/Santa Clara City & County
  - San Francisco
  - Oakland/Alameda County
  - Sacramento City & County
  - Richmond/Contra Costa County
  - Watsonville/Santa Cruz City & County
  - Fresno/Madera County
  - Napa City & County
  - Los Angeles City & County
  - San Diego
  - Santa Maria/Santa Barbara County
  - Bakersfield/Kern County
  - Pasadena
  - Riverside City & County
  - Glendale
  - San Luis Obispo County
- **Colorado**
  - Metropolitan Denver Homeless Initiative
  - Parts of Colorado Balance of State
- **Connecticut**
  - Hartford
  - Bridgeport/Stratford/Fairfield
- Connecticut Balance of State
- Norwalk/Fairfield County
- Stamford/Greenwich
- City of Waterbury

### District of Columbia

- District of Columbia

### Florida

- Sarasota/Bradenton/Manatee, Sarasota Counties
- Tampa/Hillsborough County
- St. Petersburg/Clearwater/Largo/Pinellas County
- Tallahassee/Leon County
- Orlando/Orange, Osceola, Seminole Counties
- Gainesville/Alachua, Putnam Counties
- Jacksonville-Duval, Clay Counties
- Palm Bay/Melbourne/Brevard County
- Ocala/Marion County
- Miami/Dade County
- West Palm Beach/Palm Beach County

### Georgia

- Atlanta County
- Fulton County
- Columbus-Muscogee/Russell County
- Marietta/Cobb County
- DeKalb County

### Hawaii

- Honolulu

### Illinois

- Rockford/Winnebago, Boone Counties
- Waukegan/North Chicago/Lake County
- Chicago
- Cook County

### Iowa

- Parts of Iowa Balance of State

### Kansas

- Kansas City/Wyandotte County

### Kentucky

- Louisville/Jefferson County

### Louisiana

- Lafayette/Acadiana
- Shreveport/Bossier/Northwest
- New Orleans/Jefferson Parish
- Baton Rouge
- Alexandria/Central Louisiana CoC

### Massachusetts

- Cape Cod Islands
- Springfield/Holyoke/Chicopee/Westfield/Hampden County

### Maryland

- Baltimore City
- Montgomery County

### Maine

- Statewide

### Michigan

- Statewide

### Minnesota

- Minneapolis/Hennepin County
- Northwest Minnesota
- Moorhead/West Central Minnesota
- Southwest Minnesota

### Missouri

- St. Louis County
- St. Louis City
- Joplin/Jasper, Newton Counties

- Kansas City/Independence/Lee's Summit/Jackson County
- Parts of Missouri Balance of State

### Mississippi

- Jackson/Rankin, Madison Counties

- Gulf Port/Gulf Coast Regional

### North Carolina

- Winston Salem/Forsyth County
- Asheville/Buncombe County
- Greensboro/High Point

### North Dakota

- Statewide

### Nebraska

- Statewide

### New Mexico

- Statewide

### Nevada

- Las Vegas/Clark County

### New York

- New York City
- Yonkers/Mount Vernon/New Rochelle/Westchester County

### Ohio

- Toledo/Lucas County
- Canton/Massillon/Alliance/Stark County

### Oklahoma

- Tulsa City & County/Broken Arrow

### Virginia

- Richmond/Henrico, Chesterfield, Hanover Counties

### Pennsylvania

- Philadelphia
- Lower Marion/Norristown/Abington/Montgomery County
- Allentown/Northeast Pennsylvania

- Lancaster City & County

- Bristol/Bensalem/Bucks County

- Pittsburgh/McKeesport/Penn Hills/Allegheny County

### Rhode Island

- Statewide

### South Carolina

- Charleston/Low Country
- Columbia/Midlands

### Tennessee

- Chattanooga/Southeast Tennessee
- Memphis/Shelby County
- Nashville/Davidson County

### Texas

- San Antonio/Bexar County
- Austin/Travis County
- Dallas City & County/Irving
- Fort Worth/Arlington/Tarrant County
- El Paso City and County
- Waco/McLennan County
- Texas Balance of State
- Amarillo
- Wichita Falls/Wise, Palo Pinto, Wichita, Archer Counties
- Bryan/College Station/Brazos Valley
- Beaumont/Port Arthur/South East Texas

### Utah

- Statewide

### West Virginia

- Richmond/Henrico, Chesterfield, Hanover Counties
- Roanoke City & County/Salem
- Virginia Beach
- Portsmouth
- Virginia Balance of State
- Arlington County

### Washington

- Seattle/King County
- Spokane City & County

### Wisconsin

- Statewide

### West Virginia

- Statewide

### Wyoming

- Wyoming Statewide is in the process of implementing

**Transition Age Youth -  
Vulnerability Index -  
Service Prioritization Decision Assistance Tool  
(TAY-VI-SPDAT)**

**“Next Step Tool for Homeless Youth”**

**AMERICAN VERSION 1.0**

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Eric Rice, PhD

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## Welcome to the SPDAT Line of Products

The Service Prioritization Decision Assistance Tool (SPDAT) has been around in various incarnations for over a decade, before being released to the public in 2010. Since its initial release, the use of the SPDAT has been expanding exponentially and is now used in over one thousand communities across the United States, Canada, and Australia.

More communities using the tool means there is an unprecedented demand for versions of the SPDAT, customized for specific client groups or types of users. With the release of SPDAT V4, there have been more current versions of SPDAT products than ever before.

### VI-SPDAT Series

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) was developed as a pre-screening tool for communities that are very busy and do not have the resources to conduct a full SPDAT assessment for every client. It was made in collaboration with Community Solutions, creators of the Vulnerability Index, as a brief survey that can be conducted to quickly determine whether a client has high, moderate, or low acuity. The use of this survey can help prioritize which clients should be given a full SPDAT assessment first. Because it is a self-reported survey, no special training is required to use the VI-SPDAT.

#### **Current versions available:**

- VI-SPDAT V 2.0
- Family VI-SPDAT V 2.0
- Next Step Tool for Homeless Youth V 1.0

All versions are available online at

[www.orgcode.com/products/vi-spdatt/](http://www.orgcode.com/products/vi-spdatt/)

### SPDAT Series

The Service Prioritization Decision Assistance Tool (SPDAT) was developed as an assessment tool for front-line workers at agencies that work with homeless clients to prioritize which of those clients should receive assistance first. The SPDAT tools are also designed to help guide case management and improve housing stability outcomes. They provide an in-depth assessment that relies on the assessor's ability to interpret responses and corroborate those with evidence. As a result, this tool may only be used by those who have received proper, up-to-date training provided by OrgCode Consulting, Inc. or an OrgCode certified trainer.

#### **Current versions available:**

- SPDAT V 4.0 for Individuals
- F-SPDAT V 2.0 for Families
- Y-SPDAT V 1.0 for Youth

Information about all versions is available online at

[www.orgcode.com/products/spdat/](http://www.orgcode.com/products/spdat/)

## SPDAT Training Series

To use the SPDAT assessment product, training by OrgCode or an OrgCode certified trainer is required. We provide training on a wide variety of topics over a variety of mediums.

The full-day in-person SPDAT Level 1 training provides you the opportunity to bring together as many people as you want to be trained for one low fee. The webinar training allows for a maximum of 15 different computers to be logged into the training at one time. We also offer online courses for individuals that you can do at your own speed.

The training gives you the manual, case studies, application to current practice, a review of each component of the tool, conversation guidance with prospective clients – and more!

### **Current SPDAT training available:**

- Level 0 SPDAT Training: VI-SPDAT for Frontline Workers
- Level 1 SPDAT Training: SPDAT for Frontline Workers
- Level 2 SPDAT Training: SPDAT for Supervisors
- Level 3 SPDAT Training: SPDAT for Trainers

### **Other related training available:**

- Excellence in Housing-Based Case Management
- Coordinated Access & Common Assessment
- Motivational Interviewing
- Objective-Based Interactions

More information about SPDAT training, including pricing, is available online at

<http://www.orgcode.com/product-category/training/spdat/>

## The TAY-VI-SPDAT – The Next Step Tool for Homeless Youth

OrgCode Consulting, Inc. and Community Solutions joined forces with the Corporation for Supportive Housing (CSH) to combine the best parts of products and expertise to create one streamlined triage tool designed specifically for youth aged 24 or younger.

## Administration

<b>Interviewer's Name</b> _____	<b>Agency</b> _____	<input type="checkbox"/> Team <input type="checkbox"/> Staff <input type="checkbox"/> Volunteer
<b>Survey Date</b> DD/MM/YYYY ___/___/____	<b>Survey Time</b> ___ : ___	<b>Survey Location</b> _____

## Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only “Yes,” “No,” or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

## Basic Information

<b>First Name</b> _____	<b>Nickname</b> _____	<b>Last Name</b> _____
<b>In what language do you feel best able to express yourself?</b> _____		
<b>Date of Birth</b> DD/MM/YYYY ___/___/____	<b>Age</b> _____	<b>Social Security Number</b> _____
		<b>Consent to participate</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

IF THE PERSON IS 17 YEARS OF AGE OR LESS, THEN SCORE 1.

**SCORE:**

## A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

- Shelters                       **Couch surfing**                       **Other (specify):**  
 Transitional Housing     **Outdoors**  
 Safe Haven                       **Refused**                      \_\_\_\_\_

**IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.** **SCORE:**

2. How long has it been since you lived in permanent stable housing? \_\_\_\_\_  Refused

3. In the last three years, how many times have you been homeless? \_\_\_\_\_  Refused

**IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.** **SCORE:**

## B. Risks

4. In the past six months, how many times have you...

- a) Received health care at an emergency department/room? \_\_\_\_\_  Refused  
 b) Taken an ambulance to the hospital? \_\_\_\_\_  Refused  
 c) Been hospitalized as an inpatient? \_\_\_\_\_  Refused  
 d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? \_\_\_\_\_  Refused  
 e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? \_\_\_\_\_  Refused  
 f) Stayed one or more nights in a holding cell, jail, prison or juvenile detention, whether it was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? \_\_\_\_\_  Refused

**IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.** **SCORE:**

5. Have you been attacked or beaten up since you've become homeless?  **Y**  N  Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year?  **Y**  N  Refused

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.** **SCORE:**

## NEXT STEP TOOL FOR HOMELESS YOUTH

SINGLE YOUTH

AMERICAN VERSION 1.0

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?  **Y**  N  Refused
8. Were you ever incarcerated when younger than age 18?  **Y**  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **LEGAL ISSUES**.

**SCORE:**

9. Does anybody force or trick you to do things that you do not want to do?  **Y**  N  Refused
10. Do you ever do things that may be considered to be risky like exchange sex for money, food, drugs, or a place to stay, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?  **Y**  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF EXPLOITATION**.

**SCORE:**

### C. Socialization & Daily Functioning

11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?  **Y**  N  Refused
12. Do you get any money from the government, an inheritance, an allowance, working under the table, a regular job, or anything like that?  Y  **N**  Refused

IF "YES" TO QUESTION 11 OR "NO" TO QUESTION 12, THEN SCORE 1 FOR **MONEY MANAGEMENT**.

**SCORE:**

13. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?  Y  **N**  Refused

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY**.

**SCORE:**

14. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Y  **N**  Refused

IF "NO," THEN SCORE 1 FOR **SELF-CARE**.

**SCORE:**



15. Is your current lack of stable housing...

- a) Because you ran away from your family home, a group home or a foster home?  **Y**  N  Refused
- b) Because of a difference in religious or cultural beliefs from your parents, guardians or caregivers?  **Y**  N  Refused
- c) Because your family or friends caused you to become homeless?  **Y**  N  Refused
- d) Because of conflicts around gender identity or sexual orientation?  **Y**  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS**.

**SCORE:**

- e) Because of violence at home between family members?  **Y**  N  Refused
- f) Because of an unhealthy or abusive relationship, either at home or elsewhere?  **Y**  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **ABUSE/TRAUMA**.

**SCORE:**

## D. Wellness

- 16. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?  **Y**  N  Refused
- 17. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  **Y**  N  Refused
- 18. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?  **Y**  N  Refused
- 19. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  **Y**  N  Refused
- 20. When you are sick or not feeling well, do you avoid getting medical help?  **Y**  N  Refused
- 21. Are you currently pregnant, have you ever been pregnant, or have you ever gotten someone pregnant?  **Y**  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH**.

**SCORE:**

**NEXT STEP TOOL FOR HOMELESS YOUTH**

SINGLE YOUTH

AMERICAN VERSION 1.0

22. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?  **Y**  N  Refused
23. Will drinking or drug use make it difficult for you to stay housed or afford your housing?  **Y**  N  Refused
24. If you've ever used marijuana, did you ever try it at age 12 or younger?  **Y**  N  Refused

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE.**

**SCORE:**

25. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

- a) A mental health issue or concern?  **Y**  N  Refused
- b) A past head injury?  **Y**  N  Refused
- c) A learning disability, developmental disability, or other impairment?  **Y**  N  Refused

26. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?  **Y**  N  Refused

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH.**

**SCORE:**

**IF THE RESPONENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY.**

**SCORE:**

27. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?  **Y**  N  Refused
28. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?  **Y**  N  Refused

**IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.**

**SCORE:**

## Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/1	<b>Score: Recommendation:</b> 0-3: no moderate or high intensity services be provided at this time 4-7: assessment for time-limited supports with moderate intensity 8+: assessment for long-term housing with high service intensity
A. HISTORY OF HOUSING & HOMELESSNESS	/2	
B. RISKS	/4	
C. SOCIALIZATION & DAILY FUNCTIONS	/5	
D. WELLNESS	/5	
<b>GRAND TOTAL:</b>	<b>/17</b>	

## Follow-Up Questions

<b>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</b>	place: _____ time: ___ : ___ or
<b>Is there a phone number and/or email where someone can get in touch with you or leave you a message?</b>	phone: (____) _____ - _____ email: _____
<b>Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the youth at some point in the future
- safety planning

## Appendix A: About the TAY-VI-SPDAT

The HEARTH Act and federal regulations require communities to have an assessment tool for coordinated entry - and the VI-SPDAT and SPDAT meet these requirements. Many communities have struggled to comply with this requirement, which demands an investment of considerable time, resources and expertise. Others are making it up as they go along, using “gut instincts” in lieu of solid evidence. Communities need practical, evidence-informed tools that enhance their ability to satisfy federal regulations and quickly implement an effective approach to access and assessment. The VI-SPDAT is a first-of-its-kind tool designed to fill this need, helping communities end homelessness in a quick, strategic fashion.

### The VI-SPDAT

The VI-SPDAT was initially created by combining the elements of the Vulnerability Index which was created and implemented by Community Solutions broadly in the 100,000 Homes Campaign, and the SPDAT Prescreen Instrument that was part of the Service Prioritization Decision Assistance Tool. The combination of these two instruments was performed through extensive research and development, and testing. The development process included the direct voice of hundreds of persons with lived experience.

The VI-SPDAT examines factors of current vulnerability and future housing stability. It follows the structure of the SPDAT assessment tool, and is informed by the same research backbone that supports the SPDAT - almost 300 peer reviewed published journal articles, government reports, clinical and quasi-clinical assessment tools, and large data sets. The SPDAT has been independently tested, as well as internally reviewed. The data overwhelmingly shows that when the SPDAT is used properly, housing outcomes are better than when no assessment tool is used.

The VI-SPDAT is a triage tool. It highlights areas of higher acuity, thereby helping to inform the type of support and housing intervention that may be most beneficial to improve long term housing outcomes. It also helps inform the order - or priority - in which people should be served. The VI-SPDAT does not make decisions; it informs decisions. The VI-SPDAT provides data that communities, service providers, and people experiencing homelessness can use to help determine the best course of action next.

### The Youth – Transition Age Youth Tool from CSH

Released in May 2013, the Corporation for Supportive Housing (CSH) partnered with Dr. Eric Rice, Assistant Professor at the University of Southern California (USC) School of Social Work, to develop a triage tool that targets homeless Transition Age Youth (TAY) for permanent supportive housing. It consists of six items associated with long-term homelessness (five or more years) among transition-aged youth (age 18-24).

### Version 2 of the VI-SPDAT

Version 2 builds upon the success of Version 1 of the VI-SPDAT with some refinements. Starting in August 2014, a survey was launched of existing VI-SPDAT users to get their input on what should be amended, improved, or maintained in the tool.

Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.

## The TAY-VI-SPDAT – The Next Step Tool for Homeless Youth

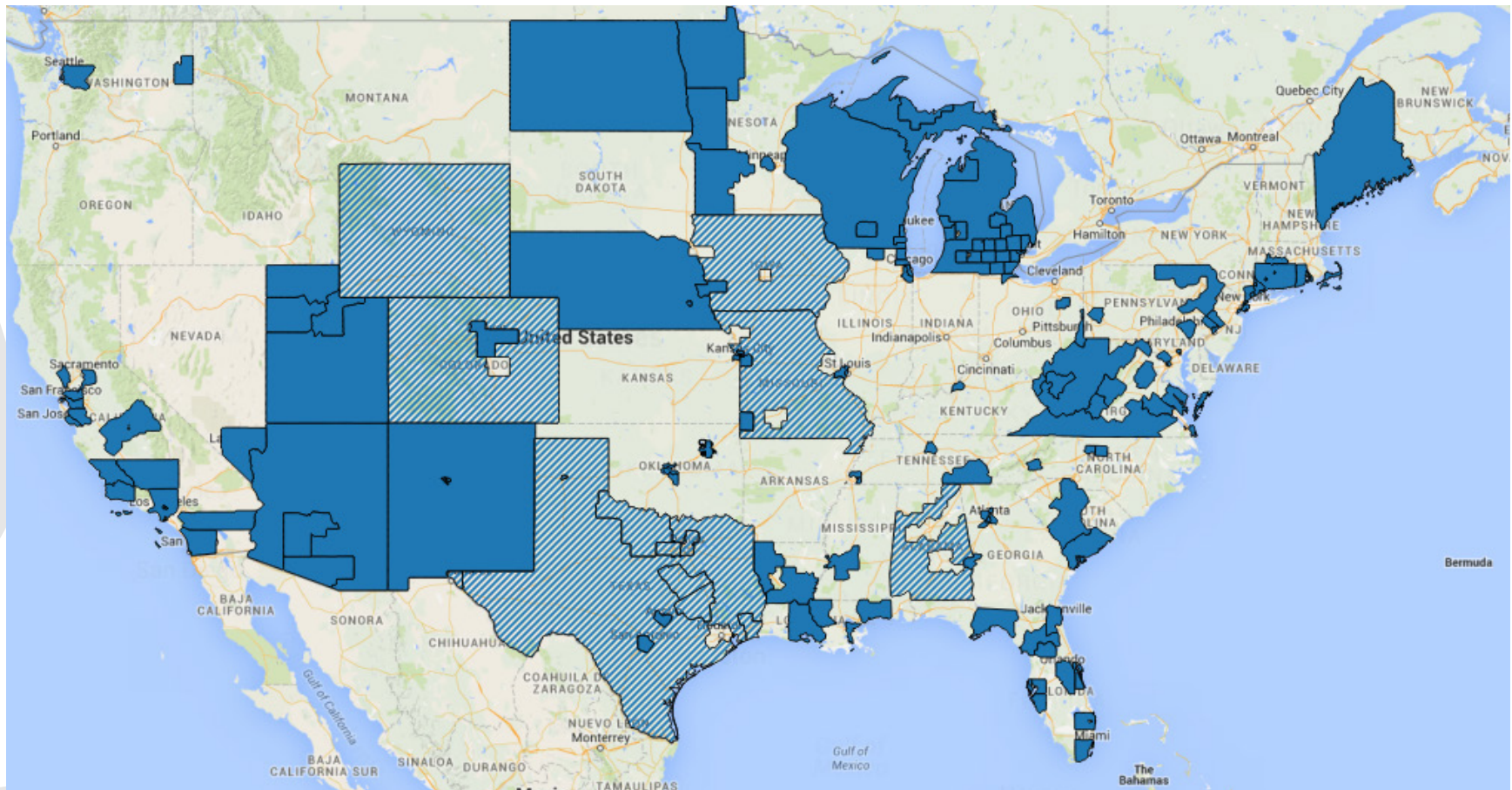
One piece of feedback was the growing concern that youth tended to score lower on the VI-SPDAT, since the Vulnerability Index assesses risk of mortality which is less prevalent among younger populations. So, in version 2 of the VI-SPDAT, OrgCode Consulting, Inc. and Community Solutions joined forces with CSH to combine the best parts of the TAY, the VI, and the SPDAT to create one streamlined triage tool designed specifically for youth aged 24 or younger.

If you are familiar with the VI-SPDAT, you will notice some differences in the TAY-VI-SPDAT compared to VI-SPDAT version 1. Namely:

- it is shorter, usually taking less than 7 minutes to complete;
- subjective elements through observation are now gone, which means the exact same instrument can be used over the phone or in-person;
- medical, substance use, and mental health questions are all refined;
- you can now explicitly see which component of the full SPDAT each VI-SPDAT question links to; and,
- the scoring range is slightly different (Don't worry, we can provide instructions on how these relate to results from Version 1).

## Appendix B: Where the VI-SPDAT is being used in the United States

Since the VI-SPDAT is provided completely free of charge, and no training is required, any community is able to use the VI-SPDAT without the explicit permission of Community Solutions or OrgCode Consulting, Inc. As a result, the VI-SPDAT is being used in more communities than we know of. It is also being used in Canada and Australia.



## NEXT STEP TOOL FOR HOMELESS YOUTH

SINGLE YOUTH

AMERICAN VERSION 1.0

A partial list of continua of care (CoCs) in the US where we know the VI-SPDAT is being used includes:

### Alabama

- Parts of Alabama Balance of State

### Arizona

- Statewide

### California

- San Jose/Santa Clara City & County
- San Francisco
- Oakland/Alameda County
- Sacramento City & County
- Richmond/Contra Costa County
- Watsonville/Santa Cruz City & County
- Fresno/Madera County
- Napa City & County
- Los Angeles City & County
- San Diego
- Santa Maria/Santa Barbara County
- Bakersfield/Kern County
- Pasadena
- Riverside City & County
- Glendale
- San Luis Obispo County

### Colorado

- Metropolitan Denver Homeless Initiative
- Parts of Colorado Balance of State

### Connecticut

- Hartford
- Bridgeport/Stratford/Fairfield
- Connecticut Balance of State
- Norwalk/Fairfield County
- Stamford/Greenwich
- City of Waterbury

### District of Columbia

- District of Columbia

### Florida

- Sarasota/Bradenton/Manatee, Sarasota Counties
- Tampa/Hillsborough County
- St. Petersburg/Clearwater/Largo/Pinellas County
- Tallahassee/Leon County
- Orlando/Orange, Osceola, Seminole Counties
- Gainesville/Alachua, Putnam Counties
- Jacksonville-Duval, Clay Counties
- Palm Bay/Melbourne/Brevard County
- Ocala/Marion County
- Miami/Dade County
- West Palm Beach/Palm Beach County

### Georgia

- Atlanta County
- Fulton County
- Columbus-Muscogee/Russell County
- Marietta/Cobb County
- DeKalb County

### Hawaii

- Honolulu

### Illinois

- Rockford/Winnebago, Boone Counties
- Waukegan/North Chicago/Lake County
- Chicago
- Cook County

### Iowa

- Parts of Iowa Balance of State

### Kansas

- Kansas City/Wyandotte County

### Kentucky

- Louisville/Jefferson County

### Louisiana

- Lafayette/Acadiana
- Shreveport/Bossier/Northwest
- New Orleans/Jefferson Parish
- Baton Rouge
- Alexandria/Central Louisiana CoC

### Massachusetts

- Cape Cod Islands
- Springfield/Holyoke/Chicopee/Westfield/Hampden County

### Maryland

- Baltimore City
- Montgomery County

### Maine

- Statewide

### Michigan

- Statewide

### Minnesota

- Minneapolis/Hennepin County
- Northwest Minnesota
- Moorhead/West Central Minnesota
- Southwest Minnesota

### Missouri

- St. Louis County
- St. Louis City
- Joplin/Jasper, Newton Counties
- Kansas City/Independence/Lee's Summit/Jackson County
- Parts of Missouri Balance of State

### Mississippi

- Jackson/Rankin, Madison Counties
- Gulf Port/Gulf Coast Regional

### North Carolina

- Winston Salem/Forsyth County
- Asheville/Buncombe County
- Greensboro/High Point

### North Dakota

- Statewide

### Nebraska

- Statewide

### New Mexico

- Statewide

### Nevada

- Las Vegas/Clark County

### New York

- New York City
- Yonkers/Mount Vernon/New Rochelle/Westchester County

### Ohio

- Toledo/Lucas County
- Canton/Massillon/Alliance/Stark County

### Oklahoma

- Tulsa City & County/Broken Arrow
- Oklahoma City
- Norman/Cleveland County

### Pennsylvania

- Philadelphia
- Lower Marion/Norristown/Abington/Montgomery County
- Allentown/Northeast Pennsylvania
- Lancaster City & County
- Bristol/Bensalem/Bucks County
- Pittsburgh/McKeesport/Penn Hills/Allegheny County

### Rhode Island

- Statewide

### South Carolina

- Charleston/Low Country
- Columbia/Midlands

### Tennessee

- Chattanooga/Southeast Tennessee
- Memphis/Shelby County
- Nashville/Davidson County

### Texas

- San Antonio/Bexar County
- Austin/Travis County
- Dallas City & County/Irving
- Fort Worth/Arlington/Tarrant County
- El Paso City and County
- Waco/McLennan County
- Texas Balance of State
- Amarillo
- Wichita Falls/Wise, Palo Pinto, Wichita, Archer Counties
- Bryan/College Station/Brazos Valley
- Beaumont/Port Arthur/South East Texas

### Utah

- Statewide

### Virginia

- Richmond/Henrico, Chesterfield, Hanover Counties
- Roanoke City & County/Salem
- Virginia Beach
- Portsmouth
- Virginia Balance of State
- Arlington County

### Washington

- Seattle/King County
- Spokane City & County

### Wisconsin

- Statewide

### West Virginia

- Statewide

### Wyoming

- Wyoming Statewide is in the process of implementing

**Coordinated Exit: CMHA HCV Homeless Preference Referral Form**

Client Public ID: \_\_\_\_\_ Case Manager: \_\_\_\_\_ Agency: \_\_\_\_\_

**YES or NO ANSWER EVERY QUESTION-If this form is not completed it will not be reviewed.**

Current Status		Notes
Y	N	Household is ready to exit CoC Housing Program (PSH, RRH, TH, SD, SSVF)
Y	N	Household is stabilized in services
		How long has client been in current housing unit? <b>Enter response in notes field</b>
Eligibility- Anyone in the household		
Y	N	Been evicted from housing for drug related or criminal activity in the last 3 years?
Y	N	Have any convictions for manufacture or production of methamphetamine?
Y	N	Required to register as a registered sex offender?
Y	N	Owe money to ANY subsidized housing in ANY state? Balance amount if yes \$ _____ Older than 8 years? Y _____ N _____
Y	N	Been evicted from public housing in last 12 months?
Y	N	Have any criminal history other than traffic violations within the past 3 years (misdemeanor or felony)? – <b>If yes, please explain</b>
Y	N	Current police check from Sheriff's dept included with this referral?
Additional Information		
Y	N	Are utilities currently on in client's name?
		If <b>no</b> , can client have utilities on in their name? <b>Explain in notes field</b>
Y	N	Will Landlord accept CMHA Housing Choice Voucher?
		If question above is <b>no</b> , does client have resources to pay deposit and first month rent? <b>Explain in notes field</b>
Y	N	Does client have resources to pay their rent? (30% of income, minimum \$50)
Y	N	Does the client have income? <b>If yes, enter source in notes field</b>
Application – Does household have:		
Y	N	Photo ID for all members of the household 18 and over
Y	N	Birth certificates and social security cards for all members of the household
Y	N	All supplemental documentation (if needed)

**Briefly state which services client is currently stabilized in. Then, please note current barriers preventing client from a successful exit. If necessary, please make clarifications regarding any information on the form overall.**

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# STRATEGIES TO END HOMELESSNESS

## 4. Objective Criteria – Rate, Rank, Review, and Selection Criteria (Attachments)

- 1) Community Meeting Agenda – Scoring Criteria
- 2) CoC Competition Scoring Criteria & Scorecard
- 3) Scorecard Completion & Submission Instructions
- 4) Community Rank List & Required Project Presentations
- 5) Community Meeting Agenda - Prioritization Event
- 6) Prioritization Event Outcomes
- 7) Final Accepted Project Priority List – Approved by CoC Board on 08/31/2018

### **Overview of the Competitive Ranking & Review Process:**

The CoC establishes objective competitive scoring criteria for ranking and review of CoC projects. Annually, the CoC Board names a *Scoring Subcommittee* that is tasked with updating the Scoring Criteria and ensuring that it is in alignment with HUD's Policy Priorities, System Performance improvement strategies, and local priorities. The *Scoring Subcommittee* presents the changes to the CoC Board, and once approved, Strategies to End Homelessness (STEH) presents the process to the full CoC<sup>1</sup>.

### **Competitive Review of Project Performance- the CoC Competition Scorecard<sup>2</sup>:**

The FY18 process included a complete overhaul of the community's historical prioritization process. The Scoring Criteria included a comprehensive CoC Competition Scorecard, which scored 29 metrics, as well as a consistent comparison of cost effectiveness between projects.

STEH issued CoC Scorecard completion & submission instructions<sup>3</sup> and agencies used HMIS data to complete a Scorecard on each competitive renewal project. STEH compiled outcomes data submitted by projects (**including domestic violence provider data**, via their comparable database) and assigned scores based on performance and in alignment with the approved Scoring Criteria. CoC projects earned points depending on how well they performed in comparison to their peers<sup>4</sup>. This score determined which renewal projects were included in the CoC Application and which were at risk of reduction or rejection via the CoC Community Prioritization process (explained below).

### **Community Prioritization Process:**

After determining Scorecard outcomes, STEH facilitated a Ranking and Review event, known as *the CoC Community Prioritization Event*<sup>5</sup> which 60 community members attended. The lowest-scoring 15 percent of renewal projects (determined by the Competitive Review of Project

Performance, described above), along with all new projects, were required to present their project to the full CoC. Attendees were trained on how to rank projects and provided the tools to make educated determinations, including: System Performance Measures, CoC Scorecard outcomes, cost effectiveness data, and project specific information. After the event, STEH compiled attendees' ranking data<sup>6</sup>.

The outcomes of the Project Performance Review & the Community Process were combined by STEH into a complete prioritization list for review by the CoC Board. On August 31, 2018, the CoC Board approved the final Accepted Project and Priority List<sup>7</sup> for inclusion in the FY18 CoC Application.



# STRATEGIES TO END HOMELESSNESS

FY18 CoC Competition  
Scoring Criteria Meeting  
July 27, 2018 - 2PM - Interact for Health

- 1) Continuum of Care Overview – Program Goals & Local Decision Making Process
- 2) FY18 Notice of Funding Availability Overview
- 3) Updates & Areas of Focus
- 4) Scoring Criteria Presentation
  - a) New Elements
  - b) Unchanged Elements
  - c) Scorecard
    - i) Review metrics
    - ii) Review instructions for completion
- 5) Important Dates:
  - 7/27/2018 – Scorecard process opens
  - 8/6/2018 – Scorecards due to STEH
  - 8/17/2018 – Scorecards rank outcomes announced & presenters notified
  - 8/24/2018 – Community Prioritization Event
  - 9/3/2018 – Announcement of accepted, reduced, & rejected projects

## 2018 Cincinnati/Hamilton County Continuum of Care Scoring Criteria for Prioritizing Projects

<u>THRESHOLD REQUIREMENTS:</u>
--------------------------------

New Projects:

Agencies may apply for new projects as allowed by HUD in the FY 2018 CoC Program Registration Notice and Bonus Projects as defined in the FY 2018 Notice of Funding Availability (NOFA).

Housing Focus: A minimum of 70% of funds in housing budget lines (leasing, rental assistance, or operating).

Renewal Projects:

In order to receive points, the project must be able to produce, from HMIS a HUD Annual Performance Report (APR) and a Universal Recidivism by Exit Destination report for the most recently completed operating year. Additional documents required to complete the scoring criteria are a completed Housing First/Low Barrier Questionnaire, match documentation letters from the most recently ended grant term, and the agency's most recent audited financial statement.

**All projects:**

**Match:** All statutory match requirements must be met. [This is currently 25% of the grant, excluding leasing funds.]

SPECIAL NOTES:

- 1- Projects that are still in their initial one year grant term will not participate in the ranking process and will be included in the CoC application for renewal funding.
- 2- All other renewal projects will be ranked based on project outcomes.
  - a. All outcomes will be based on a two-year average using either the Annual Performance Report (APR) or the Universal Recidivism report, or data provided by Strategies to End Homelessness; HMIS reports will be run out of the community HMIS system, VESTA®.
    - i. Timeframes:
      1. APR outcomes – 7/1/2016 – 6/30/2017, 7/1/2017 – 6/30/2018
        - a. Reports will be run out of VESTA®
      2. Recidivism Outcomes – 7/1/2014 – 6/30/2015, 7/1/2015 – 6/30/2016
        - a. Reports will be run out of VESTA®
      3. Coordinated Entry – referrals made between 7/1/2016 – 6/30/2017 and 7/1/2017 – 6/30/2018
        - a. Data will be provided by Coordinated Entry System via Strategies to End Homelessness.

<u>COC SCORECARD</u>
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- 1- For Metrics 1-8, 10, 11, 14, 15, 25-28, project outcomes will be ranked in four quartiles:

- a. Projects with outcomes in the highest quartile (top 25%) are awarded maximum point value (Q1).
  - b. Projects performing above the median, but below the first quartile, are awarded the 2nd highest point value (Q2).
  - c. Projects performing below the median, but above the lowest quartile are awarded the 3rd highest point value (Q3).
  - d. Projects performing at the lowest quartile (bottom 25%) will automatically receive zero points (Q4).
- 2- All other metrics (9, 12, 13, 16-24, 29) are scored based on project outcomes as indicated on scorecard.
  - 3- The Housing First Questionnaire is worth a total of 12 points; each question answered "no" or "n/a" will be awarded .5 pts. Strategies to End Homelessness will review all responses for accuracy based on Monitoring and Coordinated Entry evidence. If a discrepancy is found, STEH may send Housing First Questionnaire back to the agency for revision. If a discrepancy cannot be resolved, members of the Homeless Clearinghouse will provide additional review.
  - 4- SSO projects have fewer possible points, so their score will be weighted. The percentage of available points they receive in this process will be their weighted score in the final prioritization list. (Example: if an SSO project scores 45 out of 75 points, or 60% of the points available to them, their weighted score in the final prioritization list will be 60).
  - 5- In the event of a tie, the agency with the highest score in Section A. Project Performance will be awarded the higher rank, continuing down through each section (B-F) as needed.

New Projects: New projects will have no data, so they will not complete a CoC Scorecard. New projects will be required to present at a Community Prioritization Event.

Note: Metrics 10 and 11 will be calculated on accurate project billings submitted to STEH no later than August 10, 2018 at 12pm.

<i>COMMUNITY PRIORITIZATION MEETING</i>
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- 1- The **bottom 15%** of projects (rounded up) and all new projects will be required to present at the Community Prioritization Meeting.
- 2- All projects required to present at the Community Prioritization Meeting will be re-prioritized solely based on the results of community ranking (**their pre-score will not affect final ranking**) and they will be placed at the bottom of the full prioritization list in the order of this community ranking.
- 3- The Homeless Clearinghouse may decide to require additional projects to present at the meeting. These projects will be re-ranked in the same manner as the bottom 15% of projects.
- 4- Every agency funded with CoC dollars is required to participate in the Community Meeting. For non-presenting agencies, exactly 2 staff members are required to attend.
- 5- Presenting agencies may bring additional staff as necessary, but will only be allowed 2 ranking sheets. Number of attendees per agency presenting may be limited due to space available.

New Projects: New Projects will be required to present at the Community Prioritization Meeting. The Homeless Clearinghouse will determine a set of specific criteria that will be used to determine how new projects will be inserted into the overall rank of community

projects. **This criterion will be determined by the Homeless Clearinghouse and available to new projects prior to the community prioritization event.**

**UPDATE 8/17/2018:** New projects will be ranked together with renewal projects that are required to present at the Community Prioritization Event. The top ranked new Rapid Re-housing project and the top ranked new Permanent Supportive housing project will be placed in Tier 1 on the final priority list. The remaining projects will be placed in line with the outcome of the community ranking process at the bottom of the priority list.

<i>RANKING PROCESS</i>
------------------------

Prior to the Community Prioritization Event, the **following information will be made available online** for attendees and other community members:

- 1- All relevant data regarding pre-scored dimensions including specific scores for all projects and their relative standing on both the individual dimensions and overall score;
- 2- Cost Effectiveness data for all projects considered for prioritization; and
- 3- A standardized project description with statistical and descriptive data *selected by the Homeless Clearinghouse* to prepare the attendees to fully understand and evaluate the information that is presented at the Community Prioritization Event.

At the Community Prioritization Event, presentations will focus on:

- 1- An explanation of metrics the project scored poorly on;
- 2- Detailed strategy of how the agency plans to address these issues going forward;
- 3- How the project meets a specific need in the community;
- 4- How the project contributes positively to HUD System Performance Measures ([See link for additional info](#)); and
- 5- Cost Effectiveness.

Every attendee will be trained on the ranking process on the day of the event.

After each project presentation, each rater completes a summary sheet *for his/her own use* that will not be required to be shared with anyone else. (*See Figure 1*) These summary sheets are put in order of the priority of each project as the presentations are made to be used by the rater at the end of the Community Prioritization Event.

**Figure 1:**

<b>Project Name:</b> Pre-fill	<b>\$ requested:</b> pre-fill	<b>Rank:</b>
<b>Type:</b> Pre-fill		
<u>Key Elements to consider:</u> Pre-score/past performance, cost effectiveness, impact on ending homelessness, need/extent of problem, participation in workgroups, promotes housing stability, reduces length of homeless episode, supports/enhances other programs, uniqueness in system, housing first model		
Program Strengths	Program Weaknesses	

After the project presentations, each rater –

- i. Compiles the rating sheets in order with the highest priority on top and the others following in top-down order of priority; then
- ii. Numbers the rating sheets in the box provided, assigning the highest priority number 1 and continuing until all are numbered.

Each rater completes a ranking sheet which designates a ranking for each project by copying the numbers from the summary sheets. (See *Figure 2*) These ranking sheets are then submitted and ranks are averaged to determine the final Community Prioritization Event result for each project.

A rater may not rank a project under the following circumstances:

- Employed by the agency requesting funding and/or an agency that will receive funding from the project (i.e. partnerships or collaborations)
- On the Board of Directors of the agency requesting funds
- Not present to hear the presentation. NOTE: a rater will have to rate ALL of the projects to be included in the final ranking.

**Figure 2:**

**Project Final Ranking Sheet**

Project Name	Rank	Project Name	Rank
Project A		Project F	
Project B		Project G	
Project C		Project H	
Project D		Project I	
Project E		Project J	

**DETERMINING THE FINAL PRIORITY LISTING**

**The Cincinnati/Hamilton County Continuum of Care Board, locally known as the Homeless Clearinghouse, has final decision-making power to make any changes to the final prioritization list in order to best position the community for the maximum amount of points in the CoC 2018 Application to HUD.**

## Project Performance Scorecard Overview

- A. Project Performance – Maximum Points = (54 - Housing) ( 44- SSO)
- B. Overall Grant Management– Maximum Points = (14 - Housing) (9 - SSO)
- C. Coordinated Entry – Maximum Points = (10 - Housing) ( N/A - SSO)
- D. Project Populations– Maximum Points = 12
  - E. Data Quality – Maximum Points = 9
  - F. CoC Participation – Maximum Points = 1
- Total Available Points: (100 - Housing Programs) (75 - SSO)

A. Project Performance				Max Points Available		
Performance Measurement	Rationale For Measurement	Data Source and How Calculated	Performance Point Scale	PSH	RRH, TH	SSO
1 <b>Housing Stability:</b> % of persons who who stayed for <u>more than 90 days</u> who remained in the PH project as of the end of the operating year ( <i>PSH Only</i> ) or exited to a permanent housing destination ( <i>All</i> ).	This is a standard HUD Measurement for Project Performance and System Performance	<u>Source:</u> CoC APR - Q5a, Q23a:  <u>Calc:</u> <i>PSH:</i> (Q23a.f1 + Q5a.8) Divided by (Q23a.e - Q23a.f2 + Q5a.8)  <i>RRH/TH/SSO:</i> (Q23a.f1) Divided by (Q23a.e - Q23a.f2)	<b>Q1: 100% (10 pts)</b> <b>Q2: 99.99% - 97.96% (8 pts)</b> <b>Q3: 97.95% - 93.85% (5 pts)</b> <b>Q4: 93.84% - 0% (0 pts)</b>	10	10	10
2 <b>RRH, TH Only:</b> <b>Housing Stability:</b> % of persons who stayed for <u>90 days or less</u> who exited to a permanent housing destination.	This is a standard HUD Measurement for Project Performance and System Performance	<u>Source:</u> CoC APR - Q5a, Q23b:  <u>Calc:</u> (Q23b.f1) Divided by (Q23b.e - Q23b.f2)	<b>Q1: 100% - 83.15% (5 pts)</b> <b>Q2: 83.14% - 57.14% (3 pts)</b> <b>Q3: 57.13% - 36.36% (1.5 pts)</b> <b>Q4: 36.35% - 0% (0 pts)</b>	0	5	0
3 <b>Income Total:</b> % of persons age 18 and older who maintained or increased their total income (from all sources) as of the end of the operating year or project exit.	This is a standard HUD Measurement for Project Performance and System Performance	<u>Source:</u> CoC APR - 19a3:  <u>Calc:</u> See percentage in Row “Number of Adults with Any Income (i.e., Total Income)” and Column “Performance Measure: Percent of Persons who Accomplished this Measure”	<b>Q1: 100% - 57.41% (7 pts)</b> <b>Q2: 57.40% - 44.36% (5 pts)</b> <b>Q3: 44.35% - 28.79% (3 pts)</b> <b>Q4: 28.78% - 0% (0 pts)</b>	7	7	7
4 <b>Income - Earned:</b> % of persons age 18 through 61 who maintained or increased their earned income as of the end of the operating year or project exit.	This is a standard HUD Measurement for Project Performance and System Performance	<u>Source:</u> CoC APR - 19a3:  <u>Calc:</u> See percentage in Row “Number of Adults with Earned Income (i.e., Employment Income)” and Column “Performance Measure: Percent of Persons who Accomplished this Measure”	<b>Q1: 100% - 35.70% (5 pts)</b> <b>Q2: 35.69% - 15.79% (3 pts)</b> <b>Q3: 15.78% - 10.26% (1.5 pts)</b> <b>Q4: 10.25% - 0% (0 pts)</b>	5	5	5



5	(PSH Only) <b>Non cash Benefits – Annual</b>	It is expected that projects help clients obtain and maintain benefits as a way of maintaining positive housing outcomes.	<u>Source:</u> CoC APR – 20b+21(o-p):  <u>Calc:</u> See number in Row "1+ Sources" and Column "Income at latest annual assessment for stayers" from 20b. Divide by Line 16 in Section 5a.	<b>Q1: 100% - 92.22% (2.5 pts)</b> <b>Q2: 92.21% - 75.78% (1.5 pts)</b> <b>Q3: 75.77% - 60.51% (.5 pts)</b> <b>Q4: 60.50% - 0% (0 pts)</b>	2.5	0	0
6	(PSH Only) <b>Health Insurance – Annual</b>	It is expected that projects help clients obtain and maintain health insurance as a way of maintaining positive housing outcomes.	<u>Source:</u> CoC APR – 21(o-p):  <u>Calc:</u> Add the sum of Q21 Lines o and p. Divide by Line 16 in Section 5a.	<b>Q1: 100% - 79.93% (2.5 pts)</b> <b>Q2: 79.92 - 67.71% (1.5 pts)</b> <b>Q3: 67.70% - 53.64% (.5 pts)</b> <b>Q4: 53.63% - 0% 0 pts</b>	2.5	0	0
7	<b>Recidivism:</b> % of households who exit to permanent housing destinations and return to homelessness within 2 years	This is a standard HUD Measurement for Project Performance and System Performance	<u>Source:</u> HMIS "Recidivism by Exit Destination" Report  <u>Calc:</u> Pull for Date Range: 7/1/2014-6/30/2015, 7/1/2015-6/30/2016.  #2.az. Column h divided by Column a.	<b>Q1: 0%-6.67% (10 pts)</b> <b>Q2: 6.68% - 19.34% (8 pts)</b> <b>Q3: 19.35% - 28.57% (5 pts)</b> <b>Q4: 28.58% - 100% (0 pts)</b> <i>Projects with 0 exits will be placed in Q3.</i>	10	10	10
8	<b>Utilization Rate:</b> On the night of the 2018 PIT and HIC Count % of utilization	High utilization rate indicates a project is efficient and effective in ensuring open beds are filled quickly and timely.	<u>Source:</u> Provided by STEH  <u>Calc:</u> 2017/2018 Housing Inventory Count	<b>Q1: 100% (5 pts)</b> <b>Q2: 99.99% - 85.71% (3 pts)</b> <b>Q3: 85.70 - 57.41% (1.5 pts)</b> <b>Q4: N/A *</b>	5	5	0
9	<b>Housing First/Low Barrier:</b> To What Extent is the project Housing First/Low Barrier?	HUD has expressly stated that programs need to follow a housing first/low barrier philosophy.	<u>Source and Calc:</u> Completed Housing First/Low Barrier Questionnaire – Verify the score on the Questionnaire is correct based on the answers and enter the total score (max 12 points)	<b>Maximum of 12 pts.</b>	12	12	12
<b>B. Overall Grant Management</b>							
	<b>Performance Measurement</b>	<b>Rationale For Measurement</b>	<b>Data Source and How Calculated</b>	<b>Performance Point Scale</b>	PSH	TH/RRH, RRH, TH	SSO
10	<b>In the project's most recently ended grant year, what percentage of awarded funds were expended and drawn down from HUD?</b>	Projects not utilizing all of their awarded funds are leaving valuable resources unused; and not effectively using the resources available for their project.	<u>Source:</u> STEH Spending Data- Provided by STEH  <u>Calc:</u> Divide the amount of funding expended by the total initial subaward amount	<b>Q1: 100% (5 pts)</b> <b>Q2: 99.99% - 95.45% (3 pts)</b> <b>Q3: 95.44% - 77.65% (1.5 pts)</b> <b>Q4: N/A*</b> <i>Projects spending 100% or more will be placed in Q1</i>	5	5	5

11	<b>Percent of CoC project funding expended by the agencies during their most recently ended grant year that was used for housing vs. supportive services.</b>	HUD looks to maximize HUD funds for housing and use of match from other sources to provide supportive services to maximize clients served	<u>Source:</u> STEH Spending Data- Provided by STEH  <u>Calc:</u> For RRH, TBRA PSH projects - divide the amount of rental assistance or leasing disbursed by the total amount disbursed, excluding admin funds  For Project-based PSH – divide the amount of housing funds disbursed by the total amount disbursed, excluding admin funds	<b>Q1: 100% - 95.17% (5 pts)</b> <b>Q2: 95.16% - 81.61% (3 pts)</b> <b>Q3: 81.60% - 76.20% (1.5 pts)</b> <b>Q4: 76.19% - 0% (0 pts)</b>	5	5	0
12	<b>Did the project have the match required per CoC regulations (at least 25% or 0.25:1)?</b>	Provision of Project Match is required by HUD and lack of required match is a compliance issue.	<u>Source:</u> Provided by STEH: Match Documentation for most recently submitted APR.	<b>Yes: 2 pts</b> <b>No: 0 pts</b>	2	2	2
13	Did the agency have any identified deficiencies or findings in their agency's most recent audit.	HUD expects agencies to follow program regulations and have adequate internal controls. Findings or deficiencies indicate a need to strengthen related processes.	<u>Source:</u> Agency's most recent Audit  <u>Calc:</u> Using the applicant's most recent audit enter the number of findings and deficiencies.	<b>No deficiencies = 2 pts.</b>  <b>All Deficiencies Corrected=1.5 pts</b>  <b>1 unresolved finding = 1 pt.</b>  <b>2+ unresolved findings = 0 pt.</b>	2	2	2

**C. Coordinated Entry**

<b>C. Coordinated Entry</b>				PSH	TH/RRH, RRH, TH	SSO	
<b>Performance Measurement</b>	<b>Rationale For Measurement</b>	<b>Data Source and How Calculated</b>	<b>Performance Point Scale</b>				
14	<b>Match to Housed Time:</b> Average time from match email to housed date	Quickly transitioning clients from street/shelter into housing.	<u>Source:</u> STEH Coordinated Entry Records - Provided by STEH  <u>Calc:</u> Average time from date of Match Email to Housing Move In date. Site-based programs use initial Pre-Match email from CE as Match date.	<b>Q1: 0 - 25.03 (5 pts)</b> <b>Q2: 25.04 - 33.96 (3 pts)</b> <b>Q3: 33.97 - 41.68 (1.5 pts)</b> <b>Q4: 41.69+ (0 pts)</b>	5	5	0
15	<b>Successful Housing Match:</b> Households that were matched and subsequently housed in the program	This metric is a counter-balance to the Match to Housed Time. If a project doesn't meet the Match to Housed timeframe with a client, there is still incentive to continue to engage with the client to house them.	<u>Source:</u> STEH Coordinated Entry Records - Provided by STEH  <u>Calc:</u> Number of Households housed by project divided by total matches received from CE.	<b>Q1: 100% - 85.86% (5 pts)</b> <b>Q2: 85.85% - 80.00% (3 pts)</b> <b>Q3: 79.99% - 66.67% (1.5 pts)</b> <b>Q4: 66.66% - 0% (0 pts)</b>	5	5	0

D. Project Populations						
Performance Measurement	Rationale For Measurement	Data Source and How Calculated	Performance Point Scale	PSH	TH/RRH, RRH, TH	SSO
16 <b>% of Chronically Homeless Persons Served</b>	Effectively ending Chronic homelessness is a federal and local goal.	Source: CoC APR 5a:  Calc: Divide Line 11 by Line 1 of Section 5a.	> 50% = 1 pts 25% - 50% = 0.5 pts < 25% = 0 pts	1	1	1
17 <b>% of Veterans Served</b>	Effectively ending Veteran homelessness is a federal and local goal.	Source: CoC APR 5a:  Calc: Divide Line 10 by Line 2 of Section 5a.	> 50% = 1 pts 25% - 50% = 0.5 pts < 25% = 0 pts	1	1	1
18 <b>% Youth ages 18-24 Served</b>	Effectively ending Youth homelessness is a federal and local goal.	Source: CoC APR 5a:  Calc: Divide Line 12 by Line 2 of Section 5a.	> 50% = 1 pts 25% - 50% = 0.5 pts < 25% = 0 pts	1	1	1
19 <b>% Families (HH w/ Minor Children) Served</b>	Effectively ending Family homelessness is a federal and local goal.	Source: CoC APR 8a:  Calc: Divide Column b by Column titled "Total"	> 50% = 1 pts 25% - 50% = 0.5 pts < 25% = 0 pts	1	1	1
20 <b>% Parenting Youth Ages 18-24 with Minor Children Served</b>	Parenting youth is a sub-population of Youth.	Source: CoC APR 5a:  Calc: Divide Line 13 by Line 2 of Section 5a.	> 50% = 1 pts 25% - 50% = 0.5 pts < 25% = 0 pts	1	1	1
21 <b>% Persons Fleeing or Attempting to Flee Domestic Violence</b>	Persons actively fleeing domestic violence are a population of concern in HUD and local goals	Source: CoC APR 14b, 5a:  Calc: Divide Total "Yes" in section 14b by Line 1 of Section 5a.	> 50% = 1 pts 25% - 50% = 0.5 pts < 25% = 0 pts	1	1	1
22 <b>Participants are "hard to serve" as defined by no income at entry.</b>	Participants with no income at entry are considered harder to serve than those with income at program entry.	Source: CoC APR 18:  Calc: Take "Adults with no Income" from the "Number of Adults at Start" Column and divide it by Line 2 of Section 5a.	50% + = 2.5 pts < 50% = 0 pts	2.5	2.5	2.5
23 <b>Participants are "hard to serve" as defined by 2 or more physical/mental health conditions at entry.</b>	Participants with multiple physical/mental health conditions at entry are considered harder to serve than those with no or 1 conditions at program entry.	Source: CoC APR - 13a2:  Calc: Add the numbers in "2 conditions" and "3+ conditions" from Column "Total Persons". Divide by "Total Persons" as listed in Section 13a2, Line h.	50% + = 2.5 pts < 50% = 0 pts	2.5	2.5	2.5

24	<b>Entered From:</b> % of participants admitted directly from the street or other locations not meant for human habitation.	Coordinated Entry's focus is on serving the most vulnerable first, including those living on the street or other places not meant for human habitation.	Source: CoC APR Q15:  <u>Calc:</u> Divide number from Line a3, "Place not meant for human habitation" by "Number of Adults (age 18 and over)" listed in Section 5a.	25%+ = 1 pts < 25% = 0 pts	1	1	1
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**E. HMIS Data Quality**

Performance Measurement	Rationale For Measurement	Data Source and How Calculated	Performance Point Scale	PSH	TH/RRH, RRH, TH	SSO
25 <b>Project's Data Quality: Personally Identifiable Information</b>	HUD is utilizing HMIS data for community reporting (AHAR, Sys. Perf. Measures, CAPER, Project Performance), a project's Data Completeness, accuracy and timeliness impacts the overall community data reporting on progress	Source: CoC-APR Report - 6a  <u>Calc:</u> Enter "Overall Score" from 6a.  (Ranked in ascending order)	Q1: 0% - .14% (2 pts) Q2: .15% - 1.43% (1.5 pts) Q3: 1.44% - 2.25% (.5 pts) Q4: 2.26% + (0 pts)	2	2	2
26 <b>Project's Data Quality: Universal Data Elements: Project Start Date</b>	Same as above.	Source: CoC-APR Report – 6b  <u>Calc:</u> Enter "% of Error Rate" for "Project Start Date (3.10)" from 6b.  (Ranked in ascending order)	Q1: 0% (2 pts) Q2: .01% + (1.5 pts) Q3: N/A* Q4: N/A*	2	2	2
27 <b>Project's Data Quality: Exit Destination</b>	Same as above.	Source: CoC-APR Report - 6c  <u>Calc:</u> Enter "% of Error rate" for "Destination (3.12)" from 6c.  (Ranked in ascending order)	Q1: 0% (2 pts) Q2: .01% - 1.02% (1.5 pts) Q3: 1.03% - 6.00% (.5 pts) Q4: 6.01% + (0 pts)	2	2	2
28 <b>Project's Data Quality: Timeliness</b>	CoC standards state Real Time Data Entry is preferred, but data must be entered within 2 working days of being collected.	Source: CoC-APR Report – 6e  <u>Calc:</u> Enter all table values for Table 6e directly into Excel Scorecard. Scorecard will auto- calculate by adding all entries in the "0 days" row and dividing it by the total number of entries.  (Ranked in descending order)	Q1: 100% - 70.10% (3 pts) Q2: 70.09% - 57.14% (2 pts) Q3: 57.13% - 39.52% (1 pts) Q4: 39.51%- 0% (0 pts)	3	3	3

F. CoC Participation				PSH	TH/RRH, RRH, TH	SSO
Performance Measurement	Rationale For Measurement	Data Source and How Calculated	Performance Point Scale			
Applicant has at least 1 staff member regularly participating in at least 1 of the CoC Workgroups	HUD expects that all CoC-funded projects actively participate within the CoC	Source: CoC Workgroup Sign-In sheet records for the past 12 months - Provided by STEH  Calc: Staff attended at least 80% of at least one workgroup in the past 12 months.	Yes = 1 pt No = 0 pt	1	1	1
<b>Total Points:</b>				<b>100</b>	<b>100</b>	<b>75</b>

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\* Where metrics had a large number of projects that scored 0% or 100% that spanned across 2 two or more Quartiles, all projects below were moved up into the next quartile.

Cost Effectiveness
<p><b>CoC Project Funding</b> = <math>\frac{\text{CoC + Match Funding Total}}{\text{\# of HH served in last Op. Year}}</math> = Cost per HH</p> <p>CoC funds represent ___% of project funding.</p>
<p><b>Other Project Funding</b> = <math>\frac{\text{Other Project Funding*}}{\text{\# of HH served in last Op. Yr.}}</math> = Additional Cost per HH</p> <p>*do not include in-kind expenses List other funding sources included above (if applicable):</p>
<p><b>Total Project Funding</b> = <math>\frac{\text{CoC + Other Project Funding*}}{\text{\# of HH served in last Op. Yr.}}</math> = Total Cost per HH</p>

Number of households served in the last operating year: \_\_\_\_\_

Average size of household in the last operating year: \_\_\_\_\_

### Presentation Guidelines for **RENEWAL** Projects (5 minutes)

1. Basic agency & project description;
2. Explanation of Scorecard metrics the project scored poorly on;
3. Detailed strategy of how the agency plans to address these issues going forward;
4. How the project meets a specific need in the community;
5. How the project contributes positively to HUD System Performance Measures; and
6. Cost Effectiveness.

### Presentation Guidelines for **NEW** Projects (7 minutes)

*If applying for DV Bonus funds, clearly state that as the project focus. If not applying for the DV Bonus funds, do not request a specific type of new funding. New Projects that are selected to go into the community application will be assigned either “reallocated funds” and/or “bonus funds” as part of the overall prioritization process. Reallocated funds are typically used for the highest scoring new project(s).*

1. Basic agency & project description
2. Explain how the project will address HUD’s NOFA Policy Priorities
  - a. Ending homelessness for all persons
    - i. Describe the following:
      1. Target Population
      2. Anticipated numbers served & expected length of stay
    - ii. Degree to which project will improve or positively impact overall CoC performance measurements
  - b. Creating a systemic response to homelessness
    - i. Degree to which the project addresses an identified gap in the system
  - c. Strategically allocating and using resources
    - i. Cost Effectiveness of proposed project budget
    - ii. Match – explain the amount, source, and impact of matching funds (including secured capital or rental assistance funding)
    - iii. If applicable:
      1. Agency’s past performance in like projects
      2. Agency’s scorecard results in like projects
  - d. Use a Housing First approach
    - i. Describe Housing First methodologies. Presenters are encouraged to use the Housing First Questionnaire as a guide.
3. Explain how the project adds value to the community
  - a. Creation of new jobs
  - b. Documented community support

Cost Effectiveness Format:

To be used for Renewal & New Projects

<b>CoC Project Funding</b> = _____ / _____ = _____ CoC + Match Funding Total      # of HH served in last Op. Year      Cost per HH
CoC funds represent ____% of project funding.

<b>Other Project Funding</b> = _____ / _____ = _____ Other Project Funding*      # of HH served in last Op. Yr.      Additional Cost per HH
*do not include in-kind expenses
List other funding sources included above (if applicable):

<b>Total Project Funding</b> = _____ / _____ = _____ CoC + Other Project Funding*      # of HH served in last Op. Yr.      Total Cost per HH
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Number of households served in the last operating year: \_\_\_\_\_

Average size of household in the last operating year: \_\_\_\_\_

## FY18 CoC Competition Scorecard Completion Instructions

Please read the instructions thoroughly before beginning work on the FY18 CoC Competition Scorecard. Scorecards are due to Amanda Davis (adavis@end-homelessness.org) by **Monday, August 6 at 4:00 p.m.**

The following tools and documents are required in order to complete the FY18 CoC Competition Scorecard. Documents that are noted as “available on STEH’s website” can be found on the [Apply for Funds page](https://www.strategiestoendhomelessness.org/partner-agencies/apply-for-funds/) (<https://www.strategiestoendhomelessness.org/partner-agencies/apply-for-funds/>).

- Fillable **CoC Performance Scorecard**
- Separate **APR reports** for each project (VESTA report name "CSV - APR 2017")
- Separate **Recidivism reports** for each project (VESTA report name "Universal - Recidivism by Exit Destination")
- Separate **Housing First Questionnaires** for each similar project type (available on STEH's website)
- **Project Name Crosswalk & 2018 Housing Inventory Count** (available on STEH's website)
- FY15 & FY16 **Coordinated Entry Matches** (available on STEH's website)

### How to complete the CoC Competition Scorecard:

1. First, run two **APR reports** for each project, one report using the date range 7/1/2016 - 6/30/2017 (FY15), and the other for the date range 7/1/2017 - 6/30/2018 (FY16). See the VESTA Project Name Crosswalk to ensure that the correct project and grant filters are selected.
  - a. **How to run and save a report:**
    - i. After selecting the appropriate timeframe and project(s), click “view here”.
    - ii. Select the Print option.
    - iii. Change printer destination to save as PDF
    - iv. Print in “**portrait**” layout
    - v. Save with the following naming convention – “APR. Agency. Project Name. FY15 (or FY16)”
2. Next, run two **Recidivism reports** for each project, one report using the date range 7/1/2014 - 6/30/2015, and the other for the date range 7/1/2015 - 6/30/2016. See the VESTA Project Name Crosswalk to ensure that the correct project and grant filters are selected.
  - a. **How to run and save a report:**
    - i. After selecting the appropriate timeframe and project(s), click “view here”.
    - ii. Select the Print option.
    - iii. Change printer destination to save as PDF
    - iv. Print in “**landscape**” Layout
    - v. Save with the following naming convention – “RECIDIVISM. Agency. Project Name. FY15 (or FY16)”
3. Use available reports to complete sections A, C, D, E, and portions of G of the Scorecard. STEH will enter information in section B and in portions of sections G and F.
  - a. In the Fillable Scorecard:
    - i. Column A is each metric's number for easy reference.
    - ii. Column B is the performance measurement.



- iii. Column C is the report in which the data is found.
  - iv. Columns E-J are which data element to enter into the neighboring fields.
  - v. Column K contains FY15 data.
  - vi. Column L contains FY16 data.
  - vii. Column M is auto calculated and contains a 2 Year Performance Average. This cannot be edited.
  - viii. The Scorecard details which specific data element to enter into each field. **YOU MUST FOLLOW THE INSTRUCTIONS and YOU MAY NOT EDIT DATA.**
    - 1. For example, the first metric says to "Enter value from Q23a. Line f1." Refer to the 7/1/2016 - 6/30/2017 APR report, question 23a, line f1, and enter the FY15 APR Q23a, f1 information in the FY15 field.
  - ix. Performance data will auto-calculate in gray fields.
4. Metric 8 – Utilization data is provided on the Project **Name Crosswalk & 2018 Housing Inventory Count** document available on the STEH website.
  5. Metric 9 - Now, complete a Housing First Questionnaire for each similar project type. For example, if an agency has 2 RRH projects serving the same population, only complete one Housing First Questionnaire, and use that score for both project Scorecards.
    - a. The results of this questionnaire will be compared against STEH Compliance and Coordinated Entry records, so please respond accurately.
    - b. Save the Housing First Questionnaire as a PDF with the following naming convention, "HF. Agency. Project Name (or project type if one questionnaire applies to multiple projects)".
  6. Save the completed CoC Competition Scorecard in Excel format (do not save as a PDF, JPEG, or any other format) with the following naming convention, "SCORECARD. Agency. Project Name"
  7. Submission details:
    - a. Agencies will make a separate submission for each project.
    - b. All required documents must be submitted to Amanda Davis at [adavis@end-homelessness.org](mailto:adavis@end-homelessness.org) using the subject line: "SUBMISSION: FY18 CoC Competition Scorecard."
    - c. Each project must submit the following:
      - i. Completed Scorecard in excel format
      - ii. 2 APR reports – following directions stated in 1.a. of this document.
      - iii. 2 Recidivism Reports – following directions stated in 2.a. of this document.
      - iv. Housing First Questionnaire
  8. Questions: In order to ensure consistent answers to questions, please submit any via [FY18 CoC Competition Questions Portal](#) only (also available on STEH's website). STEH staff members may answers questions via phone or email and will make every effort to respond within 24 business hours.

#### **Next Steps:**

Following submission, STEH staff will review each Scorecard, and compare it to the submitted supporting documentation. If errors are found, STEH staff will correct them, and the agency will be notified.

After all Scorecards are submitted, STEH will aggregate the information, calculate final scores, and send the scored Scorecards back to agencies. Scores will determine whether a project is required to present at the August 24<sup>th</sup> CoC Community Prioritization Event. Required presenters will be informed of their status on August 17.

# Community Rank List & Required Project Presentations

CoC Competition FY18 Project Prioritization - updated 08/21/2018

## Projects Scoring Highest on the CoC Competition Scorecard - Guaranteed to be in the Application

Status	Pre-score Rank	Score	Agency	Project	Funding Amount	Project Type
Renewal	1	80.50	Over the Rhine Community Housing	OTRCH Jimmy Heath House	\$ 255,452	PSH
Renewal	2	78.00	Bethany House Services	BHS Rapid Rehousing 2	\$ 320,656	RRH
Renewal	3	76.00	Tender Mercies	Tender Mercies Harkavy Hall SRA	\$ 75,283	PSH
Renewal	4	71.00	Tender Mercies	Tender Mercies Haven Hall PSH	\$ 332,951	PSH
Renewal	5	70.50	Over the Rhine Community Housing	OTRCH East Clifton Homes	\$ 59,448	PSH
Renewal	6	69.50	Over the Rhine Community Housing	OTRCH Recovery Hotel SRA PSH	\$ 95,751	PSH
Renewal	7	69.50	Tender Mercies	Tender Mercies Dana Hotel	\$ 90,567	PSH
Renewal	8	69.00	Bethany House Services	BHS Rapid Rehousing 4	\$ 606,586	RRH
Renewal	9	69.00	Caracole	Caracole PSH	\$ 704,719	PSH
Renewal	10	66.50	Lighthouse Youth & Family Services	Lighthouse Scattered Site RRH	\$ 154,961	RRH
Renewal	11	66.00	Over the Rhine Community Housing	OTRCH Paths to Recovery	\$ 326,263	PSH
Renewal	12	65.00	Tender Mercies	Tender Mercies PSH 2	\$ 136,763	PSH
Renewal	13	63.50	YWCA	YWCA Domestic Violence Rapid Rehousing	\$ 131,708	RRH
Renewal	14	63.50	Lighthouse Youth & Family Services	Lighthouse Permanent Supportive Housing	\$ 207,953	PSH
Renewal	15	62.00	Interfaith Hospitality Network	IHN Permanent Supportive Housing	\$ 356,623	PSH
Renewal	16	61.00	Salvation Army	Salvation Army RRH 2 for Families	\$ 234,731	RRH
Renewal	17	60.50	Bethany House Services	BHS Permanent Supportive Housing	\$ 361,533	PSH
Renewal	18	59.50	Nothing into Something Real Estate	NISRE Exit PSH	\$ 362,163	PSH
Renewal	19	58.00	Center for Independent Living Options	CILO Permanent Housing Program	\$ 493,853	PSH
Renewal	20	58.00	Bethany House Services	BHS Rapid Rehousing 1	\$ 770,054	RRH
Renewal	21	57.50	Ohio Valley Goodwill Industries	OVGI PH Rapid Re-housing	\$ 557,400	RRH
Renewal	22	57.50	Talbert House	Talbert House Permanent Supportive Housing 1	\$ 507,591	PSH
Renewal	23	57.50	Talbert House	Talbert House Permanent Supportive Housing 2	\$ 934,628	PSH
Renewal	24	56.00	Lighthouse Youth & Family Services	Lighthouse Street Outreach	\$ 102,518	SSO
Renewal	25	56.00	Shelterhouse	Shelterhouse Homeless Individuals Partnership	\$ 251,769	SSO
Renewal	26	54.00	Shelterhouse	Shelterhouse HUD RRH	\$ 448,561	RRH
Renewal	27	53.50	Lighthouse Youth & Family Services	Lighthouse RRH Expansion	\$ 179,286	RRH
Renewal	28	53.17	Bethany House Services	Family Housing Partnership	\$ 322,568	SSO
Renewal	29	52.50	Interfaith Hospitality Network	IHN RRH for Families	\$ 322,474	RRH

**KEY**

Projects automatically included in Application	Projects to be ranked by the Community on 8/24/18
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## Projects Required to Present at the Community Prioritization Meeting on August 24, 2018

Renewal	30	52.50	Excel Development	Excel PSH Consolidation	\$ 3,090,640	PSH
Renewal	31	52.50	Over the Rhine Community Housing	OTRCH ALI Consolidation	\$ 378,168	PSH
Renewal	32	51.50	Interfaith Hospitality Network	IHN Permanent Supportive Housing 2	\$ 354,170	PSH
Renewal	33	51.00	Salvation Army	Salvation Army Permanent RRH 1	\$ 243,056	RRH
Renewal	34	49.50	Ohio Valley Goodwill Industries	OVGI PSH	\$ 211,945	PSH
Renewal	35	47.33	Shelterhouse	Shelterhouse Supportive Services	\$ 90,441	SSO
New			Bethany House Services	BHS Rapid Rehousing 5	\$ 412,548	RRH
New			Interfaith Hospitality Network	IHN TH/RRH	\$ 500,279	TH/RRH
New			Over the Rhine Community Housing	OTRCH Paths 2 Recovery Expansion	\$ 670,120	PSH
New			Shelterhouse	SHVG CoC RRH 2	\$ 912,195	RRH
New			Tender Mercies	Tender Mercies 821 Flats	\$ 426,752	PSH
New - DV Bonus			YWCA	YWCA DV TH/RRH	\$ 927,049	TH/RRH
Renewal - informational			National Church Residences	NCR Commons at South Cumminville	\$ 418,252	PSH
Renewal - informational			Over the Rhine Community Housing	OTRCH Carrie's Place	\$ 96,106	PSH

## Non-competitive Projects Automatically included in the CoC Application per the 2018 Scoring Criteria

Renewal			Caracole	Caracole House 3	\$ 76,000	PSH
Renewal			Strategies to End Homelessness	Coordinated Entry	\$ 136,711	CE
Renewal			Strategies to End Homelessness	FY 2017 HMIS Renewal	\$ 388,611	HMIS
Renewal			YWCA	YWCA DV TH/RRH	\$ 223,128	TH/RRH



# STRATEGIES TO END HOMELESSNESS

## FY18 CoC Competition Community Prioritization Event August 24, 2018 - 12PM - Interact for Health

- |  |               |
|--|---------------|
| 1) Sign-in & Find Seats  | 12:00 – 12:15 |
| 2) Welcome & Intro   | 12:15 – 12:50 |
| a) Overview of the Day   |               |
| b) Project Ranking Process Training                            |               |
| 3) Break – 5-10 minutes  |               |
| 4) Project Presentations                                       | 1:00 - 2:15   |
| a) Renewal Projects - 5 minute presentations followed by Q & A |               |
| b) New Projects - 7 minute presentations followed by Q & A     |               |
| 5) Long Break – Snacks Available                               | 2:15 – 3:00   |
| 6) CoC Project Updates – Not Ranked                            | 3:00 – 3:10   |
| a) National Church Residences- Commons at South Cumminsville   |               |
| b) OTRCH – Carrie’s Place                                      |               |
| 7) Project Presentations (Continued)                           | 3:15 - ?      |
| a) Renewal Projects - 5 minute presentations followed by Q & A |               |
| b) New Projects - 7 minute presentations followed by Q & A     |               |
| 8) Project Ranking   |               |
| 9) Adjourn   |               |



# STRATEGIES TO END HOMELESSNESS

## CoC Competition FY18 - Community Prioritization Event Outcomes

OH-500 - Cincinnati/Hamilton County, OH

Rank	Agency Name	Project Name	Ranking Average
1	Tender Mercies	821 Flats	3.9912
2	Over the Rhine Community Housing	Anna Louise Inn Consolidation	4.4675
3	Interfaith Hospitality Network	Permanent Supportive Housing 2	4.7567
4	Interfaith Hospitality Network	Transitional/ Rapid ReHousing	5.6973
5	Over the Rhine Community Housing	Paths to Recovery Expansion	5.7907
6	Bethany House Services, Inc.	Rapid Rehousing 5	6.0823
7	Shelterhouse	CoC Rapid ReHousing 2	7.1549
8	YWCA	DV Transitional/Rapid ReHousing (DV Bonus)	7.2600
9	Excel Development	PSH Consolidation	7.2614
10	Shelterhouse	Supportive Services (Case Management)	7.3340
11	Ohio Valley Goodwill	PSH	8.7072
12	Salvation Army	Permanent RRH 1	9.6468



# STRATEGIES TO END HOMELESSNESS

## Continuum of Care Competition FY 2018 Accepted Projects & Priority List

OH-500 - Cincinnati/Hamilton County, OH

Rank	Agency Name	Project Name	Application Name	Type	Application Amount	Running Total
1	Tender Mercies	821 Flats	TM PSH FY18 New	PSH	\$ 426,752	\$ 426,752
2	Interfaith Hospitality Network	TH/RRH	IHN TH/RRH FY18 New	TH/RRH	\$ 500,279	\$ 927,031
3	Over the Rhine Community Housing	Jimmy Heath House	OTR PSH 0003	PSH	\$ 255,452	\$ 1,182,483
4	Bethany House Services	Rapid Rehousing 2	BHS RRH 0303	RRH	\$ 320,656	\$ 1,503,139
5	Tender Mercies	Harkavy Hall SRA	TM PSH 0006	PSH	\$ 75,283	\$ 1,578,422
6	Tender Mercies	Haven Hall PSH	TM PSH 0329	PSH	\$ 332,951	\$ 1,911,373
7	Over the Rhine Community Housing	East Clifton Homes	OTR PSH 0330	PSH	\$ 59,448	\$ 1,970,821
8	Over the Rhine Community Housing	Recovery Hotel SRA PSH	OTR PSH 0015	PSH	\$ 95,751	\$ 2,066,572
9	Tender Mercies	Dana Hotel	TM PSH 0362	PSH	\$ 90,567	\$ 2,157,139
10	Bethany House Services	Rapid Rehousing 4	BHS RRH 0461	RRH	\$ 606,586	\$ 2,763,725
11	Caracole	Caracole PSH	CARA PSH 0009	PSH	\$ 704,719	\$ 3,468,444
12	Lighthouse Youth & Family Services	Scattered Site RRH	LYS RRH 0254	RRH	\$ 154,961	\$ 3,623,405
13	Tender Mercies	PSH 2	TM PSH 0520	PSH	\$ 136,763	\$ 3,760,168
14	YWCA	DV Rapid Rehousing	YWCA RRH 0325	RRH	\$ 131,708	\$ 3,891,876
15	Lighthouse Youth & Family Services	Permanent Supportive Housing	LYS PSH 0404	PSH	\$ 207,953	\$ 4,099,829
16	Interfaith Hospitality Network	Permanent Supportive Housing	IHN PSH 0368	PSH	\$ 356,623	\$ 4,456,452
17	Salvation Army	RRH 2 for Families	SA RRH 0403	RRH	\$ 234,731	\$ 4,691,183
18	Bethany House Services	Permanent Supportive Housing	BHS PSH 0542	PSH	\$ 361,533	\$ 5,052,716
19	Nothing into Something Real Estate	Exit PSH	NISR PSH 0439	PSH	\$ 362,163	\$ 5,414,879
20	Center for Independent Living Options	Permanent Housing Program	CILO PSH 0008	PSH	\$ 493,853	\$ 5,908,732
21	Bethany House Services	Rapid Rehousing 1	BHS RRH 0472	RRH	\$ 770,054	\$ 6,678,786
22	Ohio Valley Goodwill Industries	PH Rapid Re-housing	OVGI RRH 0306	RRH	\$ 557,400	\$ 7,236,186
23	Talbert House	Permanent Supportive Housing 1	TH PSH 0307	PSH	\$ 507,591	\$ 7,743,777
24	Talbert House	Permanent Supportive Housing 2	TH PSH 0579	PSH	\$ 934,628	\$ 8,678,405
25	Lighthouse Youth & Family Services	Street Outreach	LYS SSO 0253	SSO	\$ 102,518	\$ 8,780,923
26	Shelterhouse	Homeless Individuals Partnership	SHVG SSO 0012	SSO	\$ 251,769	\$ 9,032,692
27	Lighthouse Youth & Family Services	RRH Expansion	LYS RRH 00365	RRH	\$ 179,286	\$ 9,211,978
28	Bethany House Services	Family Housing Partnership	BHS SSO 0248	SSO	\$ 322,568	\$ 9,534,546
29	Interfaith Hospitality Network	RRH for Families	IHN RRH 0476	RRH	\$ 322,474	\$ 9,857,020
30	Over the Rhine Community Housing	ALI Consolidation	OTR PSH 0363	PSH	\$ 378,168	\$ 10,235,188
31	Interfaith Hospitality Network	Permanent Supportive Housing 2	IHN PSH 0539	PSH	\$ 354,170	\$ 10,589,358
32	Over the Rhine Community Housing	Paths 2 Recovery & Expansion	OTR PSH 0302	PSH	\$ 996,383	\$ 11,585,741
33	Bethany House Services	Rapid Rehousing 5	BHS RRH FY18 New	RRH	\$ 412,548	\$ 11,998,289
34	Shelterhouse	CoC RRH & RRH 2	SHVG RRH 0519	RRH	\$ 1,360,756	\$ 13,359,045
35	YWCA	DV TH/RRH 2	YWCA TH/RRH FY18 New	TH/RRH	\$ 927,049	\$ 14,286,094
36	Over the Rhine Community Housing	Carrie's Place	OTR PSH 0541	PSH	\$ 96,106	\$ 14,382,200
37	National Church Residence	Commons at South Cumminsville	NCR PSH 0576	PSH	\$ 418,252	\$ 14,800,452
38	Caracole	Caracole House 3	CARA PSH 0543	PSH	\$ 76,000	\$ 14,876,452
39	YWCA	DV TH/RRH	YWCA TH/RRH 0577	TH/RRH	\$ 223,128	\$ 15,099,580
40	Strategies to End Homelessness	Coordinated Entry	STEH SSO 0498	SSO	\$ 136,711	\$ 15,236,291
41	Strategies to End Homelessness	HMIS Renewal	STEH HMIS 0251	HMIS	\$ 388,611	\$ 15,624,902
42	Excel Development	PSH	EXCL PSH 0475	PSH	\$ 2,389,839	\$ 18,014,741
43	Excel Development	FY18 Reallocated 1	STEH RRH 0581	RRH	\$ 245,800	\$ 18,260,541
44	Excel Development	FY18 Reallocated 2	STEH RRH 0305	RRH	\$ 243,056	\$ 18,503,597
45	Excel Development	FY18 Reallocated 3	STEH PSH 0521	PSH	\$ 211,945	\$ 18,715,542
46	Shelterhouse	Supportive Services	SHVG SSO 0010	SSO	\$ 45,886	\$ 18,761,428
47	Strategies to End Homelessness	DV RRH	STEH RRH DV FY18 New	RRH	\$ 173,106	\$ 18,934,534
						<b>Total</b>

\*revised on 09/04/2018 - YWCA DV TH/RRH project names

Tier 1 Funding Amount - \$15,815,393

Tier 2 Funding Amount - \$ 3,119,141

Approved by Homeless Clearinghouse 08/31/2018



# STRATEGIES TO END HOMELESSNESS

## **5. Public Posting CoC-Approved Consolidated Application**

1. Email Notification informing Community of Public Posting of CoC-Approved Consolidated Application
2. Social Media Posting informing Community of Public Posting of CoC-Approved Consolidated Application
3. STEH Website – evidence of public posting

## Jen Best

---

**From:** Jen Best  
**Sent:** Thursday, September 13, 2018 4:42 PM  
**To:** Kevin Finn; Jennifer McEvilley ; Amanda Davis; Jamie Hummer (jhummer@end-homelessness.org); Jessie Modderman  
**Cc:** Linda Seiter; Debbie Brooks (dbrooks@ywcacin.org)  
**Subject:** CoC Application - available for review

Hi all,

The FY2018 CoC Application has been posted on the [STEH website](#) and is available for community review. Please note that there are two sections in the competitive application process – the CoC Application and the Priority List. HUD provides us with a few sets of instructions on how to complete the application and that information can be found on the [HUD Exchange](#), under CoC Program Competition Resources.

To submit a comment on the application, please send me an email with the subject line: “*FY18 CoC Application – Comment*”. In the body of the email, note the specific section of the application that pertains to the comment and clearly state your comment. You may submit more than one comment in a single email. All comments will be shared with the Co-chairs of the Homeless Clearinghouse (CoC Board) and responded to within 2 business days.

Public comments will be received until 10am on Monday, September 17th. Any comments received after the deadline will not be addressed.

Thanks!

### ***Jen Best***

Director of Planning & Evaluation  
p. 513.263.2789 | f. 513.221.8444



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[jbest@end-homelessness.org](mailto:jbest@end-homelessness.org)

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**Recipients – Full CoC list + Clearinghouse + STEH Staff**

## 2018 Continuum of Care Application: Posted for Community Review

Thursday, September 13th, 2018 | News

The FY2018 Continuum of Care (CoC) Application has been posted and is available for community review. There are two sections in the competitive application process – the **Priority List** and the **CoC Application**. HUD provides a few sets of instructions on how to complete the application and that information can be found on the HUD Exchange, under CoC Program Instructional Guides and Resources or by [clicking here](#).

CoC Members: To submit a comment on the application, please send an email to **Jen Best** [jbest@end-homelessness.org](mailto:jbest@end-homelessness.org) with the subject line: "FY18 CoC Application–Comment".

In the body of the email, note the specific section of the application that pertains to the comment and clearly state your comment. You may submit more than one comment in a single email. All comments will be shared with the Homeless Clearinghouse Co-chairs and responded to within 2 business days.

Public comments will be received until 10am on Monday, September 17th. Any comments received after the deadline will not be addressed.

### News and updates

- ▶ Latest News
- ▶ Media Kit

### Latest Updates

2018 Continuum of Care Application: Posted for Community Review  
September 13, 2018

Partner Spotlight: City Gospel Mission  
September 10, 2018

Continuum of Care: Community Prioritization Meeting  
August 24, 2018

[Read More...](#)







## Strategies to End Homelessness

Published by Stacie Berger [?] · 44 mins ·



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Follow the link below to read our 2018 Continuum of Care Application. This represents a culmination of all of the good working happening in Cincinnati and Hamilton County!

Thank you to all our partners! Together we can #EndHomelessness

<https://www.strategiestoendhomelessness.org/.../apply-for-fu.../>

<b>32</b> People Reached	<b>1</b> Engagement	<b>1</b> Click	<b>Boost Post</b>
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Glenn Grootegoed

Like      Comment      Share     

Write a comment...

Chat (Off)



**Strategies to End Homelessness** @toEndHomeless · 38m



Follow the link below to read our 2018 Continuum of Care Application. This represents a culmination of all of the good working happening in Cincinnati and Hamilton County! Thank you to all our partners! Together we can [#EndHomelessness buff.ly/2MsXizo](#)



Address



5:36 PM  
9/13/2018

## Apply for funds

### Continuum of Care funding

#### 2018 Continuum of Care Competition






##### Final documents

-  [FY18 CoC Application](#)
-  [FY18 CoC Priority List](#)
-  [Accepted Projects & Priority List - Final FY18 \(Revised\)](#)
-  [2018 CoC Competition Timeline](#)

##### Community Prioritization Event on August 24, 2018

-  [Community Prioritization Event Outcomes - FY18](#)
-  [Community Rank List & Required Project Presentations – FY18 dated 08212018](#)
-  [FY18 Community Prioritization Event Agenda](#)
-  [FY18 CoC Competition Community Prioritization Event Project Presentation Order](#)
-  [2018 CoC Competition Scorecard Results](#)
-  [2018 Presentation Guidelines](#)
-  [2018 Scoring Criteria & Scorecard V2 FINAL](#)
-  [Adjustments to Scoring Criteria Scorecards](#)

##### The following documents are required to complete the 2018 Fillable CoC Performance Scorecard.

-  [FY18 CoC Competition Scorecard Completion Instructions](#)
-  [2018 Fillable CoC Performance Scorecard](#)
-  [Coordinated Entry Matches](#)
-  [Housing First Questionnaire](#)
-  [Project Name Crosswalk & Housing Inventory Count](#)



# STRATEGIES TO END HOMELESSNESS

## **6. Public Posting Local Competition Rate, Rank, Review and Selection Criteria (e.g. RFP)**

1. Email- CoC's Open Invitation to Participate in FY18 CoC Competition
2. STEH Website – Apply for Funds Page: FY18 CoC Competition Required Documents and Public Postings of Prioritization and Raking Results
3. Email - Required Competition Documents sent to Projects & announcing due date for submission
4. Email Informing Community of Project Ranking, Required Presenters, Presentation Guidelines, and Prioritization Event
5. STEH Website – Explanation of CoC Community Prioritization Process

## Amanda Davis

---

**From:** Kevin Finn  
**Sent:** Thursday, June 28, 2018 3:00 PM  
**To:** clockhart@blockbyblock.com; agarcia@bhsinc.org; bmiller@bhsinc.org; ckimber@bhsinc.org; david.spatholt@hamilton-co.org; dhawkins@bhsinc.org; ematthews@bhsinc.org; ehennessy@bhsinc.org; gggreen@bhsinc.org; jclay@bhsinc.org; kfreyler@bhsinc.org; kfrederick@bhsinc.org; kcarr@bhsinc.org; lmango@bhsinc.org; ltate@bhsinc.org; pmooore@bhsinc.org; snesbit@bhsinc.org; sschiller@bhsinc.org; tfrymire@bhsinc.org; astrobelt@bhsinc.org; awinters@bhsinc.org; bbell@bhsinc.org; btuchfarber@bhsinc.org; ghoward@bhsinc.org; wwilliams@bhsinc.org; acremering@caracole.org; bgolden@shelterpluscincy.org; BBailey@CARACOLE.ORG; brichardson@caracole.org; JRidenour@CARACOLE.ORG; jridenour@caracole.org; LMahaney@SHELTERPLUSCINCY.ORG; lmahaney@shelterpluscincy.org; mmccomas@caracole.org; mparker@caracole.org; smulhauser@caracole.org; smooore@caracole.org; abalsley@caracole.org; brichardson@shelterpluscincy.org; Cgriffin@Caracole.org; clambert@caracole.org; cscott@caracole.org; cyorio@caracole.org; jfessler@caracole.org; kdengler@caracole.org; lseiter@caracole.org; mcraig@caracole.org; mhines@caracole.org; mvolmer@caracole.org; sgarman@caracole.org; szapf@caracole.org; LSeiter@CARACOLE.ORG; melissa.niekamp@cchmc.org; ebast@citygospelmission.org; krosebrook@citygospelmission.org; lcarver@citygospelmission.org; manderson@citygospelmission.org; rhowell@CityGospelMission.org; mthompson@citygospelmission.org; lbrassell@cilo.net; rfestenstein@cilo.net; Shopkins@cilo.net; yrobinson@cilo.net; lbrassell@cilo.net; scottlakes22@gmail.com; Beachre@cpsboe.k12.oh.us; casemanager1@centerforrespitcare.org; finance@centerforrespitcare.org; housingmanager@centerforrespitcare.org; casemanager3@centerforrespitcare.org; ceo@centerforrespitcare.org; casemanagement@centerforrespitcare.org; asmith@cubcincy.org; mcmelton@cinunionbethel.org; rstanley@cubcincy.org; sreisch@cubcincy.org; tsmith@cubcincy.org; cflores@exceldev.org; cevans@exceldev.org; kcooley@exceldev.org; mbrucato@exceldev.org; jmiller@exceldev.org; njohnson@exceldev.org; sriston@exceldev.org; wcopenhaver@exceldev.org; cedwards@freestorefoodbank.org; danderson@freestorefoodbank.org; shumphries@freestorefoodbank.org; blittmann@freestorefoodbank.org; ljones@freestorefoodbank.org; snicks@freestorefoodbank.org; thill@freestorefoodbank.com; BWeber@GCBHS.com; cengle@gcbhs.com; DDeMarcus@gcbhs.com; mjones@gcbhs.com; acox@gcbhs.com; ajohnson@gcbhs.com; jallen@gcbhs.com; klove@gcbhs.com; mspangenber@gcbhs.com; rdoran@gcbhs.com; tfairbanks@gcbhs.com; trains@gcbhs.com; boubacar.diallo@hamilton-co.org; AnnaWorpenberg@cincihomeless.org; Josh Spring; amerritt@otrch.org; ben@ihncincinnati.org; crystal@ihncincinnati.org; erica@ihncincinnati.org; garrett@ihncincinnati.org; jennifer@ihncincinnati.org; kelly@ihncincinnati.org; kimberly@ihncincinnati.org; marlicia@ihncincinnati.org; megan@ihncincinnati.org; merrybeth@IHNCincinnati.org; peggy@ihncincinnati.org; samantha@ihncincinnati.org; stacey@ihncincinnati.org; shawna@ihncincinnati.org; info@stlydiashouse.org; meredith@stlydiashouse.org; bcampbell@lys.org; ghollenbach@lys.org; jbobbitjohnson@lys.org; jomartin@lys.org; Judy Oakman; lrobinson@lys.org; nmoran@lys.org; phaffner@lys.org; rcole@lys.org; rkruetzkamp@lys.org; sbradley@lys.org; Amontgomery@lys.org; ccaudill@lys.org; dapope-bullucks@lys.org; ddurr@lys.org; enelson@lys.org; jcooper@lys.org; joakman@lys.org; kdunnigan@lys.org; lleonard@lys.org; Mhouston@lys.org; rharris@lys.org; Sarad@hcmhrsb.org; cawleycc@miamioh.edu; mzimmerman@nationalchurchresidences.org; gwen.copenhaver@theexitprogram.com; janice.sawyer@theexitprogram.com; michele.johnson@theexitprogram.com; valerie.walls@theexitprogram.com; vwalls@theexitprogram.com; deborah.muench@nkyhealth.org; paul.trickel@nkyhealth.org; georgine@ourdailybread.us; pamela@ourdailybread.us; asilver@otrch.org; ahutzel@otrch.org; amcdonald@otrch.org; bolson@otrch.org; delkins@otrch.org; jstein@otrch.org; kfogle@otrch.org; mburke@otrch.org; mchristopher@otrch.org; psroot@otrch.org; cwooten@otrch.org; lstoll@otrch.org; sguilfoile@otrch.org; crobinson@cincigoodwill.org; cgreen@cincigoodwill.org; CBlythe@cincigoodwill.org; janelgreen@cincigoodwill.org; jbriggs@cincigoodwill.org; jfarley@cincigoodwill.org; lmauldin@cincigoodwill.org; matthewcleves@cincigoodwill.org; mbrown@cincigoodwill.org; MSpeed@cincigoodwill.org; Spressley@cincigoodwill.oh; pamelaskeens@cincigoodwill.org; david@theplc.net;

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**Cc:** Jen Best; Jamie Hummer; Amanda Davis; Jennifer McEvilley

**Subject:** 2018 CoC Application Timeline & Deadlines

**Attachments:** 2018 Intent to Apply Form.docx; 2018 Renewal Intent Form.docx

**Importance:** High

Hello all,

On June 20<sup>th</sup>, HUD released the [FY18 Notice of Funding Availability \(NOFA\)](#) for the Continuum of Care program, which outlines the national CoC application process, HUD’s priorities, scoring breakdown, & some important dates for this year’s competition. With the NOFA out, I wanted to share some information with you all regarding this year’s CoC process.

As you likely know, our local CoC’s process has always integrated local priorities & community process with HUD’s priorities through a scoring event, referred to as “Large Group Scoring”. In recent months, as we have waited for the CoC NOFA to be released, the Homeless Clearinghouse & other community members have been considering changes to how our local scoring event will be handled this year.

The details of this year’s scoring event are still being finalized. We will share more information with you all as it becomes available, likely sometime after the Homeless Clearinghouse meeting that is scheduled for July 20<sup>th</sup>. What I will mention is that this year’s event promises to be shorter in duration, more precise in its execution, & better attuned with its purpose: balancing an emphasis on performance with our community’s unique needs. Because the event details are still being finalized, we will be asking all applicants to hold time for this event in case they are asked to present on their project(s).

Attached you will find two documents, the ***FY18 Intent to Apply Form & FY18 Renewal Intent Form***.

- **Renewal Funding:** please complete the *FY18 Renewal Intent Form* if your agency would like to renew previously funded projects; these forms are due back to STEH no later than **4 p.m. on Friday, July 13, 2018**.
- **New Funding:** please complete the *FY18 Intent to Apply Form* if your agency would like to apply for funding for a new project or expansion project for FY18; these forms are due back to STEH no later than **4 p.m. on Friday, July 20, 2018**.
- **Submission of forms:** all forms should be submitted to **Amanda Davis at [adavis@end-homelessness.org](mailto:adavis@end-homelessness.org)**

These documents will also be available on [STEH’s website](#) within the next few days.

Additionally, it may be beneficial for you or the appropriate staff at your agency to hold time available for the following tentative dates & activities related to this year’s CoC application process (dates/events may change or be added):

Event	Date & Time
<b>Scoring Criteria Community Meeting</b>	Friday, July 27: 2-4 p.m.
<b>Hold time for project pre-work</b>	Friday, July 27 to Monday, August 6
<b>Hold time for data reviews &amp; application materials</b>	Friday, August 17 to Friday, August 24
<b>Community Prioritization Meeting (tentative)</b>	Friday, August 24: 4 hour meeting, time TBD. Please hold this entire day until more information is available.

If you have general questions about the CoC process or competition, please send them to Jamie Hummer at [jhummer@end-homelessness.org](mailto:jhummer@end-homelessness.org) or to Jen Best at [jbest@end-homelessness.org](mailto:jbest@end-homelessness.org), but please note that Jen Best is out of the office until July 16<sup>th</sup>.

**Kevin Finn**  
President/CEO  
[kfinn@end-homelessness.org](mailto:kfinn@end-homelessness.org)  
p. 513.263.2788 | f. 513.221.8444

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## Apply for funds


### Continuum of Care funding

#### 2018 CoC Prioritization Documents for Prioritization Event on August 24, 2018

	<a href="#">Community Rank List &amp; Required Project Presentations – FY18 dated 08212018</a>
	<a href="#">FY18 Community Prioritization Event Agenda</a>
	<a href="#">FY18 CoC Competition Community Prioritization Event Project Presentation Order</a>
	<a href="#">2018 CoC Competition Scorecard Results</a>
	<a href="#">2018 Presentation Guidelines</a>
	<a href="#">2018 Scoring Criteria &amp; Scorecard V2 FINAL</a>
	<a href="#">Adjustments to Scoring Criteria Scorecards</a>

#### 2018 Continuum of Care Competition

The following documents are required to complete the 2018 Fillable CoC Performance Scorecard.

	<a href="#">FY18 CoC Competition Scorecard Completion Instructions</a>
	<a href="#">2018 Fillable CoC Performance Scorecard</a>
	<a href="#">Coordinated Entry Matches</a>
	<a href="#">Housing First Questionnaire</a>
	<a href="#">Project Name Crosswalk &amp; Housing Inventory Count</a>
	<a href="#">FY18 CoC Competition Question Portal</a>

#### What is a Continuum of Care?

A Continuum of Care (CoC) is a collaborative funding and planning approach that helps communities plan for and provide, as necessary, a full range of emergency, transitional and permanent housing, along with prevention and other services to address the various needs of homeless persons. HUD also refers to the group of community stakeholders involved in the decision making process as the "Continuum of Care."

Strategies to End Homelessness serves as the lead agency for our local Continuum of Care (OH-500) and is under contract with the City of Cincinnati and Hamilton County to facilitate the work of the community related to homelessness including:

- Shelter Diversion
- Outreach programs
- Emergency shelter programs for singles and families
- Transitional housing programs
- Service-enriched permanent supportive housing programs including Shelter Plus Care
- Specialized services-only programs

#### The Continuum of Care process

- Involves all agencies and programs who receive funding from the U.S. Department of Housing and Urban Development (HUD)
- Assesses capacity and identifies gaps
- Develops proactive solutions
- Increases competitive advantage for receiving funds
- Facilitates the allocation of funding to these agencies
- Serves as an inclusive vehicle to promote best practices
- Facilitates access to mainstream resources and services for the homeless
- Works to develop policies and procedures to assist homeless persons directly

The tangible product of this process is the annual Continuum of Care grant application to the U.S. Department of Housing and Urban Development.

#### Continuum of Care membership

As defined in our CoC's Governance Charter, membership is determined by fully participating in the most recent Large Group Scoring Process.

To receive information about upcoming CoC meetings and agendas, contact [Jen Best](#).

[See archived CoC information](#)

## Continuum of Care downloads and resources

### Current CoC Policies



CoC Prioritization Policy Effective 08/2016



TBRA Mobility Policy Effective 07/2017



CoC Reallocation Policy Effective 11/2017

### 2018 Governance



Homeless Clearinghouse Membership 02/2018



2018 Governance Charter 02/2018

### 2017 CoC Documents



FY 2017 Continuum of Care Application-FINAL 9/26/17



FY 2017 Continuum of Care Priority Listing-FINAL 9/26/17



FY 2017 Prioritization List – FINAL 8/18/17



2017 CoC Match Guidance & Template



2017 CoC Timeline -updated 7/31/2017



CoC Governance Charter 2017



2017 Homeless Clearinghouse Membership



2017 Governance Meeting Minutes & Attendance



2017 Governance Meeting Agenda

### 2017 Policies for approval at annual Governance Meeting



Coordinated Entry Policies & Procedures (includes Transitional Housing)



Permanent Supportive Housing Policies



Rapid Re-housing Policies

## ESG funding

### What is ESG?

On December 5, 2011, the U.S. Department of Housing and Urban Development published an interim rule for the new Emergency Solutions Grant (ESG). This program replaces the former Emergency Shelter Grant, which was originally established by the Homeless Housing Act of 1986, in response to the growing issue of homelessness among men, women, and children in the United States. The change in the program's name, from Emergency Shelter Grants to Emergency Solutions Grants, reflects the change in the program's focus from addressing the needs of homeless people in emergency or transitional shelters to assisting people so they can quickly regain stability in permanent housing after experiencing a housing crisis and/or homelessness.

ESG funds are used in multiple ways in our community. As a continuation of the HPRP Homeless Prevention, ESG funds support a Shelter Diversion Program and ESG funds continue to fund the operating and essential service expenses at the emergency shelter facilities.

The emergency shelter providers who currently receive City of Cincinnati ESG funds are: Bethany House Services, Center for Respite Care, Shelterhouse, Interfaith Hospitality Network of Greater Cincinnati, Lighthouse Youth Crisis Center, Lighthouse Sheakley Center for Youth, the Salvation Army, and the YWCA Domestic Violence Shelter.

The City of Cincinnati and Hamilton County contract with Strategies to End Homelessness for coordination and planning of homeless housing and services including ESG funds. The emergency shelter portion of the ESG funds are allocated in an inclusive process of the provider network. Providers gather annually to review the needs within the community and to allocate the funding. The ESG shelter allocation is presented to the City of Cincinnati for final approval.

Read the [Emergency Solutions Grant Program Interim Regulations](#).

Please contact [Jen Best](#) at Strategies to End Homelessness for questions regarding the ESG Emergency Shelter program.

Please contact [Jamie Hummer](#) at Strategies to End Homelessness for questions regarding the Shelter Diversion Program.

## HOPWA funding

### What is HOPWA?

Housing Opportunities for Persons With AIDS (HOPWA) is federal funding from the U.S. Department of Housing and Urban Development that is distributed to Eligible Metropolitan Statistical Areas (EMSA's) using a statutory formula that relies on AIDS statistics from the Centers for Disease Control and Prevention (CDC). HOPWA funding provides housing assistance and related supportive services as part of HUD's Consolidated Planning initiative that works in partnership with communities and neighborhoods in managing Federal funds appropriated to HIV/AIDS programs.

The HOPWA Advisory Committee oversees the allocation of HOPWA funding in a process designed to be inclusive of multiple stakeholders within the HIV/AIDS community. The Committee is comprised of: state HOPWA officials, Ryan White representatives, provider applicants, consumers, and advocacy organizations. The Committee reviews applications for HOPWA funds and makes allocation recommendations, which are subsequently forwarded to the City of Cincinnati's Office of Budget and Evaluation for inclusion in the annual budget presented to the City Council for final approval.

The City of Cincinnati contracts with Strategies to End Homelessness to oversee sponsor grant management and project activities.

HOPWA funding is awarded to the City of Cincinnati as the Formula grantee for the Cincinnati area EMSA. This area includes the following 5 counties in Ohio: Brown, Butler, Clermont, Hamilton and Warren; 7 Kentucky counties: Boone, Bracken Campbell, Gallatin, Grant, Kenton and Pendleton; and 3 Indiana counties: Dearborn, Franklin and Ohio.

Please contact [Allyson Richer](#) at Strategies to End Homelessness for more information regarding HOPWA.

The following agencies were awarded funding to operate HOPWA Programs in 2017:

Caracole, Inc.  
Center for Respite Care  
Northern Kentucky Health Department  
Shelterhouse

### HOPWA downloads and resources

#### 2018 Housing Opportunities for Persons with AIDS Application

 2018 HOPWA Application

 2018 HOPWA Program Budget


#### Resources

 HOPWA Financial Management Online Training

 HOPWA Law, Regulations, and Notices

 HOPWA Grantee Oversight Resource Guide

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Safe and Supported  
Solutions for Family Homelessness  
Progress Reports  
Data

#### Street Reach App



#### Get in Touch

Call: 513-263-2780  
Fax: 513-221-8444  
Strategies to End Homelessness  
2368 Victory Parkway, Suite 600  
Cincinnati, OH 45206  
[info@end-homelessness.org](mailto:info@end-homelessness.org)





## Amanda Davis

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**From:** Amanda Davis  
**Sent:** Monday, July 30, 2018 12:56 PM  
**Subject:** Addendum: FY18 CoC Competition Documents  
**Attachments:** FY18 CoC Competition Scorecard Completion Instructions.pdf; 2018 CoC Scoring Criteria & Scorecard.pdf; 2018 Fillable CoC Performance Scorecard.xlsx; Coordinated Entry Matches.pdf; Housing First Questionnaire.pdf; Project Name Crosswalk & 2018 Housing Inventory Count.pdf

**Importance:** High

*The Project Name Crosswalk & Housing Inventory Count has been attached and added to the below list of documents needed to complete the FY18 Fillable CoC Performance Scorecard.*

Greetings!

Attached you will find the following documents needed to complete the FY18 Fillable CoC Performance Scorecard:

- FY18 CoC Competition Scorecard Completion Instructions
- 2018 CoC Scoring Criteria & Scorecard
- 2018 Fillable CoC Performance Scorecard
- Coordinated Entry Matches
- Housing First Questionnaire
- *Project Name Crosswalk & 2018 Housing Inventory Count*

These documents are also available on STEH's [Apply for Funds](#) page. To ensure consistency in communication, please submit any questions through the [FY18 CoC Competition Question Portal](#) only.

Completed 2018 Fillable CoC Performance Scorecards and supporting documentation (APR reports, Recidivism reports, and Housing First Questionnaire) are due to Amanda Davis ([adavis@end-homelessness.org](mailto:adavis@end-homelessness.org)) **no later than 4:00 p.m. on Monday, August 6**. Following submission, STEH staff will review each Scorecard, and compare it to the submitted supporting documentation. If errors are found, STEH staff will correct them, and the agency will be notified.

As discussed at Friday's FY18 CoC Competition Scoring Criteria Community Meeting, the bottom 15% of projects, new projects, and projects of the Clearinghouse's choosing will be required to present at the CoC Community Prioritization Event on August 24; required presenters will be notified on August 17.

Thank you.

### **Amanda Davis**

Program Coordinator  
p. 513.263.2783 | f. 513.354.6688



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## Amanda Davis

---

**From:** Amanda Davis  
**Sent:** Friday, August 17, 2018 1:22 PM  
**Subject:** FY18 CoC Competition Update

**Importance:** High

Hello,

Our community has done an incredible job of quickly adapting to the new FY18 CoC Community Scoring Criteria and Scorecards—well-done and thank you!

The final Community Rank List and Required Project Presentations, updated FY18 CoC Competition Scoring Criteria (revised to include recommendations from the Clearinghouse and final quartile calculations), and FY18 Presentation Guidelines will be posted to [STEH's website](#) this afternoon. Early next week we should be able to provide the full community's Scorecard data to inform rankers' decision-making.

As a reminder, the CoC Community Prioritization Event (formerly "Large Group Scoring") will begin promptly at noon on Friday, August 24 at Interact for Health. All CoC-funded agencies are required to attend (two rankers plus presenters when required, no additional spectators, please). *Non-CoC funded agencies, community members, and other interested parties are welcome to attend and rank, but please note that space is very limited and [registration](#) is required for all attendees.*

Thank you.

### **Amanda Davis**

Program Coordinator

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# Continuum of Care: Community Prioritization Meeting

Friday, August 24th, 2018 | [News](#)

On June 20th, HUD released the **FY18 Notice of Funding Availability (NOFA)** for the **Continuum of Care (CoC)** program, which outlines the national CoC application process, the priorities of the U.S. Department of Housing and Urban Development (HUD), scoring breakdown, and some important dates for this year's competition. This process determines which local programs will be funded FY18.



## What is a Continuum of Care

A Continuum of Care (CoC) is a collaborative funding and planning approach that helps communities plan for and provide, as necessary, a full range of emergency, transitional and permanent housing, along with prevention and other services to address the various needs of homeless persons. HUD also refers to the group of community stakeholders involved in the decision making process as the "Continuum of Care."

**Strategies to End Homelessness** serves as the lead agency for our local Continuum of Care (OH-500) and is under contract with the City of Cincinnati and Hamilton County to facilitate the work of the community related to homelessness.

## The purpose of the Continuum of Care Program, is to:

- Promote community-wide commitment to ending homelessness
- Provide funding to quickly house individuals and families while minimizing the trauma of homelessness
- Promote access to and effective use of mainstream benefits
- Optimize self-sufficiency among individuals and families experiencing homelessness

Today, Friday August 24, our **Community Prioritization Meeting** is taking place to determine local priorities – finding the balance – between HUD System Performance and local Community Process. To do so we have implemented Improved Scoring Criteria and improved our Community-based Rank & Review Process.

## Focused on HUD CoC Priorities:

- Ending Homelessness for all people
- Creating a systemic response to homelessness
- Strategically allocating & using resources
- Using a housing first approach

## To get the maximum benefit from the resources available we need to:

- Divert people from entering homelessness
- House more people who become homeless
- Provide individualized supportive services & reduce recidivism
- Prove the community has an efficient & effective system to end homelessness

## Work facilitated

- Shelter Diversion
- Outreach programs
- Emergency shelter programs for singles and families
- Transitional housing programs
- Service-enriched permanent supportive housing programs including Shelter Plus Care
- Specialized services-only programs

All based on system-performance and in line with our strategy to reduce **Chronic, Family, Veteran & Youth Homelessness** in the **Cincinnati/Hamilton County** area.

Agencies, Non-CoC funded agencies, community members, and other interested parties were invited to take part in the ranking process.

Follow these links to learn more about the programs in consideration by the community integrating both local priorities and those of the U.S. Department of Housing and Urban Development.

## News and updates

- [Latest News](#)
- [Media Kit](#)

## Latest Updates

Continuum of Care: Community Prioritization Meeting  
August 24, 2018

Strategies to End Homelessness in the Media  
August 14, 2018

The Truth About Our Homeless System  
August 14, 2018

[Read More...](#)



[Our Agenda](#)

[Community Ranking List & projects to be presented](#)

[How our Partners Apply for Funds](#)

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Fax: 513-221-8444  
Strategies to End Homelessness  
2368 Victory Parkway, Suite 600  
Cincinnati, OH 45206  
[info@end-homelessness.org](mailto:info@end-homelessness.org)







# STRATEGIES TO END HOMELESSNESS

## **7. CoC Process for Reallocation**

1. On-going Process for Reallocation as allowable under UFA status:

A. CoC Expenditure Threshold Policy & Procedure

B. Reallocation of CoC Funding Policy

C. Evidence of Successful Implementation of CoC Spending & Reallocation Policies

2. Annual CoC Rank & Review Process completed during CoC Competition – all supporting documents are included in attachment #4 “Objective Criteria – Rate, Rank, Review & Selection Criteria”

**TITLE:** Continuum of Care Expenditure Threshold Policy & Procedure

**POLICY ADMINISTRATION:** The “Homeless Clearinghouse”, Cincinnati and Hamilton County’s Continuum of Care Board.

**PURPOSE:** To maximize use of Continuum of Care (CoC) funding

**EFFECTIVE DATE:** July 2017

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**POLICY:** It is the policy of the Clearinghouse to minimize unspent funding returned to HUD in an effort to maximize limited resources. The board has adopted the following Expenditure Threshold Procedure. This policy is not applicable to projects in their first year of operation.

**PROCEDURE:** Acknowledging that CoC subawards state that funding must be drawn at least quarterly, the Homeless Clearinghouse has defined it as a best practice for projects to draw monthly on their CoC funded projects.

Strategies to End Homelessness (STEH) will monitor spending on all CoC funded projects and recapture funding based on the schedule below. Recaptured funding will be reallocated per a separate Clearinghouse-approved procedure. STEH will engage in regular discussions with all provider agencies about pace of spending based on the expectation that approximately 1/12 of the grant funds will be drawn monthly.

STEH will provide the Homeless Clearinghouse with a report of spending per project at each regularly scheduled monthly meeting. Requests for Reimbursement must be submitted five days before the “review date” for each quarter. The requests for reimbursement must also be current at the point of submission, meaning the request is for the month immediately preceding the review date.

	<b>Review Date</b>	<b>Expected % spent:</b>	<b>Recapture of funding if:</b>	<b>Discussion with CoC staff about spending plan in following Quarter if between:</b>
Quarter 1: July-Sept	October 15	25%	< 15%	15-24.9%
Quarter 2: Oct-Dec	January 15	50%	< 45%	45-49.9%
Quarter 3: Jan-March	April 15	75%	<75%	
Quarter 4: April-June	Final billings are due 40 days after the close of the operating year.			

The amount of funds recaptured will be based on the difference between actual amount expended and recapture threshold defined above. Funding will be recaptured proportional to original budget line items.

Provider agencies will have an opportunity to appeal the recapture of funds by submitting a formal request to the CoC Director; including a detailed spend-down plan, decisions will be made by the Homeless Clearinghouse.

If funding is recaptured, projects will be eligible to renew at a funding level at or below the current funding amount based on the average of the following:

1. The total amount expended in the last completed operating year, and;
2. The projected amount to be spent for the current operating year, as of the end of the third quarter as defined above. Quarter 4 spending projections will equal the amount of funds that the project expended in Quarter 3.

If the average of the annual spending of the completed year and the projection for the current year is less than the current contracted project subaward, the project will be able to renew up to 110% of this average annual amount, not to exceed the current contracted subaward amount.

This policy is subject to annual review by the Homeless Clearinghouse depending on timeliness of the availability of funds.

**POLICY TITLE:** Continuum of Care Reallocation of CoC Funding

**POLICY ADMINISTRATION:** The Homeless Clearinghouse, Cincinnati/Hamilton County Continuum of Care Board.

**EFFECTIVE DATE:** 11/17/2017

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**POLICY:** In coordination with the *Continuum of Care Expenditure Threshold Policy & Procedure*, it is the policy of the Clearinghouse to maximize the effectiveness of Continuum of Care (CoC) Funding and to assist as many people as possible in exiting homelessness.

**PROCEDURE:**

1. Funding Priority:

The CoC will prioritize the use of recaptured CoC funds to increase Rapid Re-Housing capacity in Cincinnati and Hamilton County. Rapid Re-Housing will provide services and short or medium-term rental assistance to individuals and families in accordance with 24 CFR 578. The Homeless Clearinghouse may approve a Rapid Re-Housing project to specifically provide one month of rental assistance and eligible moving costs to participants in need of minimal resources to exit homelessness.

Other eligible CoC projects may also be considered to receive reallocated funds.

2. Criteria:

In order to receive CoC funding through the process outlined below, the **agency** requesting funds must meet the following criteria:

- a. Is currently in contract with Strategies to End Homelessness to administer a CoC funded project;
- b. Is not currently under a monitoring sanction that was formally approved by the Homeless Clearinghouse.

The eligible agency may request funds for a **project** that meets the following criteria:

- a. Is currently meeting or exceeding spending thresholds as outlined in the *Continuum of Care Expenditure Threshold Policy & Procedure*;
- b. Is currently administering the project component for which funding is requested.

3. Allocation Process:

- a. Agencies interested in additional CoC funds will complete a standard Funding Request form and submit it to the CoC Director at Strategies to End Homelessness (STEH).
- b. Funding Request forms will be accepted on a rolling basis but are only guaranteed to be reviewed at each quarterly threshold as defined by the *Continuum of Care Expenditure Threshold Policy & Procedure*.
- c. STEH will contact agencies requesting funds to provide additional information if the intent of the request is not clear. STEH will inform agencies if requests are ineligible for CoC funding.
- d. Once the reallocation amount is finalized at each quarterly threshold, STEH will gather all submitted Funding Requests and present the Homeless Clearinghouse with the following information: the amount of funds available for reallocation, an overview of all Funding Requests received (ineligible requests will be noted), copies of submitted Funding

Request forms, and any information regarding the elements listed in the “criteria” section of this document.

- e. The Clearinghouse will make final funding decisions. The board may delegate the allocation process to a subcommittee of board members. However, STEH may not issue contract amendments to increase CoC funding to any projects without an official vote by the Homeless Clearinghouse at their monthly meeting or via email.
- f. STEH will execute subaward amendments for the approved increases.

4. Additional Information:

- a. As a means of managing and maintaining the Homeless Preference Housing Choice Vouchers issued to the CoC by Cincinnati Metropolitan Housing Authority, reallocated CoC funds will be used to support the community’s CMHA liaison, currently employed by STEH, at a time determined by program need.
- b. Agencies requesting to increase Rapid Re-Housing capacity may submit one Funding Request form for as much capacity as can be added. If a Funding Request cannot be fully awarded in a single re-allocation period, the Funding Request will remain on file and the Clearinghouse can decide to award additional funding if/when they are available.
- c. Funding awarded under this process will not be renewed. Agencies may be able to apply for new CoC projects to maintain increased capacity in housing projects dependent on information released in the annual CoC Notice of Funding Availability (NOFA) and as defined in the local prioritization process.
- d. Agencies receiving additional funds will be required to provide match funding as required by 24 CFR 578 and detailed in each subaward.
- e. STEH will continue to monitor the pace of spending on projects that receive reallocated CoC funding. However, projects approved to increase housing capacity will not be held to the recapture timeline outlined in the *Continuum of Care Expenditure Threshold Policy & Procedure* for the current operating year.
- f. The Homeless Clearinghouse may retract funding awarded under this process if the receiving agency is not utilizing the additional funds and alternative funding requests could immediately utilize the funds for eligible projects.
- g. STEH may work directly with an agency to move funds between CoC projects within that same Agency. These funding transfers do not require Homeless Clearinghouse approval.

## Jen Best

---

To: Jen Best  
Subject: RE: FY16 CoC Renewal Spending

### Evidence of successful implementation of CoC Spending & Reallocation Policies – “CoC Expenditure Threshold Policy” & “Procedure & CoC Reallocation of CoC Funding”

---

From: Jennifer McEvilley <[jlmcevilley@end-homelessness.org](mailto:jlmcevilley@end-homelessness.org)>  
Sent: Friday, August 24, 2018 10:03 AM  
To: Jennifer McEvilley  
Cc: Suzanne Church; Aaron Whitehead  
Subject: FY16 CoC Renewal Spending

Hello,

If you are receiving this email, your agency has a subaward on the FY16 CoC Renewal grant. As you know, we are currently finalizing the spending for this award. **One-hundred percent** of the program funds have been committed and expended. There are several agencies that have a pending request for additional program funding that we will not be able to approve. This is both bad and great news. I wish we could fund the remaining requests but after returning \$1.2mil to HUD last year, I am delighted that we were able to use all of the program funding to serve individuals and families experiencing homelessness in our community. Great job to all of you!

We do have some additional admin dollars available on this award. If you have unreimbursed admin expenses on your FY16 CoC Renewal projects, please let us know an estimated amount ASAP – **no later than Wednesday, August 29<sup>th</sup> at 4pm**. Once we have an idea of what agencies might need, I will be able to let you know the next steps in being reimbursed for those expenses.

Thank you,

**Jennifer L. McEvilley**  
Compliance Director  
p. 513.263.2797 | f. 513.221.8444



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# STRATEGIES TO END HOMELESSNESS

## **8. Notification Outside of e-snaps – Projects Accepted**

1. CoC-wide email - Notification of accepted projects
2. Accepted Projects & Priority List

## Amanda Davis

---

**From:** Jen Best  
**Sent:** Friday, August 31, 2018 6:01 PM  
**To:** Kevin Finn; Jennifer McEvilley; Amanda Davis; Jamie Hummer  
**Cc:** Linda Seiter; Debbie Brooks (dbrooks@ywcacin.org)  
**Subject:** Accepted Projects & Priority List - FY18 CoC Competition

**Importance:** High

The local Continuum of Care (CoC) competition process is complete for FY18! On behalf of the full Continuum, we want to thank everyone who embraced the new and improved local scoring process. We are fortunate to do this work amongst such incredible community partners!

The ***Accepted Projects & Priority List***, which details the final results of the process has been posted to the [CoC page on the STEH website](#). The CoC Board, locally known as the Homeless Clearinghouse, approved the prioritization list today and all projects that were either reduced or rejected as a result of the competition have been notified. This email serves as notification of inclusion to all applicants listed in the *Accepted Projects & Priority List*.

Now that the local process is complete, we will shift our focus to pulling together the final pieces of the community's full CoC application. By September 14<sup>th</sup>, we will make a draft of the complete application available for public comment and I encourage you to review the narratives that describe the great work of this community. We will send an email when the application is available but please keep checking the [CoC page on the STEH website](#) for up-to-date information on this process.

We say it all the time but this process only works because of your participation! We are so thankful to each and every one of you for your dedication to improving our system and ending homelessness.

Please let me know if you have questions. Have a great weekend!

### ***Jen Best***

Director of Planning & Evaluation  
p. 513.263.2789 | f. 513.221.8444



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[jbest@end-homelessness.org](mailto:jbest@end-homelessness.org)

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**Recipients – Full CoC list + Clearinghouse + STEH Staff**



# STRATEGIES TO END HOMELESSNESS

## Continuum of Care Competition FY 2018 Accepted Projects & Priority List

OH-500 - Cincinnati/Hamilton County, OH

Rank	Agency Name	Project Name	Application Name	Type	Application Amount	Running Total
1	Tender Mercies	821 Flats	TM PSH FY18 New	PSH	\$ 426,752	\$ 426,752
2	Interfaith Hospitality Network	TH/RRH	IHN TH/RRH FY18 New	TH/RRH	\$ 500,279	\$ 927,031
3	Over the Rhine Community Housing	Jimmy Heath House	OTR PSH 0003	PSH	\$ 255,452	\$ 1,182,483
4	Bethany House Services	Rapid Rehousing 2	BHS RRH 0303	RRH	\$ 320,656	\$ 1,503,139
5	Tender Mercies	Harkavy Hall SRA	TM PSH 0006	PSH	\$ 75,283	\$ 1,578,422
6	Tender Mercies	Haven Hall PSH	TM PSH 0329	PSH	\$ 332,951	\$ 1,911,373
7	Over the Rhine Community Housing	East Clifton Homes	OTR PSH 0330	PSH	\$ 59,448	\$ 1,970,821
8	Over the Rhine Community Housing	Recovery Hotel SRA PSH	OTR PSH 0015	PSH	\$ 95,751	\$ 2,066,572
9	Tender Mercies	Dana Hotel	TM PSH 0362	PSH	\$ 90,567	\$ 2,157,139
10	Bethany House Services	Rapid Rehousing 4	BHS RRH 0461	RRH	\$ 606,586	\$ 2,763,725
11	Caracole	Caracole PSH	CARA PSH 0009	PSH	\$ 704,719	\$ 3,468,444
12	Lighthouse Youth & Family Services	Scattered Site RRH	LYS RRH 0254	RRH	\$ 154,961	\$ 3,623,405
13	Tender Mercies	PSH 2	TM PSH 0520	PSH	\$ 136,763	\$ 3,760,168
14	YWCA	DV Rapid Rehousing	YWCA RRH 0325	RRH	\$ 131,708	\$ 3,891,876
15	Lighthouse Youth & Family Services	Permanent Supportive Housing	LYS PSH 0404	PSH	\$ 207,953	\$ 4,099,829
16	Interfaith Hospitality Network	Permanent Supportive Housing	IHN PSH 0368	PSH	\$ 356,623	\$ 4,456,452
17	Salvation Army	RRH 2 for Families	SA RRH 0403	RRH	\$ 234,731	\$ 4,691,183
18	Bethany House Services	Permanent Supportive Housing	BHS PSH 0542	PSH	\$ 361,533	\$ 5,052,716
19	Nothing into Something Real Estate	Exit PSH	NISR PSH 0439	PSH	\$ 362,163	\$ 5,414,879
20	Center for Independent Living Options	Permanent Housing Program	CILO PSH 0008	PSH	\$ 493,853	\$ 5,908,732
21	Bethany House Services	Rapid Rehousing 1	BHS RRH 0472	RRH	\$ 770,054	\$ 6,678,786
22	Ohio Valley Goodwill Industries	PH Rapid Re-housing	OVGI RRH 0306	RRH	\$ 557,400	\$ 7,236,186
23	Talbert House	Permanent Supportive Housing 1	TH PSH 0307	PSH	\$ 507,591	\$ 7,743,777
24	Talbert House	Permanent Supportive Housing 2	TH PSH 0579	PSH	\$ 934,628	\$ 8,678,405
25	Lighthouse Youth & Family Services	Street Outreach	LYS SSO 0253	SSO	\$ 102,518	\$ 8,780,923
26	Shelterhouse	Homeless Individuals Partnership	SHVG SSO 0012	SSO	\$ 251,769	\$ 9,032,692
27	Lighthouse Youth & Family Services	RRH Expansion	LYS RRH 00365	RRH	\$ 179,286	\$ 9,211,978
28	Bethany House Services	Family Housing Partnership	BHS SSO 0248	SSO	\$ 322,568	\$ 9,534,546
29	Interfaith Hospitality Network	RRH for Families	IHN RRH 0476	RRH	\$ 322,474	\$ 9,857,020
30	Over the Rhine Community Housing	ALI Consolidation	OTR PSH 0363	PSH	\$ 378,168	\$ 10,235,188
31	Interfaith Hospitality Network	Permanent Supportive Housing 2	IHN PSH 0539	PSH	\$ 354,170	\$ 10,589,358
32	Over the Rhine Community Housing	Paths 2 Recovery & Expansion	OTR PSH 0302	PSH	\$ 996,383	\$ 11,585,741
33	Bethany House Services	Rapid Rehousing 5	BHS RRH FY18 New	RRH	\$ 412,548	\$ 11,998,289
34	Shelterhouse	CoC RRH & RRH 2	SHVG RRH 0519	RRH	\$ 1,360,756	\$ 13,359,045
35	YWCA	DV TH/RRH 2	YWCA TH/RRH FY18 New	TH/RRH	\$ 927,049	\$ 14,286,094
36	Over the Rhine Community Housing	Carrie's Place	OTR PSH 0541	PSH	\$ 96,106	\$ 14,382,200
37	National Church Residence	Commons at South Cumminsville	NCR PSH 0576	PSH	\$ 418,252	\$ 14,800,452
38	Caracole	Caracole House 3	CARA PSH 0543	PSH	\$ 76,000	\$ 14,876,452
39	YWCA	DV TH/RRH	YWCA TH/RRH 0577	TH/RRH	\$ 223,128	\$ 15,099,580
40	Strategies to End Homelessness	Coordinated Entry	STEH SSO 0498	SSO	\$ 136,711	\$ 15,236,291
41	Strategies to End Homelessness	HMIS Renewal	STEH HMIS 0251	HMIS	\$ 388,611	\$ 15,624,902
42	Excel Development	PSH	EXCL PSH 0475	PSH	\$ 2,389,839	\$ 18,014,741
43	Excel Development	FY18 Reallocated 1	STEH RRH 0581	RRH	\$ 245,800	\$ 18,260,541
44	Excel Development	FY18 Reallocated 2	STEH RRH 0305	RRH	\$ 243,056	\$ 18,503,597
45	Excel Development	FY18 Reallocated 3	STEH PSH 0521	PSH	\$ 211,945	\$ 18,715,542
46	Shelterhouse	Supportive Services	SHVG SSO 0010	SSO	\$ 45,886	\$ 18,761,428
47	Strategies to End Homelessness	DV RRH	STEH RRH DV FY18 New	RRH	\$ 173,106	\$ 18,934,534
						<b>Total</b>

\*revised on 09/04/2018 - YWCA DV TH/RRH project names

Tier 1 Funding Amount - \$15,815,393

Tier 2 Funding Amount - \$ 3,119,141

Approved by Homeless Clearinghouse 08/31/2018





# STRATEGIES TO END HOMELESSNESS

## **9. Notification Outside of e-snaps – Projects Rejected or Reduced**

1. Reduced Project Email - Excel Development
2. Reduced Project Email - Shelterhouse Volunteer Group
3. Rejected Project Email - Ohio Valley Goodwill Industries
4. Rejected Project Email - Salvation Army

## Amanda Davis

---

**From:** Jen Best  
**Sent:** Friday, August 31, 2018 4:51 PM  
**To:** Kevin Cooley; Matt Brucato  
**Cc:** Jennifer McEvilly; Kevin Finn  
**Subject:** CoC Competition – Reduction in Renewal Application

Good afternoon,

The Excel Development PSH Project (EXCL PSH 0475) will go into the Fiscal Year 2018 Continuum of Care (CoC) Application at a reduced amount. This decision was approved by the CoC Board, locally known as the Homeless Clearinghouse, at their meeting on August 31, 2018. The reduction is a result of the significant funding level attached to the project and the fact that it scored low in the local competition process. This combination poses a potential risk to the CoC in regards to losing community resources.

The project rank in each part of the competition was as follows:

1. CoC Competition Scorecard – 30 out of 35 projects
2. CoC Community Prioritization Event – 9 out of 12 projects

The full community prioritization list will be sent in a separate email soon and below is your updated project budget. The project application will be updated prior to submission.

**Project:** Excel Development PSH Project (EXCL PSH 0475)  
**Original Budget:** \$3,090,640  
**Amount of Decrease:** \$700,801  
**New Budget:** \$2,389,839

There was a lot of discussion about this decision and Matt Brucato, was present for the full discussion but I understand if there are still questions. We to ensure you are clear on what this decision means for Excel Development and the full CoC. Please let us know if you are available next week to discuss this or if you have any immediate questions.

Sincerely,

### *Jen Best*

Director of Planning & Evaluation  
p. 513.263.2789 | f. 513.221.8444



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## Amanda Davis

---

**From:** Jen Best  
**Sent:** Friday, August 31, 2018 1:13 PM  
**To:** Arlene Nolan; Fanni Johnson; Julie Winkowski (JWinkowski@shelterhousecincy.org)  
**Cc:** Kevin Finn; Jennifer McEvelley; Linda Seiter; Debbie Brooks (dbrooks@ywcacin.org)  
**Subject:** CoC Competition – Reduction in Renewal Application

Arlene, Fanni, & Julie

The Shelterhouse Supportive Services Project (SHVG SSO 0010) will go into the Fiscal Year 2018 Continuum of Care (CoC) Application at a reduced amount. This decision was approved by the CoC Board, locally known as the Homeless Clearinghouse, at their meeting on August 31, 2018. The reduction is the result of the project's performance as stated in the 2018 Scoring Criteria, and community feedback at the 2018 CoC Community Prioritization Event. The amount of the reduction was determined by the fact that the CoC has a maximum amount of funding for which we are able to apply. The project application will be updated prior to submission.

**Project:** Shelterhouse – Supportive Services (SHVG SSO 0010)  
**Original Budget:** \$90,441  
**Amount of Decrease:** \$44,555  
**New Budget:** \$45,886

The full community prioritization list will be sent in a separate email very soon. We are very thankful for your dedication to the CoC and understand that funding cuts are challenging, but please remember that this reduction will not take effect until the start of the FY18 operating year.

Sincerely,

***Jen Best***

Director of Planning & Evaluation  
p. 513.263.2789 | f. 513.221.8444

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## Amanda Davis

---

**From:** Jen Best  
**Sent:** Friday, August 31, 2018 1:30 PM  
**To:** Camille Robinson; Susie Skeens; cbylthe@cincigoodwill.org; skoons@cincigoodwill.org; Dostholthoff@cincigoodwill.org  
**Cc:** Kevin Finn; Jennifer McEvilley; Linda Seiter; Debbie Brooks (dbrooks@ywcacin.org)  
**Subject:** CoC Competition – Rejected Project Notification

Good afternoon,

I regret to inform you that the Ohio Valley Goodwill Industries Permanent Supportive Housing Project (OVGI PSH 0521) will not be included in the Fiscal Year 2018 Continuum of Care (CoC) Application. This decision was made by the CoC Board, locally known as the Homeless Clearinghouse, at their meeting on August 31, 2018. It was based on performance outcomes as stated in the 2018 Scoring Criteria and community feedback at the 2018 CoC Community Prioritization Event.

The project rank in each part of the competition was as follows:

1. CoC Competition Scorecard – 34 out of 35 projects
2. CoC Community Prioritization Event – 11 out of 12 projects

The full community prioritization list will be sent in a separate email very soon. We understand that funding cuts are hard and a closing project is even more challenging. The current project will close at the end of the FY17 operating year and Strategies to End Homelessness plans to be actively involved in the process to ensure that no participants exit to homelessness.

Additionally, Coordinated Entry will not make any more referrals into the project until we have discussed a close-out plan. We can start that discussion as early as October 1, 2018. Please let me know if you have questions.

Sincerely,

### **Jen Best**

Director of Planning & Evaluation  
p. 513.263.2789 | f. 513.221.8444



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## Amanda Davis

---

**From:** Jen Best  
**Sent:** Friday, August 31, 2018 1:22 PM  
**To:** Sarah Wagner (sarah.wagner@use.salvationarmy.org); James Hickok (Jim.hickok@use.salvationarmy.org)  
**Cc:** Kevin Finn; Jennifer McEvilley; Linda Seiter  
**Subject:** CoC Competition – Rejected Project Notification

Sarah and Jim,

I regret to inform you that the Salvation Army Permanent Rapid ReHousing 1 Project (SA RRH 0305) will not be included in the Fiscal Year 2018 Continuum of Care (CoC) Application. This decision was made by the CoC Board, locally known as the Homeless Clearinghouse, at their meeting on August 31, 2018. It was based on performance outcomes as stated in the 2018 Scoring Criteria and community feedback at the 2018 CoC Community Prioritization Event.

The project rank in each part of the competition was as follows:

1. CoC Competition Scorecard – 33 out of 35 projects
2. CoC Community Prioritization Event – 12 out of 12 projects

The full community prioritization list will be sent in a separate email very soon. We understand that funding cuts are hard and a closing project is even more challenging. The current project will end at the end of the FY17 operating year and Strategies to End Homelessness plans to be actively involved in the close of the project to ensure that no participants exit to homelessness.

Additionally, Coordinated Entry will not make any more referrals into the project until we have discussed a close-out plan. We can start that discussion as early as October 1, 2018. Please let me know if you have questions.

Sincerely,

### ***Jen Best***

Director of Planning & Evaluation  
p. 513.263.2789 | f. 513.221.8444



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[www.strategiestoendhomelessness.org](http://www.strategiestoendhomelessness.org)  
[jbest@end-homelessness.org](mailto:jbest@end-homelessness.org)

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## **10. Public Posting – Local Competition Deadline**

1. 2018 CoC Competition Timeline
2. FY18 CoC Competition Opening Announcement & Invitation to Participate
  - a. Community Email from Strategies to End Homelessness
  - b. Social Media (Facebook) Post
  - c. Participate Greater Cincinnati Nonprofit News

**2018  
Continuum of Care Timeline**

Continuum of Care Funding (PSH, RRH, TH/RRH, TH and Services Only Projects)

**Agencies are encouraged to visit the Strategies to End Homelessness website for CoC Competition Updates. All CoC Competition Documents will be available here:**  
[www.strategiestoendhomelessness.org/partner-agencies/apply-for-funds/](http://www.strategiestoendhomelessness.org/partner-agencies/apply-for-funds/)

<b>June 20, 2018</b>	<b>FY18 CoC Notice of Funding Availability released by HUD</b> <a href="#">FY18 CoC Notice of Funding Availability</a>
<b>June 28, 2018</b>	<b>RELEASE OF LOCAL INTENT FORMS - available on STEH website</b> Intent to Apply - New Projects; Renewal Intent – CoC Renewal Projects  <i>*This is an open competition. Organizations eligible under the CoC Interim Regulations are encouraged to apply for NEW projects as outlined in the FY18 Notice of Funding Availability.</i>
<b>July 13, 2018</b> 4:00 PM	<b>RENEWAL INTENT FORMS DUE by 4:00pm.</b> All agencies that wish to renew an existing CoC project must complete and return a Renewal Intent Form to Amanda Davis at <a href="mailto:adavis@end-homelessness.org">adavis@end-homelessness.org</a>
<b>July 20, 2018</b> 4:00 PM	<b>INTENT TO APPLY FORMS DUE by 4:00pm.</b> All agencies that wish to apply for funding for a new CoC project must complete and return an Intent to Apply Form to Amanda Davis at <a href="mailto:adavis@end-homelessness.org">adavis@end-homelessness.org</a>
<b>July 27, 2018</b> 2:00 PM – 4:00 PM Interact for Health 3805 Edwards Road 5 <sup>th</sup> Floor, ChoiceCare Rm Cincinnati, OH 45209	<b>2018 SCORING CRITERIA COMMUNITY MEETING: CoC PRIORITIZATION PROCESS REVIEW</b> At this meeting, the full CoC will hear a detailed explanation of the 2018 scoring criteria for projects applying to be in the FY 2018 CoC application to HUD, as proposed by the Scoring Sub-committee and approved by the Homeless Clearinghouse. Attendees will be trained on how to complete the NEW 2018 CoC Competition Scorecard. <b>REGISTRATION REQUIRED</b> at <a href="http://www.strategiestoendhomelessness.org/register/">www.strategiestoendhomelessness.org/register/</a>
<b>July 30, 2018</b>	<b>CoC COMPETITION SCORECARD REALSED</b> Final Scoring Criteria documents will be made available. Announcement via email with all documents available on the STEH website.
<b>August 10, 2018</b> 12:00 PM	<b>FINAL FY16 CoC BILLINGS DUE</b> All FY16 CoC billings are due to <a href="mailto:billings@end-homelessness.org">billings@end-homelessness.org</a> by noon on August 10, 2018. Financial data submitted on or before this date will be used to complete the applicable sections of the CoC Competition Scorecard.
<b>August 17, 2018</b>	<b>SCORECARD RESULTS &amp; NOTIFICATION OF PROJECTS REQUIRED TO PRESENT AT THE COC COMMUNITY PRIORITIZATION EVENT</b> Announcement made via email with all documents available on the STEH website.
<b>August 22, 2018</b> 1:00 PM	<b>REGISTRATION CLOSSES - CoC COMMUNITY PRIORITIZATION EVENT</b> <b>REGISTRATION is REQUIRED</b> at <a href="http://www.strategiestoendhomelessness.org/register/">www.strategiestoendhomelessness.org/register/</a> Space is limited to 2 attendees per CoC funded agency (plus presenters if needed). Participation is encouraged by people and organizations directly involved in the homeless services system. Contact Amanda Davis with questions: <a href="mailto:adavis@end-homelessness.org">adavis@end-homelessness.org</a>
<b>August 23, 2018</b> 12:00 PM	<b>COMMUNITY PRIORITIZATION EVENT POWERPOINT PRESENTATIONS DUE</b> Final presentations must be submitted to STEH, via email to Amanda Davis at <a href="mailto:adavis@end-homelessness.org">adavis@end-homelessness.org</a>

<p><b>August 24, 2018</b> 12:00 PM – 5:00 PM</p> <p>Interact for Health 3805 Edwards Road 5<sup>th</sup> Floor, ChoiceCare Rm Cincinnati, OH 45209</p>	<p><b>FY18 CoC COMMUNITY PRIORITIZATION EVENT</b> Agencies applying for funding <b>must</b> attend this event. Agencies will present on specific elements of their new or renewal projects and audience members will be trained on how to rank the projects. Community rank will be incorporated with Scorecard results to determine the CoC's final list of Accepted and Prioritized projects for inclusion in the FY18 CoC Application.</p>
<p><b>August 31, 2018</b></p>	<p><b>FY18 CoC COMPETITION FINAL LIST OF ACCEPTED &amp; PRIORITIZED PROJECTS</b> Announcement of accepted projects made via email with all documents available on the STEH website. STEH will email projects accepted with a reduced-budget and rejected projects directly.</p>
<p><b>September 13, 2018</b></p>	<p><b>CoC APPLICATION AVAILABLE ON THE STEH WEBSITE</b> Questions and/or comments about the Application and Priority List can be submitted by email to Jen Best at <a href="mailto:jbest@end-homelessness.org">jbest@end-homelessness.org</a></p>
<p><b>September 18, 2018</b></p>	<p><b>CoC Application due in eSNAPS</b></p>

## Project Applications

Projects requesting funding through this process will begin working on renewal and new project applications immediately after submission of Renewal Intent or Intent to Apply forms. Because STEH is a Unified Funding Agency, they will create applications in eSNAPS and work with each agency to complete the applications. STEH will submit project applications in eSNAPS after all accepted, reduced, and rejected projects have been notified.



## Amanda Davis

---

**From:** Kevin Finn  
**Sent:** Thursday, June 28, 2018 3:00 PM  
**Cc:** Jen Best; Jamie Hummer; Amanda Davis; Jennifer McEvilley  
**Subject:** 2018 CoC Application Timeline & Deadlines  
**Attachments:** 2018 Intent to Apply Form.docx; 2018 Renewal Intent Form.docx

**Importance:** High

Hello all,

On June 20<sup>th</sup>, HUD released the [FY18 Notice of Funding Availability \(NOFA\)](#) for the Continuum of Care program, which outlines the national CoC application process, HUD's priorities, scoring breakdown, & some important dates for this year's competition. With the NOFA out, I wanted to share some information with you all regarding this year's CoC process.

As you likely know, our local CoC's process has always integrated local priorities & community process with HUD's priorities through a scoring event, referred to as "Large Group Scoring". In recent months, as we have waited for the CoC NOFA to be released, the Homeless Clearinghouse & other community members have been considering changes to how our local scoring event will be handled this year.

The details of this year's scoring event are still being finalized. We will share more information with you all as it becomes available, likely sometime after the Homeless Clearinghouse meeting that is scheduled for July 20<sup>th</sup>. What I will mention is that this year's event promises to be shorter in duration, more precise in its execution, & better attuned with its purpose: balancing an emphasis on performance with our community's unique needs. Because the event details are still being finalized, we will be asking all applicants to hold time for this event in case they are asked to present on their project(s).

Attached you will find two documents, the ***FY18 Intent to Apply Form*** & ***FY18 Renewal Intent Form***.

- **Renewal Funding:** please complete the *FY18 Renewal Intent Form* if your agency would like to renew previously funded projects; these forms are due back to STEH no later than **4 p.m. on Friday, July 13, 2018.**
- **New Funding:** please complete the *FY18 Intent to Apply Form* if your agency would like to apply for funding for a new project or expansion project for FY18; these forms are due back to STEH no later than **4 p.m. on Friday, July 20, 2018.**
- **Submission of forms:** all forms should be submitted to **Amanda Davis at [adavis@end-homelessness.org](mailto:adavis@end-homelessness.org)**

These documents will also be available on [STEH's website](#) within the next few days.

Additionally, it may be beneficial for you or the appropriate staff at your agency to hold time available for the following tentative dates & activities related to this year's CoC application process (dates/events may change or be added):

Event	Date & Time
<b>Scoring Criteria Community Meeting</b>	Friday, July 27: 2-4 p.m.
<b>Hold time for project pre-work</b>	Friday, July 27 to Monday, August 6
<b>Hold time for data reviews &amp; application materials</b>	Friday, August 17 to Friday, August 24
<b>Community Prioritization Meeting (tentative)</b>	Friday, August 24: 4 hour meeting, time TBD. Please hold this entire day until more information is available.

If you have general questions about the CoC process or competition, please send them to Jamie Hummer at [jhummer@end-homelessness.org](mailto:jhummer@end-homelessness.org) or to Jen Best at [jb主@end-homelessness.org](mailto:jb主@end-homelessness.org), but please note that Jen Best is out of the office until July 16<sup>th</sup>.

***Kevin Finn***

President/CEO

[kfinn@end-homelessness.org](mailto:kfinn@end-homelessness.org)

p. 513.263.2788 | f. 513.221.8444



2368 Victory Parkway, Suite 600

Cincinnati, OH 45206

[www.strategiestoendhomelessness.org](http://www.strategiestoendhomelessness.org)

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# STRATEGIES TO END HOMELESSNESS

## FY18 CoC Competition Opening Announcement and Invitation to Participate Social Media Post

Strategies to End Homelessness

Home for the summer

STRATEGIES TO END HOMELESSNESS

Strategies to End Homelessness ✓  
@StrategiestoEndHomelessness

Home

Posts

Subscribe to e-News

About

Reviews

Photos

Videos

Community

Events

Info and Ads

Create a Page

Liked Following Share ... Donate Send Message

Strategies to End Homelessness  
July 18 · 🌐

If you know of a Cincinnati Hamilton County 501(c)(3) [#nonprofit](#) organization helping the homeless, please share this post and tag them!  
The 2018 Continuum of Care "Intent to Apply Form" is due to [Strategies to End Homelessness](#) this Friday 7/20 4PM.  
Find the short form, here:  
<https://www.strategiestoendhomelessness.org/continuum-of-c.../>

STRATEGIESTOENDHOMELESSNESS.ORG

**Continuum of Care 2018 Application Timeline & Deadlines - Strategies to End Homelessness**

On June 20th, HUD released the FY18 Notice of Funding Availability (NOFA) for the Continuum of Care program, which outlines the national CoC application process, HUD's priorities, scoring breakdown, and some...

4.5 out of 5 · Based on the opinion of 8 people

Cincinnati: Let's End Homelessness

You can make a difference every day in the lives of people experiencing homelessness in Greater Cinc...

See More

Community See All

Invite your friends to like this Page

984 people like this

983 people follow this

**The Public Library of Cincinnati and Hamilton County** closed on the purchase of a building that will become the home of the Library's new distribution center. The building, located at 1130 Findlay Street, is a five-minute drive from the Main Library and near I-75, which will allow Library trucks easy highway access to make their deliveries.

**Strategies to End Homelessness** reports the FY18 Notice of Funding Availability from HUD is now open. Please complete the short Intent to Apply Form if your agency would like to apply for funding for a new project. Complete and submit by 4PM July 20. Continuum of Care 2018 Application, timeline, and eligibility guidelines are available [here](#):

**St. Joseph Orphanage** is pleased to announce they have been awarded a \$20,000 grant from **The Daniel and Susan Pfau Foundation** to support our **Emergency Placement Program**. This program provides short-term housing and care to youth involved with the child welfare system.

**IUPUI Fall Intern Fair Registration** is open with Early Bird Rates through August 15. Space is limited so sign up soon and do not miss the opportunity to find your future intern talent from across the majors here at IUPUI. IUPUI Fall Intern Fair is Tuesday, September 25 from 1:00pm - 4:00pm at the IUPUI Campus Center. For more information and to register [click here](#).

**Franciscan Ministries** would like to thank the **Greater Cincinnati Foundation** and the **Joseph A. and Susan E. Pichler Fund**, a donor advised fund of the Greater Cincinnati Foundation for \$30,000 in general support of our **Tamar's Center** program. Tamar's is a day shelter that assists women who are trafficked for sex due to addiction, particularly to heroin. The grant will fund a shelter manager to assist with the day-to-day operations of the facility.

**Haircuts from the Heart**, a program of **Franciscan Ministries**, is proud to be the recipient of a \$10,000 grant from **The Charles H. Dater Foundation**. The funding will be used to pay for haircuts for children who attend CISE (Catholic Inner-city Schools Education Fund.) The goal of the program is to support the self-esteem of children by helping them to feel confident about their appearance. Ninety-three percent of students who attend CISE schools live in poverty.

**Social Venture Partners** announces two grant opportunities through one application. The focus area for both is Innovation and the opportunities are as follows:

- Apply to be SVP's next investee! Investees receive a total grant of up to \$60,000 over the course of three years. Investees also receive the strategic contribution of SVP partners' time and expertise so that the average benefit to the nonprofit is three to five times greater than the cash grants.
- Apply for Fast Pitch 2019! Using a technique borrowed from the venture capital and startup communities, Fast Pitch is a way to showcase and accelerate nonprofits making a difference in our community. Nonprofits get training in telling effective, inspiring stories and then compete via a 3-minute pitch.

The combined application is available at [www.socialventurepartners.org/cincinnati/](http://www.socialventurepartners.org/cincinnati/) and due on August 3rd.



# STRATEGIES TO END HOMELESSNESS

## **11. CoC and HMIS Lead Governance (Roles & Responsibilities of the CoC & HMIS Lead)**

1. Contract - HMIS Lead through September 30, 2018
2. Contract - HMIS Lead through December 31, 2018
3. License - HMIS License through September 30, 2018 & new signature showing continuation of HMIS License through December 31, 2018
4. HMIS Transition Summary – the CoC is currently undergoing an HMIS transition. Contracts are in progress for implementation starting January 1, 2019.

# The Partnership Center, Ltd.

## Contract Service Agreement for HMIS Lead Agency

---

Effective October 1, 2016, the following Agreement was made and entered into by and between **The Partnership Center, Ltd.** (PCL), a limited liability company located in Cincinnati, Ohio, and Strategies to End Homelessness (STEH), a 501(C) 3 non-profit corporation located in Cincinnati, Ohio.

### Time Period:

This Agreement shall be in effect from **October 1, 2016 through September 30, 2017**. This Agreement may be extended and/or re-negotiated during the Agreement period by mutual agreement of both parties. Termination of this Agreement shall be at the discretion of either party and written notification of termination shall be presented.

### Purpose:

The purpose of this agreement is to record the scope of work and compensation for PCL to complete work on behalf of STEH, as required in STEH's role as the HMIS Lead Agency for the Cincinnati/Hamilton County CoC, as designated by the U.S. Department of Housing and Urban Development – Office of Community Development and Planning and Special Needs Assistance Programs.

### Scope of Work:

The division of labor for Lead Agency required work between PCL and STEH was reviewed with members of the Homeless Clearinghouse and determined appropriate to meet the community's needs. The scope of work and responsible party is identified in the table below:

Scope of Work	STEH	PCL
<b>Administration</b>		
MOU between CoC and Lead	X	X
Collect and Maintain Agency Agreements for all participating HMIS agencies		X
Collect and Maintain (annual) User Agreements		X
Assign and monitor User Levels		X
Assign and monitor all partnership agreements for data sharing		X
Maintain HMIS Policies & Procedures	X	X
Day-to-day administration of the system, projects, users to HMIS policies/procedures and data standard/HMIS requirements		X
VESTA - Front End Maintenance of Project Descriptor Data Elements	X	
<b>Technical</b>		
Provide all HMIS system administration functions – project set-up; maintenance of forms/fields for existing projects; decommission closed projects; project type changes; data migration; etc.		X
Maintenance of all privacy/security functions		X
<b>Data</b>		
Un-duplication – no less than monthly and as needed		X
Monitor error tolerance levels and have users correct – weekly		X
Annual project monitoring	X	

Data Locking		X
Annual un-duplication/archive preparation for HIC/PIT/Community Reporting		X
Manage HIC and PIT and report to HDX	X	
Provide and submit data for AHAR		X
Customization – 20 hours for STEH		X
Data export capability*		X
<b>User Support</b>		
One-on-One training for all new users		X
Classroom training for larger deployments/specific project needs and beyond one-on-one (e.g. power of together; reporting; Flexo; supervisor training; Medicaid; chronic homeless; case planning; VESTA updates; students/interns; etc.)		X
Development and implementation of training resources (e.g. video shorts on- case plan; searching; one pager documents; desk reference; help and more; alerts in VESTA; system notices; etc.)		X
E-mail and telephone support M-F 9-5 (password resets, report questions, Flexo mini, data clarification, data fixes, q/a)		X
Basic technical support to HMIS agencies (scanning, e-sign, logon, limited basic computer)		X

\*Data export- PCL agrees to provide all consenting agencies participating in HMIS under the terms of this agreement the ability to generate a complete export of any and all data pertaining to programs administered by the consenting agency. Such export will be compliant with a standard export format published by HUD.

#### **General Relationship Between the Parties:**

Both parties agree to communicate with the other as necessary to produce the necessary data, information, records, reports and/or documentation that may be required to achieve the purposes of this Agreement. PCL will provide all work as indicated above. STEH shall use their best efforts to provide updated information necessary to manage the HMIS system in a timely fashion.

#### **General Relationship of Parties with the CoC Board (aka Homeless Clearinghouse):**

As the CoC Board, the entity responsible for designating an HMIS system for the CoC as well as designating a CoC Lead Agency:

- PCL and STEH will meet with the assigned members of the Homeless Clearinghouse on an as needed basis to ensure that HMIS-related issues are being addressed promptly and to the satisfaction of the CoC.
- The CoC Board will be asked to resolve CoC and HMIS issues on which PCL and STEH are unable to agree on a course of action.
- PCL or STEH shall not release or publish HMIS data available to it under this Agreement or prior agreements between the parties (PCL and STEH) without the express majority affirmative vote of the CoC Board and subsequent written notification of such by the CoC Board. The CoC Board will review and approve any and all releases, interpretations, explanations and conclusions of HMIS data and/or system performance by STEH or PCL. Notwithstanding the foregoing, PCL is authorized to use HMIS Data for reporting from the HMIS National Data Lab to HMIS federal partners.
- Individual agencies/programs can receive and release their own data without consent from the Homeless Clearinghouse.
- All system-wide changes and decisions must be made by the Homeless Clearinghouse.

**Compensation:**

The cost of the provision of services as outlined in this document is \$279,150.00.

- STEH agrees to compensate PCL a total of **\$188,958**.
- PCL agrees to bill and collect from agencies on a per project bases \$48,000 in accordance with the annual billing structure of the HMIS Advisory Committee
- PCL agrees to use \$42,192 of their own funds to cover the balance required.

A monthly invoice will be provided to STEH by PCL in the amount of \$23,262.  
STEH will pay \$15,746 (\$15,752 in month 1).

**Indemnification and Hold Harmless Provision:**

PCL agrees to indemnify and hold harmless STEH, the CoC Board and all CoC member entities, including their respective parents, subsidiaries, officers, directors, employees, agents and assigns, from any and all claims that may arise out of and in the course of the performance of PCL's performance of its duties hereunder. Similarly, STEH agrees to indemnify and hold harmless PCL, the CoC Board and all CoC member entities, including their respective parents, subsidiaries, officers, directors, employees, agents and assigns, from any and all claims that may arise out of and in the course of the STEH's performance of duties hereunder. Specifically, PCL will not accept the liability for programming specifications provided to them by STEH that result in the funding or de-funding of any local project. That liability lies solely with the STEH. Evidence of PCL's status as additionally insured is required to be provided to PCL within one month of contract signing.

**Debarment/Suspension:**

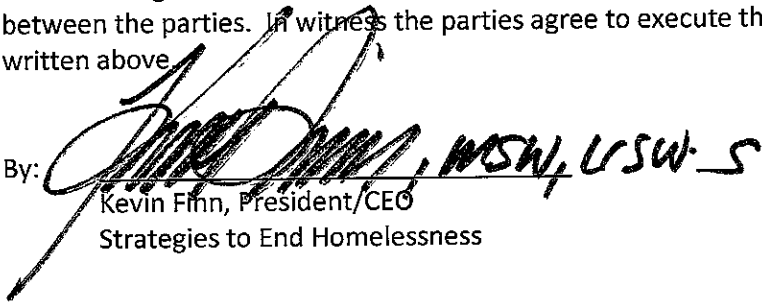
In accordance with 24 CFR Part 84.13, STEH will not contract with parties on the federal excluded parties list of debarred and suspended contractors. STEH has verified as of the execution of this contract that PCL is not on that list.

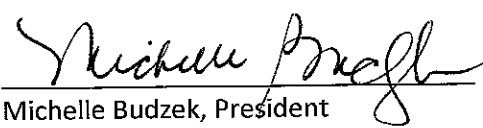
**Professional Responsibility:**

Neither party shall construe anything in this Agreement to interfere with or otherwise affect the operation of their businesses in accordance with their professional judgment.

**Entire Agreement:**

The within Agreement shall be construed in accordance with Ohio law and shall constitute the entire Agreement between the parties. In witness the parties agree to execute this Agreement effective the day and year first written above.

By:   
 Kevin Finn, President/CEO  
 Strategies to End Homelessness

By:   
 Michelle Budzek, President  
 The Partnership Center, Ltd.



**Amendment to the Agreement between Strategies To End Homelessness and Partnership Center, Ltd.**

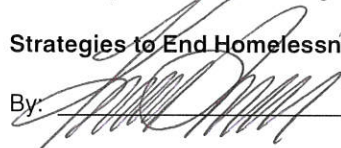
This document serves to amend the following section of the Agreement governing HMIS Lead Agency required work, effective October 1, 2016. Upon signature by both parties, the following changes shall be effective:


- A. The Time Period as defined in this Agreement shall be extended by six months, and the agreement shall be in effect through March 31, 2018 instead of through September 30, 2017.

No other provisions of the original agreement shall be altered by this document.

**Strategies to End Homelessness, Inc.**

**Partnership Center, Ltd.**

By:  \_\_\_\_\_

By:  \_\_\_\_\_

Kevin Finn

Printed Name: DAVID DURKALSKI

Date: 9/8/2017

Date: 9/8/2017

**Second Amendment to the Agreement between Strategies to End Homelessness and Partnership Center, Ltd.**

This document serves to amend the following section of the Agreement governing HMIS Lead Agency required work, effective October 1, 2016. This Agreement was first amended on September 8, 2017.

Upon signature by both parties, the following changes shall be effective:

- A. The Time Period as defined in this Agreement shall be in effect through September 30, 2018 instead of through September 30, 2017.

No other provisions of the original agreement shall be altered by this Amendment.

**Strategies to End Homelessness, Inc.**

By: 

Kevin Finn

Date: 2/14/2018

**Partnership Center, Ltd.**

By: 

Printed Name: David Durkalski

Date: 2/14/2018

# The Partnership Center, Ltd.

## Contract Service Agreement for HMIS Lead Agency

Effective October 1, 2018, the following Agreement was made and entered into by and between **The Partnership Center, Ltd.** (PCL), a limited liability company located in Cincinnati, Ohio, and Strategies to End Homelessness (STEH), a 501 (C) 3 non-profit corporation located in Cincinnati, Ohio.

### Time Period:

This Agreement shall be in effect from **October 1, 2018 through December 31, 2018**. This Agreement may not be extended or renewed.

### Purpose:

The purpose of this agreement is to record the scope of work and compensation for PCL to complete work on behalf of STEH, as required in STEH's role as the HMIS Lead Agency for the Cincinnati/Hamilton County CoC, as designated by the U.S. Department of Housing and Urban Development- Office of Community Development and Planning and Special Needs Assistance Programs.

### Scope of Work:

The division of labor for Lead Agency required work between PCL and STEH was reviewed with members of the Homeless Clearinghouse and determined appropriate to meet the community's needs. The scope of work and responsible party is identified in the table below:

Scope of Work	STEH	PCL
<b>Administration</b>		
MOU between CoC and Lead	X	X
Collect and Maintain Agency Agreements for all participating HMIS agencies		X
Collect and Maintain (annual) User Agreements		X
Assign and monitor User Levels		X
Assign and monitor all partnership agreements for data sharing		X
Maintain HMIS Policies & Procedures	X	X
Day-to-day administration of (the system, projects, users to HMIS policies/procedures and data standard/HMIS requirements		X
VESTA- Front End Maintenance of Project Descriptor Data Elements	X	
<b>Technical</b>		
Provide all HMIS System administration functions - project set up; maintenance of forms/fields for existing projects; decommission closed projects; project type changes; data migration; etc.		
Maintenance of all privacy/security functions		X
<b>Data</b>		
Un-duplication – no less than monthly and as needed		X
Monitor error tolerance levels and have users correct- weekly		X
Annual project monitoring.	X	

<b>Data Locking</b>		
Annual un-duplication/archive preparation for HIC/PIT/Community Reporting		X
Manage HIC and PIT and report to HDX	X	
Provide and submit data for AHAR		X
Data export capability*		X
<b>User Support</b>		
One-on-One training for all new users		X
Classroom training for larger deployments/specific projects needs and beyond one-on-one {e.g. power of together; reporting; Flexo; supervisor training; Medicaid; chronic homeless; case planning; VESTA updates; students/interns; etc.)		X
Development and implementation of training resources (e.g. video shorts on- case plan; searching; one pager documents; desk reference; help and more; alerts in VESTA; system notices; etc.)		X
E-mail and telephone support M-F 9-5 (password resets, report questions, Flexo, data clarification, data fixes)		X
Basic technical support to HMIS agencies (scanning, e-sign, logon, limited basic computer)		X

\*Data export- PCL agrees to provide all consenting agencies participating in HMIS under the terms of this agreement the ability to generate a complete export of any and all data pertaining to programs administered by the consenting agency. Such export will be compliant with a standard export format published by HUD.

#### General Relationship Between the Parties:

Both parties agree to communicate with the other as necessary to produce the necessary data, information, records, reports and/or documentation that may be required to achieve the purposes of this Agreement. PCL will provide all work as indicated above. STEH shall use their best efforts to provide updated information necessary to manage the HMIS system in a timely fashion.

#### General Relationship of Parties with the CoC Board {aka Homeless Clearinghouse):

As the CoC Board, the entity responsible for designating an HMIS system for the CoC as well as designating a CoC Lead Agency:

- PCL and STEH will meet with the assigned members of the Homeless Clearinghouse on an as needed basis to ensure that HMIS-related issues are being addressed promptly and to the satisfaction of the CoC.
- The CoC Board will be asked to resolve CoC and HMIS issues on which PCL and STEH are unable to agree on a course of action.
- PCL or STEH shall not release or publish HMIS data available to it under this Agreement or prior agreements between the parties (PCL and STEH) without the express majority affirmative vote of the CoC Board and subsequent written notification of such by the CoC Board. The CoC Board will review and approve any and all releases, interpretations, explanations and conclusions of HMfS data and/or system performance by STEH or PCL. Notwithstanding the foregoing, PCL is authorized to use HMIS Data for reporting from the HMIS National Data Lab to HMIS federal partners.
- Individual agencies/programs can receive and release their own data without consent from the Homeless Clearinghouse.
- All system-wide changes and decisions must be made by the Homeless Clearinghouse.

Compensation:

- STEH agrees to compensate PCL a total of \$47,238.
- STEH will pay \$15,746 per month.

**Indemnification and Hold Harmless Provision:**

PCL agrees to indemnify and hold harmless STEH, the CoC Board and all CoC member entities, including their respective parents, subsidiaries, officers, directors, employee , agents and assigns, from any and all claims that may arise out of and in the course of the performance of PCL's performance of its duties hereunder. Similarly, STEH agrees to indemnify and hold harmless PCL, the CoC Board and all CoC member entities, including their respective parents, subsidiaries, officers, directors, employees, agents and assigns, from any and all claims that may arise out of and in the course of the STEH's performance of duties hereunder. Specifically, PCL will not accept the liability for programming specifications provided to them by STEH that result in the funding or de-funding of any local project. That liability lies solely with the STEH. Evidence of PCL's status as additionally insured is required to be provided to PCL within one month of contract signing.

**Debarment/Suspension:**

In accordance with 24 CFR Part 84.13, STEH will not contract with parties on the federal excluded parties list of debarred and suspended contractors. STEH has verified as of the execution of this contract that PCL is not on that list.

**Professional Responsibility:**

Neither party shall construe anything in this Agreement to interfere with or otherwise affect the operation of their businesses in accordance with their professional judgment.

**Entire Agreement:**

The within Agreement shall be construed in accordance with Ohio law and shall constitute the entire Agreement between the parties. In witness the parties agree to execute this Agreement effective October 1, 2018.

The Partnership Center, Ltd.

BY: 

Meradith Alspaugh  
TITLE: Chief Operating Officer

Date: 7/18/18

Strategies to End Homelessness, Inc. ▼

BY: 

Kevin Finn  
TITLE: President/CEO

Date: 7/13/2018

**The Partnership Center, Ltd.**  
Software License for VESTA®

This Agreement is entered into between **THE PARTNERSHIP CENTER, LTD.**, an Ohio limited liability corporation ("PCL"), located in Cincinnati, Ohio and **Strategies to End Homelessness, Inc.** an Ohio non-profit corporation ("STEH"), located in Cincinnati, Ohio, to license VESTA®, a homeless management information system (referred to as the "Software").

**1.0 Definitions.**

- 1.1 "Agency" shall mean any agency on the Eligible List, which receives a sublicense to use Software.
- 1.2 "Project" shall mean a component or project run by an Agency which is required to collect client data using the Software.
- 1.3 "Eligible List" shall mean those agencies that are required or otherwise eligible to participate in the HMIS project by regulation or standard established by the US Department of Housing and Urban Development (HUD) and any other such agencies that are determined by the Cincinnati/Hamilton County Homeless Continuum of Care HMIS Subcommittee of the VESTA Advisory Committee (referred to as the "HMIS Advisory Committee") guidelines to be eligible to participate in the HMIS project.
- 1.4 "HMIS" shall mean Homeless Management Information System as defined by HUD.
- 1.5 "End-user" shall mean an authorized employee of any Agency, who has been granted authority to use the Software under the terms of this Agreement.
- 1.6 "User community" shall mean STEH, the Agencies which use the Software under the terms of this Agreement, and the End-users associated with such Agencies, inclusive.

**2.0 License.** PCL grants to STEH and STEH accepts, in accordance with the terms and conditions set forth hereafter, a non-transferable, non-exclusive license to use the Software as an HMIS.

- 2.1 The Software will be loaded and stored on a secure server. The Software will be accessed by Agencies through the internet.
- 2.2 The Software shall be used for the following purposes: to collect demographic and service data related to homeless clients to whom Agencies provide services; to comply with data collection and reporting requirements established by HUD including the HUD Annual Progress Report, the Annual Homeless Assessment Report, other HUD required reports; and to provide aggregate data for STEH, City of Cincinnati, Hamilton County and the State of Ohio to use in planning and reporting for homeless housing and services activities.
- 2.3 Agencies participating in HMIS and the End-users that they authorize to access the Software on their behalf are governed by standards established by HUD and the HMIS Subcommittee of the VESTA Advisory Committee.
- 2.4 Each Agency must be required to sign an Agency Agreement for use of the Software as part of the community's HMIS. PCL will develop and provide the Agency Agreements to each agency identified by STEH.
- 2.5 In the event that Agencies decide to allow the sharing of certain data, Agencies will be required to sign Data Sharing Agreements to acknowledge which data are shared and under what specific conditions. PCL will develop and provide the Partnership Agreements to each participating Agency.

- 2.6 Each Agency will also be required to require each End-user to sign an End-user Agreement. PCL will develop and provide the End-user Agreement to each user identified by the Agency or STEH.
- 2.7 This license and subscription is restricted to use by STEH, STEH's authorized Agencies and the authorized End-users, employed by such Agencies. It does not extend to any parent, subsidiary or other affiliated entities of either STEH or the Agencies, as may now or in the future exist.
- 2.8 STEH, with advice from the HMIS Subcommittee of the VESTA Advisory Committee, will be solely responsible for determining eligibility for participation in the HMIS project. Any agency deemed eligible for participation in the HMIS project will be qualified to be offered a sublicense and subscription by STEH. Only agencies deemed eligible may be offered a sublicense and subscription to the Software. STEH must and shall immediately notify PCL of any agency to be added or terminated from HMIS participation.
- 2.9 Under this license, STEH may issue a maximum of 100 sublicenses and subscriptions to authorized Agencies to access and use the Software. Sublicenses and subscriptions shall be issued solely to agencies which are deemed eligible as set forth below unless specifically approved by PCL. STEH may not issue a sublicense or subscription to any Agency not included on the Eligible List without prior and explicit approval by PCL. PCL is not required to approve the issuance of a sublicense or subscription to any Agency not deemed by STEH with the advice of the HMIS Subcommittee of the VESTA Advisory Committee to be eligible for participation in HMIS.
- 2.10 STEH may authorize no more than a maximum of 500 total End-users. PCL will monitor User accounts regarding this limit on a monthly basis. Each authorized End-user will select a password that shall permit entrance into the system. A User account is solely for the use of the End-user for whom it is set up and named; End-users are not permitted to divulge their password to anyone, including other authorized End-users, and will not allow any unauthorized person to access the Software.
- 2.11 Additional Agencies and End-users beyond the 100 sublicenses and 500 End-users permitted above may be negotiated for but may require additional fees to support. PCL agrees to notify STEH if and when either of these limits are reached and further agrees to provide not less than 30 days' notice following such notice before seeking additional compensation.
- 3.0 **Ownership of the Software.** STEH acknowledges that neither rights of ownership nor any other rights to the Software are transferred by this license, other than the specific rights to use and sublicense the Software, as provided herein. STEH, its employees and agents are prohibited from and have no right to sell, distribute, sublicense or otherwise transfer the Software itself, access to the Software, or the Software Manual (if any) to any other party not described in this Agreement. The rights granted herein are specific and limited. Any rights neither specifically granted to STEH or the Agencies, nor specifically reserved to PCL, are not granted to STEH and the Agencies and are thereby reserved to PCL.
- 3.1 STEH acknowledges and agrees that the Software and Software documentation and manuals are the proprietary rights of PCL, and are to be considered trade secrets and confidential information of PCL. Further, the Software is an unpublished work for which PCL holds all rights, including copyright. "Confidential information" includes any information that may not be a trade secret, but nonetheless is not generally known in the community or industry and is of benefit to PCL and the release of which could harm PCL.
- 3.2 Ownership rights to any enhancements, modifications or derivative works involving the Software shall belong solely to PCL. STEH is hereby granted a license, running concurrently with this license agreement, to use any such enhancements on the same terms and conditions as set forth herein, for so long as this license or any successor license continues in force. However, this License is not

generally for the purpose of creating enhancements. ANY ALTERATIONS, MODIFICATIONS OR USE IN THE CREATION OF DERIVATIVE WORKS MAY HAVE UNFORESEEN OR UNDESIRABLE CONSEQUENCES, WHICH WILL VOID ANY AND ALL WARRANTIES SET FORTH IN THIS AGREEMENT.

- 3.3 STEH agrees that it will immediately disclose to PCL any violation of this Agreement that comes to its attention and will assist PCL in halting or limiting damage from such violation and will assist in identifying and pursuing whomever caused such violation to occur. This section is in addition to, not in substitution of, any rights which PCL may have at law or otherwise and is not limited as to duration by the term of this Agreement.

Agency requests for customization to the Software are not covered under this agreement. Any such work is not governed by the terms of this Agreement and will require a separate agreement between the Agency and PCL.

- 4.0 **Ownership of HMIS Data.** PCL acknowledges and agrees that neither rights of ownership nor any other rights to access, publish, or otherwise utilize HMIS data are granted or implied by the licensing of the Software by STEH. HMIS data are not a component of the Software, but are owned by the Agencies that create it and are collected and stored in the Software under the terms of this Agreement between PCL and STEH and the terms of HMIS Participation Agreements.

4.1 PCL agrees to provide, within 30 days of a request by any Agency participating in HMIS under the terms of this agreement, a complete export of any and all data entered by requesting Agency or Agencies. Such export will be compliant with a standard export format published by HUD and current at the time of the request.

4.2 PCL agrees to provide, within 30 days of a request by STEH, a complete export of any and all data to which it is routinely has access entered by any and all Agencies participating in HMIS under the terms of this Agreement. Such export will be compliant with a standard export format published by HUD and current at the time of the request.

4.3 PCL agrees that any access, publication, or use of HMIS data by any organization or individual outside of the user community (as defined in Section 1.5 of this document) or the terms of this Agreement requires explicit prior approval by STEH. PCL's use of HMIS data pursuant to their work on the National Data Lab is excluded from this provision.

4.4 PCL employees with access to HMIS data must sign a Data Confidentiality Agreement.

- 5.0 **License Fee.** The License and other fees are as shown on Exhibit "A" attached hereto. Initial payment is due within 30 days of contract start date and no later than the 15<sup>th</sup> of each month thereafter for a term of 1 year. Payments received after the due date will be assessed a 1.5% finance charge each month.

- 6.0 **Taxes.** Fees paid for the Software are exclusive of all federal, state and local taxes. If any tax is due as a result of this transaction, except for taxes based upon PCL's income, STEH agrees to pay such amount.

**7.0 Ongoing Maintenance and Support, Services and Training.**

7.1 Technical Support for staff employed by STEH will be provided as needed. Train-the-trainer services will be provided to staff employed by STEH as needed. Direct End-user training is not included.

7.2 The US Department of Housing and Urban Development (HUD) has mandated that each Continuum of Care for the Homeless implement an HMIS; the Software is the HMIS chosen by the Cincinnati / Hamilton County Continuum of Care. Data and technical standards as well as reporting requirements for HMIS are set by HUD. PCL, in conjunction with STEH with the advice



of the HMIS Subcommittee of the VESTA Advisory Committee, will implement modifications to the Software's data collection, functionality, and reporting as necessary to comply with HUD policies.

- 7.3 The Software licensed herein is complete. Any Agency wishing to customize the Software for its own use shall reach a separate agreement with PCL.
- 7.4 Agencies may request customizations, additional features, and other extensions of the Software's functionality, in conjunction with STEH and under the guidance of the HMIS Subcommittee of the VESTA Advisory Committee, Cincinnati / Hamilton County Continuum of Care under the following conditions:
- 7.4.1 PCL will ensure that no requested change to the Software's functionality has a negative impact on its primary function as an HMIS for the Cincinnati / Hamilton County Continuum of Care; and,
- 7.4.2 PCL will, in the case of extended functionality which may be of general interest or benefit to the User community and without regard to which entity requested it or may have paid for it, make this extended functionality as widely available as is deemed desirable as an upgrade at no additional expense to STEH.
- 7.5 In order to minimize Software down time required to make changes to the system, it is most efficient for updates to the Software, whether necessitated by HUD-mandated changes or significant customization features, to be bundled and implemented at one time. This process is referred to as a deployment. This License covers up to 5 deployments annually at no additional cost. Additional deployments, if necessary, may incur supplementary fees. PCL agrees to notify STEH if and when this limit is reached and further agrees to provide not less than 30 days' notice following such notice before seeking additional compensation.
- 7.6 Modifications to the Software for any reason have the potential to introduce malfunctions, errors, or 'bugs'; these 'bugs' are a common feature of the software development process. PCL, in conjunction with STEH, will test any and all modifications to the Software prior to release. Thorough testing of modifications before release will significantly reduce the number of 'bugs' that impact End-users, but it is not generally possible to eliminate all potential issues prior to release. In the event that a 'bug' is discovered in the Software, PCL will work as quickly as possible to correct the 'bug' and to notify STEH and End-users in order to mitigate any impact.

**8.0 Assignment.** STEH may not transfer by assignment, sale, gift, or otherwise this license or the Software licensed herein. STEH may not permit any Agency to transfer any sublicense by assignment, sale, gift or otherwise. Any attempted assignment shall be void.

**9.0 Confidentiality and Security of HMIS Data.** HMIS data is highly confidential. Appropriate confidentiality training, releases, and documentation for Agencies and End-users are the responsibility of STEH. Each Agency is responsible for End-users' use of the Software and any breach in security. Agencies or End-users who fail to maintain required standards of confidentiality, security, data accuracy and client respect, as outlined by separate Agency and End-user agreements, may be removed from the Eligible List and thus barred from use of the Software.

- 9.1 In the event that PCL becomes aware that an Agency or an End-user is in violation of the terms of the HMIS Participation Agreement or the HMIS User Agreement, PCL may, as an agent of STEH, restrict access to the Software as permitted within the terms of the Agreements. PCL must notify both the Agency and STEH by email prior to restricting access to the Software for any End-user, but may act without receiving consent from STEH in the event that it considers continued access

to negatively impact the security or integrity of HMIS data or the Software. PCL will reinstate access at the discretion of the HMIS Advisory Committee in cooperation with STEH as necessary.

9.2 In the event that PCL becomes aware of a breach of HMIS data due to being hacked or other unauthorized access, PCL shall notify STEH within 24 hours of them being made aware of the breach.

10.0 **Minimum System Requirements.** Agencies are responsible for purchasing and maintaining appropriate computer systems, software licenses, networks, and Internet access, required for accessing and running the Software. A specifications list will be provided by PCL to any agency requesting the specifications.

11.0 **Limited Warranty.** The parties agree that this is an agreement for software services, not for the sale of goods. The primary purpose of STEH in entering into this agreement is to license an HMIS application that is compliant with all relevant HUD standards including those related to data collection, reporting, and security. PCL grants a limited warranty that it will correct any errors or omissions which cause the Software to materially fail to meet their intended purpose, as described herein, or to conform to PCL's specifications. Further, the Software provides homeless client tracking information and will provide a valid and approved HUD Annual Progress Report and the Hamilton County Homeless Certification form. Except for the express limited warranty set forth in this agreement, THERE ARE NO OTHER WARRANTIES, WRITTEN OR ORAL, EXPRESS OR IMPLIED, WITH REGARD TO THE SOFTWARE, INCLUDING BUT NOT LIMITED TO IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE.

12.0 **Copyright Infringement Warranty.** PCL shall defend, at its cost, STEH, against any claim alleging copyright infringement. This warranty shall not apply to any such claim which may be based upon modifications to the Software, which modifications were not written or created by PCL. STEH shall promptly and in sufficient time to permit PCL to defend, negotiate or settle any such claim, notify PCL of the claim in writing. Such notice to PCL should attach a copy of any Summons and Complaint, Cease and Desist letter or other notice from the party claiming infringement.

12.1 Should an injunction be issued preventing further use of the Software, or should PCL deem itself to be in jeopardy, PCL shall, at its sole cost and in its absolute discretion,

12.1.1 negotiate a license for STEH to continue use of the Software in question;

12.1.2 replace the Software with another application which is substantially similar; or

12.1.3 grant STEH a pro rata refund of the license fee, using five (5) years as the useful life of this version of the Software.

12.2 THIS SECTION CONTAINS THE SOLE REMEDIES AND DAMAGES AVAILABLE TO STEH OR ANY AGENCY FOR ANY CLAIM OF COPYRIGHT INFRINGEMENT. ALL OTHER DAMAGES, OF ANY FORM OR TYPE, ARE SPECIFICALLY EXCLUDED, INCLUDING ALL DAMAGES EXCLUDED IN THE DAMAGES SECTION OF THIS AGREEMENT.

13.0 **Damages.** PCL SHALL NOT BE LIABLE FOR DAMAGES, OTHER THAN AS SET FORTH ABOVE, INCLUDING BUT NOT LIMITED TO SPECIAL, CONSEQUENTIAL, INCIDENTAL OR PUNITIVE DAMAGES, WHETHER DIRECT OR INDIRECT, ARISING OUT OF OR IN CONNECTION WITH THE USE OR PERFORMANCE OF THE SOFTWARE, AND INCLUDING, WITHOUT LIMITATION, DAMAGES FOR LOSS OF BUSINESS REVENUES, BUSINESS INTERRUPTION, LOSS OF BUSINESS INFORMATION AND THE LIKE. THE MAXIMUM LIABILITY OF PCL, IN ANY CIRCUMSTANCES, FOR ANY DAMAGES IS THE AMOUNT PAID BY STEH FOR THIS LICENSE.

- 14.0 **Code Protection.** In the event that PCL ceases all business operations, PCL hereby grants a perpetual, royalty free, non-transferable license to STEH to operate, run, maintain, and modify the Software, as required in order to maintain and use the Software for the purposes set forth in this agreement and to issue such sublicenses and to grant access to the Software to End-users as STEH deems necessary.
- 15.0 **Termination.** The License to the Software shall terminate upon the happening of any of the following:
- 15.1 Material breach of this Agreement by either party, which is not cured within thirty (30) days of the date that notice of such breach is sent to the party in violation of this Agreement.
  - 15.2 STEH fails to promptly pay all fees when due.
  - 15.3 By agreement of the parties.
  - 15.4 By giving notice of termination as provided in this agreement.
- 16.0 In the event of early termination of this contract, unless by material breach of this Agreement by PCL, voluntary initiation of PCL, or mutual agreement of the parties, all amounts due PCL under this contract will become immediately due and payable in full.
- 17.0 **Renewal.** This license will automatically renew after one year, unless either party shall give a notice of termination or a notice of amendment to this agreement, not more than ninety (90) days nor less than forty five (45) days prior to the end of the agreement term. Any notice of amendment not rejected or otherwise responded to by the other party at least thirty (30) days prior to the end of the term shall be deemed accepted. If any proposed amendment is rejected, the contract does not terminate as a result, but continues in full force.
- 18.0 **Governing Law.** This Agreement shall be governed by the laws of the State of Ohio. This Agreement was entered into in Cincinnati, Hamilton County, Ohio.
- 19.0 **Arbitration.** Should there be any dispute by and between the parties hereto, all such disputes must be brought within one year of the date thereof. All such disputes shall be submitted to the commercial arbitration section of the American Arbitration Association at Cincinnati, Ohio. Any judgment rendered or granted upon such arbitration shall be enforceable in the courts of general jurisdiction of any court in any state in which the parties may be found.
- 20.0 **Validity.** If any provisions of this Agreement shall be held invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions shall not in any way be impaired or affected thereby.
- 21.0 **Time for Bringing an Action.** No action of any kind arising out of this Agreement may be brought by either party more than one (1) year after the cause of action has arisen, nor, in the case of non-payment, more than one (1) year from the date PCL knew of an unpaid installation.
- 22.0 **Notice.** The parties may give any notice to the other party, as required herein, by U.S. Mail (certified, return receipt requested). Each party's last known address, as provided to the other party in writing, will be the proper address for notice. The addresses for notice, until substitute addresses are provided, are as follows:

U.S. Mail	PCL	STEH
	The Partnership Center, Ltd.,	Strategies to End Homelessness
	2134 Alpine Place	2368 Victory Parkway, Suite 600
	Cincinnati, OH 45206	Cincinnati, Ohio 45206

- 23.0 **Complete Agreement.** This Agreement is the complete and exclusive statement of the agreement between the parties pertaining to the subject matter of this Agreement and supersedes all prior such agreements, oral or written, and all other communications, promises or discussions between the parties, relating to the subject matter of this Agreement. This Agreement will bind both of the parties hereto only after it is signed by an authorized representative of each party. No change or alteration to this agreement, of any kind, is permitted unless agreed to in writing by both parties.
- 24.0 **Federal and State Rules and Regulations.** STEH and PCL agree that they are bound by all applicable federal, state, and local laws, and that the operation of an HMIS is governed by standards set by HUD The HMIS Subcommittee of the VESTA Advisory Committee establishes policies and procedures locally for the use of HMIS, and STEH and PCL will first seek the advice of the HMIS Subcommittee of the VESTA Advisory Board in the event of a dispute regarding compliance. If such a question arises, the HMIS Subcommittee of the VESTA Advisory Committee may consult with HUD at its discretion.
- 25.0 **IN WITNESS WHEREOF, the parties having** read this Agreement and agreeing to be bound by same, have hereunto set their signatures this 30th day of September, 2015.

The Partnership Center, Ltd.

BY: 

Michelle Budzek  
TITLE: President

Strategies to End Homelessness, Inc.

BY:  MSW, LCSW-S

Kevin Finn  
TITLE: President/CEO

**EXHIBIT "A"**

PCL Inc.  
Annual Fees

VESTA 3.0 License Fee \$171,808 Annually

(To be paid in 12 monthly installments of \$14,317 (\$14,321 in month 1))

Contract Start Date VESTA License October 1, 2014

EXHIBIT "A"

PCL Inc.  
Annual Fees

VESTA License Fee \$42,951

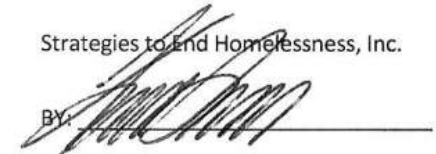
(To be paid in 3 monthly installments of \$14,317)

Contract Start Date VESTA License October 1, 2018

The Partnership Center, Ltd.  
BY: 

Meradith Alspaugh  
TITLE: Chief Operating Officer

Date: 7/16/2018

Strategies to End Homelessness, Inc.  
BY: 

Kevin Finn  
TITLE: President/CEO

Date: 7/13/2018

## **Homeless Management Information System Transition Summary**

In June 2017, the Cincinnati/Hamilton County Continuum of Care initiated a cost and functionality comparison of Homeless Management Information System (HMIS) software. Over the following year, Strategies to End Homelessness (STEH), the Unified Funding Agency for the CoC, in conjunction with a cross-functional Request for Proposals Committee lead the selection process, which included:

- Reviewing proposals for technical, organizational, and financial elements
- Testing live HMIS systems for usability, functionality, and durability
- Interviewing other communities and agencies who have implemented and currently use the systems
- Soliciting community feedback

In July 2018, the committee recommended Clarity Human Services by Bitfocus as the CoC's new HMIS. The CoC Board, locally known as the Homeless Clearinghouse, voted to enter into a one-year contract with Bitfocus for Clarity Human Services HMIS.

### *Timeline for Implementation*

- August – September 2018: Contract Negotiations
- September – October 2018: System Configuration / Data Migration Test
- November – December 2018: User Training / Testing
- January – February 2019: Final Data Migration

### *Documentation under Development*

#### STEH/Bitfocus Agreements

- Bitfocus Master Agreement for Services
- Clarity HMIS Services Agreement
- Clarity HMIS Implementation Service Agreement
- Clarity HMIS Legacy Migration Service Agreement

#### STEH/Agency

- Agency Data Sharing Agreement
- Software Licensing Agreement

#### STEH/User

- User and Confidentiality Agreement

#### STEH/Client

- Client Consent

### *HMIS Lead*

As a part of the HMIS transition, STEH will staff all HMIS Lead responsibilities including:

- System configuration
- User set-up and training
- Data sharing agreements and configuration
- User support
- Data quality monitoring

### *Data Goals*

The Cincinnati/Hamilton County CoC was one of the first in the country to establish a shared database used by all local homeless programs. Strategies to End Homelessness and the Cincinnati/Hamilton County CoC are committed to maintaining 100% HMIS participation. Clarity Human Services HMIS will be integrated into the CoC's Coordinated Entry process, allowing for shelter bed reservations through the Central Access Point (CAP) & the completion of the VI-SPDAT to match clients with housing resources.

Clarity Human Services HMIS is programmed to collect all Universal Data Elements (UDEs) & Program Specific Data Elements as set forth in the current HMIS Data & Technical Standards and offer the HMIS Data Quality report to assist users, program managers, and administrators in monitoring and improving data quality. Clarity also offers the ability to produce custom reports, all HUD & Federal partner reports, and data exports including, but not limited to: HUD System Performance Measures, CoC APR, ESG CAPER, CSV Export v5.1 (hashed & un-hashed), & AHAR table shells.





# STRATEGIES TO END HOMELESSNESS

## 12. HMIS – Policies and Procedures Manual

1.OH- 500 Current HMIS Policy & Procedure Manual – effective until 12/31/2018

2. OH-500 **DRAFT** HMIS Policy & Procedure Manual – to be completed & effective on 1/1/2019



**VESTA®**

# **Policies & Procedures**

*Updated June 2015*

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## Introduction

### Introduction

The policies and procedures outlined in this manual are those that have been developed by The Partnership Center, Ltd. (PCL) in cooperation with our local VESTA Advisory Committee. PCL is the developer and manager of VESTA® – the Virtual Electronic Service Tracking Assistant software, designed to measure performance, track accomplishments, report to funders, manage services, and facilitate integrated service approaches. We work with federal agencies, funders, and community service organizations that plan, fund, or provide housing and services to persons experiencing homelessness and/or low-income persons.

In 1999 PCL created a local Homeless Management Information(HMIS) Advisory Committee to create a mechanism for community feedback into the design, creation, policies and procedures of VESTA, the software selected by the Cincinnati/Hamilton County Continuum of Care for the Homeless's HMIS. Over the years as VESTA has grown in use across the Greater Cincinnati community so also has the Advisory Board grown to now not only reflect the needs and issues of HMIS, but also of all of the other community users of the system.

Questions regarding VESTA or the contents of this manual should be directed to:

The Partnership Center, Ltd.  
2134 Alpine Place  
Cincinnati, OH 45206  
[www.partnershipcenter.net](http://www.partnershipcenter.net)  
phone: 513-891-4016 x 336  
email: [techsupport@partnershipcenter.net](mailto:techsupport@partnershipcenter.net)



## General Participation Policies and Procedures

### General Participation Policies and Procedures

#### Data Ownership

**Policy:** All data entered into VESTA is owned by the Agency entering the data. Individual client level data about all persons served by the Agency, whether in a homeless project or other Agency project, may be entered into VESTA.

#### Procedure:

- Client-level identifying information will not be released by The Partnership Center, Ltd. (PCL) for any reasons other than those required by law.
- As a community database, VESTA enables different Agencies to record information about clients and services within a single common software system and to create partnership/data-sharing agreements with other Agencies as the Agency determines appropriate.
- As a community database, basic demographic information for any client, who has signed a consent form, is shared with other VESTA Users who are also serving the same client, once the client has entered their project. Project-specific data will not be shared with another Agency without the expressed consent of this Agency in the form of a signed Partnership Agreement.

#### Agency Participation Expectations

**Policy:** The Agency agrees to use the VESTA software as part of the community's effort to provide accurate data on homelessness, for their own record keeping of all client level data, and as a reporting tool for all reports necessary for the Agency and its funders.

**Procedure:** The Agency agrees to the following terms for using VESTA in accordance with federal, local HMIS rules, and guidance provided by VESTA clients (such as United Way of Greater Cincinnati):

- The Agency commits to entering truthful, accurate, complete, and timely information to the best of their ability on all clients receiving homeless and/or emergency assistance services.
- The Agency may not use VESTA system participation, or data, as a reason to deny outreach, shelter, housing, or emergency assistance services to a client. Emergency assistance agencies deny specific funding for emergency assistance to a client for reasons specified as a condition of receiving the funds, (such as EFSP funds) or as a result of agreements/best practices defined through the EA Learning Circle, (i.e., not providing stabilization services to a client because he or she is currently being served by another project in stabilization).
- The Agency may customize their data collection, including additional client-level information as needed by their project(s), but must collect all HMIS-required data fields as indicated in the US Department of Housing and Urban Development (HUD) HMIS Data Standards (identified in VESTA as required fields), and/or data required by the appropriate funder.
- The Agency agrees to allow clients to view their own HMIS / services data and request changes or corrections to their data.
- The Agency agrees that the data entered into VESTA will be monitored by PCL. PCL will merge duplicate client records on a regular basis. There will be no data monitoring on any custom fields developed by Agencies for their own use or for any projects enrolled in VESTA outside the Continuum of Care (CoC) and/ or United Way

administered funding.

- The Agency agrees that public reporting in aggregate either collectively, by program, or by project type for all CoC projects enrolled in VESTA as part of HMIS and/or projects funded by United Way administered funds may be released as needed by the funder.
- The Agency agrees to abide by all VESTA policies and procedures as approved and adopted by the VESTA Advisory Board. These include: confidentiality, client consent, and data entry requirements. Agencies also agree to assure that all employees and agents comply with these policies.
- Specific to HMIS projects: Consistent with Strategies to End Homelessness' agreement with the U.S. Department of Housing and Urban Development, all CoC Agencies may view and print Homeless Certification forms generated by HMIS as a way to document clients' eligibility for services.

### Data Entry

**Policy:** VESTA continues to be designed for live data entry; as a result, all Agencies participating in VESTA are encouraged to enter data into VESTA in a timely manner. For HMIS projects, specific timeliness policies are required and HMIS participation may not be used to deny services.

### Procedure:

- One hundred percent (100%) of all CoC homeless certified clients are to be entered into the system, detailing basic data, services and special needs data based on the most recent data standards - see HUD Exchange for details and project requirements.
- Real Time Data Entry is encouraged. However, in cases where real time cannot be accomplished the following timeframes are required:
  - Residential Projects: All data required to be collected at project entry is to be entered into the HMIS system within **two working days** of a residential project entry. Residential projects include: emergency shelter, transitional housing, and all types of permanent housing including rapid re-housing and permanent supportive housing. In accordance with HUD policy all residential projects where persons reside for a year or longer must do an annual assessment within the 30 day before or 30 day after the client's anniversary of project entry each year.
  - Emergency Assistance, Service Only, and Stabilization Projects: All intake data is required to be collected at project entry is to be entered into the HMIS system within **two working days** of a residential project entry. All data documenting specific shared services, such as holiday basket/ gift sign ups, should generally be recorded at the time of service to prevent duplication of these services.
  - Street Outreach Projects: Limited basic demographic data (race, gender, and a unique identifier) is to be entered into the HMIS system within two working days of the first substantial outreach encounter.
  - Exit Data: All data required to be collected at project exit data is to be entered into the HMIS system within **five working days** of the client exiting a housing stay or receiving a service.

### The Role of the Partnership Center, Ltd.

#### **Management of VESTA**

**Policy:** PCL assumes the following expectations as the administer and owner of VESTA. Annual licensing fees for VESTA are provided by Strategies to End Homelessness, under a grant from the U.S. Department of Housing and Urban Development specifically for HMIS and from the United Way of Greater Cincinnati. The licensing fee provides the Agency with:

#### **VESTA Management:**

1. Maintain VESTA and VESTA servers to ensure daily operation with minimal outages.
2. Software updates - no less than three times per year.
3. Code documentation and deployment record keeping: Ensure the VESTA code is well documented and

- maintain records of changes made at each deployment.
4. Ensure VESTA software is fully compliance with all HMIS Data and Technical standards and United Way requirements.
  5. Report functionality for Funder Reports including: HMIS Reports for HUD, HHS, and VA programs; United Way Reports for EA, Emergency Food and Shelter Board, City of Cincinnati General Fund, and Basic Demographic.
  6. Report functionality for Universal reports including: Active Client List, Bed night list, Export via Access and CSV.
  7. Oversight of the day-to-day administration of all contracts/ jobs with PCL for the use of VESTA.
  8. Record keeping: ensure all Agencies have signed an Agency agreement, ensure all sharing agreements are documented and signed prior to sharing, and maintain current User agreements for all active Users.
  9. Organize and manage a VESTA Advisory Board oversight of Emergency Assistance and HMIS implementation.

### ***HMIS Lead Agency Role Participation Expectations***

**Definition:** A Lead Agency is an organization designated by a CoC to operate the CoC’s HMIS. The Cincinnati/Hamilton County Continuum of Care for the Homeless designates Strategies to End Homelessness (STEH), as the HMIS Lead Agency. STEH has contracted with The Partnership Center, Ltd., the software vendor for VESTA, the following scope of work and roles as articulated in the following\*:

*\*Please note, work or roles listed below are in addition to the work and roles provided in the previous section – Management of VESTA.*

### **HMIS Project Management:**

1. Oversight of the day-to-day administration of the HMIS project.
2. Ensure all Community Housing Organization (CHO’s) designated by STEH and the HMIS Advisory Board have signed Agency Agreements to utilize VESTA as their HMIS and monitor compliance with the agreement.
3. Maintain an active list of all CHO’s participating in VESTA as part of the community’s HMIS and enter into VESTA the following project descriptor data elements on each project:
  - a. Organization Identifier
  - b. Organization Name
  - c. Project Identifier
  - d. Project Name
  - e. Direct Service Code
  - f. Site Information
  - g. Continuum of Care Number
  - h. Project Type Code
  - i. Annual and Grant Based Bed and Unit Inventory Information
  - j. Target Population Data
  - k. Method for tracking Residential Project Occupancy
4. Produce annual e-HIC as specified by HUD in order to generate annual Bed and Unit Inventory Information.
5. Maintain all User Agreements, assign User levels, and monitor agreement compliance.
6. Provide staff support to the VESTA Advisory Board – HMIS Sub group.
7. Provide documentation required by HUD for the Annual CoC Grant- HMIS section.

### **VESTA User Training:**

1. HELP Desk – User Support by telephone and email during regular business hours, (Monday - Friday from 9AM – 5PM).
2. Provide individual or small group training for all new Users of HMIS and United Way projects.
3. Free classroom training on basic and advanced database use skills.
4. Provide training on new features of VESTA as needed for HMIS Data Standards compliance.



5. Development of training materials and methods as may be necessary to keep Users at the highest possible proficiency level.

#### **HMIS User Support:**

1. Research and respond to CHO or User questions, problems and inquiries in a timely fashion.
2. Provide support services to organizations to customize their data for implementation of VESTA and/or to support all funding and reporting requirements of the project.
3. Utilize newsletters, email communication, groups, etc. to maintain User engagement and proficiency.

#### **HMIS Data Quality:**

At least weekly, monitor error reports on all Users and proactively address errors for Users above approved tolerance levels.

1. At least quarterly, perform unduplication of all records.
2. At least annually, monitor CHO projects for data quality & outcome performance as measured on their APR.
3. Lock Agency data within 90 days of completion of the grant operating year.

#### **HMIS Data Reporting:**

1. Annually, or as required by HUD or the CoC, produce the Electronic Housing Inventory Chart (e-HIC).
2. Annually, or as required by HUD, produce the Annual Homeless Assessment Report (AHAR) and electronically submit it as required.
3. Provide documentation required by HUD for the Annual CoC grant application on HMIS data.
4. Produce the annual HMIS Data Report.



## **Operational Policies and Procedures**

### **Chronically Homeless Individuals Project (CHIP)**

**Policy:** Chronically Homeless Individual's Program (CHIP) is the method used to identify, on a long-term basis, those single individuals (or heads of household) who are chronically homeless and came into the system through an Outreach or Emergency Shelter project.

#### **Procedure:**

The VESTA Advisory Board authorized an effort to track accomplishments with the chronically homeless and to permanently mark persons entering the system through outreach or emergency shelter that meet the following:

- They have entered the system as unaccompanied, single individuals; or as a chronically homeless head of household for a family.
- They are recognized as having a disabling condition.
- They have been self-identified as being homeless for longer than 1 year or more than 4 times in 3 years.

Once an outreach client or shelter resident meets the three indicators they will be identified in VESTA as a CHIP client. CHIP permanently flags clients. This Permanent flag remains with the client regardless of their future intakes at any other projects.

## Client Consent

**Policy:** It is VESTA and HMIS Policy that all clients are provided with a client consent form (CCF) as authorized by the HMIS Lead Agency and VESTA Advisory Board to inform them that, if consent is granted, their personal identifying information will be shared within the VESTA community database. Withholding consent does not allow a client to keep the Agency that is housing/serving them from entering their data into VESTA. Consent only governs the sharing of that data within the wider community database.

### Procedure:

#### Timing:

1. Clients should be informed about the VESTA consent process, and provided the opportunity to sign a CCF the first time they are entering in a housing (emergency shelter, transitional housing, permanent housing), service, or other project that utilizes VESTA.
2. VESTA consents are valid across the entirety of the database—once a client signs a consent, it allows their basic personal information to be seen across the system.
3. During each project intake, VESTA Users will have the option to utilize an existing consent (if one exists), generate a new client consent form, or renew an expired/expiring consent.

#### Signature:

1. VESTA allows for consent forms to be signed and stored electronically within the database. Agencies may elect to print and maintain physical copies of signed consents, but all consents must be recorded within VESTA to allow client data to be seen outside the original entering Agency.
2. All adult members of households should be provided the opportunity to consent. Consent for data entry/updating for minors will be provided for in the language of the parent/guardian's CCF.
3. Agency data entry/updating permission applies only to clients currently receiving services or housing.

#### Renewal:

1. All consent forms expire after three years. If a client is still in residence, a new consent form must be offered to them at the time of lease renewal or annual assessment.

#### Revoking Consent:

1. Consent may be revoked by a client at any time. [Revoking consent means that all client data will no longer be viewable to any other outside project or Agency. Data will still be recorded in VESTA and will still be viewable by the provider Agency.]

#### Unattainable Consent:

1. If a CCF cannot be obtained, the Agency shall enter client data as non-releasable data to be viewed by only that project for aggregate reporting purposes.
2. A client's decision to not sign a CCF may not be used as a reason to deny them housing or services.

#### Individual client information sharing:

1. A CCF does not authorize the Agency to release information about a client from the database. The Agency's own Agreement and release form and process must still be used prior to information sharing.

## Client Grievance

**Policy:** Client has the right to appeal his or her individual issues related to their HMIS data to the entering Agency.

**Procedure:** If a client has a complaint related to HMIS, they may file a grievance in accordance with the Agency's established grievance policy. In the absence of an established Agency grievance process, clients may address their concerns by the following progression:

1. Case worker
2. Case worker's supervisor
3. Executive Director of the Agency

## Client Notification/ VESTA Workstation Requirements

**Policy:** Because of the confidential nature of data stored within VESTA and its use as a community database application, the system must be accessed from a secured and semi-private location. Computers located in public areas will not be given access to VESTA. All computer work stations entering HMIS data will be identified with the official HMIS Poster. Work stations entering VESTA data must be identified with the “VESTA used here” sticker.

A written notice of the assumed functions of VESTA must be posted and/or given to each client so they are aware of the potential use of their data that is given, as a part of receiving services from the project. No consent is required. All clients have the right to refuse to participate.

### **Procedure:**

- For HMIS projects: Notification as an HMIS work station must be prominently displayed at each computer work station where HMIS data is entered or in a prominent location in a service area.
- For all other projects: Notification of “VESTA used here” must be prominently displayed at the work station or on the primary entrance of the project.
- If the work station is not accessible to customers, an official Cincinnati/Hamilton County HMIS Poster must be displayed.

## Data Access/Sharing

**Policy:** Client confidentiality and privacy are core values of the HMIS system. Data may only be shared pursuant to signed agreements between Agencies. Full data sharing among Agencies will only be allowed with a signed partnership agreement spelling out details, services, terms, and participating Agencies. Agency data entry/updating permission applies only to clients currently receiving services or housing.

**Procedure:** VESTA identifies the following data sharing levels

- Level 1 – Indicates data that will be shared among VESTA Users with projects other than the intake project as long as a consent form has been signed and indicated in VESTA.
- ▼ Level 2 – Indicates data that will be shared pursuant to the execution of a Partnership Data Sharing Agreement signed by all partner Agencies.
- Level 3 – Indicates data that will never be shared, regardless of consent or partnership agreement.

## Data Entry/Editing

**Policy:** The data in VESTA is the property and the responsibility of the project that entered it.

**Procedure:** PCL will not alter data, except under the following circumstances:

1. Agency data may be altered by PCL Staff in the course of routine system maintenance, such as the merging of duplicate client records. (See Unduplication Approach for additional details on record merging)  
**Example:** Record A shows JOE WILLIAMS with a date of birth of 1/1/1925. Record B shows Joseph Williams with a date of birth of 1/1/1925. Both records show the same SSN. In this case JOE WILLIAMS will be merged in to Joseph Williams’s record.
2. Agency data may be altered by PCL Staff in the event that the data as entered by the Agency prevents accurate reporting or functioning. In most cases, VESTA prevents the entry of such data, but there are exceptions.  
**Example:** A User enters ‘\$400.00’ as an income amount. The dollar sign prevents VESTA from recognizing the data as a number; it is not possible to report on the data in the field. PCL Staff will remove the dollar sign.
3. Agency data may be altered by PCL Staff in the event that data collection and/or reporting requirements

change such as data as previously entered is non-compliant or non-reportable under new requirements.

**Example:** HUD changes the list of valid prior living situations. PCL Staff will 'translate' the existing data en masse to the best possible match within the new list.

- Minor edits and alterations made in the course of routine system and/or data maintenance, such as those described in paragraphs one and two above, are pre-authorized by the VESTA Advisory Board. Data alteration en masse, such as that described in paragraph three above, must be a type that could only reasonably be done as a central administrative function rather than by individual Agencies; it should be undertaken only in coordination with the VESTA Advisory Board and with advanced notice to Agencies. If possible, Agencies should have the option to receive a copy of their original data for reference purposes.
- These categories of authorization reflect a response to a system-level problem, not an Agency problem. If the threat to data is not a system threat but rather a problem with the records of individual Agencies, then it is the responsibility of each Agency to clean its data. While VESTA Support Staff should continue to assist individual Users with any appropriate problem, this document is not meant to relieve any Agency of responsibility for the correctness of its data. VESTA Support Staff may help a User to fix his or her data for a client, but VESTA Support Staff cannot be responsible for an Agency's entire record keeping and data entry requirements.

### HMIS Data Standards/Elements

**Policy:** An HMIS system must implement, at a minimum, the HUD HMIS Data Standards within one year of each version's release. HMIS Data Standards include fields and responses for each of the provider project descriptor data elements, universal data elements, provider project-specific data elements, and metadata elements.

#### Procedure:

- As the National HMIS Research Lab, VESTA is required to implement newer versions of the HMIS Data standards in advance of their general implementation.
- VESTA complies with all HUD reporting requirements associated with HMIS Data Standards data in accordance with the most current version.
- When fields/responses are modified/aggregated as part of a new HMIS Standards release, data is migrated to the appropriate field/response to ensure that data integrity is maintain historically.
- While all projects in VESTA are required to collect those HMIS Standard elements associated with their project type, VESTA also allows each project to customize what other data and reporting they want for their own project.

### Data Release

**Policy:** Data contained within the Homeless Management Information System (HMIS) is intended to be utilized at the Agency level for project monitoring, reporting, and planning and at the community level for government funding accountability, to increase the general population's accurate understanding of homelessness and to inform policy and decision making around homeless issues/funding.

#### Procedure:

System-wide Level:

- Each Agency owns the client data for housing and/or services provided by them.
- Agencies are encouraged to use their own HMIS data for public relations, reporting, and funding as long as client confidentiality is maintained.
- Community-wide aggregate HMIS homeless data (not Agency specific) will be published annually by PCL. These reports will be raw point-in-time data. An Agency may use any and all summary data published in the annual VESTA Community Data Report.

- Any researcher interested in accessing the data, after ascertaining from the Partnership Center the specific kinds of data they are interested in and the format required, must submit, in writing, a request to the VESTA Advisory Board. No identified data will be released by PCL for research purposes.
- STEH, on behalf of Cincinnati/ Hamilton County Continuum of Care for the Homeless (CoC), may use HMIS data for planning, reporting, and grant writing purposes. The CoC may reconcile and release aggregate data to the City of Cincinnati and Hamilton County without VESTA Advisory Board review for reporting purposes including: Consolidated Plan development/reporting, HUD reporting, ESG reporting, IDIS, etc.

The HMIS Lead Agency, STEH, may release aggregate data for the purpose of community-wide reporting as required (e.g. Annual Homeless Assessment Report). Neither PCL nor STEH will release any project-specific or client-level data without the consent of the Agency and/or individual except as required by law.

### **Vesta Advisory Board Role**

**Purpose:** To guide the on-going planning, development, and implementation of a community-wide Homeless Management Information System (HMIS) for the Cincinnati-Hamilton County Continuum of Care for the homeless and VESTA as a community database for the region and other social services.

**Mandate:** The VESTA Advisory Board HMIS Committee mandate is to oversee the HMIS implementation and usage throughout the CoC. It also serves in an advisory capacity to The Partnership Center.

### **Work of the HMIS Committee:**

- Ensure that the community's HMIS is able to fulfill all functions required by HUD for an HMIS system including but not limited to: implementation of new/ updated data standards, Annual progress Reporting, Annual Homeless Assessment Reporting, etc.
- Monitor/improve/revise security and confidentiality protocols.
- Develop and oversee all local CoC HMIS Policies and Procedures.
- Represent Users' interests regarding use of VESTA as the community's HMIS.
- Review, recommend, and initiate action on significant HMIS issues uncovered during project monitoring.
- Review and recommend VESTA changes/upgrades as they relate to its use as the community's HMIS.
- Respond to any community grievances (Agencies, projects, or Users) regarding HMIS.
- Establish the annual fee schedule for HMIS Agencies.
- Review/approve all research, data warehousing, and data integration project requests.

**Asset Management:** The VESTA Advisory Board HMIS Committee will make recommendations to the HMIS Lead Agency, currently STEH, regarding asset disbursement, should the need arise.

**Work of the EA Committee:** The VESTA Advisory Board EA Committee oversees and guides the implementation and growth of EA implementation in VESTA. This committee works closely with the EA Learning Circle, led by United Way of Greater Cincinnati.

**Meeting:** The VESTA Advisory Board meets on a rotating schedule, with Committees meeting every other month and the full Board meeting quarterly. Additional committees may be developed as necessary and may consult with additional Agencies and resources in the community. VESTA Advisory Board meeting minutes will be filed at PCL.

**Term and Structure:** The VESTA Advisory Board will serve as advisors to PCL and STEH. Membership on the committee will be reviewed annually and should have at least one representative of each of the following project types: emergency shelter, transitional housing, permanent supportive housing, and street outreach. The chair of the committee is elected annually and may serve no more than two consecutive terms. The Executive Director of the STEH (or their designee) is an ex-officio member of the HMIS sub-committee and a staff of United Way of Greater Cincinnati will be an ex-officio member of the EA sub-committee. PCL will staff the sub-committees.

## HMIS Monitoring

**Policy:** To ensure that Agencies are maintaining high quality data (specifically with regard to HMIS data standards and HUD measured outcomes), each project in VESTA will be monitored by PCL Staff on at least an annual basis.

### Procedure:

1. PCL will generate a monitoring report covering a one-year period that corresponds to the project grant year being monitored or one year from the end of the previous month.
  - CoC projects will be monitored in the month following the close of their grant operating year.
  - ESG projects will be monitored annually in accordance with their annual reporting requirements.
  - Projects which provide homeless certification but do not have a HUD grant will be monitored annually in a month agreed upon between the project and PCL.
  - All other grant projects will be monitored in accordance with their grant terms.
  - Notes/exceptions:
    - a. Projects that have multiple grants will only be required to be monitored once annually at the close of the first operating year of the calendar year. (Additional monitoring on a grant-by-grant basis can be arranged by mutual agreement.)
    - b. Projects that have ESG funding and CoC funding will be monitored on the CoC grant schedule.
2. PCL will review the monitoring report, making appropriate notes in a monitoring template. (Template outlines data retrieved in each area and any comments related to each item listed above.)
3. The monitoring report and template will be emailed to the supervisor of the project being monitored and any other key staff the Agency has identified to participate. The email will contain information on what elements the monitoring has identified as issues or areas of concern and are further detailed in the monitoring report. If the monitoring findings identify multiple significant issues, an on-site monitoring will be scheduled. Project supervisors will be asked to have each issue addressed in one of the following ways:
  - data review and correction as necessary,
  - scheduling follow up training for a User, and/or
  - documentation of a new process/policy/procedure for future correction of the issue going forward.

### Items to be monitored include:

1. VESTA Front End data accuracy
2. HMIS issues:
  - Data quality based on all APR required fields
  - Data quality of Health Foundation fields
  - Error alerts
  - Client consent (# of clients with signed consent forms)
  - Timeliness of data entry (intake and exit)
  - Average time lapse between days of activity to days of data entry for intake/exit data entry
3. Grant related issues:
  - # of persons without an auto generated homeless certificate
  - Average daily capacity as compared to housing inventory
  - Recidivism rate
4. Outcomes:
  - Income
  - Clients with a loss of income and benefits over the stay
  - Annual recertification of income for all TH and PSH projects
5. Housing
  - Exit destination as compared to recidivism

### Monitoring Close Out

1. Corrective action is to be documented on the monitoring template by the project and return to PCL within 30 days.

2. On the 31<sup>st</sup> day (or the workday thereafter) PCL will review the areas of concern in VESTA to assure all have been corrected or addressed.
3. Follow up action will be taken as necessary according to the monitoring response matrix below.
4. Project data is locked.

#### *Response 1*

- A letter from PCL will be mailed to the Executive Director (ED) of the Agency, copied to the project supervisor, indicating the positive monitoring outcome.
- Strategies to End Homelessness will be notified of positive outcome via email.

#### *Response 2*

- A letter from PCL will be mailed to the ED of the Agency, copied to the project supervisor indicating the monitoring outcome, the issue(s) addressed, and the action.
- A monitoring note will be placed in the Agency file for next year to follow up.
- Strategies to End Homelessness will be notified of positive outcome via email.

#### *Response 3*

- A letter from PCL will be mailed to the ED of the Agency, copied to the project supervisor indicating the findings of the monitoring and informing them that the issue has been referred to STEH for action.
- Strategies to End Homelessness will be notified via email.

### **Messaging System Policy**

**Policy:** The VESTA client messaging system was developed for the convenience of clients and Agencies and should not be used in any manner which compromises confidentiality or integrity of the system. The messaging system can supplement, but not replace, other methods of contacting homeless clients or other clients served by projects using VESTA.

#### **Procedure:**

- Only authorized Users at participating Agencies can enter messages. Only staff has direct access to messages. The system is designed to convey only minimal information, and requires a phone call back to the Agency that placed the message.
- Placing a message in the system is NOT adequate formal notice for legal, benefit, or health related issues.
- Agencies must determine and enforce their own message policies. It is up to the Agency to determine how and whether they will accept messages for clients directly, if they will post messages from providers outside the Agency, and if they will try to contact clients no longer receiving services.
- Government and service Agencies who are not HMIS participants may wish not use the messaging system to attempt to contact their homeless clients. In such cases, the organization should contact The Partnership Center for message placement.
- Messages that violate these terms will be removed; violators will be warned; repeat violators will be terminated as Users of the system.
- Since phone numbers and staff names are well known in the community, Agencies whose identity conveys protected information should not use the messaging system.
- Agencies should not place detailed information in the messaging system. For example, an Agency may notify a client to contact a lab regarding test results, but should not include test results in message.
- Users may not use the message system to store inappropriate information or communicate information about a client to other shelter workers. Doing so is a violation of User agreements, which specify that information in the system may not be used to deny housing. (Note: this means shelters cannot use the message for “bar out”.)

### **Outreach Exit Policy**

**Policy:** All street outreach project clients that obtain housing should be exited from the street outreach project within 30 days of their housing start.

**Procedure:** This policy is designed to facilitate consistent data quality among street outreach projects using VESTA and to ensure an accurate picture of which projects' clients are active at any time. Review of VESTA data suggests that clients historically remained active in street outreach projects long after they obtained housing (and presumably are no longer working directly with outreach staff). The 30 day window is reflective of the fact that initial housing options are not always a suitable fit for clients, and sometimes it is necessary for the outreach staff to remain engaged with the client if they immediately fail out of that housing option, and return to the streets.

Likewise, this policy is not designed to encourage outreach projects to prematurely exit clients if their housing status is unknown (i.e. projects should not exit a client just because they have not seen them in a 30 day period). The policy applies only to exits for clients who are known to have obtained (and maintained) housing.

### **Street Outreach Homeless Certification Policy**

**Policy:** To ensure consistent and accurate verification of homelessness before issuing a street outreach homeless certificate in VESTA.

**Procedure:**

- Street Outreach Homeless Certificates can only be issued for individuals sleeping outside, in camps, abandoned buildings, cars, or other places not meant for human habitation.
- Street Outreach Homeless Certificates cannot be issued to individuals who are staying in shelters, transitional housing, staying with family or friends, couch surfing, staying in hotels/motels, or are facing potential eviction from their own housing.
- When an individual requests a Street Outreach Homeless Certificate, outreach workers should ask specific questions to assess his/her current living situation. Questions could include, but should not be limited to:
  - “Where did you sleep last night?”
  - “Where will you sleep tonight?”
  - “Why do you need a Homeless Certification?”
- Individuals should be offered options of shelters where they could go to sleep.
- Individuals should be informed that outreach workers will verify the person’s homeless status within one week, and that such verifications happen at various times during the Monday-Friday work week. Outreach workers should not provide the individual a specific day/time that outreach workers will be going out to verify their homeless situation.
- When verifying homelessness for an individual, outreach workers will look for evidence that the individual is staying at the location reported. Such evidence could include, but is not limited to:
  - Clothes
  - Bags of personal items
  - Empty food containers/bags
  - Shelter structure/tents/blankets/sleeping bags
- After verifying homelessness, outreach workers will enter client information into VESTA within 48 hours.
- Street Outreach Homeless Certificates are valid for 90 days. If an individual still needs a Homeless Certificate after 90 days, an outreach worker will need to re-verify their homeless status/living situation following the procedure outlined above and update the client’s VESTA profile as appropriate.
- When deciding whether to issue Homeless Certificates, Outreach workers are to use their professional judgment and collaborate as needed with other professionals working with the homeless population.

### **System Usage Policy**

**Policy:** In order to control for data quality, all participating Agencies must participate in required training and follow all established User protocols.

**Procedure:**



### General HMIS Users:

- Only authorized Users may view or update client data.
- Agencies may have an unlimited number of Users of the HMIS system; each must have his or her own username and password, and these passwords are not to be shared.
- Each User must receive training from The Partnership Center in the use of the HMIS system.
- Agency directors (or designee) must approve each individual User from their Agency.
- Only paid staff (or approved students/interns) of participating Agencies may be Users of the HMIS system. Access permission is contingent on continued employment by the Agency, and will be terminated immediately if the User is no longer employed by the Agency. Each User must sign an agreement accepting system rules and protocols and receive training from PCL before receiving a username and password to access the system. These agreements must be renewed annually or User access to the system will be revoked.
- The Agency is responsible for supervision of Users and assuring that security, confidentiality, and data integrity are maintained.
- The Agency will report any breaches of confidentiality, consent, and actual or suspended misuse of data or the VESTA software system to PCL immediately
- PCL may terminate an individual's User access rights upon violation of confidentiality provisions. The User's supervisor will be notified immediately. Termination of an individual User will not necessarily affect the Agency's overall participation in the system. Reinstating the User will be determined through discussion with the Agency's Executive Director (or designee), STEH, and PCL.

### Advanced Data Users:

- Because of the complexity of the database, specific training on Flexo (VESTA's custom report builder tool) will be required prior to its use.
- Agency Directors (or designee) must authorize a User to be trained in Flexo.
- Any deliberate misuse or misrepresentation of VESTA data by an Advanced Data User may be considered cause for termination of the User's agreement.

### **Unduplication Approach**

**Policy:** An HMIS must be capable of unduplicating client records with distinct Personal Identification Numbers automatically matching personal identifier fields (e.g., name, SSN, date of birth, and gender). This functionality must be able to unduplicate counts of clients and to support accurate HMIS reporting. This requirement applies to all client records entered in the HMIS, including client records entered by CHOs that have not been disclosed to other CHOs (non-consenting client records). VESTA System Administrators are allowed to edit a client record in order to facilitate unduplication. This includes correcting a client's recorded gender, correcting misspelled names, or entering a SSN into a record which doesn't have one.

### **Procedure:**

1. Each **client ID** is a link to a client's record. If basic client information is edited, VESTA saves those changes.
2. When one client record is **missing information**, (field left blank, field 'unknown', or field selected as 'client doesn't know', 'client refused', or 'data not collected') but the other client record contains the missing information, merging the records will automatically discard unknown data and use available data.
3. When one client record is YES for **Consent** but the other record is NO for Consent, regardless of the 'Select Target', after merging the final client record will be marked as consenting.
4. If two records exist that can be merged, where possible, the smaller (i.e. older) **Client ID** number will be the target record. The smaller the Client ID number, the earlier that client was created in VESTA.
5. When one client record contains a selected **race** and the other client record contains a different race, when the records are merged the client will show as having both (multiple) races.
6. In certain cases, other discrepancies can be resolved directly by VESTA system administrators. These cases are described below:

#### Client name discrepancies:

- One client record contains middle name or middle initial but the other record is missing middle name.
- One client record contains middle initial but the other record contains the full middle name (both beginning with the same letter).
- One client record contains 'Other Names' but the other record does not contain 'Other Names'
- The names in both client records are different only due to case sensitivity.
  - **Action:** Merge with the target being the client with more data in the name field, e.g. the client who has the full middle name. If necessary, edit the target client record so it contains the full/correct middle name and has correct capitalization of all name elements.

#### Gender discrepancies:

- One client record contains one gender but the other client record contains another gender AND...
  - the name is very clearly gender-specific.
  - or a client photo shows the client to be obviously male or female.
  - or the client is present in a project which only serves a particular gender (e.g. a family shelter doesn't serve adult males).**Action:** Change the gender in the record that is incorrect.
- If one selected gender is transgender or the gender of the client is in any way ambiguous, an email must be sent to confirm the gender to the Users who entered the most recent intake on each client (see #7 below).

#### SSN discrepancies:

- One client record contains a complete SSN but the other record contains a missing SSN (000000000) AND all of the remaining information is identical.
    - **Action:** Merge the two records with the target being the record with the full SSN.
  - One client record contains a partial SSN (e.g. "000007742") and the other contains the full SSN (ending in ...7742). Remaining information matches.
    - **Action:** Edit the source record with the partial SSN and give it the full SSN of the target record.
7. An email must be sent to both VESTA Users who did the most recent intakes if any other ambiguities exist for the merging of two client records. Cases where this procedure is necessary include:
- The client records contain different names (this does not include situations where the only difference in the names is case sensitivity, OR where the first and last names are the same and the only difference is a missing middle name, middle initial, or other name/nickname).
  - The client records contain different genders and other information provided for that client does not clearly distinguish with certainty the gender of the client.
  - The client records contain two different SSNs (where neither is an invalid SSN 000000000 NOR where one record contains a partial SSN ending or beginning with matching numbers in the full SSN--e.g. SSN 123456789 and SSN 000000789).
  - The client records contain different DOB.
8. If an email is sent to both Users who did the most recent intakes on the client records in question and no reply is received from either User or the Users cannot recall the information that needs to be confirmed, then the records cannot be merged at that time.

#### **User Access Levels**

**Policy:** In order to properly regulate access to data and reporting amongst various Users within the database, VESTA had established User access levels that govern whether Users can view/add/edit project data and/or generate reports on the data.

#### **Procedure:**

- All VESTA Users are assigned a User access level for each project to which they are granted access, as determined by their Executive Director (or designee). A User who has access to multiple projects within an Agency may have the same or different access levels for each project.
- Changes to project access levels can only be requested by a User's Executive Director (or designee)
- The following is a list of the primary User access level for VESTA Users (Note: there are some additional access levels that are used only by STEH or PCL Staff to facilitate administrative or User Support functions):

**Regular:** Client data entry/editing and review- no access to reports

**Power:** Full access to client data entry/editing, review, and reporting

**Supervisor:** Full access plus view all Users' error alerts for project(s) with Supervisor access

**VESTAcad:** Access only to VESTAcad module; no full VESTA access

**Reports only:** View and print reports only- no access to individual client records

**Data updater:** Very limited client data entry- requires special arrangements



## Training Policies and Procedures

### Training Policies and Procedures

#### Training Curriculum

**Policy:** All new Users are required to complete at least one training session prior to having access to VESTA. The training requirements are as follows:

#### VESTA 101

*VESTA 101 is a training designed to ensure that each new User learns the basic skills to navigate VESTA, including recording client details and services, and any other aspect of VESTA use necessary to performing his/her job.*

**This training is required for all new HMIS VESTA Users and new EA employee VESTA Users.**

**Scheduling:** After a User Set-Up form has been received and processed by PCL, the User Support Team will contact the User's supervisor (as listed on the form) to schedule the VESTA 101 training. Typically, the training will be scheduled at least one week after processing the Set-up request.

**Time Length:** One (1) hour for regular, power, and supervisory Users; 30 minutes for VESTAcad and reports only Users.

**Format:** On-site training at User's work location (one-on-one or small group)

#### EA in VESTA: From Food to Stability

*EA in VESTA: From Food to Stability is a training tailored to all new volunteers and student interns at emergency assistance programs. The training provides a general background of VESTA, basic skills necessary to navigate VESTA (such as those covered in VESTA 101), and EA specific skills. **This training is required for all volunteer, student, or other non-staff, and can also be provided by an Agency VESTA-authorized trainer.***

**Scheduling:** Users can schedule their attendance on PCL's website using the registration page. Trainings are held once or twice monthly depending on demand.

**Time Length:** One (1) hour

**Format:** Training conducted in PCL's training facility, 2134 Alpine Place, Cincinnati, Ohio 45206

#### **Procedure:**

- These initial training classes are designed to allow the User to navigate the system with User Support

supervision rather than the trainer leading the session.

- At the conclusion of the training session, the User is asked to sign a training outline indicating that they have been trained on and understand how to utilize the VESTA software. In addition, each User must sign a User agreement outlining the policies and procedures governing access to the system and security of the data. This agreement is re-signed at least annually or whenever a User seeks access to a new project.

### **Supplemental Training/Timetable**

**Policy:** Beginning in 2016, all new Users will be required to complete a follow-up group class within 90 days of completing VESTA 101. HMIS Users who hold part-time/ overnight/ or weekend only positions may receive an exemption from this class. In addition, PCL regularly offers additional training opportunities for VESTA Users. The training requirements are as follows:

#### **The Power of Together®**

*The Power of Together® training is a fun and interactive training designed to provide Users with a better understanding of VESTA as a community level database, with a strong focus on the homelessness continuum. This training provides new Users the opportunity to network with each other, all while mastering the basic skills needed to successfully use VESTA for their jobs. **This training is required for all new VESTA Users who are new to the Agency, and/or new to homelessness or emergency assistance services (within 90 days of completing VESTA 101) and is recommended for longer-term emergency assistance volunteer Users.***

**Scheduling:** Users can schedule their attendance on PCL's website using the registration page.

**Time Length:** One (1) hour

**Format:** Training conducted in PCL's training facility, 2134 Alpine Place, Cincinnati, Ohio 45206

#### **Procedure:**

- The Power of Together is offered monthly, on a first come, first serve basis.

#### **VESTA+ hours**

The VESTA system is constantly changing and improving. In order to ensure that long-standing VESTA Users are familiar with the newest features, VESTA Users are asked to complete additional trainings, VESTA+ (plus) hours, every year. These training hours are similar to continuing education hours required for social work credentials, but are specifically geared towards VESTA. VESTA+ hours are required on an annual basis after Users' first year of VESTA use. All regular, power, and supervisory Users must complete at least 4 hours of VESTA+ hours per year (VESTA Card only and Reports only Users must complete at least 2 hours per year) to maintain their level of use. VESTA+ classes will be revised periodically and class topics will be published on the PCL website's registration page as they are developed.

#### **Procedure:**

- PCL will maintain a training calendar with supplemental training opportunities at least monthly for small groups of Users to learn more about specific VESTA topics.
- In instances where significant changes are made to VESTA, The Partnership Center Limited (PCL) routinely offers group sessions to provide instruction of new features/ functionality.
- For advanced Users interested in building their own custom reports, PCL periodically offers the Advanced Data Users Academy. This course trains Users in the use of Flexo, a custom reporting tool that allows Users to generate and save ad-hoc reports to provide customized information for funders, boards, etc.

#### **EA Train the Trainer**

**Policy:** For Emergency Assistance Agencies with a dedicated volunteer coordinator or staff who directly manage volunteers, the EA Train the Trainer curriculum prepares and certifies Agency staff as a VESTA trainer for new

volunteer (un-paid) Users.

**Procedure:**

- Generally, EA Agencies may only certify one paid staff as the VESTA trainer for volunteer Users at the Agency.
- In order to become certified, staff must participate in an initial training and successfully complete a mock training exercise; and complete a yearly renewal course.
- Certified Agency trainers must demonstrate their use of PCL provided training materials and must adhere to the training outline, covering all necessary topics with each new User.
- Certified trainers may be asked to participate in additional trainings if monitoring by PCL (including data quality of volunteer Users, set-up requests, and the trainer’s data quality/ User performance) indicate additional need. If User performance does not increase or PCL has information that the trainer is not following appropriate training protocol and/or the new User set-up process, PCL may revoke the staff’s certificate as a trainer.

**VESTA Medicaid Application Project Training**

**Policy:** For Agencies with paid staff Users who provide benefits assistance to clients, the VESTA Medicaid Application Project training prepares Users to submit benefit applications through the Medicaid Application Project within VESTA. This does not apply to Agencies with a current relationship or special process for benefit applications – such as a dedicated Hamilton County Jobs and Family Services worker.

**Procedure:**

- A User must participate in a Medicaid training prior to accessing the Medicaid Application Project within VESTA.
- In order to participate in the training, Users must meet the following pre-requisites:
  - User must hold a paid staff position within the Agency;
  - Demonstrate work experience or current work duties related to assessing individuals for benefits, directly assisting in benefit acquisition, financial coaching, or benefit advocacy;
  - Maintain appropriate VESTA User performance and demonstrate a high familiarity with VESTA.
    - VESTA User performance will be determined by PCL Staff and will look at the following:
      - Previous VESTA experience
      - Number of Error Alerts – Are they within acceptable limits? Is the User under any active error monitoring?
      - Data Quality – Is the data quality for items related to the Medicaid Application Project (such as social security number, income, non-cash benefits, health insurance/medical benefits) generally no more than 2% of clients with missing data?
- Once trained, Users will be required to annually sign a User agreement specific to the Medicaid Application Project.
- During the first year of this project, PCL Staff will continue to monitor trained Users, and User access will generally be limited to two Medicaid application Users per Agency.
- If at any time Users fail to maintain appropriate VESTA User performance, PCL Staff may require additional training or turn off User access to the Medicaid Application Project.

**Roles**

**Policy:** The VESTA User Support Team is responsible to train and support the Users of VESTA.

**Procedure:**

- Technical and User Support questions are generated through email and phone calls from Users and are addressed in a timely and accurate manner.
- User Support Staff regularly interacts with the VESTA development team so they can be kept abreast

regarding User interface issues, bugs or other items that affect the User's system experience and improve service delivery to our customers.

- User Support Staff also assists in the development process for training and implementation of new features. This includes testing of new/modified reports, projects, and other system enhancements prior to deployment.
- User Support Staff has a limited scope to only assist with technical issues directly related to VESTA functionality (for example assisting with browser settings and digital certificates) and troubleshooting equipment if it was provided by PCL (such as signature pads).



## Security Policies and Procedures

### Security Policies and Procedures

#### Tuberculosis (TB) Policy

Policy: Tuberculosis is a serious health threat to the homeless and the community at large. Every effort should be made to cooperate with local health officials to minimize contagion.

The data in VESTA is owned by the Agencies and is subject to local consent procedures. It is the responsibility of each Agency, when approached by local TB Control officials, following the official opening of a TB Contact Investigation, to release their specific Agency data to TB Control.

#### Procedure:

1. To facilitate release of TB Control related data, a report in VESTA lists the name, date of birth, and number of days an individual has been sheltered during the given date range. Agencies should, at the request of TB Control, run that list and provide a printed hard copy or an Excel spreadsheet of the data to TB Control. It is the obligation of the local Agency to work with TB Control around the release of their data.
2. PCL programming staff can query the data in simple or sophisticated ways to assist an Agency in a search during a Contact Investigation. TB Control may request additional information of a homeless provider Agency and the Agency may choose one of two methods to request specialized data queries of PCL:
  - a. An Agency may determine with TB Control what queries will be authorized and make the request directly to PCL. PCL Staff will work with the Agency and data will be provided directly to Agency, the Agency may release the information to TB Control, subject to the Agency's policies and procedures.
  - b. The Agency may authorize PCL to work directly with TB Control. In this case, PCL will require a written authorization from the Agency director (via email or post) prior to working with TB Control. In this case, PCL will provide data directly to TB Control with copies to the Agency director.
3. Confidentiality standards imposed by local VESTA Advisory Board for VESTA do not permit any Agency to see all the residential and/or service projects a homeless person has utilized during a period of time. Only a PCL VESTA System Administrator can view this information. **Pursuant to the HMIS Data Standards "Protected Personal Information maintained in HMIS (like other data systems) also may be released for the following reasons: 1) if required by law; 2) to avert a serious threat to health or safety..."** Accordingly, when TB Control has initiated a formal TB Contact Investigation, they may formally request PCL to review the individual's data associated with the Investigation and to release to TB Control the history of any known associations and contacts within these locations. PCL will work directly with TB Control, once proper authorization has been provided, to identify all locations the client had contact with during the Investigation Period. TB Control must provide the full name, SSN, and/or Date of Birth of the homeless

individual with TB, if they have it, along with any other identifying information that will enable PCL to identify the individual in the database. Pursuant to HIV confidentiality standards, specifically OAC3701-3-03 (c), HIV information may only be released to the Health Department upon their direct request.

4. Upon identification of an infected individual's history of shelter stays and/or contacts within VESTA, PCL will work with TB Control to notify case workers and other homeless individuals (clients) who were exposed to TB via contact with the individual as follows:
  - a. Client notification will be done using VESTA. Each client exposed to TB will have an icon next to his/her name on Active Client Lists/Client Summaries; this icon will be visible at any project the client is served. Clicking the icon will display a message about TB exposure and referral information.
  - b. Users who deliver this message to clients will mark the message as 'delivered' so that PCL will be able to analyze the effectiveness of this system.

### User Security Components

**Policy:** The User security components help VESTA keep client information confidential and efficiently respond to Users that are misusing the system.

#### Procedure:

- Only authorized Users may view or update client data
- Agencies may have an unlimited number of VESTA Users, each must have his/her own username and password
- Each User must receive training in the use of VESTA
- Agency directors (or designee) must approve each individual User from their Agency.
- Only paid staff (or authorized students/interns) of Agencies may be Users of the VESTA system
- Access permission is contingent on continued employment at the Agency, and will be terminated immediately if the User is no longer employed by the Agency. It is the responsibility of the Agency to notify PCL prior to or upon the termination of the employee. PCL will terminate access immediately.
- Each User must sign a User agreement stating full understanding of the system rules and protocols before receiving a username and password to access the system. These agreements must be renewed annually or User access to the system will be revoked.

### Student/Intern Access Policy

**Policy:** In general, only paid Agency staff is granted access to HMIS projects in VESTA. However, under certain circumstances, Agencies may request access to VESTA projects for students and/or interns.

#### Procedure:

Access for such Users will be considered under the following conditions:

- Access to VESTA will only be allowed from the student/intern's primary physical work location. This restriction will be enforced through the use of a digital certificate, IP address tracking, or other measures deemed appropriate by PCL.
- Executive Directors (or designees) must provide assurance, in writing, that the student/intern's VESTA use will be actively monitored by a paid staff person(s) to ensure that only data necessary for completion of their assigned duties is being accessed, and, if applicable, all data entry is being performed properly.
- Unless strictly required by their assigned duties, student/intern access should not include viewing/editing of client-level data.

Just like any other User, prospective student/intern Users will receive the appropriate training formal VESTA training by PCL Staff or a certified Agency VESTA trainer before obtaining access to the system. Given the frequency and turnover of student/intern assignments, it is not practical for PCL to provide one-one on-site

training for every student/intern User. Instead, PCL offers group training, as often as monthly if required, for students/interns requiring access. This training will be provided free of charge provided trainees attend (unexcused absences without 24 hours' notice will incur a fee). As with any other User, it is the Agency's responsibility to notify PCL immediately when a student/intern's assignment is complete and their access to VESTA can be terminated.

### **VESTA User E-mail Policy**

**Policy:** Primary communication between PCL and VESTA Users is conducted via e-mail. In order to ensure that information disseminated to Users does not result in unauthorized access or compromised confidentiality, specific requirements for User e-mail addresses have been established.

#### **Procedure:**

- 1) Every VESTA User must have a unique e-mail address, which must be provided to PCL User Support upon initial VESTA User setup. VESTA Users may not share an email account.
- 2) For security reasons, e-mail addresses used for VESTA communications must utilize the Agency's e-mail domain (for example, [username@ABCagency.org](mailto:username@ABCagency.org)) or may be a generic web-based e-mail account as long as the email was created by the Agency for the employee's business-only uses. In the event that a given Agency does not have a designated e-mail domain, PCL User Support will work with that Agency to establish an alternate e-mail protocol that will maximize the security of VESTA-related communications via e-mail. Under no circumstances will VESTA e-mail communications be directed to User's personal e-mail account.
- 3) In the event that a User is employed separately by more than one Agency, that User must have a separate VESTA username for each Agency, and each username must be associated with a discrete e-mail address meeting the requirements listed above. (Note: separate accounts/e-mail addresses will not be required in cases where a User employed by a single Agency is accessing multiple Agencies' projects based on the existence of a partnership agreement allowing shared access between these Agency projects.) If a User is authorized to have VESTA access by multiple Agencies, it is PCL's policy to notify the Executive Director of each Agency to verify that they are aware of such multiple Agency access.
- 4) User set-up agreements submitted to PCL User Support without an e-mail address or with an address that does not adhere to this policy will not be processed. Users will not be granted access to VESTA until an appropriate e-mail address has been verified. Please note that this policy pertains to both paid Agency staff and student/intern Users (if applicable).

### **User ID/Password/Personal ID Number Specifications**

**Policy:** Access to any HMIS application must be secured with a User authentication protocol, a methodology for ensuring that only authorized Users are permitted access. The confidentiality, integrity, and availability of an HMIS application are dependent on preventing unauthorized persons from accessing or altering HMIS data.

**Procedure:** VESTA utilizes a multi-tiered approach to User access security:

- 1) Each User is assigned a unique username. In most cases, it consists of the User's first initial and last name.
- 2) At their initial VESTA login, each User is required to designate a unique password known only to them. A password must have at least eight non-blank characters, contain at least one letter and one number, and may not be the same as the User's username. Passwords are required to be reset every 90 days.
- 3) As part of an effort to streamline access to VESTA for Users while maintaining a high level of security for data, VESTA has an additional security method based on Internet Protocol (IP) address filtering and a PIN code requirement. Under the IP address filtering system, VESTA tracks the unique internet location from where a given User is accessing VESTA. As a general rule, the IP address (a string of 12 numeric digits) for a specific facility or location tends to stay the same over long periods of time. However, no two internet gateways can have the same IP address at any given time. Thus, if the same User accesses VESTA from their office and then later that day from another location, VESTA records the access from two different locations and of course whether or not the login was successful.



In order to ensure that an authorized User is attempting to access VESTA from a new location, every VESTA User is required to establish a personal 4 digit PIN. Once the PIN is established from their primary work location, the User is only asked to enter it when accessing VESTA from an IP address they have not accessed from before, or in the unlikely event that their work location IP address changes. This feature is designed to safeguard against a situation where a User's username and password have been compromised. Since it is highly unlikely that someone attempting to gain unauthorized access to VESTA would do so from the authorized User's work location, without the PIN, a hacker would not be able to log in from a remote location. The PIN is also required when a User wishes to reset his/her password. Furthermore, after four attempts with the incorrect PIN, the User's account is locked and can only be unlocked by a VESTA system administrator.

- 4) A final security feature is the selection of three security questions/answers provided privately to VESTA User Support by each User. Similar to technology implemented by banks and other secure online sites, PCL developed a list of personal questions (from which the User choose three) where the User is likely to be the only person who knows the answer. Once provided, these questions are then locked away in the User's profile where they can only be accessed by VESTA system administrators or the Users themselves after successfully logging in. These security questions and answers serve to positively identify a User to User Support Staff if there is any ambiguity as to who is calling on the phone. In the event that a User is either a) locked out of VESTA for too many incorrect login attempts or b) attempts to access VESTA from a new location and doesn't recall their PIN, the User can call VESTA User Support, provide the answers to their security questions, and have their password reset or account unlocked.

### **VESTA Dormant User Policy**

#### **Policy:**

In order to maximize VESTA security, only Users who are accessing VESTA on a routine basis (or who are accessing limited features at specific intervals) should have active User accounts. A current VESTA User Agreement by itself does not signify an "active" User. User accounts are monitored to ensure that Users with valid accounts are using the system on a regular basis.

#### **Procedure:**

PCL will review User activity across the entire VESTA system at regular intervals. Dormant User accounts (those who have not accessed the system for at least 6 months) will be handled as follows:

- A User who has not accessed VESTA login for 12 months or longer will be deactivated. This policy will be implemented regardless of the status of the User's VESTA agreement. Such accounts will only be re-activated at the specific request of the User's executive director. Any User who has not used VESTA for more than 12 months **MUST** be re-trained in order to have their access restored.
- For Users that have not accessed VESTA in between 6 months and 1 year, VESTA User Support Staff will generate an e-mail notification to the User and key contact/supervisor requesting a determination of whether access is still needed for that User. This notification will specify that a request for continued access be received from the key contact/supervisor within 5 business days or the User's account will be deactivated. Such accounts can be re-activated at a future date upon request of the Agency director. Re-training of such Users will be offered on a case by case basis.

## Remote Desktop Viewing and Control

### **Policy:**

Partnership Center, Ltd. User Support Staff can provide remote support only on-demand software that encrypts the network traffic (VESTA remote) or through utilizing “go to meeting” screen sharing tool. Remote sessions may only be initiated by direct action of the VESTA end User requesting assistance.

### **Benefits:**

1. Faster service: Partnership Center, Ltd. support staff can provide immediate support to Users by viewing exactly what the User is viewing in their VESTA session.
2. More responsive service: User Support Staff can quickly diagnose and resolve the issue and, if necessary, elevate issues to the attention of appropriate VESTA personnel for troubleshooting.

### **Procedure:**

1. VESTA remote
  - a. Access may ONLY occur with the expressed written authorization of this policy by the Agency director. PCL will not remotely access any User’s computer (nor initiate the installation of any software that would enable this functionality) unless such an approval is on file for that User’s Agency.
  - b. Users must initiate the remote session by downloading and installing the approved application. In most cases, these sessions will not require administrative or other enhanced access to install.
  - c. Users must communicate a session-specific, randomly-generated access key in order for PCL Staff to open the connection.
  - d. All remote access communication will be encoded and encrypted using recognized industry standards. In most cases, remote access will not require modification to firewalls.
  - e. Remote sessions allow for view screen only access or full remote control at the request of the User.
  - f. Users can terminate the remote session at any time, and in the event of remote control, the User’s commands always take precedence over remote commands initiated by PCL Staff.
2. Go to Meeting
  - a. Screen sharing must be initiated by the User.
  - b. PCL Staff will provide a link to begin the meeting and the User must click to share his or her screen. Using this tool, PCL will only be able to view the screen to guide the User to resolve the question.
  - c. Users can choose to stop screen sharing or end the meeting at any point.

## Incident Response Plan

### **Policy:**

To protect the data in VESTA and the integrity of VESTA as a community level database, procedures have been put in place to ensure consistent responses to incidents (such as security breaches and/or inappropriate User, project, or Agency actions). This plan is intended to address how PCL will respond to any incident, including: assessing the incident, minimizing damage, ensuring quick response, and documenting and preserving evidence.

Incident Definition: An incident is any one or more of the following:

- Loss of information confidentiality
- Compromise of information integrity
- Theft of physical IT asset including computers, storage devices, printers, etc.
- Misuse of information, tools, etc.
- Sharing login information
- Infection of systems by unauthorized or hostile software
- An attempt at unauthorized access
- Unauthorized changes to organizational hardware, software, or configuration
- Reports of unusual system behavior

**Procedure:** PCL will use the following guidelines when addressing any incident in relation to VESTA.

1. **Discovery:** Typically an incident will come to the attention of PCL when someone discovers something not right or suspicious. It may be discovered by:
  - User Support
  - Intrusion detection system
  - A system administrator
  - A firewall administrator
  - A business partner
  - A monitoring team
  - A manager
  - Agency IT staff
  - An outside source
2. **Assess and document the issue;** including but not limited to:
  - Scope of the issue – how many clients were affected? How many Users involved?
  - Whether the situation resulted from a User acting on his/her own, under the direction of a supervisor, and/or due to a general culture of the project or Agency.
  - Is the incident still in progress?
  - What data or property is threatened and how critical is it?
  - What is the impact on the business should the attack succeed? Minimal, serious, or critical?
  - What system or systems are targeted, where are they located physically and on the network?
  - Is the incident inside the trusted network?
3. **Determine the response and minimize damage:** In order to minimize risk and respond quickly, PCL may act initially on its own to determine the appropriate response strategy. In determining the strategy; the following questions will be considered and an incident level will be assigned.
  - i. Considering questions:
    - Is the response urgent? (Scope and nature of the incident?)
    - Can the incident be quickly contained?
    - Will the response appropriately alert those involved in the incident?
  - ii. Incident Level System (ranked from most severe to least)
    - Category 1 - A threat to the community-wide security of VESTA
    - Category 2 - A threat to shared data elements in VESTA
    - Category 3 - A threat to VESTA security within an Agency or across shared projects
    - Category 4 - A threat limited to the scope of actions of one User
  - iii. Responses: Based on specific situations that have arisen in the past, the following guidelines have been established to help guide PCL's initial response. *Please note: New situations are likely going to arise that may require additional responses.*
    - a. Isolate and contain the incident
      - i. Category 1 and 2 – This may result in temporarily turning off a particular feature, field option, or sharing agreement.
      - ii. Category 3 and 4 – This may result in temporarily turning off an Agency, project, or specific User.
    - b. Notify appropriate parties and begin to address the issue:
      - i. Notify - All the following parties will be notified immediately if any action is taken:
        1. Agency: Executive director, direct project management, and specific Users involved
        2. Funders: In the case that the Agency/ project is using VESTA as a requirement of their funding, the primary contact for the funder will be notified immediately
        3. VESTA Advisory Board: Advisory chair and committee will be made aware of the incident and response.
    - c. Addressing the issue - PCL will work quickly with the Agency, funder(s), and VESTA Advisory Board, as appropriate, to quickly resolve the issue. If necessary, PCL will convene all the parties together as quickly as possible to discuss an appropriate action plan to resolve the incident. This is intended to ensure all viewpoints are addressed and considered as part of the action

plan. If necessary, the VESTA Advisory Board may convene prior to its involvement to ensure that the Board agrees with the viewpoint it is taking on the incident.

- i. Establish Action plan - Based on incidents arising in the past, an action plan may include:
    1. Agency leadership and PCL addressing the actions of staff and determining if additional action against the User is appropriate
    2. Agency leadership establishing or modifying Agency policies around VESTA usage and ensuring staff are properly notified
  - ii. Restore Access – In cases where an action plan is initiated, PCL will restore access once the action plan is established and any immediate steps are taken.
  - iii. Monitoring Action Plan – As part of the action plan, PCL will work to ensure that a monitoring plan, if necessary, is included as part of the action plan.
- d. Terminate specific Users' access
- i. In severe cases, PCL will adhere to a zero tolerance approach. Without prior warning to the User, PCL may choose to ban the User from future access to VESTA (i.e. - cases where a trained User has knowingly and intentionally shared his/her personal password and login).
  - ii. In other cases, PCL will notify the User and supervisor of the issue as a warning, but if the User commits the same or similar action again, PCL may ban the User from future access, temporarily suspend the Users' account, and/or require the User to complete additional training before turning the User's access back on.
- e. Final Resolution: In the case that the Agency, PCL, and/ or funder are unable to come to an agreement of action to resolve the incident, PCL maintains the right to terminate system usage for any Agency that violates or compromises client confidentiality based on access to or use of the system. Any Agency wishing to contest the termination may seek mediation from the Cincinnati Mediation Association, and will be responsible for all charges and/or fees incurred from the mediation.
4. **Document the incident:** All documentation of the incident and response will be stored in PCL corporate files. Any documentation referencing client files will either use the Public ID or the Client ID as the key reference code to the file stored in VESTA.
  5. **Notification:** Notification of incidents is important as VESTA is a shared, community-level database, and the HMIS in Hamilton County. Beyond the notification step as part of any response, there may be necessary times to notify other groups, such as: EA leadership, Clearinghouse, and general Users. When necessary, PCL may post a general warning or notice to all Users on VESTA to alert them of the incident and response or provide a more detailed account of the incident, response, and resolution.
  6. **Assess damages and costs:** If necessary, PCL will assess the damages to VESTA and/or the costs associated with responding and fixing the incident.
  7. **Review response and update policies:** After any incident PCL will plan and take preventative steps so that the possibility of the incident occurring again will be minimized and update these policies as needed. The following will be considered:
    - Whether an additional policy could have prevented the intrusion.
    - Whether a procedure or policy was not followed which allowed the intrusion, then consider what could be changed to be sure the procedure or policy is followed in the future.
    - Was the incident response appropriate? How could it be improved?
    - Was every appropriate party informed in a timely manner?
    - Is additional monitoring necessary?
    - Were the response procedures detailed and cover the entire situation? Can they be improved?
    - Have changes been made to prevent a re-infection of the current infection? Are all systems patched, systems locked down, passwords changed, anti-virus updated, email policies set, etc.?
    - Have changes been made to prevent a new and similar infection?

- Should any security policies be updated?
8. **Incident Preparation and Prevention.**
- i. **Preparation:** PCL currently has the following in place to limit incidents from occurring initially: (Please note that this list is not exhaustive.)
    - Security training with all new Users
    - Signed agreements outlining liability as a result of misuse of VESTA (User agreements, Agency agreements, sharing/ partnership agreements)
    - Security such as individual passwords that require change on a regular basis, tracking of IP addresses, Digicerts for volunteers, Notices to TechSupport when a User attempts to access VESTA outside of his/her privileges, User level set-ups, etc.
    - Secured servers
    - Automatic log-off after inactivity
    - Dormant User policy
    - Designation of a VESTA contact per Agency to ensure communication from VESTA is distributed to the Agency as needed
    - Error alerts
    - Monitoring reports and processes
  - ii. **Prevention of re-infection.** After any incident, PCL will take steps to prevent an immediate re-infection which may include one or more of:
    - Close a port on a firewall
    - Patch the affected system
    - Shut down the infected system until it can be re-installed
    - Re-install the infected system and restore data from backup. Be sure the backup was made before the infection.
    - Change email settings to prevent an attachment type from being allow through the email system.
    - Plan for some User training.
    - Disable unused services on the affected system.



## *Central Server Operation, Maintenance and Data Security Plans/Commitments*

### **Central Server Operation, Maintenance and Data Security Plans/Commitments**

#### **Server Access (via networks)**

**Policy:** HMIS vendors, HMIS Leads, and CHOs must ensure that computers, devices, and servers on which HMIS applications and data are stored or processed are protected from malicious intrusion behind a boundary protection device (“firewall”) that is configured to allow only ports and services that are required in the course of regular operations.

#### **Procedure:**

1. The VESTA servers are protected behind an intelligent firewall device which blocks traffic incoming to the VESTA servers except for:
  - HTTP
  - HTTPS (“SSL”)
  - Private encrypted VPN (virtual private network) traffic between the servers and authorized

Partnership Center computers.

2. Additionally, the VESTA servers also make use of the built-in Windows firewall software to further restrict incoming traffic to the computers.
3. By default, Windows-based servers and workstations have their software firewall enabled and it is general expected that it remains so for all workstations accessing the VESTA website. Naturally, standard firewall exceptions are expected such as those which permit file sharing or remote administration of systems.

### Server Access (physical location)

**Policy:** Physical access to servers which store HMIS data is limited to authorized HMIS system administrators from PCL.

**Procedure:**

- VESTA-Live equipment resides at the Cincinnati Bell/CyrusOne downtown Cincinnati Data Center.
- Only select PCL Staff has direct access to the VESTA server rack. Anyone requesting access to it must be positively identified as an authorized person before even gaining access to the building. Additionally, a data center employee must unlock the cage to allow access to the servers.

### Audit Trails

**Policy:** HMIS software must track User activity in the HMIS.

**Procedure:**

VESTA logs the following events and retains a rolling one-year history in the active VESTA-Live database, with prior years being available in backups:

General events that apply to all VESTA Users:

1. Successful login.
2. Logout.
3. Unsuccessful login (username and password are not saved in audit log, though if supplied username matches an existing VESTA account the user ID is stored).
4. User requesting a password reset (logging occurs via email to VESTA User Support).
5. User automatically logged out of VESTA.
6. User redirected to the login page due to the same username being used in a successful VESTA login in another web browser window or on a different computer.
7. User accessing any page in VESTA, along with the URL of the page requested. This includes pages such as the VESTA home page, a client review page (including the client ID), intake or exit wizard pages, etc.
8. User being blocked from accessing a webpage in VESTA, along with the URL of the page requested.
9. User executing a report, along with all the parameters selected for report execution.
10. User experiencing an unexpected error (“YSD”) message, (details of error are emailed to VESTA Support).
11. The IP addresses from which a User accesses VESTA. Previously-unknown IP addresses require the User to supply their VESTA PIN before successful login.
12. When any client data is changed, VESTA maintains a history of “what was data before it was changed”.

Additional events logged for system administration functions:

1. Which administrator last edited a User account and when.
2. User accounts deactivated due to expired User agreements.

### Backup and Recovery Procedures

**Policy:** In order to ensure that data entered into VESTA is safe in the event of a catastrophic power/system failure, a series of redundancy/backup/recovery protocols have been established.

**Procedure:**

VESTA-Live backup procedures have been optimized for speed in recovering data quickly while maintaining a reasonable history of “back in time” data snapshots.

1. All VESTA-Live servers use RAID-5 hard drive configurations for redundant hard drive storage.
2. The VESTA-Live transactional database is backed up nightly to another folder on the same server. There is a 30-day history of these nightly backups.
3. The VESTA-Live transactional database’s transaction log is backed up hourly to another folder on the same server. There is at least a one-day history of these transaction logs.
4. The nightly and weekly backups of the VESTA-Live transactional database are mirrored nightly to another VESTA server in the same facility as the VESTA-Live transactional database server. Specifically, the VESTA-Live reporting database server.
5. The VESTA-Live transactional database is also backed up weekly to another folder on the same server, independent of the nightly backup. These weekly backups are maintained indefinitely.
6. The VESTA-Live transactional database is also backed up nightly to Cyrus One’s off-site backup facility using Tivoli backup software installed on that server. These backups are available using the same Tivoli software on the server, or by requesting a copy through Cyrus One’s online service ticket system.
7. The VESTA-Live web server copies scanned/uploaded client-related documents, including client photos, to the VESTA-Live reports database server.
8. The VESTA-Live web server performs a full Windows Backup of all its data on a nightly basis and stores this on the VESTA-Live reports database server.
9. The VESTA-Live reports database server also contains a mirror of all the database backups, both nightly and weekly, made on the VESTA-Live transactional database server. This mirror is updated nightly.

**Internet Connection and Power Redundancy**

**Policy:** As web-based software, VESTA relies on power and a working internet connection to ensure uninterrupted access for Users. Both must be redundant.

**Procedure:**

1. The VESTA-Live servers reside at the Cincinnati Bell/CyrusOne downtown datacenter. This datacenter has redundant incoming internet connections as well as generator-based power backup.
2. VESTA-Live servers require a minimum of 4 hours to relocate to a different facility in the event of a longer-duration power or internet outage at the Cyrus One datacenter. The VESTA servers can reside on a temporary basis at a facility with a single static IP address and incoming internet connection at least 3mbps.

**Transmission/Encryption**

**Policy:** The HMIS Lead, CHOs, and HMIS vendors must encrypt all HMIS data containing client protected personal information (PPI) that are electronically transmitted over the Internet, publicly accessible networks or phone lines in accordance with current industry standards using AES-128-bit equivalent or higher encryption. The HMIS application must implement these transmission standards for any transactions it processes.

**Procedures:**

1. VESTA uses the Secure Sockets Layer (SSL) protocol with 128-bit encryption. This provides a highly secure, encrypted connection between the VESTA server and the User’s computer. SSL is an industry standard and is used on all websites where sensitive information is transmitted.
2. VESTA Users should not store files with PPI unsecured on their workstations.
3. VESTA Users should **never** email unencrypted PPI, and should be very careful about to whom PPI is sent.
4. When accessing, storing, or sending PPI, Users should consider “is this how I would treat data about myself?”

## Virus Protection

**Policy:** The HMIS Lead and CHOs must protect HMIS systems from applications designed to damage or disrupt the system (e.g., a virus) by using anti-virus software. The HMIS Lead Agency and CHOs must update virus definitions from the anti-virus software vendor at least weekly.

### Procedures:

1. All VESTA servers use Symantec Endpoint Protection, an industry-standard antivirus software, which updates automatically on an as-needed basis.
2. All workstations and servers which store VESTA code are also protected with antivirus software.
3. All workstations used to access the VESTA website must also have antivirus software set to automatically update at least on a weekly basis.



## Technical Specifications

### Technical Specifications

#### Hardware, Software and Connectivity Requirements

**Policy:** Agencies are responsible for purchasing and maintaining approved computer systems, operating software, networks, and internet access. Because of the confidential nature of data stored in VESTA and its use as a community database application, PCL requires that the system must be accessed from a secured and semi-private location. Computers located in public areas will not be granted access to VESTA. Each User must have their own unique username and password to access the computer/network from which they access VESTA. All computers that access VESTA must have up-to-date anti-virus software installed and running.

PCL will maintain the hardware and software required to support the VESTA system for community wide use; perform regular data backups of all data stored in VESTA; and complies with industry standards for security.

### Procedure:

#### Minimum system requirements for User systems to access VESTA:

Hardware:	1.5 GHz processor 512 MB RAM 1 GB free hard drive space VGA (1024 x 768) display
Software:	Windows XP Microsoft Internet Explorer 6.0 Antivirus Microsoft Word 2003 or newer (required to view pre-filled templates from VESTA) Microsoft .NET 2.0 framework (required to run VESTAdocup and VESTAcad)
Connectivity:	384bps internet connection

#### Recommended system requirements:

Hardware:	Dual-core processor (Intel Core 2 Duo, AMD Athlon x2) 2 GB RAM SXGA (1280 x 1024) or WXGA (1280 x 768) display
Software:	Windows 7/8 Microsoft Internet Explorer 8.0 Antivirus
Connectivity:	1.5mbps (or better) internet connection



**Cincinnati/Hamilton  
County Continuum of Care**

**Homeless Management  
Information System (HMIS)**

**Policies and Procedures Manual**

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# HOMELESSNESS MANAGEMENT INFORMATION SYSTEM

## POLICIES AND PROCEDURES MANUAL

*This manual is developed by the CoC Data Committee and authorized by the Homeless Clearinghouse of the Cincinnati/Hamilton County CoC*

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### HMIS GOVERNANCE CHARTER

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#### INTRODUCTION

The Homeless Clearinghouse of the Cincinnati/Hamilton County CoC (Clearinghouse) has selected Strategies to End Homelessness (Strategies) as the lead agency and Collaborative Applicant for the Cincinnati/Hamilton County CoC (CoC, OH-500) as well as the designated lead agency for the Cincinnati/Hamilton County Homeless Management Information System (HMIS). The coverage area for both the CoC and the HMIS includes all municipalities in Hamilton County. Strategies has primary responsibility for all HMIS activities.

The HMIS Governance Charter serves to delineate the roles and responsibilities related to key aspects of the governance and operations of the Cincinnati/Hamilton County HMIS and includes the most recent *HMIS Policies and Procedures Manual (Policy)* developed and adopted by the CoC Data Committee and Clearinghouse, which is incorporated into this charter by reference. The Policy includes privacy, security, client consent and data entry requirements and may be modified from time to time at the Clearinghouse's discretion.

Beginning with the 2003 Continuum of Care (CoC) grants and continuing with the Emergency Solutions Grants (ESG), the United States Department of Housing and Urban Development (HUD) requires all grantees and sub-grantees to participate in their local Homeless Management Information System. This policy is consistent with the Congressional Direction for communities to provide data to HUD on the extent and nature of homelessness and the effectiveness of its service delivery system in preventing and ending homelessness.

The HMIS and its operating policies and procedures are structured to comply with the most recently released *HUD Data and Technical Standards for HMIS*. Recognizing that the Health Insurance Portability and Accountability Act (HIPAA) and other Federal, State and local laws may further regulate agencies, the Continuum may negotiate its procedures and/or execute appropriate business agreements with Partner Agencies so they are in compliance with applicable laws.

Strategies uses all submitted data for analytic and administrative purposes, including the preparation of Strategies' reports to funders and the Continuum's participation in the Federal Annual Homeless Assessment Report (AHAR). Aggregate data taken from the HMIS is used to inform Strategic Planning activities and the Consolidated Plans of Cincinnati and Hamilton County, as necessary.

## KEY SUPPORT ROLES & RESPONSIBILITIES

### Strategies to End Homelessness

As lead agency for the Cincinnati/Hamilton County Continuum of Care (CoC):

- ⇒ Designates the HMIS lead agency, oversees the HMIS project and has primary responsibility for all HMIS activities
- ⇒ Ensures HMIS compliance with all HUD rules and regulations
- ⇒ Encourages and facilitates participation.
- ⇒ Approves and facilitates enforcement of HMIS policies as set forth in the *HMIS Policies and Procedures Manual*
- ⇒ Appoints the HMIS committee
- ⇒ Designates software to be used for the HMIS in the geographic region
- ⇒ Selects, approves and executes annual contract(s) with HMIS vendor(s)

### HMIS Committee

- ⇒ Guides the implementation of the Homeless Management Information System
- ⇒ Develops, informs, and reviews HMIS policies and procedures
- ⇒ Advises and recommends to the CoC board changes to HMIS policies and procedures
- ⇒ Cultivates ways in which future data measurement can contribute to fulfillment of strategic goals
- ⇒ Chair is elected by the Homeless Clearinghouse; members are drawn from the HMIS user community at large

### HMIS Management Team-Strategies

- ⇒ Consists of the HMIS Lead Agency staff, including the Director of Information Services, the Data Quality Manager and Lead Trainer, and the HMIS Support Specialist
- ⇒ Authorizes/makes decisions regarding day-to-day operations
- ⇒ Ensures compliance with HMIS policies and HUD requirements
- ⇒ Monitors data quality in accordance with Data Quality Plan benchmarks as set forth in the *HMIS Policies and Procedures Manual*
- ⇒ Acts as liaison between the Clearinghouse and regional or national HMIS related organizations and participates in related activities
- ⇒ Supervises contract(s) with vendor(s)
- ⇒ Provides training and support to partner agency users
- ⇒ Facilitates continuing quality improvement via data analyses and knowledge of best practices

### **HMIS Partner Agencies**

- ⇒ Execute an HMIS Agency Partner Agreement and, if applicable, a Network Data Sharing Agreement
- ⇒ Agree to abide by the most current *HMIS Policy and Procedures Manual (Policy)* approved and adopted by the Clearinghouse
- ⇒ Ensure that all employees and agents comply with the Policy
- ⇒ Ensure staffing and equipment necessary to implement and ensure HMIS participation

### **HMIS Primary Point Persons/Agency Administrators**

- ⇒ Are the main communicators and the liaison between the HMIS Management Team and their respective agency's users
- ⇒ Ensure compliance with HMIS policies within their agency
- ⇒ Provide support for HMIS use within their agencies (Agency Administrators)

### **HMIS User Group**

- ⇒ Includes representatives of all HMIS participating projects
- ⇒ Provides feedback on system performance and the need for system enhancements
- ⇒ Provides input and support for policy enforcement
- ⇒ Provides information link between agency users and the HMIS Management Team

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## **HMIS AGENCY IMPLEMENTATION POLICIES AND PROCEDURES**

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### **HMIS PARTICIPATION POLICY**

#### **Mandated Participation**

All projects that are authorized under HUD's McKinney-Vento Act as amended by the HEARTH Act to provide homeless services must meet the minimum HMIS participation standards as defined by this Policies and Procedures manual. These participating agencies will be required to comply with all applicable operating procedures and must agree to execute and comply with an HMIS Agency Partner Agreement.

#### **Voluntary Participation**

Although funded agencies are required to meet only minimum participation standards, the Clearinghouse strongly encourages funded agencies to fully participate with all of their homeless programs.

While the Clearinghouse cannot require non-HUD funded providers to participate in the HMIS, the Clearinghouse and Strategies works closely with non-HUD funded agencies to articulate the benefits of the HMIS and to strongly encourage their participation in order to achieve a comprehensive and accurate understanding of homelessness in Cincinnati/Hamilton County.

### Minimum Participation Standards

- ⇒ Each participating agency shall execute an HMIS Agency Partner Agreement and, if applicable, a Network Data Sharing Agreement.
- ⇒ Agency staff shall collect the universal and program-specific data elements as defined by HUD and other data elements as determined by the HMIS Committee for all clients served by programs participating in HMIS; data may be shared with other agencies subject to appropriate client consent and network data sharing agreements.
- ⇒ Real Time Data Entry is encouraged. However, in cases where real time cannot be accomplished the following timeframes are required:
  - o Residential Projects: All data required to be collected at project entry is to be entered into the HMIS system within two working days of a residential project entry. Residential projects include: emergency shelter, transitional housing, and all types of permanent housing, including rapid re-housing and permanent supportive housing. In accordance with HUD policy all residential projects where persons reside for a year or longer must do an annual assessment within the 30 day before or 30 day after the client's anniversary of project entry each year.
  - o Street Outreach Projects: Limited basic demographic data (race, gender, and a unique identifier) is to be entered into the HMIS system within two working days of the first substantial outreach encounter.
  - o Exit Data: All data required to be collected at project exit data is to be entered into the HMIS system within five working days of the client exiting a housing stay or receiving a service
- ⇒ Participating agencies shall comply with all HUD regulations for HMIS participation.
- ⇒ Each agency shall designate at least one HMIS Key Contact/Primary Point Person. This person may or may not also be the Agency Administrator (see below). The HMIS Primary Point Person functions as the main liaison with the HMIS Management Team and is responsible for organizing its agency's users, making sure proper training has taken place for the users and that all paperwork and confidentiality requirements are being followed by all users from that agency.
- ⇒ Each agency having five or more users must designate at least one user to function as an Agency Administrator. Agencies with fewer than five users have the option of designating an Agency Administrator. The Agency Administrator is expected to provide on-site support to the agency's end-users, run agency reports, monitor the agency's data quality, and work with the HMIS Management Team to troubleshoot HMIS issues. Agency Administrators are expected to attend HMIS User Group

meetings.

- ⇒ Each HMIS participating project within an agency is required to have a representative at each HMIS User Group meeting who can effectively communicate what is covered in the meeting to the rest of the project's HMIS users.

## HMIS PARTNERSHIP TERMINATION - DATA TRANSFER POLICIES

In the event that the relationship between the Cincinnati/Hamilton County HMIS and a Partner Agency is terminated, the Partner Agency will no longer have access to the HMIS. The HMIS Management Team shall make reasonable accommodations to assist a Partner Agency to export its data in a format that is usable in its alternative database. Any costs associated with exporting the data will be the sole responsibility of the Partner Agency.

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## HMIS SECURITY PLAN

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The Continuum has defined a security plan that:

- ⇒ Ensures the confidentiality, integrity, and availability of all HMIS information
- ⇒ Protects against any reasonably anticipated threats or hazards to security
- ⇒ Ensures compliance by end-users

## HARDWARE, CONNECTIVITY AND COMPUTER SECURITY REQUIREMENTS

### Workstation Specification

Computers should meet the **minimum** desktop specification:

- ⇒ Operating System: Any system capable of running a current Internet browser as specified below
- ⇒ Processor: 2 GHz Pentium processor or higher; dual core recommended
- ⇒ Memory: 4gb recommended (2gb minimum)
- ⇒ Hard Drive: 40 MB available space
- ⇒ Web Browsers: The most current version of MS Internet Explorer, Chrome or Mozilla Firefox

### Internet Connectivity

Partner Agencies must have Internet connectivity for each workstation accessing the HMIS. To optimize performance, all agencies are encouraged to secure a high speed Internet connection.

Any network that has a Wi-Fi component must employ at least WPA2 level security.

### Security Hardware/Software

All workstations accessing the HMIS need to be protected by a securely configured



firewall. If the workstations are part of an agency computer network, the firewall may be installed at a point between the network and the Internet or other systems rather than at each workstation. Each workstation also needs to have anti-virus and anti-spyware programs in use and properly maintained with automatic installation of all critical software updates.

### Agency Workstation Access Control

Access to the HMIS will be allowed only from computers specifically identified by the Partner Agency's Executive Director or authorized designee and HMIS Agency Administrator. Each Partner Agency will determine the physical access controls appropriate for their organizational setting based on HMIS security policies, standards and guidelines. Each workstation, including laptops and other mobile devices used off-site, should have appropriate and current firewall and virus protection as specified above under *Security Hardware/Software*.

## HMIS USER IMPLEMENTATION

### Eligible Users

Each Partner Agency shall authorize use of the HMIS only to users who need access to the system for data entry, editing of client records, viewing of client records, report writing, administration or other essential activity associated with carrying out participating agency responsibilities according to the following guidelines:

- Only authorized Users may view or update client data
- Agencies may have an unlimited number of HMIS Users, and each must have his/her own username and password
- Each User must receive training in the use of HMIS
- Agency directors (or designee) must approve each individual User from their Agency.
- Only paid staff (or authorized students/interns) of Agencies may be Users of the HMIS system
- Access permission is contingent on continued employment at the Agency, and will be terminated immediately if the User is no longer employed by the Agency. It is the responsibility of the Agency to notify Strategies prior to, or upon the termination of, the employee. Strategies will terminate access immediately.
- Each User must sign a User agreement stating full understanding of the system rules and protocols before receiving a username and password to access the system. These agreements must be renewed annually or User access to the system will be revoked. The HMIS Management Team shall authorize use of the HMIS only to users who need access to the system for technical administration of the system, report writing, data analysis and report generation, back-up administration or other essential activity associated with carrying out central server responsibilities.

In the event that a User is employed separately by more than one Agency, that User

must have a separate username for each Agency, and each username must be associated with a discrete e-mail. If a User is authorized to have HMIS access by multiple Agencies, Strategies with notify the Executive Director of each Agency to verify that they are aware of such multiple Agency access.

### **User Requirements**

Users must be aware of the sensitivity of client-level data and must take appropriate measures to prevent its unauthorized disclosure. Users are responsible for protecting institutional information to which they have access and for reporting security violations. Users must comply with all policies and standards described within this Policies and Procedures manual. They are accountable for their actions and for any actions undertaken with their username and password.

Agency Administrators must ensure that users have received adequate training prior to being given access to the database.

### **Setting Up a New User**

If the Partner Agency wants to authorize system use for a new user, the agency's Executive Director or authorized designee must:

- ⇒ Determine the access level of the proposed HMIS user
- ⇒ Execute an HMIS user confidentiality agreement
- ⇒ Review HMIS records about previous users to ensure that the individual does not have previous violations with the HMIS Policies and Procedures that prohibit their access to the HMIS
- ⇒ Verify that an HMIS user confidentiality agreement has been correctly executed
- ⇒ Verify that appropriate and sufficient training has been successfully completed
- ⇒ Create the new user ID and password, or submit request for creation to the HMIS Management Team

Volunteers/students/interns have the same user requirements that paid staff have. They must have an individual user account, go through the same training, and have the same confidentiality and privacy documents signed and on file with the agency they are serving.

The Executive Director or authorized designee is responsible for ensuring that the user understands and complies with all applicable HMIS Policies and Procedures.

### **Incident Response Plan**

#### **Policy:**

To protect the data in the Cincinnati/Hamilton County HMIS and the integrity of the community level database, procedures have been put in place to ensure consistent responses to incidents (such as security breaches and/or inappropriate User, project, or Agency actions). This plan is

intended to address how Strategies will respond to any incident, including: assessing the incident, minimizing damage, ensuring rapid response, and documenting and preserving evidence.

**Incident Definition:** An incident is any one or more of the following:

- Loss of information confidentiality
- Compromise of information integrity
- Theft of physical IT asset, including computers, storage devices, printers, etc.
- Misuse of information, tools, etc.
- Sharing login information
- Infection of systems by unauthorized or hostile software
- An attempt at unauthorized access
- Unauthorized changes to organizational hardware, software, or configuration
- Reports of unusual system behavior

**Procedure:** Strategies will use the following guidelines when addressing any incident in relation to HMIS.

**1. Discovery:** Typically an incident will come to the attention of Strategies when someone discovers something not right or suspicious. It may be discovered by:

- User Support
- Intrusion detection system
- A system administrator
- A firewall administrator
- A business partner
- A monitoring team
- A manager
- Agency IT staff
- An outside source

**2. Assess and document the issue:** Actions may include, but are not limited to:

- Scope of the issue – how many clients were affected? How many Users involved?
- Whether the situation resulted from a User acting on his/her own, under the direction of a supervisor, and/or due to a general culture of the project or Agency.
- Is the incident still in progress?
- What data or property is threatened and how critical is it?
- What is the impact on the business should the attack succeed? Minimal, serious, or critical?
- What system or systems are targeted, where are they located physically and on the network?
- Is the incident inside the trusted network?

**3. Determine the response and minimize damage:** In order to minimize risk and respond quickly, Strategies may act initially on its own to determine the appropriate response strategy. In determining the strategy, the following questions will be considered and an incident level will be assigned.

- i. Considering questions:
  - a. What is the scope and nature of the incident?
  - b. Is an urgent response required?
  - c. Can the incident be quickly contained?
  - d. Will the response appropriately alert those involved in the incident?
- ii. Incident Level System (ranked from most severe to least)
  - a. Category 1 - A threat to HMIS security at a community-wide level
  - b. Category 2 - A threat to shared HMIS data elements
  - c. Category 3 - A threat to HMIS security within an Agency or across shared projects
  - d. Category 4 - A threat limited to the scope of actions of one User
- iii. Responses: The following guidelines have been established to help guide Strategies' initial response. This list is subject to change based on exactly what types of incidents are encountered
  - a. Isolate and contain the incident
    - 1. Category 1 and 2 – This may result in temporarily disabling a particular feature, field option, or data sharing protocol.
    - 2. Category 3 and 4 – This may result in temporarily disabling access for an Agency, project, or specific User.
  - b. Notify appropriate parties and begin to address the issue: All the following parties will be notified immediately if any action is taken:
    - 1. Agency: Executive director, direct project management, and specific Users involved
    - 2. Funders: In the case that the Agency/ project is using HMIS as a requirement of their funding, the primary contact for the funder will be notified immediately
  - 3. HMIS Management Team
  - c. Addressing the issue - Strategies will work quickly with the Agency, funder(s), and Clearinghouse, as appropriate, to quickly resolve the issue.

If necessary, Strategies will convene all the parties together as quickly as possible to discuss an appropriate action plan to resolve the incident. This is intended to ensure all viewpoints are addressed and considered as part of the action plan. If necessary, the HMIS Advisory Board may convene prior to its involvement to ensure that the Board agrees with the viewpoint it is taking on the incident.

- i. Establish Action plan - Based on incidents arising in the past, an action plan may include:
  - 1. Agency leadership and Strategies addressing the actions of staff and determining if additional action against the User is appropriate
  - 2. Agency leadership establishing or modifying Agency policies around HMIS usage and ensuring staff are properly notified
- ii. Restore Access – In cases where an action plan is initiated, Strategies will restore access once the action plan is established and any immediate steps are taken.
- iii. Monitoring Action Plan – As part of the action plan, Strategies will work to ensure that a monitoring plan, if necessary, is included as part of the action plan.
- d. Terminate specific Users' access
  - i. In severe cases, Strategies will adhere to a zero tolerance approach. Without prior warning to the User, Strategies may choose to ban the User from future access to HMIS (i.e. -

cases where a trained User has knowingly and intentionally shared his/her personal password and login).

ii. In other cases, Strategies will notify the User and supervisor of the issue as a warning, but if the User commits the same or similar action again, Strategies may ban the User from future access, temporarily suspend the Users' account, and/or require the User to complete additional training before turning the User's access back on.

e. Final Resolution: In the case that the Agency, Strategies, and/ or funder are unable to come to an agreement of action to resolve the incident, STRATEGIES maintains the right to terminate system usage for any Agency that violates or compromises client confidentiality based on access to or use of the system. Any Agency wishing to contest the termination may seek mediation from the Cincinnati Mediation Association, and will be responsible for all charges and/or fees incurred from the mediation.

4. Document the incident: All documentation of the incident and response will be stored in Strategies corporate files. Any documentation referencing client files will either use the Public ID or the Client ID as the key reference code to the file stored in HMIS.

5. Notification: Notification of incidents is important as HMIS is a shared, community-level database, and the HMIS in Hamilton County. Beyond the notification step as part of any response, there may be necessary times to notify other groups, such as: EA leadership, Clearinghouse, and general Users. When necessary, Strategies may post a general warning or notice to all Users on HMIS to alert them of the incident and response or provide a more detailed account of the incident, response, and resolution.

6. Assess damages and costs: If necessary, Strategies will assess the damages to HMIS and/or the costs associated with responding and fixing the incident.

7. Review response and update policies: After any incident Strategies will plan and take preventative steps so that the possibility of the incident occurring again will be minimized and update these policies as needed. The following will be considered:

- Whether an additional policy could have prevented the intrusion.
- Whether a procedure or policy was not followed which allowed the intrusion, then consider what could be changed to be sure the procedure or policy is followed in the future.
- Was the incident response appropriate? How could it be improved?
- Was every appropriate party informed in a timely manner?
- Is additional monitoring necessary?
- Were the response procedures detailed and cover the entire situation? Can they be improved?
- Have changes been made to prevent a re-infection of the current infection? Are all systems patched, systems locked down, passwords changed, anti-virus updated, email policies set, etc.?

- Have changes been made to prevent a new and similar infection?

- Should any security policies be updated?

8. Incident Preparation and Prevention.

i. Preparation:

Strategies currently has the following in place to limit incidents from occurring initially: (Please note that this list is not exhaustive.)

- o Security training with all new Users

- o Signed agreements outlining liability as a result of misuse of HMIS (User agreements,

Agency agreements, sharing/ partnership agreements)

- o Security such as individual passwords that require change on a regular basis, tracking of IP addresses, Notices to Tech Support when a User attempts to access HMIS outside of his/her privileges, User level set-ups, etc.
  - o Secured servers
  - o Automatic log-off after inactivity
  - o Dormant User policy
  - o Designation of a HMIS contact per Agency to ensure communication from HMIS is distributed to the Agency as needed
  - o Error alerts
  - o Monitoring reports and processes
- ii. Prevention of re-infection. After any incident, Strategies will take steps to prevent an immediate re-infection which may include one or more of:
- o Close a port on a firewall
  - o Patch the affected system
  - o Shut down the infected system until it can be re-installed
  - o Re-install the infected system and restore data from backup. Be sure the backup was made before the infection.
  - o Change email settings to prevent an attachment type from being allow through the email system.
  - o Plan for some User training.
  - o Disable unused services on the affected system.

### **Enforcement Mechanisms**

The HMIS Management Team will investigate all potential violations of any security protocols. Any user found to be in violation of security protocols will be sanctioned.

#### **Sanctions include, but are not limited to:**

- ⇒ A formal letter of reprimand
- ⇒ Suspension of system privileges
- ⇒ Revocation of system privileges

A Partner Agency's access may also be suspended or revoked if serious or repeated violation(s) of HMIS Policies and Procedures occur by agency users.

### **HMIS Dormant User Policy**

#### **Policy:**

In order to maximize HMIS security, only Users who are accessing HMIS on a routine basis (or who are accessing limited features at specific intervals) should have active User accounts. A current HMIS User Agreement by itself does not signify an "active" User. User accounts are monitored to ensure that Users with valid accounts are using the system on a regular basis.

#### **Procedure:**

Strategies will review User activity across the entire HMIS system at regular intervals. Dormant User accounts

(those who have not accessed the system for at least 6 months) will be handled as follows:

- A User who has not accessed HMIS login for 12 months or longer will be deactivated. This policy will be implemented regardless of the status of the User's HMIS agreement. Such accounts will only be re-activated at the specific request of the User's executive director. Any User who has not used HMIS for more than 12 months MUST be re-trained in order to have their access restored.
- For Users that have not accessed HMIS in between 6 months and 1 year, HMIS User Support Staff will generate an e-mail notification to the User and key contact/supervisor requesting a determination of whether access is still needed for that User. This notification will specify that a request for continued access be received from the key contact/supervisor within 5 business days or the User's account will be deactivated. Such accounts can be re-activated at a future date upon request of the Agency director. Re-training of such Users will be offered on a case by case basis.

## HMIS AGENCY IMPLEMENTATION

### Adding Partner Agencies

Prior to setting up a new Partner Agency within the HMIS database, the HMIS Management Team shall:

- ⇒ Review HMIS records to ensure that the agency does not have previous violations
- ⇒ Verify that the required documentation has been correctly executed and submitted or viewed on site, including:
  - Partner Agreement
  - Additional Documentation on Agency and Project(s)
  - Designation of HMIS Primary Point Person/Agency Administrator
  - Fee Payment, if applicable
- ⇒ Request and receive approval from the HMIS Management Team to set up a new agency in the HMIS
- ⇒ Work with the Partner Agency to input applicable agency and program information
- ⇒ Work with the HMIS Management Team to migrate legacy data, if applicable

### Agency Information Security Protocol Requirements

At a minimum, Partner Agencies must develop security rules, protocols or procedures based on the final *HUD Data and Technical Standards* including but not limited to the following:

- ⇒ Internal agency procedures for complying with the HMIS Notice of Privacy Practices and provisions of other HMIS client and agency agreements
- ⇒ Maintaining and posting an updated copy of the agency's Notice of Privacy Practices on the agency's website
- ⇒ Posting a sign in the areas of client intake that explains generally the reasons for collecting personal information

- ⇒ Appropriate assignment of user accounts
- ⇒ Preventing user account sharing
- ⇒ Protection of unattended workstations
- ⇒ Protection of physical access to workstations where employees are accessing HMIS
- ⇒ Safe storage and protected access to hardcopy and digitally generated client records and reports with identifiable client information
- ⇒ Proper cleansing of equipment prior to transfer or disposal
- ⇒ Procedures for regularly auditing compliance with the agency's information security protocol

The HMIS Management Team conducts annual site visits to monitor compliance with HMIS policies, at which time agencies may need to demonstrate their procedures for securing client data.

### **User Access Levels**

All HMIS users must be assigned a designated user access level that controls the level and type of access the user will have within the system. Users will have access to client-level data that is collected only by their own agency unless a client specifically consents in writing to share their information.

## **DATA ACCESS CONTROL POLICIES**

### **User Accounts**

Partner Agencies are responsible for managing user accounts following the procedures documented in the *HMIS User Implementation* section of this manual for user account set-up including verification of eligibility, the appropriate training, and the establishment of appropriate user type. The assigned user type will determine each user's individual access level to data, and Partner Agencies must regularly review user access privileges.

Partner Agencies are responsible for inactivating and/or removing users from the system by contacting the HMIS Management Team. They should discontinue the rights of a user immediately upon that user's termination from any position with access. When a user will be on leave for an extended period (longer than 30 days), his/her account should be temporarily suspended within 5 business days from the start of the leave.

### **User Passwords**

Each user will be assigned a unique identification code (User ID), preferably the first initial and last name of the user.

A temporary password will be assigned when a new user is created. The user will be required to establish a new password upon initial log-in. This password will need to be changed every 45 days. A password cannot be used again until another password has expired. Passwords must be between 8 and 16 characters long, contain at least two



numbers, and should not be easily guessed or found in a dictionary. The password format is alphanumeric and is case-sensitive.

Users are prohibited from sharing passwords—even with supervisors. Sanctions will be imposed on the user and/or agency if user account sharing occurs. Any passwords written down should be securely stored and inaccessible to others. They should not be saved on a personal computer.

## **Password Reset**

Except when prompted by the HMIS to change an expired password, users cannot reset their own password. The HMIS Management Team and in some cases, the Agency Administrator, have the ability to temporarily reset a password. If an Agency Administrator needs to have his/her password set, a member of the HMIS Management Team will need to reset that password.

## **Temporary Suspension of User Access to HMIS**

### *System Inactivity*

Users must log off from the HMIS application and either lock or log off their respective workstation if they leave the workstation. Also, password protected screen-savers or automatic network log-off should be implemented on each workstation. If the user is logged into HMIS and the period of inactivity in HMIS exceeds 30 minutes, the user will be logged off the HMIS system automatically.

### *Unsuccessful Login*

If a user attempts to log in 3 times unsuccessfully, the User ID will be “locked out” and their access permission will be revoked; the user will be unable to regain access until the User ID is reactivated by the Agency Administrator or a member of the HMIS Management Team.

## **Electronic Data Control**

### *Agency Policies Restricting Access to Data*

Partner agencies must establish protocols limiting internal access to data based on the final *HUD Data and Technical Standards*.

### *Downloaded Data*

Users have the ability to download and save client-level data. Once this information has been downloaded from the HMIS server, the security of this data then becomes the responsibility of the user and the agency.

### *Ability to Export Agency-specific Data from the HMIS*

Partner Agencies will have the ability to export a copy of their own data for internal analysis and use. Agencies are responsible for the security of this information.

## **Hardcopy Data Control**

Printed versions (hardcopy) of confidential data should not be copied or left unattended and open to compromise. Media containing HMIS client-identified data will not be shared with any agency, other than the owner of the data, for any reason. Authorized employees using methods deemed appropriate may transport HMIS data between the participating agencies that meet the above standard. Reasonable care should be taken, and media should be secured when left unattended. Magnetic media containing HMIS data which is released and/or disposed of by the participating agency and the central server should first be processed to destroy any data residing on that media. Degaussing and overwriting are acceptable methods of destroying data. HMIS information in hardcopy format should be disposed of properly. This could include shredding finely enough to ensure that the information is unrecoverable.

## Central Server Operation, Maintenance and Data Security Plans/Commitments

### Server Access (via networks)

**Policy:** HMIS vendors, HMIS Leads, and CHOs must ensure that computers, devices, and servers on which HMIS applications and data are stored or processed are protected from malicious intrusion behind a boundary protection device (“firewall”) that is configured to allow only ports and services that are required in the course of regular operations.

**Procedure:**

### Server Access (physical location)

**Policy:** Physical access to servers which store HMIS data is limited to authorized HMIS system administrators from Strategies.

**Procedure:**

### Audit Trails

**Policy:** HMIS software must track User activity in the HMIS.

**Procedure:**

HMIS logs the following events and retains a rolling one-year history in the active HMIS database, with prior years being available in backups:

#### General events that apply to all HMIS Users:

1. Successful login.
2. Logout.
3. Unsuccessful login (username and password are not saved in audit log, though if supplied username matches an existing HMIS account the user ID is stored).
4. User requesting a password reset (logging occurs via email to HMIS User Support).
5. User automatically logged out of HMIS.
6. User redirected to the login page due to the same username being used in a successful HMIS login in another web browser window or on a different computer.
7. User accessing any page in HMIS, along with the URL of the page requested. This includes pages such as the HMIS home page, a client review page (including the client ID), intake or exit wizard pages, etc.
8. User being blocked from accessing a webpage in HMIS, along with the URL of the page requested.
9. User executing a report, along with all the parameters selected for report execution.

10. User experiencing an unexpected error message, (details of error are emailed to HMIS Support).
11. The IP addresses from which a User accesses HMIS. Previously-unknown IP addresses require the User to supply their HMIS PIN before successful login.
12. When any client data is changed, HMIS maintains a history of what was data before it was changed.

Additional events logged for system administration functions:

1. Which administrator last edited a User account and when.
2. User accounts deactivated due to expired User agreements.

### Backup and Recovery Procedures

**Policy:** In order to ensure that data entered into HMIS is safe in the event of a catastrophic power/system failure, a series of redundancy/backup/recovery protocols have been established.

**Procedure:**

### Internet Connection and Power Redundancy

**Policy:** As web-based software, HMIS relies on power and a working internet connection to ensure uninterrupted access for Users. Both must be redundant.

**Procedure:**

### Transmission/Encryption

**Policy:** The HMIS Lead, CHOs, and HMIS vendors must encrypt all HMIS data containing client protected personal information (PPI) that are electronically transmitted over the Internet, publicly accessible networks or phone lines in accordance with current industry standards using AES-128-bit equivalent or higher encryption. The HMIS application must implement these transmission standards for any transactions it processes.

**Procedure:**

1. HMIS uses the Secure Sockets Layer (SSL) protocol with 128-bit encryption. This provides a highly secure, encrypted connection between the HMIS server and the User's computer. SSL is an industry standard and is used on all websites where sensitive information is transmitted.
2. HMIS Users should not store files with PPI unsecured on their workstations.
3. HMIS Users should **never** email unencrypted PPI, and should be very careful about to whom PPI is sent.
4. When accessing, storing, or sending PPI, Users should consider "is this how I would treat data about myself?"

### Virus Protection

**Policy:** The HMIS Lead and CHOs must protect HMIS systems from applications designed to damage or disrupt the system (e.g., a virus) by using anti-virus software. The HMIS Lead Agency and CHOs must update virus definitions from the anti-virus software vendor at least weekly.

**Procedures:**

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## HMIS PRIVACY PLAN

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The Continuum has defined a privacy plan that includes:

- ⇒ Data collection limitation
- ⇒ Purpose and use limitations
- ⇒ Allowable uses and disclosures
- ⇒ Access and correction standards
- ⇒ Protection for victims of domestic violence, dating violence, sexual assault, and stalking

### DATA COLLECTION LIMITATION POLICY

Partner Agencies will solicit or enter information about clients into the HMIS database only in order to provide services or conduct evaluation or research. Partner Agency management, in consultation with Strategies, will make a determination of what qualifies as essential for services or research.

### CLIENT NOTIFICATION POLICIES AND PROCEDURES

Strategies has prepared standard documents for HMIS Notice of Privacy Practices and Client Consent to Release Information. Partner Agencies may either use these forms or incorporate the content of the HMIS documents into the agency's own documentation. All written consent forms must be stored in a client's case management file for record keeping and auditing purposes.

Agencies must make reasonable accommodations for persons with disabilities throughout the data collection process. This may include, but is not limited to, providing qualified sign language interpreters, readers, or materials in accessible formats such as Braille, audio, or large type, as needed by the individual with a disability.

Agencies that are recipients of federal assistance shall provide required information in languages other than English that are common in the community if speakers of these languages are found in significant numbers and come into frequent contact with the program.

The HMIS Management Team conducts annual site visits to monitor compliance with HMIS policies, at which time agencies may need to provide examples of the above-mentioned privacy documents and their procedures for protecting the privacy of client data.

## Definitions and Descriptions of Client Notification and Consent Procedures

### *Client Notice*

A written notice of the assumed functions of the HMIS must be posted and/or given to each client so that he/she is aware of the potential use of his/her information and where it is stored. No consent is required for the functions articulated in the notice. However, as part of the notification process, clients must be informed of their right to designate their client records as hidden/closed and to view a copy of his/her record upon request. To fulfill this requirement, the agency may either adopt the HMIS Notice of Privacy Practices or may develop an equivalent Privacy Notice that incorporates all of the content of the standard HMIS Notice. If the agency has a website, the adopted Notice of Privacy Practices or equivalent privacy notice must also be posted on the website.

### *Hidden/Closed Client Record*

After learning about the HMIS, if a client does not wish to have his/her Primary Identifiers accessible to all HMIS users, the originating HMIS user should close the client record by locking the security setting on the client screen. Closing a client record will allow the agency to access the client's information for agency purposes. This action will allow the HMIS Management Team to view client-identifying information but will prevent any personal client-identifying information from being accessed by HMIS users outside of the originating agency.

## Written Client Consent for Network Data Sharing

At the initial intake, the client should be provided an oral explanation and written documentation about the option of sharing his/her Information within the Cincinnati/Hamilton County HMIS.

If a client is willing to share his/her information within the HMIS, he/she must provide written consent (see exception below for call center operations). The consent must be specific regarding:

- ⇒ Purpose
- ⇒ The expiration of the sharing
- ⇒ Affected data elements
- ⇒ Function
- ⇒ Involved parties

The client maintains a right to revoke written authorization at any time (except if that policy is overridden by agency policy or if the information is required to be shared as a condition of a provider agreement). Note that any such revocation will not be retroactive to any information that has already been released.

### *Client Authorization*

HMIS users may share client information only if the client authorizes that sharing with a valid Client Release of Information form.

Authorized users will be able to grant permission based on appropriate client consent to share individual client information with another agency’s users. Random file checks for appropriate client authorization, audit trails, and other monitoring tools may be used to ensure that this data sharing procedure is followed. Specific monitoring procedures around program enrollment will be implemented to ensure appropriate client information access.

*Applicability of Consents*

The Partner Agency shall uphold federal and state confidentiality regulations to protect client records and privacy. If an agency is covered by the Health Insurance Portability and Accountability Act (HIPAA), the HIPAA regulations prevail.

**Summary of Notification/Consent and Data Sharing Procedures**

The table below summarizes the client data categories and the related notification/consent rules that relate to each data category. These minimum procedures should not imply that all providers would perform all of these functions.

<b>Client Data Categories</b>	<b>Summary of Notification/Consent and Data Sharing Procedures</b>
<p>Primary Identifiers:</p> <ul style="list-style-type: none"> <li>• Name and Aliases</li> <li>• Birth Date</li> <li>• Gender</li> <li>• Social Security Number</li> <li>• Family/Relationship Information</li> </ul>	<p><u>Open Client record</u>: If the client does not ask to hide his/her identifiers, the primary identifiers will be available to all HMIS users in the Client Search to locate an existing client. None of the other client information will be viewable, except as described below.</p> <p><u>Closed Client record</u>: If a client asks to hide his/her primary identifiers, the record will appear on the Client Search List only for the originating agency. It will be hidden to all other agencies. Some system-level users will have access to hidden records for system administration purposes.</p>
<p>General Client Information (Demographics, Entry/Exit, and Service Transactions):</p> <ul style="list-style-type: none"> <li>• Ethnicity</li> <li>• Race</li> <li>• Services Provided</li> <li>• Program Enrollment (Entry/Exit)</li> </ul>	<p><u>Open Assessment</u>: With a signed release of information (ROI), these data can be shared with HMIS users from partner agencies by opening/unlocking the Demographics assessment and relevant Entry/Exit and Service Transactions.</p> <p><u>Closed Assessment</u>: If written consent is not provided, this information is accessible only within the originating agency and some system-level users for system administration purposes.</p>

**Protected Information:**

- Housing History
- Income/Benefits/Employment
- Disability information
- Mental Health Assessment
- Substance Abuse Assessment
- HIV/AIDS Information
- Domestic Violence Information
- Veteran status and information

**Protected Information:** Generally, this information is available only within the originating agency to users that have an authorized access level and to authorized system-level users for system administration purposes. Any other sharing of this data should be limited to specific Partner Agencies as a closed exception and requires signed consent from the client.

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## HMIS DATA USE AND DISCLOSURE POLICIES AND PROCEDURES

Each of the HMIS Partner Agencies must comply with the following uses and disclosures, as outlined in the *HUD Data and Technical Standards: Notice for Uses and Disclosures for Protected Personal Information (PPI)*. A Partner Agency has the right to establish additional uses and disclosures as long as they do not conflict with Strategies-approved uses and disclosures.

### Privacy Notice Requirement

Each Partner Agency must publish a privacy notice that incorporates the content of the *HUD Data and Technical Standards Notice* as described below. Agencies that develop their own privacy and security policies must allow for the de-duplication of homeless clients at the Continuum level.

Each agency must post the privacy notice and provide a copy of the privacy notice to any client upon request. If an agency maintains a public web page, the agency must post the current version of its privacy notice on its web page.

#### *An agency's privacy notice must:*

- ⇒ Specify all potential uses and disclosures of a client's personal information
- ⇒ Specify the purpose for collecting the information
- ⇒ Specify the time period for which a client's personal information will be retained at the agency
- ⇒ Specify the method for disposing of a client's personal information or removing identifiers from personal information that is not in current use seven years after it was created or last changed
- ⇒ State the process and applicability of amendments, and commit to documenting all privacy notice amendments
- ⇒ Offer reasonable accommodations for persons with disabilities and/or language

barriers throughout the data collection process

- ⇒ Allow the individual the right to inspect and to have a copy of his/her client record and offer to explain any information that the individual may not understand
- ⇒ Specify a procedure for accepting and considering questions or complaints about the privacy and security policies and practices

### Strategies-approved Uses and Disclosures

Identifiable HMIS client data may be used or disclosed for case management, billing, administrative and analytical purposes.

- ⇒ Case management purposes include uses associated with providing or coordinating services for a client. As part of case management, the agency will share client information with other agencies based only on written client consent.
- ⇒ Billing uses include functions related to payment or reimbursement for services. An example might include generating reports for fundraising purposes
- ⇒ Administrative purposes are uses required to carry out administrative functions, including but not limited to legal, audit, personnel, oversight and management functions. An example would be analyzing client outcomes to evaluate program effectiveness
- ⇒ Analytical purposes are functions that are related to analyzing client data to understand homelessness, including but not limited to creating de-identified protected personal information, understanding trends in homelessness and the needs of persons who are homeless.

Unless a client requests that his/her record remains hidden, his/her primary identifiers will be disclosed to other HMIS agencies. This will allow agencies to locate the client within the HMIS system when the client comes to them for services. This will allow Strategies to determine how many people are homeless in Cincinnati/Hamilton County.

Identifiable client information may also be used, or disclosed, in accordance with the *HUD Data and Technical Standards* for:

- ⇒ Uses and disclosures required by law
- ⇒ Aversion of a serious threat to health or safety
- ⇒ Uses and disclosures about victims of abuse, neglect or domestic violence
- ⇒ Uses and disclosures for academic research purposes
- ⇒ Disclosures for law enforcement purposes in response to a lawful court order, court-ordered warrant, subpoena or summons issued by a judicial office or a grand jury subpoena

Aside from the disclosures specified above, a client's protected personal information will be disclosed only with his/her written consent.



Client information will be stored with personal identifiers for a period of seven years from the time it was last modified. Beyond that point, client information will be retained only in a de-identified format.

## HMIS DATA RELEASE POLICIES AND PROCEDURES

### Client-identifying Data

No identifiable client data will be released to any person, agency, or organization for any purpose other than those specified in the *HMIS Data Use and Disclosure Policies and Procedures* section of this manual without the written permission of the client.

### Data Release Criteria

HMIS client data will be released only in aggregate, or in anonymous client-level data formats, for any purpose beyond those specified in the *HMIS Data Use and Disclosure Policies and Procedures* section of this manual, such that the identity of any individual or household cannot be determined.

Parameters of the release of aggregate data (*i.e.*, where the data comes from, what it includes and what it does not include) will be presented to each requestor of aggregate data.

### Data Release Process

Beyond individual agency reports, or Strategies reports on its funded programs, the Homeless Clearinghouse must approve all data for public classification and release.

### Specific Call Center Exception to Written Consent Requirement

Call center operations will not be required to obtain written consent to share primary and general client information collected primarily through telephonic or other electronic means. However, all clients must be informed of their rights regarding HMIS participation. Clients will be read the call center consent and notifications script. Clients can view the Privacy Notice on the Strategies website or pick up a copy at the Strategies office. Callers who do not want their information shared in HMIS will have their records closed and/or may be limited in their ability to obtain an agency referral.

### Specific Client Notification Procedures for Victims of Domestic Violence, Dating Violence, Sexual Assault, and Stalking

A mainstream agency that is serving a victim of domestic violence, dating violence, sexual assault, or stalking must explain the potential safety risks for victims and the client's specific options to protect her/his data, such as designating her/his record as hidden/closed to other agencies. Thus, the client notification form must clearly state the potential safety risks for domestic violence, dating violence, sexual assault or stalking victims and delineate the information sharing options. All Partner Agency staff must be trained on the protocol for educating victims about their individual information sharing options.

### **Specific Client Notification Procedures for Unaccompanied Minor Youth**

Based on their age and potential inability to understand the implications of sharing information, the HMIS cannot be used to share information about unaccompanied minor youth outside of the originating agency. Thus even with written client authorization, users cannot share any client information of unaccompanied minor youth. For the purposes of this policy, minor youth are defined as youth under 18.

### **Privacy Compliance and Grievance Policy**

Partner Agencies must establish a regular process of training users on this policy, regularly auditing that the policy is being followed by agency staff (including employees, volunteers, affiliates, contractors and associates), and receiving and reviewing complaints about potential violations of the policy. Agencies may appoint a Chief Privacy Officer to be responsible for these tasks.

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## **HMIS DATA QUALITY PLAN**

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### **The Continuum has defined a data quality plan that:**

- ⇒ Based on HUD data standards and CoC data requirements, specifies the data quality standard to be used by all participating agencies
- ⇒ Provides a mechanism for monitoring adherence to the standard
- ⇒ Provides the necessary tools and training to ensure compliance with the standard
- ⇒ Includes strategies for working with agencies that are not in compliance with the standard

## **HMIS DATA COLLECTION**

### **Data Quality Standard**

- ⇒ All data entered will be accurate
- ⇒ Per HUD data standards, blank entries in required data fields will not exceed 5% per month
- ⇒ All services provided will be compatible with providing program
- ⇒ Data entry, including program Entry and Exit transactions, must be complete within five working days of data collection

### **Data Quality Monitoring**

The HMIS Management Team will perform regular data integrity checks on the HMIS data. Any patterns of error at a Partner Agency will be reported to the Agency

Administrator and/or Primary Point Person. When patterns of error have been discovered, users will be required to correct data entry techniques and will be monitored for compliance.

*Partner Agencies are expected to:*

- ⇒ Run and submit data completeness reports, data incongruities reports, and other data quality reports as required by HMIS Lead staff
- ⇒ Review monthly PIT reports to confirm accurate program entry and exit data
- ⇒ Notify HMIS Lead staff of findings and timelines for correction
- ⇒ Rerun reports for errant agencies/programs to confirm data correction
- ⇒ Create notification for Agency Executive Director and submit to HMIS Lead staff for approval

## Data Collection Requirements

### *Required Data Elements*

A Partner Agency is responsible for ensuring that a minimum set of data elements, referred to as the Universal Data Elements (UDE's) and Program-specific Data Elements as defined by the *HUD Data and Technical Standards*, and other data elements as determined by the HMIS Committee, will be collected and/or verified from all clients at their initial program enrollment or as soon as possible thereafter. Partner Agencies are required to enter data into the HMIS within five business days of collecting the information.

These required data elements are all included collectively on the *Client Profile*, *Client Demographics* section, *Comprehensive Entry*, and *Interim and Review* assessments and includes timely entry of program Entry and Exit transaction data.

Partner Agencies must report client-level UDE's and Program-specific Data Elements using the required response categories detailed in the *HUD Data and Technical Standards*. These standards are already incorporated into the HMIS.

### *Entry/Exit Data*

Program entry and exit dates should be recorded upon any program entry or exit on all participants. Entry dates should record the first day of service or program entry with a new program entry date for each period/episode of service. Exit dates should record the last day of residence in a program's housing before the participant leaves the shelter or the last day a service was provided.

## Data Quality Training Requirements

### *End-User Training*

Each end user of the HMIS system must complete HMIS training before being given HMIS log-in credentials. It is recommended they also receive training from their Agency Administrator in order to understand agency-specific nuances in how they enter data.

HMIS Primary Point Persons and Agency Administrators should notify Strategies when they have specific training needs for their end-users.

### *Reports Training*

Reports training for Agency Administrators and other interested users will be made available as needed.

Agencies are expected to run their own data quality reports so that they can monitor their own data quality and become more effective in serving our clients across the Continuum.

## **HMIS DE-DUPLICATION OF DATA - POLICIES AND PROCEDURES**

### **De-duplicating Data Elements**

The HMIS application will use the following data elements to create unduplicated client records:

- ⇒ Name (first, middle, last, suffix; aliases or nicknames should be avoided)
- ⇒ Social Security Number
- ⇒ Date of Birth (actual or estimated)
- ⇒ Gender
- ⇒ Race and Ethnicity

### **User-mediated Look-up**

The primary way to achieve de-duplication will be a user-mediated search of the client database prior to creating a new client record. The user will be prompted to enter a minimum number of the data elements into the HMIS application, and a list of similar client records will be displayed. Based on the results, the user will be asked to select a matching record if the other identifying fields match correctly.

If the user is unsure of a match (either because some data elements differ or because of blank information), the user should query the client for more information and continue evaluating possible matches or create a new client record.

The user will not be able to view sensitive client information or program-specific information during the de-duplication process. After the client record is selected, the user will be able to view previously existing portions of the client record only if he/she has explicit authorization to view that client's record.

### **Back-end Central Server Matching Based on Identifiable Information**

When Primary Identifiers are not shared across agencies for de-duplication purposes, the HMIS Management Team with the assistance of the Agency Administrator will manage a process for matching a client's personal identifying information based on a unique client identifier that is assigned by the HMIS to each client. The unique client identifier provides an unduplicated internal count of clients served by the Agency and provides the HMIS

Management Team the means of conducting longitudinal analysis of services provided to each client. This scenario will be used to de-duplicate hidden client records. The process will also be used to validate data received from all users, as human decisions and misjudgments may introduce error to the provider-mediated look-up process.

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## TECHNICAL SUPPORT

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### HMIS TECHNICAL SUPPORT POLICIES AND PROCEDURES

#### HMIS Application Support

As unanticipated technical support questions on the use of the HMIS application arise, users will follow this procedure to resolve those questions:

#### *During the normal business hours of Strategies:*

- ⇒ Begin with utilization of the on-line help and/or training materials
- ⇒ If the question is still unresolved, direct the technical support question to the Agency Administrator or Primary Point Person
- ⇒ If the question is still unresolved, the Agency Administrator or Primary Point Person can direct the question to the HMIS Management Team
- ⇒ If the question is still unresolved, the HMIS Management Team will direct the question to the software vendor's technical support staff

#### *After the normal business hours of Strategies:*

- ⇒ Begin with utilization of the on-line help and/or training materials
- ⇒ If the question can wait to be addressed during the following business day, wait and follow the normal business hours procedure outlined above
- ⇒ If the question cannot wait, direct the technical support question to the Agency Administrator or Primary Point Person, if available
- ⇒ If unavailable, and the question is still unresolved, contact the HMIS Management Team, or the duly appointed representative. They will determine the appropriate procedure to be followed

If it is determined that the issue needs immediate attention, the user's request will be forwarded to an appropriate HMIS technical support representative. Otherwise, the user will be instructed to pursue assistance through normal channels on the following business day.

#### User Training

The HMIS Management Team will provide HMIS application training periodically throughout the year. If additional, or specific, training needs arise, the HMIS Management Team may arrange for special training sessions.

## Agency/User Forms

All Agency Administrators and Primary Point Persons will be trained in the appropriate on-line and hardcopy forms. If the Agency Administrator or Primary Point Person has questions on how to complete HMIS forms, he/she shall contact the HMIS Management Team.

## Report Generation

Each Agency may send its Agency Administrator to receive training on how to develop agency-specific reports using the HMIS application. The HMIS Management Team will be a resource to agency users as they develop reports but will be available to provide only a limited, reasonable level of support to each Agency.

The HMIS User Group will be the primary body to query Partner Agencies on their reporting needs and to prioritize a list of reports to be developed by Strategies for use by all Partner Agencies.

## Programming-related Service Requests

If a user encounters programming issues within the HMIS application that need to be addressed, that user should identify the error or suggest an improvement to the Agency Administrator. The Agency Administrator will forward this information to the HMIS Management Team, identifying the specific nature of the issue or recommended improvement, along with the immediacy of the request.

The HMIS Management Team will review all application service requests and determine the action to be taken. Requests to fix programming errors will be prioritized and forwarded to Bowman Systems. Suggested application improvements will be compiled and periodically discussed by the HMIS Committee and the HMIS User Group. A prioritized list of improvements will be submitted to the HMIS Management Team for review. Approved recommendations will be submitted to Bowman Systems.

## HMIS SYSTEM AVAILABILITY POLICIES

There may be times that the HMIS software is unavailable in order to perform necessary backup and maintenance of the HMIS database. These will normally occur at times when as few people as possible need access to the system.

However, if/when Strategies receives notice of a planned interruption of service for other reasons or for an abnormal amount of time, the HMIS Management Team will notify Agency Administrators via email. If there is an unplanned interruption to service, the HMIS Management Team will communicate with the software vendor, and Agency Administrators will be notified of any information regarding the interruption as it is made available.



# STRATEGIES TO END HOMELESSNESS

## **13. FY 2018 CoC Competition Report (HDX Report)**

### 1. FY 2018 CoC Competition Report

# 2018 HDX Competition Report

## PIT Count Data for OH-500 - Cincinnati/Hamilton County CoC

### Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count	1116	1162	1114
Emergency Shelter Total	761	829	810
Safe Haven Total	0	0	15
Transitional Housing Total	295	259	242
Total Sheltered Count	1056	1088	1067
Total Unsheltered Count	60	74	47

### Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	24	90	70
Sheltered Count of Chronically Homeless Persons	24	64	64
Unsheltered Count of Chronically Homeless Persons	0	26	6



# 2018 HDX Competition Report

## PIT Count Data for OH-500 - Cincinnati/Hamilton County CoC

### Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	80	80	82
Sheltered Count of Homeless Households with Children	80	80	82
Unsheltered Count of Homeless Households with Children	0	0	0

### Homeless Veteran PIT Counts

	2011	2016	2017	2018
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	192	185	192	161
Sheltered Count of Homeless Veterans	186	183	190	158
Unsheltered Count of Homeless Veterans	6	2	2	3

2018 HDX Competition Report  
HIC Data for OH-500 - Cincinnati/Hamilton County CoC

**HMIS Bed Coverage Rate**

Project Type	Total Beds in 2018 HIC	Total Beds in 2018 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	701	72	629	100.00%
Safe Haven (SH) Beds	15	0	15	100.00%
Transitional Housing (TH) Beds	296	60	236	100.00%
Rapid Re-Housing (RRH) Beds	1258	37	1221	100.00%
Permanent Supportive Housing (PSH) Beds	2351	0	2351	100.00%
Other Permanent Housing (OPH) Beds	26	0	26	100.00%
Total Beds	4,647	169	4478	100.00%

2018 HDX Competition Report  
HIC Data for OH-500 - Cincinnati/Hamilton County CoC

**PSH Beds Dedicated to Persons Experiencing Chronic Homelessness**

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	622	687	887

**Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children**

Households with Children	2016 HIC	2017 HIC	2018 HIC
RRH units available to serve families on the HIC	283	271	273

**Rapid Rehousing Beds Dedicated to All Persons**

All Household Types	2016 HIC	2017 HIC	2018 HIC
RRH beds available to serve all populations on the HIC	1082	1215	1258

# 2018 HDX Competition Report

## FY2017 - Performance Measurement Module (Sys PM)

### Summary Report for OH-500 - Cincinnati/Hamilton County CoC

#### 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 October, 1, 2012.

**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.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES and SH	5548	5869	45	48	3	29	32	3
1.2 Persons in ES, SH, and TH	6031	6337	64	64	0	34	37	3

b. This measure is based on data element 3.17.

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.

The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	5553	6260	135	186	51	49	60	11
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	6034	6702	159	217	58	57	67	10

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

#### Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

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.

After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO	144	5	3%	5	3%	11	8%	21	15%
Exit was from ES	2505	268	11%	171	7%	221	9%	660	26%
Exit was from TH	554	44	8%	30	5%	46	8%	120	22%
Exit was from SH	0	0		0		0		0	
Exit was from PH	1292	96	7%	61	5%	91	7%	248	19%
TOTAL Returns to Homelessness	4495	413	9%	267	6%	369	8%	1049	23%

#### Measure 3: Number of Homeless Persons

##### Metric 3.1 – Change in PIT Counts

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1116	1162	46
Emergency Shelter Total	761	829	68
Safe Haven Total	0	0	0
Transitional Housing Total	295	259	-36
Total Sheltered Count	1056	1088	32
Unsheltered Count	60	74	14

### Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	6102	6434	332
Emergency Shelter Total	5613	5945	332
Safe Haven Total	0	0	0
Transitional Housing Total	666	747	81

# 2018 HDX Competition Report

## FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	1295	1259	-36
Number of adults with increased earned income	105	108	3
Percentage of adults who increased earned income	8%	9%	1%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	1295	1259	-36
Number of adults with increased non-employment cash income	318	432	114
Percentage of adults who increased non-employment cash income	25%	34%	9%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	1295	1259	-36
Number of adults with increased total income	404	523	119
Percentage of adults who increased total income	31%	42%	11%



## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

#### Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	619	767	148
Number of adults who exited with increased earned income	193	193	0
Percentage of adults who increased earned income	31%	25%	-6%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	619	767	148
Number of adults who exited with increased non-employment cash income	127	180	53
Percentage of adults who increased non-employment cash income	21%	23%	2%

#### Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	619	767	148
Number of adults who exited with increased total income	300	345	45
Percentage of adults who increased total income	48%	45%	-3%

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

#### Measure 5: Number of persons who become homeless for the 1st time

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

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	5480	5789	309
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.	1511	1703	192
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)	3969	4086	117

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

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	6294	6576	282
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.	1832	2033	201
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.)	4462	4543	81

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in FY2017 (Oct 1, 2016 - Sept 30, 2017) reporting period.

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

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	749	789	40
Of persons above, those who exited to temporary & some institutional destinations	197	268	71
Of the persons above, those who exited to permanent housing destinations	263	215	-48
% Successful exits	61%	61%	0%

Metric 7b.1 – Change in exits to permanent housing destinations

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	5425	5421	-4
Of the persons above, those who exited to permanent housing destinations	3041	2653	-388
% Successful exits	56%	49%	-7%

#### Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	2554	2528	-26
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	2493	2468	-25
% Successful exits/retention	98%	98%	0%

## 2018 HDX Competition Report FY2017 - SysPM Data Quality

### OH-500 - Cincinnati/Hamilton County CoC

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports in order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

## 2018 HDX Competition Report FY2017 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017
1. Number of non-DV Beds on HIC	531	538	604	578	287	271	291	261	2092	2347	2267	2342	948	933	1042	1185				
2. Number of HMIS Beds	525	538	604	578	277	271	291	261	1882	2003	2254	2342	856	933	1003	1185				
3. HMIS Participation Rate from HIC ( % )	98.87	100.00	100.00	100.00	96.52	100.00	100.00	100.00	89.96	85.34	99.43	100.00	90.30	100.00	96.26	100.00				
4. Unduplicated Persons Served (HMIS)	5551	5442	5730	5960	1277	1084	721	680	2458	2635	2654	2637	1989	2253	2418	3308	821	781	616	679
5. Total Leavers (HMIS)	5036	4844	5071	5363	795	856	502	499	300	434	403	466	1138	1293	1306	1850	579	532	422	532
6. Destination of Don't Know, Refused, or Missing (HMIS)	1259	1324	1595	1932	90	97	85	79	14	23	15	22	21	42	21	86	182	230	169	166
7. Destination Error Rate (%)	25.00	27.33	31.45	36.02	11.32	11.33	16.93	15.83	4.67	5.30	3.72	4.72	1.85	3.25	1.61	4.65	31.43	43.23	40.05	31.20

# 2018 HDX Competition Report

## Submission and Count Dates for OH-500 - Cincinnati/Hamilton County CoC

### Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2018 PIT Count	1/23/2018	

### Report Submission Date in HDX

	Submitted On	Met Deadline
2018 PIT Count Submittal Date	4/27/2018	Yes
2018 HIC Count Submittal Date	4/27/2018	Yes
2017 System PM Submittal Date	5/20/2018	Yes



# STRATEGIES TO END HOMELESSNESS

## **14. Order of Priority – Written Standards**

### 1. Permanent Supportive Housing Eligibility Requirements & Prioritization Policy



**POLICY TITLE:** Permanent Supportive Housing Eligibility Requirements & Prioritization Policy

**POLICY ADMINISTRATION:** The Homeless Clearinghouse, Cincinnati/Hamilton County Continuum of Care Board

**EFFECTIVE DATE:** 7/1/2018 – revision

**Approved – 8/31/2018**

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**POLICY:** Permanent Supportive Housing (PSH) projects provide housing and supportive services to assist homeless persons with a disability to live independently. The goal of this policy is to ensure that PSH is targeted to the most vulnerable, with continued prioritization of chronically homeless individuals and families, while providing flexibility by expanding bed categorization from “Dedicated” to “DedicatedPLUS”.

**ELIGIBILITY CRITERIA:** In order to be served in a PSH program the individual or family must:

- be literally homeless; and
- be a member of a household that contains at least one documented disabled adult or minor living with an adult legal guardian; and
- be a member of a zero to low-income household

Under some circumstances, congregate living facilities may include additional eligibility criteria. All projects are required to comply with HUD’s Equal Access Rule and any additional eligibility requirements must be approved by Strategies to End Homelessness prior to inclusion into the community’s Coordinated Entry System.

**COORDINATED ENTRY:** All literally homeless clients are prioritized based on completion of a standardized assessment. The CoC has adopted the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT). All CoC-funded PSH projects will accept referrals *only* through a single community-wide prioritization list that is generated in the HMIS.

**PRIORITIZATION:** All PSH units that are not dedicated to serving the chronically homeless will prioritize the chronically homeless upon turnover. The Coordinated Entry System is required to follow this order of priority when making referrals to PSH projects. As of 7/1/2018 (the FY17 operating year start date), all PSH beds in the CoC have a *DedicatedPLUS* (DP) designation. This policy combines the recommended orders of priority as established in HUD’s Notice CPD-16-11 and HUD’s *DedicatedPLUS* description/definition as outlined in the FY2017 Notice of Funding Availability (NOFA).

- **(DP) First Priority**-Chronically homeless individuals and families with the longest history of homelessness and with the most severe service needs
- **(DP) Second Priority**-Homeless individuals and families with a disability who are residing and have resided in a place not meant for human habitation, a safe haven, or emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions.
- **(DP) Third Priority:** Homeless individuals and families with a disability who are residing in a place not meant for human habitation, emergency shelter, or safe haven; but the individuals or families experiencing chronic homelessness as defined at 24 CFR 578.3 had been admitted and enrolled in a permanent housing project within the last year and were unable to maintain a housing placement.
- **(DP) Fourth Priority:** Homeless individuals and families with a disability who are residing in a transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the transitional housing project.
- **(DP) Fifth Priority:** Homeless individuals and families with a disability who are residing in transitional housing funded by a Joint TH and PH-RRH component project and who were experiencing chronic homelessness as defined at 24 CFR 578.3 prior to entering the project.

- **(DP) Sixth Priority:** Homeless individuals and families with a disability who are receiving assistance through a Department of Veterans Affairs(VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.
- **Seventh Priority-**Homeless individuals and families with a disability with long periods of episodic homelessness and severe service needs
- **Eighth Priority-** Homeless individuals and families with a disability with severe service needs
- **Ninth Priority-**Homeless individuals and families with a disability without severe service needs
- **Tenth Priority-**Homeless Individuals and families with a disability coming from transitional housing (and resided on the street or in shelter prior to entering transitional housing)

#### DEFINITIONS:

**Literally Homeless** (Category 1): An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
- An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

#### **Disabled:**

- A person shall be considered to have a disability if he or she has a disability that:
  - Is expected to be long-continuing or of indefinite duration;
  - Substantially impedes the individual's ability to live independently;
  - Could be improved by the provision of more suitable housing conditions; and
  - Is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, posttraumatic stress disorder, or brain injury.
- A person will also be considered to have a disability if he or she has a developmental disability, as defined by HUD.
- A person will also be considered to have a disability if he or she has acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome, including infection with the human immunodeficiency virus (HIV).
- Documentation of disability must be maintained with client records.

#### **Chronically Homeless:**

- A "homeless individual with a disability," as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), and by this document who:
  - Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
  - Has been homeless and living as described in bullet 1 of this listed definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in bullet 1 of this definition. Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;

- An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in bullet 1 of this listed definition, before entering that facility; or
- A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in bullet 1 or 2 of this listed definition, including a family whose composition has fluctuated while the head of household has been homeless.
- Documentation of Chronic Homelessness must be maintained with client records and meet the following criteria, following HUD's established order of priority for obtaining evidence:
  - **1<sup>st</sup> Priority- Third Party Documentation**
  - **2<sup>nd</sup> Priority- Intake worker observation**
  - **3<sup>rd</sup> Priority- Certification from the individual seeking assistance**
    - Documentation includes a letter signed by the individual seeking assistance
  - A single encounter in a month is sufficient to consider household homeless for entire month unless evidence of a break.
    - "**Break**" is defined as at least 7 nights not residing in an emergency shelter, safe haven, or residing in a place meant for human habitation
    - Acceptable documentation of a break includes: Third party evidence or a self-report of the individual seeking assistance
  - Attempts to obtain third-party documentation and if necessary, reasons for why third-party documentation was not obtained must be thoroughly documented in each client record.
    - For all clients, up to 3 months can be documented through self-certification
    - If third-party documentation cannot be obtained, a written record of intake workers due diligence to obtain, the intake worker's documentation of the living situation, AND the individual's self-certification of the living situation is required in client file.
    - In limited circumstances (no more than 25% of households served in an operating year), up to the full 12 months can be obtained through self-certification
      - Documentation requires previous approval from the CoC – approval must be maintained in client record, if applicable.
  - **Institutional Stays** – acceptable documentation:
    - Discharge paperwork or written/oral referral from a social worker, case manager, or other appropriate official stating the beginning and end dates of the time residing in the institutional care facility
    - Where the above is not attainable, a written record of intake workers due diligence to obtain AND the individual's self-certification that he or she is exiting an institutional care facility where resided less than 90 days

**Severity of Service Needs:**

- History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; or
- Significant health or behavioral health challenges or functional impairments which require a significant level of support in order to maintain permanent housing; or
- For youth and victims of domestic violence, high-risk of continued trauma or high risk of harm or exposure to very dangerous living situations.

**DedicatedPLUS:**

- A permanent supportive housing project where 100 percent of the beds are dedicated to serve individuals with disabilities and families in which one adult or child has a disability, including unaccompanied homeless youth, that at intake meet one of the above listed criteria (Priorities 2-6 above).

Cincinnati & Hamilton County Continuum of Care for the Homeless

# Racial Disparities in Homelessness

A local assessment of the Homeless Service System between July 1, 2016 & June 30, 2018

 STRATEGIES TO  
END HOMELESSNESS

September 2018

## Introduction

This report is published by Strategies to End Homelessness as a starting point in assessing racial disparities in the homeless service system, the report provides baseline conclusions while identifying limitations in the assessment.

According to census data, 65% of residents living in Hamilton County, Ohio are White, non-Hispanic and 26.5% of residents are Black/African-American. The remaining portion of residents identify as either American Indian/Alaskan Native, Asian, Native Hawaiian, or multiracial descent. However, when comparing this census data to the racial make-up of the homeless service system, it can very easily be determined that people who identify as Black/African America are over represented in the homeless service system.

Because 100% of homeless projects are on HMIS, the distribution of race and ethnicity can be seen at the system level and broken down by project type. When looking at the full system, persons of Black/African-American descent represent 64% of participants who received services through street outreach, emergency shelter, and/or a supportive housing project. **The overrepresentation of Black/African-American singles and families is the result of systematic, institutionalized inequity in Cincinnati and Hamilton County, Ohio.** This discrepancy will likely continue without community-wide intervention across all systems.

This region is not alone in these findings. According to a recent report published by Supporting Partnerships for Anti-Racist Communities (SPARC)<sup>1</sup>, “People of color are dramatically more likely than white people to experience homelessness in the United States.” Through their study across six communities, it was found that Black residents accounted for nearly 65% of people experiencing homelessness, even though they accounted for only 18% of the overall population in the same geographical area (Atlanta, GA; Columbus, OH; Dallas, TX; San Francisco, CA; Syracuse, NY; Pierce County, WA).

“Although **Black people comprise 13% of the general population** in the United States and 26% of those living in poverty, **they account for more than 40% of the homeless population**, suggesting that poverty rates alone do not explain the over-representation.”

*SPARC Phase One Study Findings*

Locally, the Continuum of Care is in compliance with all required policies covering issues of fair housing, equal access, and accessibility. But it is evident that policies alone will not move the system towards true equity.

The data used in this report was collected between July 1, 2016 and June 30, 2018 in the Cincinnati/Hamilton County Continuum of Care’s Homeless Management Information System (HMIS). The following HMIS data sets are applicable:

- HMIS Universal Data Elements
- Coordinated Entry System data collected through the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT)

<sup>1</sup> <http://center4si.com/wp-content/uploads/2018/03/SPARC-Phase-1-Findings-March-20181.pdf>

Additional public data is incorporated throughout the report.

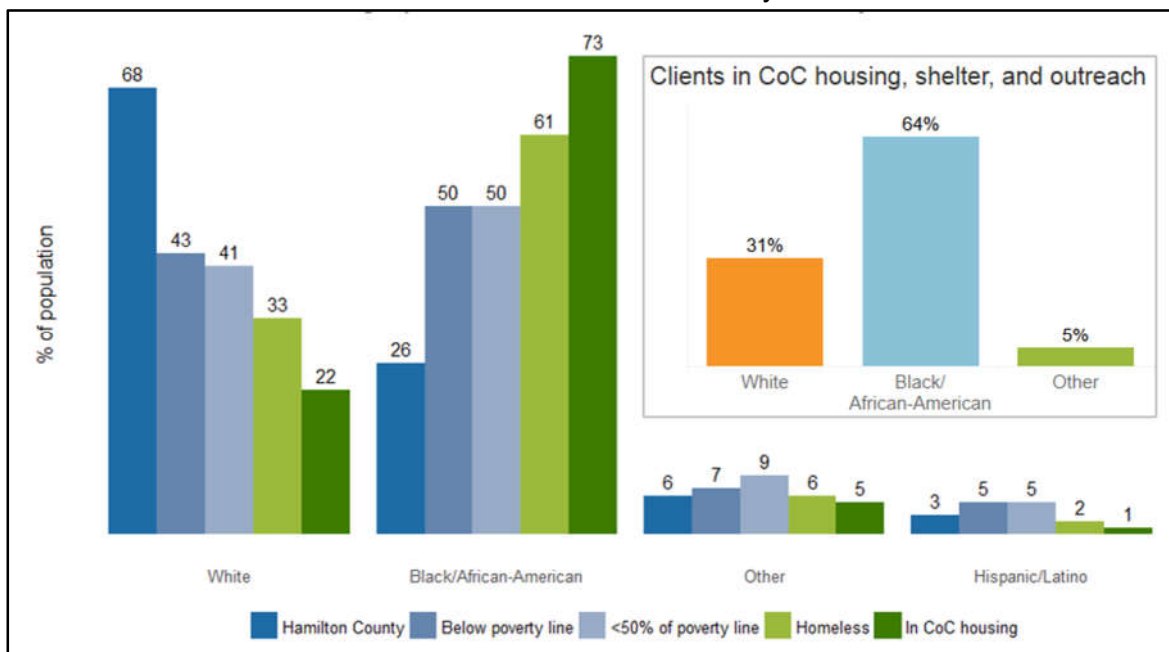
In review of the report, it is important to understand the following:

- Participants in homeless programs self-report demographic data to intake workers administering homeless programs
- Data on minor children is reported by the family head of household
- Full system data does not include data collected in victim service projects or homeless projects funded by the Veterans Administration
- Limitations in findings were mostly the result of either limited data or a small population size

This report focuses on the comparison between Black/African-American participants and White participants in the Cincinnati/Hamilton County CoC. The category labeled “Other” represents the combination of participants identifying as American Indian/Alaskan Native, Asian, Native Hawaiian, or multiracial descent. The decision to combine these groups was made because of the very small number of people represented in each. Based on the data available for this report, it is difficult to assess and inappropriate to assume any conclusions in regards to these distinct groups.

## 1. Race & Ethnicity - Hamilton County & the Continuum of Care

Census Data & the Homeless System



\*Homeless is defined using the Department of Housing and Urban Development’s category 1 definition including people sleeping in an emergency shelter or a place not meant for human habitation.

### Observations

The demographic breakdown in the homeless service system is not reflective of Hamilton County, Ohio’s demography as a whole. About 65% of Hamilton County residents are white, non-Hispanic, 26.5% are Black/African-American, and 3.3% are Hispanic/Latino. The remaining 5.2% of the population is American Indian/Alaskan Native, Asian, Native Hawaiian, or multiracial.

The Black/African-American community is overrepresented in both the population living below the poverty line, and the population whose income is less than 50% of the poverty line. The “other” population experiences poverty--and has income less than 50% of the poverty line--at a greater rate than Whites, but not at as great a rate as the Black/African-American community. Of the general population of Hamilton County, 16% live in poverty.

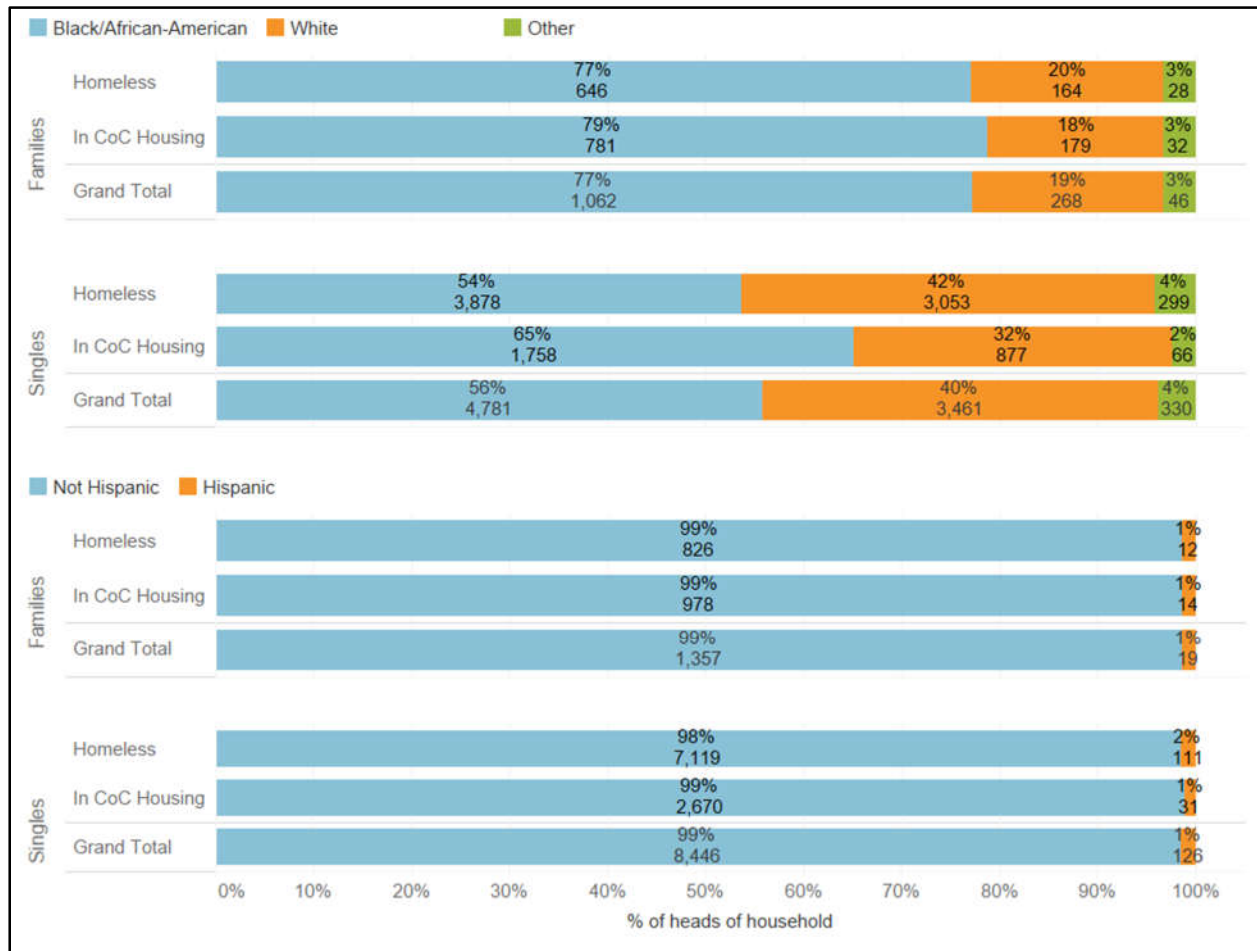
Those who self-identify as Black/African-American were overrepresented among CoC clients compared to their share of Hamilton County’s population, even after accounting for poverty data. Although Hamilton County’s population is only 26.5% Black/African-American, 61% of the literally homeless and 73% of those in CoC housing (TH-RRH, RRH, PSH) are Black/African-American. Conversely, the Hispanic/Latino population makes up a small portion of the county demographics (3.3%) and an even smaller portion of the homeless system (2% of the literally homeless and 1% in CoC housing).

### Limitations

- The impact of community inequities on the Hispanic/Latino population and those of American Indian/Alaskan Native, Asian, Native Hawaiian, or multiracial descent requires more data to properly analyze. The total population is so small that drawing any conclusions from this data set is inappropriate.

## 2. Household Composition

Individuals & Families by Race & Ethnicity



### Observations

When looking at the differences between individual and family households served in the homeless system, it is clear that Black/African-American households are overrepresented in both populations.

However, the racial inequity observed in the family population is readily observable. Black/African-American families with minor children represent an extreme overrepresentation in the homeless system.

- Of the families who experienced literal homelessness, 77% were Black/African-American
- Of the families who moved into a CoC supportive housing project, 79% were Black/African-American

As a whole, Black/African-American households made up the majority of the literal homeless population. Black/African-American households were also more likely than White households to access supportive housing subsidies in CoC housing projects.



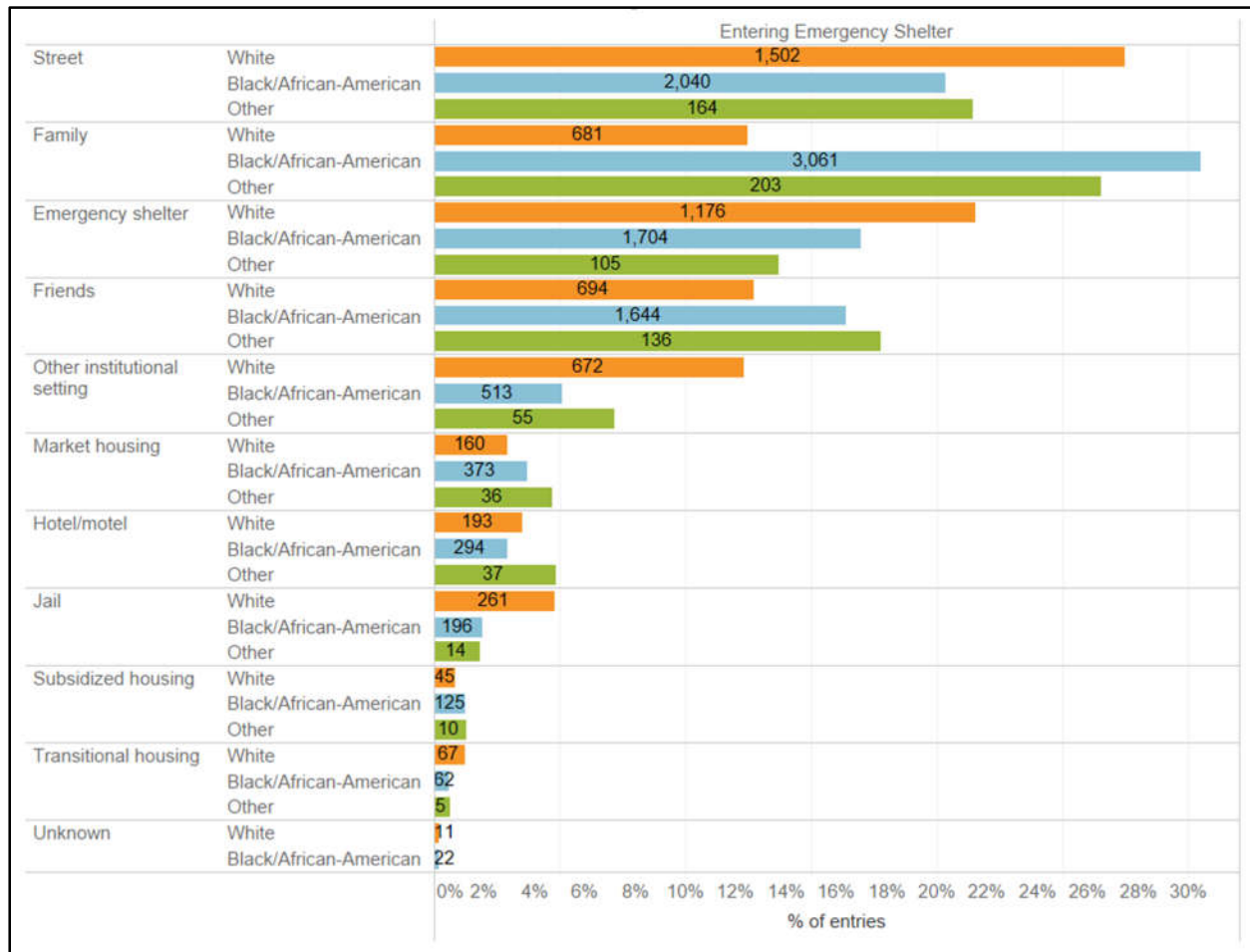
## Limitations & Recommendations

Structural racism and inequities in both housing and income exist across the nation as well as in the local community. These barriers are often difficult to quantify in data sets but cannot be overlooked when discussing racial disparities in the homeless system.

- Homeless Families & Race:
  - More data is imperative. It is recommended that a longer period of time be analyzed to see if multi-generational homelessness is apparent in the local system. Specifically, are children who experience homelessness more likely to enter homelessness as adults? The findings from this analysis could predict future racial disparities if nothing changes.
  
- Access to Housing:
  - From the data available, it is difficult to extract broader meaning of the statement, “Black/African-American households were also more likely than White households to access supportive housing subsidies in CoC housing projects.” Deeper analysis is recommended to determine if the rate of access to CoC housing is proportionate to the rate of racial disparity identified in the literal homeless populations.
  - Data outside the homeless system may reveal more insight – it is recommended that data sharing with emergency assistance providers be analyzed to identify disparities in access. If White households were more likely to access resources that prevented or shortened episodes of homelessness, it could explain the deep disparities among races.

### 3. Prior Living Situation – Emergency Shelter

Participant Location Prior to Entering an Emergency Shelter



\*The length of the bar indicates the percentage of emergency shelter participants who entered homelessness from each location & the number on the bar indicates the total number of participants.

#### Observations

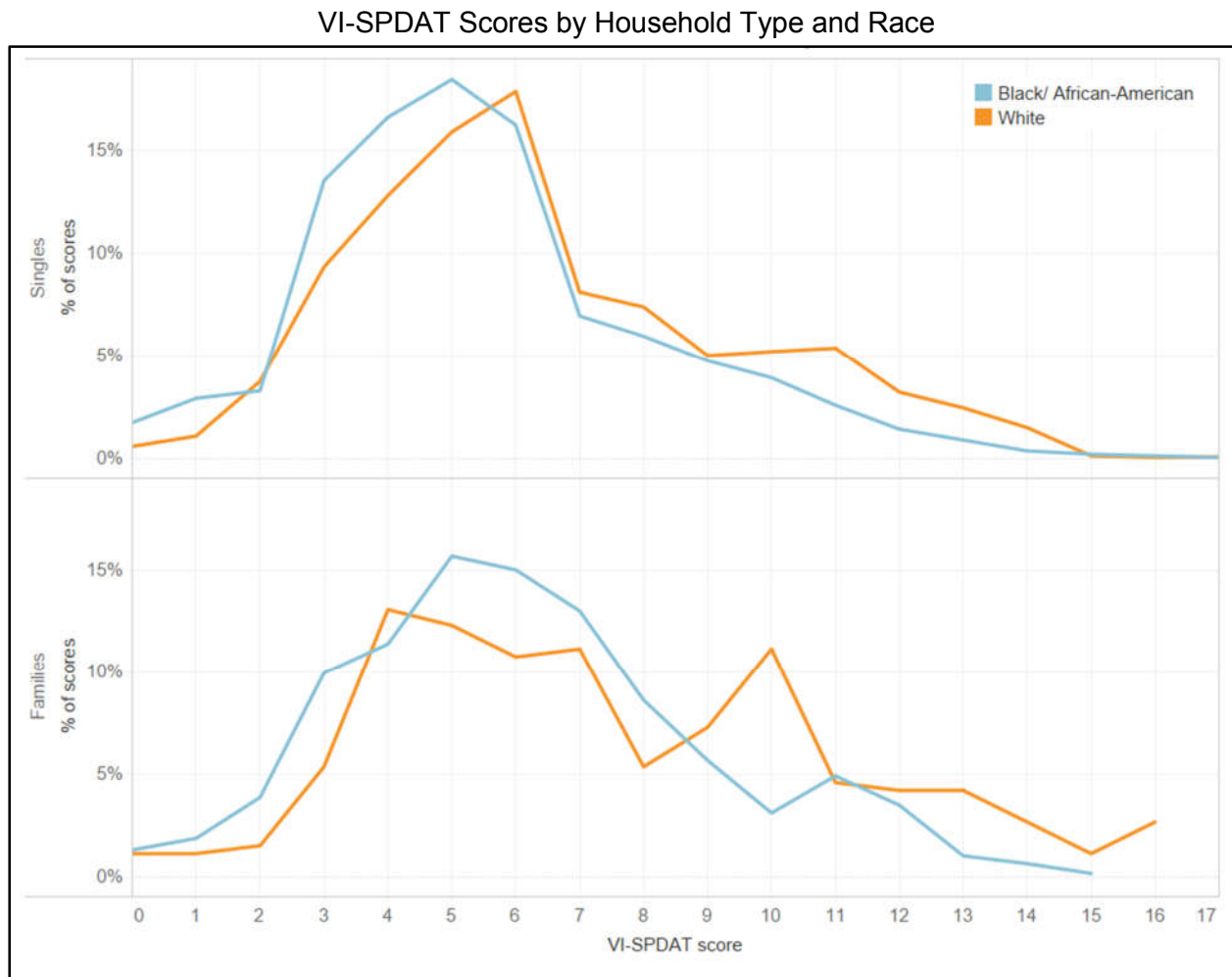
When compared to Black/African-American participants, White participants were more likely to enter emergency shelter from the street, another emergency shelter, jail, or another institutional setting. 31% of Black/African-American participants reported staying with family prior to entering emergency shelter and while not statistically significant, they also were more likely to report subsidized housing as their prior living situation. Clients in the “Other” category (American Indian/Alaskan Native, Asian, Native Hawaiian, or multiracial) were more likely to enter emergency shelter via friends, market rate housing, and hotel/motel than Black/African-American or White clients.

#### Limitations & Recommendations

- “Prior Living Situation” assesses only where the client stayed the night before they entered emergency shelter, not their primary nighttime residence before becoming homeless.
- This data includes duplication amongst participants who have multiple entries into emergency shelter which may skew any conclusions.

- The CoC should explore options of expanding the data collected prior to entry into homelessness. Additionally, data sharing with other systems would allow for a more thorough analysis movement between systems and a means of evaluating exit strategies of systems known to feed into homelessness such as child welfare (specifically young people aging out of foster care), jails/prisons, and other institutions.

#### 4. Vulnerability Index–Service Prioritization Decision Assistance Tool (VI-SPDAT)



#### Observations

The overall distribution of VI-SPDAT scores is consistent with national data, with many participants scoring in the 4-7 range of vulnerabilities. The total number of higher scores decreases as VI-SPDAT scores increase (i.e. a smaller number of participants achieve the highest possible scores on the tool).

Generally, Black/African-American participants had lower VI-SPDAT scores when compared to White participants. Educated assumptions can be made about this observation:

- Black/African-American participants were more likely to experience barriers are not accounted for in the VI-SPDAT. This may include inequitable access to housing, or intergenerational poverty.
- Discrepancy may be attributed to the fact that the VI-SPDAT relies on self-report and that continued exposure to trauma may impact self-perception of constitutes a “vulnerability” or “barrier” to housing. For example – people who grow-up witnessing negative interactions between the police and their community members may unknowingly be desensitized to personal interactions with police and under report that barrier when completing the VI-SPDAT; generational poverty may have a similar effect on a self-reported answer.

Referring back to section 1 of this report, it was observed that Black/African-American households enter CoC housing at a rate higher than White households. This observation conflicts with the lower VI-SPDAT scores shown here, especially when CoC policies prioritize households identified as most vulnerable based in-part by VI-SPDAT data. It is not clear as to exactly why this data is conflicting but a conclusion can be drawn that the VI-SPDAT does not accurately capture the vulnerabilities/barriers experienced by the Black/African-American population represented in the homeless service system.

#### Limitations & Recommendations

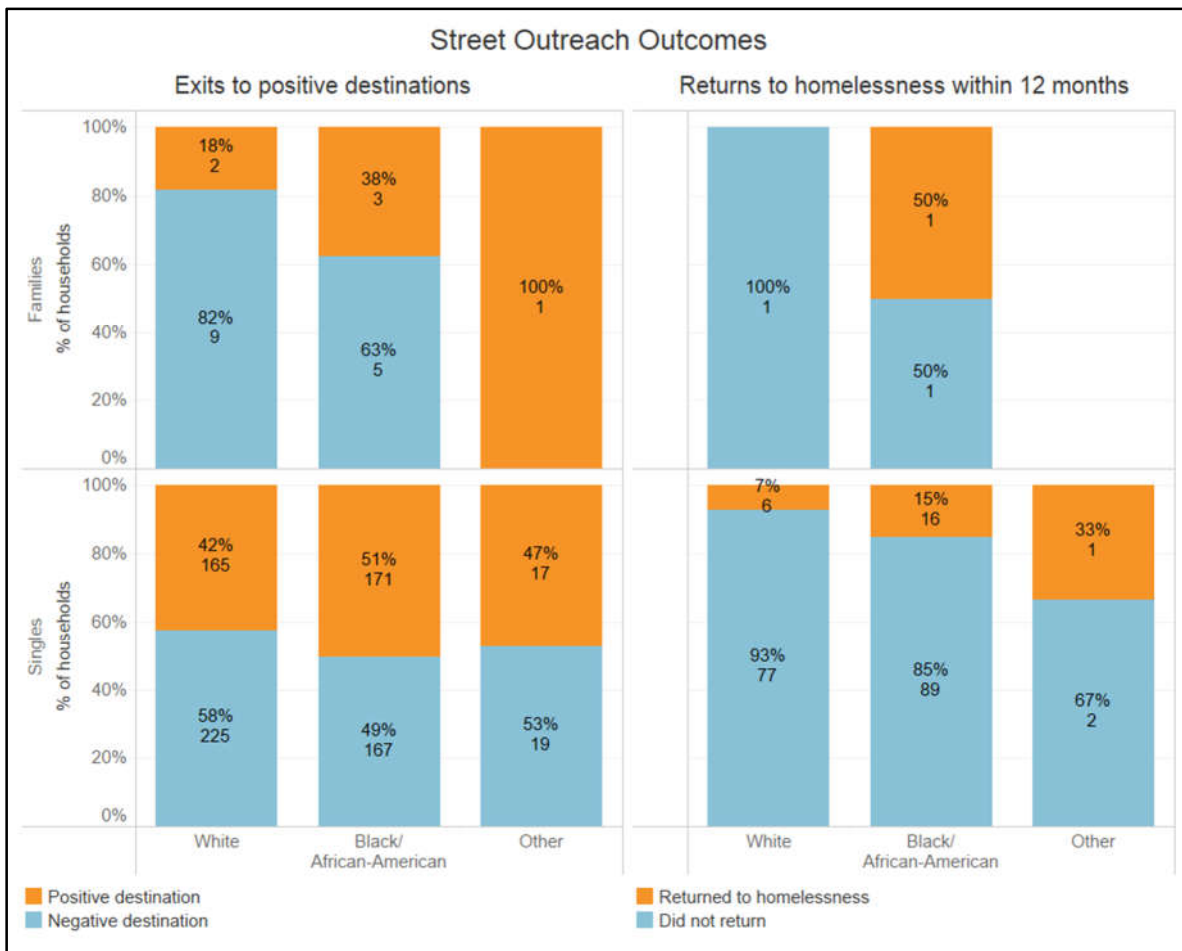
Capturing the full range of vulnerabilities experienced by a large population is challenging. The data available to the CoC is very limited and data-sharing partnerships with other systems (education, criminal justice, child welfare, healthcare) would allow for a more robust assessment of how homeless participants interact with other systems and if these interactions impact the overall vulnerabilities associated with maintaining permanent housing.

The observations do draw the conclusion that the VI-SPDAT, as a standalone Coordinated Entry tool, does not accurately capture data to clearly identify the most vulnerable people in the community.

Strategies for improvement:

- Complete a full assessment of Coordinated Entry data and its outcomes
- Compare local observations with national reports
- Talk to current and past participants in the homeless service system to learn more about the VI-SPDAT and the overall impact of the Coordinated Entry system. This should be strategic with a series of interviews, conversations, and focus groups – representation must align with the demographic makeup of the homeless service system.
- Learn from other CoC's who have changed their assessment tool – specifically identify, what led them to make the change? What was the impact? How are they evaluating accuracy?

## 5. Outreach



\*The lengths of the bars represent the percentage of street outreach clients of the racial group who exited to a positive destination type or returned to homelessness with 12 months of exit. The numbers indicate the total clients represented.

### Observations

Black/African-American households with children exit street outreach to positive housing at a higher rate than families who were White. Of Black/African-American families exiting street outreach, 38% exit to positive destinations, versus 18% of White families.

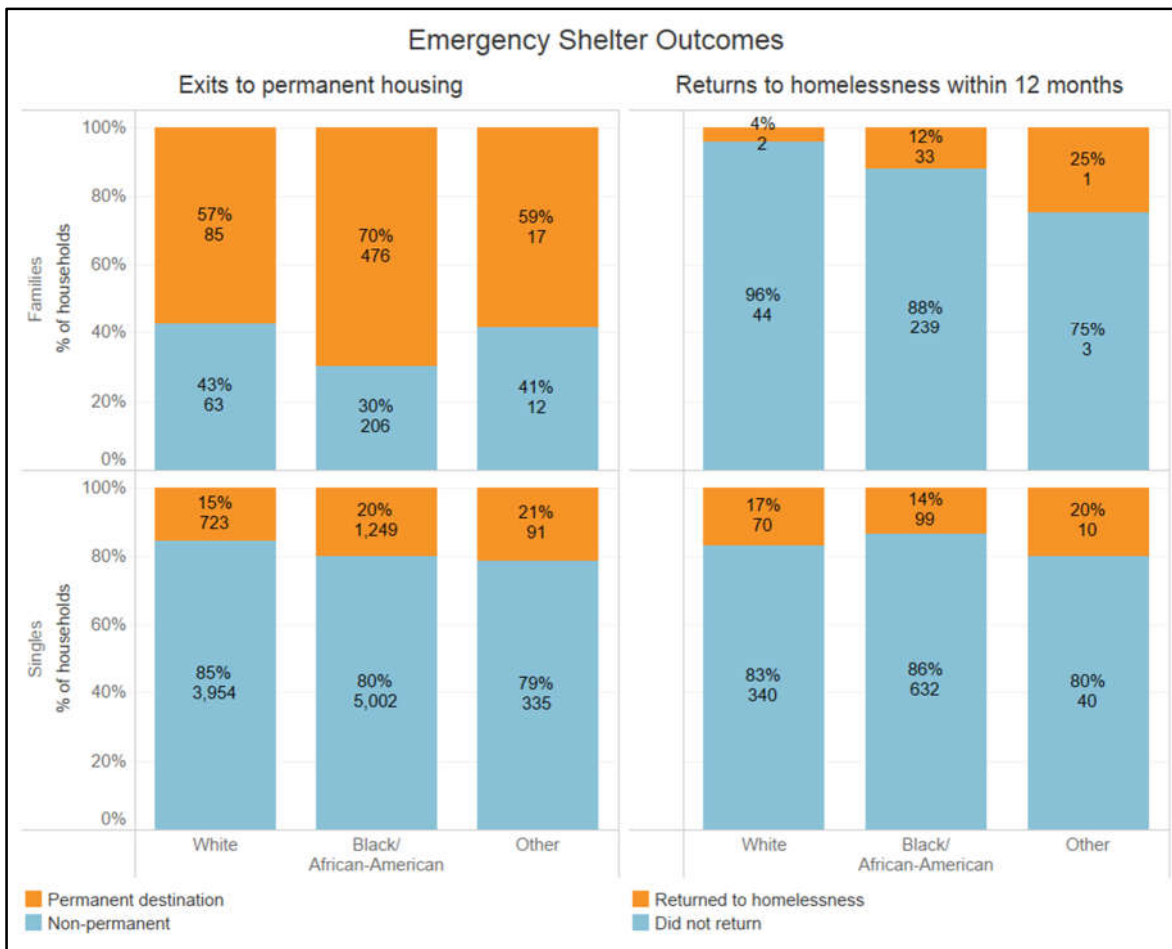
Black/African-American single individuals, and single individuals of other races exit street outreach to positive destinations at a similar rate (51% and 47%, respectively), while White single individuals exit to positive destinations at a slightly lower rate (42%).

While single Black/African-American clients exited to positive destinations more often, those who exited to permanent housing returned to homelessness at a slightly higher rate than White single clients.

### Limitations

- There are too few families engaged by street outreach to make accurate conclusions from this data. The extremely small number of families of other races engaged by street outreach limits the ability to compare the experiences of those of other races to the experiences of Black/African-American or White clients.

## 6. Emergency Shelter



\* The lengths of the bars represent the percentage of emergency shelter clients of the racial group who exited to permanent housing type or returned to homelessness with 12 months of exit. The numbers indicate the total clients represented.

### Observations

Black/African-American households with children exit shelter to permanent housing at a higher rate than families who were White or other races. Of Black/African-American families exiting shelter 70% exit to permanent housing, versus 57% of White families and 59% of families of other races.

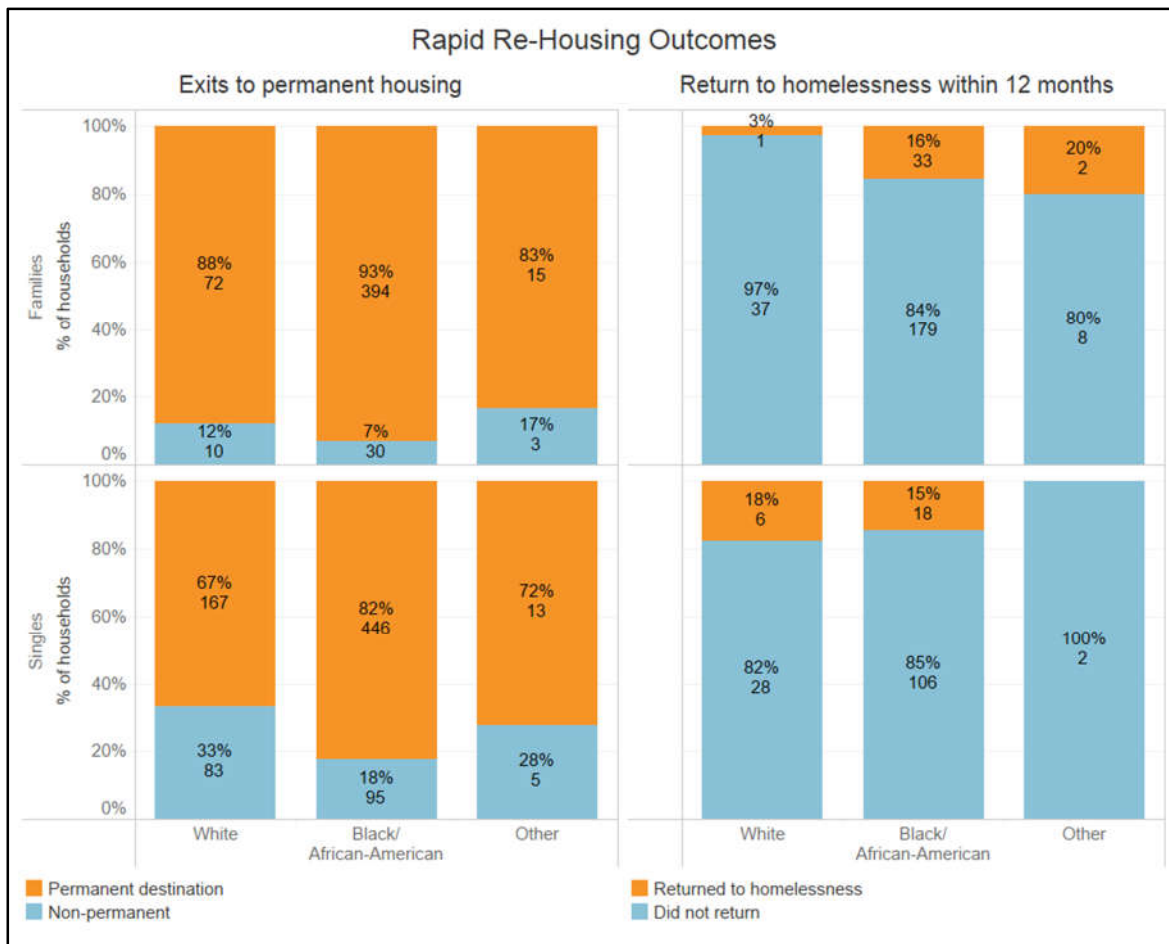
Black/African-American single individuals, and single individuals of other races exit shelter to permanent housing at a similar rate (20% and 21%, respectively), while White single individuals exit shelter to permanent housing at a lower rate (15%).

Despite these differences in exits from shelter to permanent housing by racial group, recidivism rates were similar across racial groups for single individuals who exited to permanent housing. Among families, the rate of returns to homelessness was lower for White clients than for Black/African-American families or those of other races.

### Limitations

- Because only two years of data were examined, recidivism rates at 24 months from exit are unknown, and 12-month recidivism is known for only about half the clients

## 7. Rapid Re-Housing



\* The lengths of the bars represent the percentage of Rapid Re-Housing clients of the racial group who exited to the destination type or returned to homelessness with 12 months of exit. The numbers indicate the total clients represented.

### Observations

Families of Black/African-American, White, and other races exited Rapid Re-Housing (RRH) to permanent housing at similar rates. Black/African-American single individuals (82%) were more likely to exit RRH to permanent housing than White single individuals (67%) or single individuals of other races (72%).

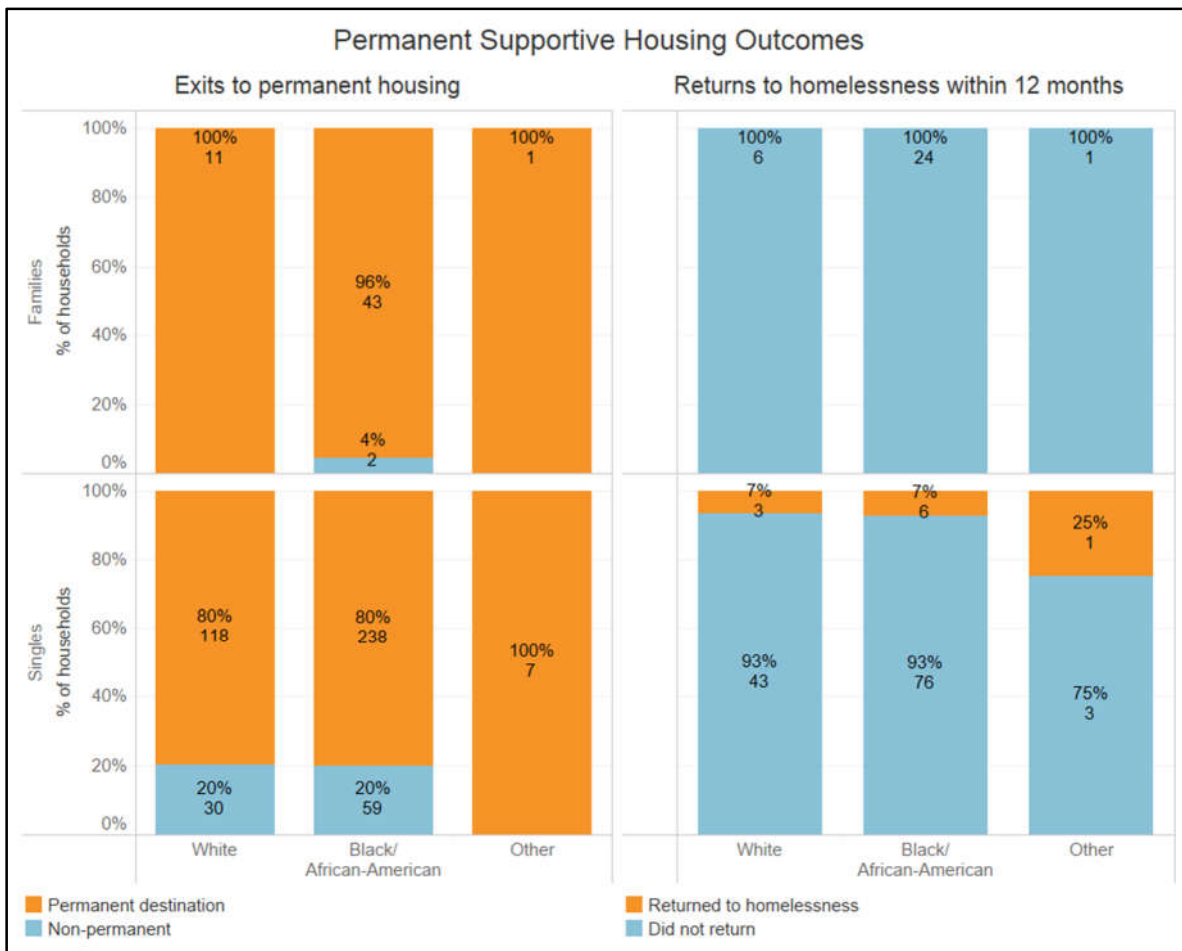
After exiting RRH to permanent housing destinations, 20% of families of other races returned to homelessness within 12 months, whereas 16% of Black/African-American families, and 3% of White families, exited RRH to permanent housing destinations and returned to homelessness within 12 months.

### Limitations

- The small number of clients of “other races” (American Indian/Alaskan Native, Asian, Native Hawaiian, or multiracial descent) makes it difficult to assess the unique needs of these distinct groups.



## 8. Permanent Supportive Housing



\* The lengths of the bars represent the percentage of Permanent Supportive Housing clients of the racial group who exited to the destination type or returned to homelessness with 12 months of exit. The numbers indicate the total clients represented.

### Observations

No significant differences in exit destinations or recidivism across racial groups can be detected. Recidivism among Black/African-American single individuals who exited PSH to permanent housing destinations (7%) was similar to that of White singles (7%).

### Limitations

The cohort in this metric is small, compared to other metrics, owing to the small number of clients for whom PSH is an appropriate housing intervention. Like other metrics, those of other races represent a small portion of PSH singles and families, and therefore extrapolating significant meaning from observations is difficult.

## 9. Other Observations

- Length of time homeless was similar across racial groups.
- The small number of Hispanic CoC clients makes comparison difficult. However, no clear differences in exit destinations or recidivism between Hispanic and non-Hispanic clients could be found in any project type.
- Similarly, the small number of singles and families in the “other races” category (American Indian/Alaskan Native, Asian, Native Hawaiian, or multiracial descent) makes comparison difficult.
- Black/African-American singles were more likely to increase their total and earned income.
- Data-sharing partnerships with other systems throughout Hamilton County would provide a more robust assessment of institutionalized barriers and systematic inequity that contributes to overrepresentation of the Black/African-American population in the CoC.

## 10. Next Steps: Commitment to Equitable Access to and Provision of Housing & Services

The CoC is committed to improving strategies that address racial disparities. This analysis represents the beginning stages of this work and the Homeless Clearinghouse will continue to move this work forward.

Based partly on suggestions from the FY2018 Continuum of Care funding application released by the Department of Housing & Urban Development, the following action steps should be prioritized by the Homeless Clearinghouse:

- Name a CoC committee that is responsible for analyzing & addressing racial disparities related to homelessness
- Continue analysis of HMIS data
- Integrate other data in the analysis and present a broader view of the community
- Acknowledge the discrepancies between the make-up of the CoC Board & develop strategies towards naming a board that is representative of the population served in the CoC
- Train leadership & staff working in homeless services on understanding racism and the intersection of racism and homelessness
- Partner with other groups in the community working to improve equity in the area
- Improve/formalize strategies to educate organizations, stakeholders, & boards of directors working on homelessness on the topic of creating greater racial and ethnic diversity

While progress has been identified in the following areas, the Homeless Clearinghouse should formalize expectations & processes to ensure advancement continues:

- Ensure all flyers, websites, and materials are inclusive of underrepresented groups
- Establish professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homeless sector
- Analyze the Coordinated Entry System data to understand its impact on people of different races and ethnicities experiencing homelessness
- Analyze HMIS & comparable database system data to understand the pattern of program use for people of different races and ethnicities in the homeless services system
- Analyze of U.S. Census, education, employment, health, and other data to better understand the scope and needs of different races or ethnicities experiencing homelessness