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 2019 CoC Program Competition Notice of Funding Available (NOFA) for specific
application and program requirements.
 2. The FY 2019 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:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition
Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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competition/#nofa-and-notices

1A-1. CoC Name and Number: NY-500 - Rochester, Irondequoit, Greece/Monroe
County CoC

1A-2. Collaborative Applicant Name: Rochester/Monroe County Homeless Continuum
of Care, Inc.

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Rochester/Monroe County Homeless CoC, Inc.

1B. Continuum of Care (CoC) Engagement

Instructions:

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Warning! The CoC Application score could be affected if information is incomplete on this formlet.

1B-1. CoC Meeting Participants.

 For the period of May 1, 2018 to April 30, 2019, applicants must indicate whether the Organization/Person listed:
 1. participated in CoC meetings;
 2. voted, including selecting CoC Board members; and
 3. participated in the CoC's coordinated entry system.

Organization/Person	Participates in CoC Meetings	Votes, including selecting CoC Board Members	Participates in Coordinated Entry System
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
Law Enforcement	Yes	No	No
Local Jail(s)	Yes	Yes	Yes
Hospital(s)	Yes	Yes	Yes
EMS/Crisis Response Team(s)	No	No	No
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes	Yes
Disability Service Organizations	Yes	Yes	Yes
Disability Advocates	Yes	Yes	Yes
Public Housing Authorities	Yes	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes

Youth Advocates	Yes	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Domestic Violence Advocates	Yes	No	No
Street Outreach Team(s)	Yes	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	No	Yes
LGBT Service Organizations	Yes	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Mental Illness Advocates	Yes	Yes	Yes
Substance Abuse Advocates	Yes	Yes	Yes
Other:(limit 50 characters)			
Faith Based Organizations	Yes	Yes	Yes
Public Libary	Yes	No	Yes
Business Community	Yes	Yes	No

1B-1a. CoC's Strategy to Solicit/Consider Opinions on Preventing/Ending Homelessness.

Applicants must describe how the CoC:
1. solicits and considers opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
 2. communicates information during public meetings or other forums the CoC uses to solicit public information;
3. takes into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness; and
 4. ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats, e.g., PDF.
(limit 2,000 characters)

1. The CoC stakeholder group, the Homeless Services Network (HSN), is a group of 60+ organizations and individuals who provide housing and/or services to the homeless, represent other systems that interact with the homeless system, homeless/formerly homeless persons or community members who are interested in addressing issues of homelessness, housing and poverty. HSN meets monthly and elects two representatives to the CoC Board to ensure that HSN input is brought to the CoC Board. Both the HSN and the CoC Board have standing agenda items for CoC Board and HSN reports respectively that ensures ideas, opinions, needs/gaps, etc. are communicated. The CoC develops community priorities that are utilized for planning purposes, and to guide funding decisions. CoC staff attend HSN meetings and are on HSN Advisory Committee. This process drives the tasks of both the CoC and HSN working committees: Chronic Homeless, Housing and Health Care (H2), HMIS Advisory/Data Collection, STOMP (homeless youth leadership committee),

Coordinated Entry, HSN Training, Project Homeless Connect, PIT Planning Committee, etc. Each committee reports back to HSN or CoC Board to report on progress, request assistance/direction as needed.
2. CoC and HSN leaders are also members of larger collaborations such as the Rochester/Monroe Anti-Poverty Initiative, Finger Lakes Regional Economic Development Council, Health Home and Managed Care Initiatives. They ensure that homeless and housing issues are included on these agendas that create new partnerships and can bring additional resources to the homeless system both funding and knowledge.
3. The information gathered in these public forums is utilized in creating community priorities, developing program models and planning.
4. CoC is able to effectively communicate with people with disabilities through use of email, phone and TTY. Upon request ASL translation can be provided. All CoC documents are posted in pdf format.

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 the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats;
4. how often the CoC solicits new members; and
 5. 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. The CoC Governance Committee actively seeks out new CoC Board members that have knowledge and experience in homelessness, housing, services and systems that are interrelated with homelessness. Special outreach efforts are made to recruit members from the community that are not currently represented or are under-represented. CoC Board and the HSN members are continuously soliciting people to attend meetings, join committees, etc. that ensure diverse representation and to draw in people from the community both the public and private sector who can partner with the CoC, HSN and providers to accomplish goal of ending homelessness and improving performance outcomes.
2. The CoC emails its contact list (300+ individuals and organizations) that it is accepting nominations for CoC Board membership and makes announcement at HSN meetings. Outreach for CoC Board and HSN includes talking with housing developers, workforce and economic development organizations, landlords/property managers, the business community, local schools and universities, etc. HSN member outreach is ongoing. CoC and HSN members are continuously educating people on homelessness issues and encourage attendance at meetings and committee participation.
3. CoC is able to effectively communicate with people with disabilities through use of email, phone and TTY. Upon request ASL translation can be provided. All CoC documents are posted in pdf format.
4. Solicitation for new CoC Board members is conducted Aug.-Oct. to have a slate of nominees presented at the Nov. Board meeting and voted on at December meeting. New member solicitation for HSN and committee members

is ongoing throughout the year.
5. Providers are encouraged to identify participants who are willing to join CoC Board and HSN. There has been increased participation due to more programs using peers as staff or volunteers. Inclusion of formerly homeless on project Boards is reviewed during project monitoring visits.

1B-3. Public Notification for Proposals from Organizations Not Previously Funded.

Applicants must describe:
1. how the CoC notifies the public that it is accepting project application proposals, and that it is open to and will consider applications from organizations that have not previously received CoC Program funding, as well as the method in which proposals should be submitted;
2. the process the CoC uses to determine whether the project application will be included in the FY 2019 CoC Program Competition process;
3. the date(s) the CoC publicly announced it was open to proposal;
4. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats; and
5. if the CoC does not accept proposals from organizations that have not previously received CoC Program funding or did not announce it was open to proposals from non-CoC Program funded organizations, the applicant must state this fact in the response and provide the reason the CoC does not accept proposals from organizations that have not previously received CoC Program funding.
(limit 2,000 characters)

1. Each year the CoC conducts a local process that is open, transparent, and equitable. The CoC released the 2019 RFP for New and Renewal Project Applications for FY 2019 HUD CoC Program by email to our CoC contact list of 300+ organizations and individuals, and to the Homeless Services Network (HSN) email list of 350+ organizations and individuals. The email requests that the receiver also send out the RFP to their email lists to spread the word to even more potential applicants. "Continuum of Care 101" workshops are conducted throughout the year that provide an overview of the function and responsibilities of the CoC to encourage organizations that have not received CoC funding to apply. One organization applied that has not received CoC funding in the past and their project is included in Tier 2 on the 2019 Project Priority List. All project applications are required to be submitted by email. An Applicant Workshop was held on 6/19/2019 for any organizations that outlined the application process, reviewed community priorities, local scoring criteria, local rating and ranking process, timeline, provided information on eligible program components, definitions, Bonus and DV Bonus Projects, eligible expenses, match requirements and budget. Applicant Workshop power point and Local Application Process Q & A are posted on our website, www.letsendhomelessness.org .
2. All applications are reviewed and scored using a Scoring Matrix. Scoring Matrix used was posted with application documents on website www.letsendhomelessness.org on 5/23/2019. Application ranking is based on score and projects are ranked until ARD + Bonus Funding has been expended.
3. The RFP was released on 5/23/2019 by email and posted on the CoC website and were due on 6/21.
4. CoC is able to effectively communicate with people with disabilities through

use of email, phone and TTY. Upon request ASL translation can be provided.
All CoC documents are posted in pdf format.
5. N/A

1C. Continuum of Care (CoC) Coordination

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1C-1. CoCs Coordination, Planning, and Operation of Projects.

Applicants must select the appropriate response for each federal, state, local, private, other organizations, or program source the CoC included in the planning and operation of projects that serve individuals experiencing homelessness, families experiencing homelessness, unaccompanied youth experiencing homelessness, persons who are fleeing domestic violence, or persons at risk of homelessness.

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	Not Applicable
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)	

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;
2. participated in the evaluating and reporting performance of ESG Program recipients and subrecipients; and
3. ensured local homelessness information is communicated and addressed in the Consolidated Plan updates.
(limit 2,000 characters)

1. There are two ESG Recipients in the CoC, the City of Rochester and Monroe County. The CoC and ESG recipients work closely together in planning and coordinating of homeless housing and services. Both ESG recipients are represented on the CoC Board. CoC and ESG recipients work together to ensure efficient use of resources; ESG funds focus on programs like emergency shelter and prevention which are not eligible activities for CoC funding.
2. CoC staff participate in review and rating of ESG applications for funding and ESG recipients sit on the CoC Rating and Ranking Committee for CoC funding. CoC staff provides updated PIT and HIC data and narrative sections related to homelessness for both the City and County. Both ESG recipients and the Town of Greece, a Consolidated Plan jurisdiction are members of CoC Board and sit on various committees, so are actively involved in CoC strategic planning activities.
3. The CoC provides assistance to ESG grantees with CAPER HMIS uploads and updates data and narrative on the CAPER reports submitted by the County and the City. In addition to the two ESG Recipients there are two other Consolidated Plan jurisdictions, Towns of Greece and Irondequoit. CoC provides the narrative homeless information for these con plan jurisdictions as well as PIT and HIC data.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions.

Applicants must indicate whether the CoC provided 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.

Applicants must indicate whether the CoC ensured local homelessness information is communicated to Consolidated Plan Jurisdictions within its geographic area so it can be addressed in Consolidated Plan updates.

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 protocols for coordinated entry and the CoC's emergency transfer plan, that prioritize safety and incorporate trauma-informed, victim-centered services; and
2. how the CoC, through its coordinated entry, maximizes client choice for housing and services while ensuring safety and confidentiality.
(limit 2,000 characters)

1. The first question asked as part of coordinated entry is whether the person(s) is safe. If household is fleeing DV, they are immediately connected to the Willow Domestic Violence Center 24 Hotline where an assessment is conducted. Based on the DV assessment the household is either admitted into Willow's licensed DV emergency shelter, placed in a DV shelter in a neighboring county if Willow's beds are full, to an emergency shelter in the CoC or diverted to another safe housing option. Initial safety planning is conducted and whether household enters shelter or not, info is provided on the non-residential programs and services that Willow offers. The CoC uses HMIS for Coordinated Entry. DV survivors referred to the Prioritization List through HMIS have the option of providing personal identifying information or being entered anonymously and assigned an unique ID with no info provided such as DOB, # of children, etc.
2. The CoC has implemented an emergency transfer plan in accordance with the Violence Against Women Act (VAWA). This plan identifies tenants who are eligible for an emergency transfer, the documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance to tenants on safety and security. This plan is based on a model emergency transfer plan published by the U.S. Department of Housing and Urban Development (HUD), the Federal agency that oversees that the Rochester/Monroe County Homeless Continuum of Care and CoC-funded programs are in compliance with VAWA. If a program participant becomes a victim of Domestic Violence and it is determined their safety is at risk if they stay in the unit; they will be transferred to another unit within the program if one is available or will go to the top of the prioritization list if they must transfer to another program.

1C-3a. Training–Best Practices in Serving DV Survivors.

Applicants must describe how the CoC coordinates with victim services providers to provide training, at least on an annual basis, for:
1. CoC area project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence; and
2. Coordinated Entry staff that addresses safety and best practices (e.g., Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence.
(limit 2,000 characters)

1. The CoC is increasing training opportunities in Trauma Informed Care (TIC) for all providers through H2 and HSN Training Committees, a best practice for

working with DV victims and as well as homeless and other vulnerable populations. Shelter, coordinated entry, street outreach and community based organization staff that complete the VI-SPDAT assessment are all trained, and training includes using language when asking questions that are not re-traumatizing. Coordinated Entry has also contracted to provide more in depth TIC training for providers through Community Care Services, Inc. (CCSI).
2. The Coordinated Entry Project Manager and the Prioritization Coordinator worked with DV providers to develop the Emergency Transfer Plan that ensures a participant who is victimized remains safe while the transfer plan is in progress. CE staff make sure that DV protocols are adhered to from referral to the list to housing move in. Participant is fully informed of housing choices in terms of location and the expected time a move-in can take place. A DV survivor being put on the Prioritization List remains anonymous. The referring case manager can call a case conference to ensure that safety plan is integrated with the housing search and development of a service plan to ensure long term safety of the participant.

1C-3b. Domestic Violence–Community Need Data.

**Applicants must describe how the CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking.
(limit 2,000 characters)**

For projects that participate in HMIS, the CoC is able to track data on the numbers of persons entering the homeless system that are currently fleeing domestic violence and those that have experinced domestic violence. Currently, there there is not a comparable database being used at this time, as there are no DV programs being funded by the CoC. Willow utilizes a web based software, Apricot for their data collection activities. Willow fully participates in the annual PIT count, provides data annually on total numbers served as requested by the CoC and through their annual report to the community. Staff from Willow attend Homeless Services Network meetings and participate in the Coordinated Entry workgroup. Though data is not fully integrated; Willow's participation in CoC and Homeless Services Network activities keep the CoC and the community informed and supportive of th meeting the needs for crisis housing, services and for permanent housing options for survivors. The CoC has facilitated opportunities for providers to partner with affordable housing developers. Willow partnered with PathStone Corporation in the recent development of their new emergency shelter which in addition to increasing the number of emergency beds for the community, also includes 10 units of permanent supportive housing, the first PSH units for survivors in the community. Willow has also recently partnered with the Rochester Cornerstone Group for a set-aside of 10 units for survivors in an affordable housing development that is currently being sumbitted for funding.

*1C-4. PHAs within CoC. Attachments Required.

Applicants must submit information for the two largest PHAs or the two PHAs with which the CoC has a working relationship within the CoC's geographic area.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 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., Moving On
Rochester Housing Authority		No	No
Fairport Housing Authority		No	No

1C-4a. PHAs' Written Policies on Homeless Admission Preferences.

 Applicants must:
 1. provide the steps the CoC has taken, with the two largest PHAs within the CoC's geographic area or the two PHAs the CoC has working relationships with, to adopt a homeless admission preference–if the CoC only has one PHA within its geographic area, applicants may respond for one; or
 2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)

1. While RHA does not have a homeless preference, RHA is one of the original CoC members and has been an active participant in homelessness activities in this community since the mid-1980s. RHA is the applicant for multiple CoC funded rental assistance programs to provide long term rental assistance to homeless households. RHA staff is on the CoC Board, attend Homeless Services Network meetings, actively participates on the Coordinated Entry workgroup, Project Homeless Connect, volunteer for unsheltered Point In Time Count, Rochester/Monroe Anti-Poverty Initiative's Housing Policy Committee, and other task forces/workgroups working on issues related to housing, homelessness and reduction of poverty. RHA has also stepped up and provided Housing Choice Vouchers for PSH participants who could have lost affordable housing when funding for their programs was reallocated.

The CoC needs to follow up with Fairport Housing Authority to establish a homeless preference.

2. N/A

1C-4b. Moving On Strategy with Affordable Housing Providers.

 Applicants must indicate whether the CoC has a Moving On Strategy with affordable housing providers in its jurisdiction.

Yes

If "Yes" is selected above, describe the type of provider, for example, multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs. (limit 1,000 characters)

NYS has created a funding stream for support services and operations (Empire State Supportive Housing Initiative (ESSHI) for affordable housing projects that set aside units for persons who are homeless or at risk of homelessness. These

are generally tax credit projects; the funding allows units to serve households at less than 30% AMI. The primary barrier for PSH participants "graduating", is the lack of affordable housing units. There are PSH participants who may no longer need the intensive support services provided in PSH who could move on if they had a rent subsidy. The CoC encourages partnerships with homeless providers and non-profit developers to create these projects to create options for homeless persons after PSH. We already have project in operation and a second opening 9/24/19 that are serving the re-entry population. CoC Lead is required to provide support letters for the projects they would like to see move forward. This year 12 applications were submitted by CoC partners. This year 21 applications were submitted on 9/25/2019 almost double from last year.

1C-5. Protecting Against Discrimination.

Applicants must describe the actions the CoC has taken to address all forms of discrimination, such as discrimination based on any protected classes under the Fair Housing Act and 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing.
(limit 2,000 characters)

CoC and ESG funded programs are required to have Anti-Discrimination policies and conduct fair housing outreach efforts to inform those least likely to apply for their housing and services. Annual CoC monitoring visits review policies to ensure compliance. Community written standards require that programs have an internal appeals process for participants who are discharged or denied entry into their program(s). The CoC has established an external Appeal process for participants unsatisfied with results of program level appeal through Coordinated Entry case conference. CoC encourages all organizations that serve persons with disabilities, refugees, and other sub-populations to participate in CoC activities so they are aware of homeless housing and services that can benefit their consumers. Most programs have bi-lingual staff (Spanish) and access to translation services. The two entry points into the homeless system, MCDHS and "211" as well as DV and Homeless Youth hotlines have TTY and translation services as well.

*1C-5a. Anti-Discrimination Policy and Training.

Applicants must indicate whether the CoC implemented an anti-discrimination policy and conduct training:

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 address discrimination based on any protected class under the Fair Housing Act?	Yes
3. Did the CoC conduct annual training on how to effectively address discrimination based on any protected class under 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing?	Yes

*1C-6. Criminalization of Homelessness.

Applicants must select all that apply that describe the strategies the CoC

implemented to prevent the criminalization of homelessness in the CoC's geographic area.

1. Engaged/educated local policymakers:	X
2. Engaged/educated law enforcement:	X
3. Engaged/educated local business leaders:	X
4. Implemented communitywide plans:	
5. No strategies have been implemented:	
6. Other:(limit 50 characters)	

1C-7. Centralized or Coordinated Assessment System. Attachment Required.

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 for homelessness assistance in the absence of special outreach; and
3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner. (limit 2,000 characters)

1. Monroe County is the CoC geographic area and Coordinated Entry (CE) system covers the entire County. CE staff conduct ongoing outreach and training to providers outside the homeless system that serve homeless persons regardless of their location. RRH and the majority of the PSH programs provide tenant based rental assistance that allows participants choice in where they live throughout Monroe County. Review of the list of organizations making referrals to the prioritization list and the zip code of participants collected in HMIS demonstrates that CE covers the whole county.
2. Prior to CE and by-name prioritization list it was unlikely that unsheltered homeless or persons staying in shelters that have limited or no case management services would be referred to PH programs. This group is also the most likely to have higher vulnerability. Since CE, 256 individuals have been placed on the Prioritization List from these shelters or through focused Street Outreach efforts across the County to conduct assessments and submit prioritization list referrals.
3. CoC has adopted the VI-SPDAT tool (Individual, Family and TAY) to assess

vulnerability for prioritization. It is administered at emergency shelters (within 72 hours of admission), during street outreach efforts, by care/case managers at community-based organizations and drop-in/meal sites. In addition to the VI-SPDAT a prioritization list application is completed for each person. LOT homeless, age (<18 or >60), chronic homelessness, disability and being unsheltered are factors that affect placement on the prioritization list in addition to the VI-SPDAT score. A case conferencing process is in place to ensure appropriate referrals are being made and are expedited as quickly as possible. CE uses HMIS for referrals, and data collected will be used in CE monitoring reports to ensure that the system continues to cover the entire CoC area and prioritizes persons with the highest needs in a timely manner.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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1D-1. 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:	X
Health Care:	X
Mental Health Care:	X
Correctional Facilities:	X
None:	

1E. Local CoC Competition

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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*1E-1. Local CoC Competition–Announcement, Established Deadline, Applicant Notifications. Attachments Required.

Applicants must indicate whether the CoC:

1. informed project applicants in its local competition announcement about point values or other ranking criteria the CoC would use to rank projects on the CoC Project Listings for submission to HUD for the FY 2019 CoC Program Competition;	Yes
2. established a local competition deadline, and posted publicly, for project applications that was no later than 30 days before the FY 2019 CoC Program Competition Application submission deadline;	Yes
3. notified applicants that their project application(s) were being rejected or reduced, in writing along with the reason for the decision, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline; and	Yes
4. notified applicants that their project applications were accepted and ranked on the CoC Priority Listing in writing, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline.	Yes

1E-2. Project Review and Ranking–Objective Criteria.

Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2019 CoC Program Competition:

1. Used objective criteria to review and rank projects for funding (e.g., cost effectiveness of the project, performance data, type of population served);	Yes
2. Included one factor related to improving system performance (e.g., exits to permanent housing (PH) destinations, retention of PH, length of time homeless, returns to homelessness, job/income growth, etc.); and	Yes
3. Included a specific method for evaluating projects submitted by victim services providers that utilized data generated from a comparable database and evaluated these projects on the degree they improve safety for the population served.	No

1E-3. Project Review and Ranking–Severity of Needs and Vulnerabilities.

Applicants must describe:
1. the specific severity of needs and vulnerabilities the CoC considered when reviewing and ranking projects; and
2. how the CoC takes severity of needs and vulnerabilities into account when reviewing and ranking projects.
(limit 2,000 characters)

1. Applicants provide data on participants served; sub-populations, special needs; describe how they utilize Housing First principles so have few or no barriers to entry into the project, have high retention and exits to permanent housing, high percentage of persons connected to mainstream resources both cash and non-cash benefits. This data is validated using HMIS. The CoC develops a scoring rubric that is made available to all potential applicants during the local application process that is used to score applications. The renewal application completed for the local process includes a question on mitigating factors that the applicant would like reviewers to be aware of. There is also a question that allows applicants to discuss reasons why performance measures weren't met and whether serving the high needs population(s) they serve affected those outcomes or describe their participants in more detail, providing an opportunity for reviewers to increase their score.
2. The severity of needs and vulnerabilities served by a project is considered when reviewing and ranking projects. An application can earn up to 20 points based on the sub-populations and types of special needs served by the project and incorporating Housing First.   Qualitative information is also shared on how the program operates in practice; i.e. - does a project reject Coordinated Entry referrals of very high need individuals, does a project terminate participants immediately upon a violation rather than trying to resolve the situation. For new project applications, reviewers also look at the services that are proposed for participants to ensure that they are sufficient to meet the special needs of the proposed sub-population(s).

1E-4. Public Postings–CoC Consolidated Application. Attachment Required.

Applicants must:
1. indicate how the CoC made public the review and ranking process the CoC used for all project applications; or
2. check 6 if the CoC did not make public the review and ranking process; and
3. indicate how the CoC made public the CoC Consolidated Application–including the CoC Application and CoC Priority Listing that includes all project applications accepted and ranked or rejected–which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the FY 2019 CoC Program Competition application submission deadline; or
4. check 6 if the CoC did not make public the CoC Consolidated Application.

Public Posting of Objective Review and Ranking Process	Public Posting of CoC Consolidated Application including: CoC Application, CoC Priority Listing, Project Listings

1. Email	X	**1. Email**		X
2. Mail	X	**2. Mail**		X
3. Advertising in Local Newspaper(s)	☐	**3. Advertising in Local Newspaper(s)**		☐
4. Advertising on Radio or Television	☐	**4. Advertising on Radio or Television**		☐
5. Social Media (Twitter, Facebook, etc.)	☐	**5. Social Media (Twitter, Facebook, etc.)**		☐
6. Did Not Publicly Post Review and Ranking Process	☐	**6. Did Not Publicly Post CoC Consolidated Application**		☐

1E-5. Reallocation between FY 2015 and FY 2018.

 Applicants must report the percentage of the CoC's ARD that was reallocated between the FY 2015 and FY 2018 CoC Program Competitions.

Reallocation: 44%

1E-5a. Reallocation–CoC Review of Performance of Existing Projects.

 Applicants must:
 1. describe the CoC written process for reallocation;
 2. indicate whether the CoC approved the reallocation process;
 3. describe how the CoC communicated to all applicants the reallocation process;
 4. describe how the CoC identified projects that were low performing or for which there is less need; and
 5. describe how the CoC determined whether projects that were deemed low performing would be reallocated.
(limit 2,000 characters)

 1. The written reallocation policy is made available to applicants at the beginning of the local application process. Possible reasons for reallocation include: history of unspent HUD funds; project voluntarily decides not to renew or requests to be reallocated to create a new project; history of not meeting performance measures; project has deficiencies in the on-going operation of their program.
 2. The reallocation process is approved prior to releasing the local application RFP by the Application Review Committee which is composed of non-conflicted CoC Board and community members who have knowledge of the homeless system, expertise in program management, etc.
 3. Per 1E-5a.1. applicants are aware of the reallocation policy from the beginning of the local application process. Once project applications have been reviewed, scored and ranked a letter is sent to each applicant which informs them how their project has been ranked/unranked; and whether their project was partially or fully reallocated.

4. Projects are identified as low performing or no longer meeting a priority need in the CoC based on the scoring of their local application. All project applications are reviewed and scored based on scoring matrix that is available to applicants at the start of the local application process. Sets uniform criteria for scoring in areas of performance, utilization, cost per household, severity of needs of participants, participation in Coordinated Entry and HMIS; adherence to Housing First principles; and involvement in CoC, HSN and other community efforts addressing homelessness.

5. All Renewal Projects are ranked based on their score. If their score placed them below the total amount of the ARD the project would be reallocated in total. A project can also be reallocated based on serious deficiencies in the operation of the program, making them ineligible for funding due to non-compliance with HUD requirements.

DV Bonus

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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Warning! The CoC Application score could be affected if information is incomplete on this formlet.

1F-1   DV Bonus Projects.

Applicants must indicate whether the CoC is requesting DV Bonus projects which are included on the CoC Priority Listing: No

Applicant Name	DUNS Number
This list contains no items	

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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2A-1. HMIS Vendor Identification.   Mediware/Service Point

Applicants must review the HMIS software vendor name brought forward from FY 2018 CoC Application and update the information if there was a change.

2A-2. Bed Coverage Rate Using HIC and HMIS Data.

Using 2019 HIC and HMIS data, applicants must report by project type:

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	585	49	431	80.41%
Safe Haven (SH) beds	12	0	12	100.00%
Transitional Housing (TH) beds	139	0	131	94.24%
Rapid Re-Housing (RRH) beds	591	0	591	100.00%
Permanent Supportive Housing (PSH) beds	1,465	0	1,465	100.00%
Other Permanent Housing (OPH) beds	0	0	0	

2A-2a. Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-2.

For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-2., applicants must describe:

1. steps the CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2. how the CoC will implement the steps described to increase bed coverage to at least 85 percent.
(limit 2,000 characters)

1. We have made tremendous progress with increasing the bed coverage rate for our emergency shelter beds over the past two years. Our largest faith based shelter and a seasonal shelter who are now participating; increasing our coverage from 2017 - 51% and 2018 (64.03%) to our current ES coverage rate of 80.41%.
2. The CoC will continue to encourage non-participating programs to utilize HMIS, the CoC offers free licenses as an incentive to participate as well as other benefits such as providing reports, planning, grant writing, etc. Another faith based shelter (40 beds) began participating in HMIS in 2019, but it was after the PIT count so those beds are not reflected in the current rate. For 2020, the coverage rate will meet the 85% benchmark.

*2A-3. Longitudinal System Analysis (LSA) Submission.

Applicants must indicate whether the CoC submitted its LSA data to HUD in HDX 2.0.   Yes

*2A-4. HIC HDX Submission Date.

Applicants must enter the date the CoC submitted the 2019 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy)   04/08/2019

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

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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**2B-1. PIT Count Date.
Applicants must enter the date the CoC
conducted its 2019 PIT count (mm/dd/yyyy).**   01/23/2019

**2B-2. PIT Count Data–HDX Submission Date.
Applicants must enter the date the CoC
submitted its PIT count data in HDX
(mm/dd/yyyy).**   04/08/2019

2B-3. Sheltered PIT Count–Change in Implementation.

**Applicants must describe:
1. any changes in the sheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and
2. how the changes affected the CoC's sheltered PIT count results; or
3. state "Not Applicable" if there were no changes.
(limit 2,000 characters)**

There were no changes in the methodology for the sheltered PIT count from 2018 - 2019. All ES, TH and SH programs in the CoC, regardless of their participation in HMIS participate in the annual PIT count. Programs that are using HMIS were sent regular reminders from November through January to update their program entry/exits in preparation for the PIT, to ensure an accurate count. Trained staff/volunteers conducted the surveys at the programs that do not participate in HMIS. The CoC is therefore confident that it is a complete and unduplicated count of the sheltered homeless in the geographic area covered by the CoC on 1/25/2018.

*2B-4. Sheltered PIT Count–Changes Due to Presidentially-declared Disaster.

Applicants must select whether the CoC added or removed 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 2019 sheltered PIT count. No

2B-5. Unsheltered PIT Count–Changes in Implementation.

Applicants must describe:
1. any changes in the unsheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and
2. how the changes affected the CoC's unsheltered PIT count results; or
3. state "Not Applicable" if there were no changes.
(limit 2,000 characters)

There were no changes in the methodology for the unsheltered count from 2018 to 2019. The unsheltered PIT survey could be accessed on-line. The questions remained the same as in prior years, but now volunteers are able to complete the survey on their phone/tablet which was quicker. Personal care bags and small gift card or daily bus pass were also provided as an incentive to complete the survey. The data entered on-line went directly into an Excel database so the survey data did not have to be keystroked in which reduces potential errors. The additional incentives and the faster administration of the survey increased the number of surveys that had all questions completed because participants were more willing to answer all the questions and questions couldn't be skipped or wouldn't allow the survey to be submitted. We had a record number of volunteers (100+) participate in the unsheltered count.

*2B-6. PIT Count–Identifying Youth Experiencing Homelessness.

Applicants must:

Indicate whether the CoC implemented specific measures to identify youth experiencing homelessness in their 2019 PIT count. Yes

2B-6a. PIT Count–Involving Youth in Implementation.

Applicants must describe how the CoC engaged stakeholders serving youth experiencing homelessness to:
1. plan the 2019 PIT count;
2. select locations where youth experiencing homelessness are most

likely to be identified; and
3. involve youth in counting during the 2019 PIT count.
(limit 2,000 characters)

All of the youth emergency shelters and transitional living programs participate in HMIS which insures that sheltered homeless youth are accurately counted in the PIT count.
1. The CoC PIT Planning Committee meets from Sept. - Feb. to plan, conduct and debrief for the annual unsheltered count. Homeless youth providers and homeless youth and STOMP, the CoC Youth Advisory Board fully participated in the PIT process; were part of the planning team, identified locations where homeless youth were likely to be found and volunteered to conduct the count. This included making and distributing posters and flyers inviting homeless youth to a drop-in event to complete surveys, the first time this was done in the CoC. Youth volunteered to conduct surveys at the central downtown Public Transit Center, rec centers and certain streets that are known to be "hot spots" where youth tend to congregate. As described in 2C-4A, the ability to do the unsheltered survey on line and additional incentives were helpful for getting more completed surveys. A youth specific PIT survey was utilized in the unsheltered count that asked additional questions regarding school attendance, whether their current living situation is safe, how long has it been since they felt they were permanently housed, use of community services, history with foster care and criminal justice systems, etc. to gain more insight into the needs of unsheltered homeless youth.
3. Members of the STOMP, Youth Advisory Board were volunteers in the unsheltered PIT count. They are also planning an additional Youth PIT count that will be conducted in the Fall.

2B-7. PIT Count–Improvements to Implementation.

Applicants must describe the CoC's actions implemented in its 2019 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)

1. Throughout the year, the CoC has been conducting additional HMIS training to improve data quality that included all data elements that must be completed to establish chronic homelessness, entering disability information, entering income correctly, entering housing move in dates and annual reviews. While these efforts were not just undertaken for the PIT count, the vast majority of the sheltered PIT is done from HMIS, so overall data quality improvement across the CoC ensures more accurate PIT numbers. There was additional training of volunteers to be sure they understood all components of the "Homeless" and "Chronic Homeless" definitions and that they completed all of those questions.
2. HMIS training to improve data quality also included a focus on creating households, adding/deleting household members. We have not identified any unsheltered homeless families during PIT counts therefore PIT count for families with children is in sheltered count which is done through HMIS; there are no shelters serving families who are not participating in HMIS. Improved data quality as with CH ensures more accurate PIT numbers.
3. Veteran status is a HMIS data element and must be answered in order to complete the entry/exit form as well as in the electronic PIT survey now used.

This ensures that the veteran status question is completed for every person in HMIS. HMIS user and PIT volunteer training includes questions to ask to correctly determine veteran status.

3A. Continuum of Care (CoC) System Performance

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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*3A-1. First Time Homeless as Reported in HDX.

 Applicants must:

Report the Number of First Time Homeless as Reported in HDX.	3,957

3A-1a. First Time Homeless Risk Factors.

 Applicants must:
 1. describe the process the CoC developed to identify 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. From FY 2017 to FY2018, the # of people entering ES, SH or TH experiencing homelessness for the 1st time increased by 67; the # of people entering ES, SH, TH or PH experiencing homelessness for the 1st time increased by 85. Analysis of HMIS and other community data is used to identify risk factors. The primary reasons for becoming homeless are eviction by the primary tenant; they were doubled up and asked to leave or are "young families" - households with minor children where the head of household is less than 25 years of age.
 2. Coordinated entry process attempts to divert as many persons as possible to other safe and acceptable housing by linking them to other services and

support. Monroe County DHS the primary entry point into emergency shelter, and "211" does a diversion assessment with all households requesting emergency shelter. Interventions might be landlord mediation, providing resources to the household such as food or linking to other community resources so that household could stay housed until they find their own housing. An ESG funded homelessness prevention program ($110,000)is in its second year of operation provides some additional resources for prevention services, but it a small amount of funding in relation to need and does not come close to meeting the current need. CoC is involved in the development of a Systems Integration project which when implemented could identify households who are "doubled up" or where Head of Household is under 25 and appropriate services could be targeted to prevent entering the homeless system. CoC is involved in several community initiatives: one is conducting interviews with households being evicted and attempting to link them with resources, the creation of a "Housing Court" that would provide consistency in eviction proceedings and the ability to provide free legal representation for those being evicted.
3. CoC and Coordinated Entry staff oversee strategies to reduce first time homelessness

*3A-2. Length of Time Homeless as Reported in HDX.

  Applicants must:

Report Average Length of Time Individuals and Persons in Families Remained Homeless as Reported in HDX.	30

3A-2a. Strategy to Reduce Length of Time Homeless.

  Applicants must:
  1. describe the CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
  2. describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
  3. 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. From 2017-18, the average LOT homeless increased by 5 days; from 25 to 30 days from ES and SH, and from 32 to 37 days from ES, SH and TH. The CoC employs several strategies to reduce length of time homeless; a) emphasizing outreach and relationship building with landlords to create a sufficient stock of units available to move homeless households to PH as quickly as possible; b) Shelters are required to conduct the VSPDAT within 72 hours of entry for rapid referral to the prioritization list if appropriate and to ensure that housing plan is in place as quickly as possible to ensure that accessing housing is the focus of the shelter placement from day one; c) length-of-time homeless is heavily weighted in coordinated entry prioritization, as is chronic homeless status. d) increasing resources for RRH projects which quickly move people to permanent housing; e) developing and implementing Move On strategies which will open PSH slots reducing the waiting time to

access PSH; f) case reviews of all persons referred out from prioritization list who do not have a housing move in date within 30 days to problem solve barriers to accessing housing; g) CE has created a Housing Navigator position that will work with the people at top of prioritization list to assist with getting any required documentation and with housing search.
2. HMIS data, third party verification and self-reporting is used to determine length of time homeless-persons who have been homeless the longest are prioritized higher on list. These variables account for approximately 25% of the prioritization score. Further, if individuals are prioritized as equally vulnerable, they are prioritized such that the individual with the longest current homeless event are referred first. This is intended to move individuals as quickly as possible from homelessness to permanent housing;
3. Coordinated Entry Workgroup and Prioritization Coordinator are responsible for oversight of these strategies.

*3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX.

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	48%
2. Report 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 as reported in HDX.	97%

3A-3a. Exits to Permanent Housing Destinations/Retention of Permanent Housing.

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;
 2. provide the organization name or position title responsible for overseeing 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;
 3. 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; and
 4. provide the organization name or position title responsible for overseeing 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. From FY 2017 to FY 2018, the % of persons in SO that exited to PH increased from 36% to 62%; the % of persons who exited ES, SH, TH and PH-RRH who exited to PH increased from 43% to 48%. % of persons in PH who

exited to or retained PH remained the same at 93%. PH programs have adopted the community written standards which include commitment to discharging a participant in only the most serious situations. CoC has been encouraging programs to utilize Housing First and harm reduction principles that reduce discharges due to relapse, behavioral health issues, etc. Reallocation of funding for adult TH housing programs to create a new joint TH-RRH is expected to increase discharges to PH and retention in PH. After analyzing VSPDAT scores, CoC is increasing RRH programs that are also expected to increase exits to PH from ES.
2. Emergency Shelter Providers Workgroup and MCDHS staff are responsible for oversight of these strategies.
3. From 2017 – 18, the % of persons in PH who retain their PH or exit to other PH increased from 93% to 97%. The strategies the CoC employs are a)utilization of Housing First and harm reduction principles which reduce negative terminations from programs, developing and implementing Move On strategies that move people from PSH to PH opportunities, and encourage partnerships with homeless providers and non-profit developers to create additional affordable housing resources
4. PSH Workgroup and CoC Board/Staff are responsible for oversight of these strategies.

*3A-4. Returns to Homelessness as Reported in HDX.

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX.	10%
2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX.	6%

3A-4a. Returns to Homelessness–CoC Strategy to Reduce Rate.

Applicants must:
1. describe the strategy the CoC has implemented to identify 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 return to homelessness.
(limit 2,000 characters)

1. Analysis of HMIS data identifies homeless persons who return to homelessness. Detail level reports for the SysPM for returns to homelessness and the coordinated entry prioritization list give the CoC the ability to identify those people returning to homelessness. Those that return to homelessness are more likely to have short program lengths of stay and/or discharges due to behavioral issues or accessed PH in the private market that was not affordable.
2. CoC has implemented a number of strategies to reduce the rate of returns: a)Coordinated Entry attempts to ensure that homeless persons are referred to

the program(s) that will best meet their needs; b) CoC is providing increased support to programs to adopt Housing First principles that will reduce terminations which often result in returns to homelessness. When violations rise to the level where termination can't be prevented; programs are encouraged to provide assistance to the participant in securing other permanent housing or possible transfer to another program that could better meet the needs of the household; c) increasing the number of RRH programs in the CoC, with the goal of providing RRH assistance to persons who score 4+ on VSPDAT. RRH assistance is focused on housing stabilization; d) CoC encourages partnering with community based organizations and investing non-CoC resources in stabilizing people in permanent housing; support and be active in community initiatives to reduce evictions and create housing policies that support increasing affordable housing resources and deconcentration of poverty; e) building partnerships and collaborations with health care system to connect homeless persons, particularly those that exit ES to temporary situations or PH in the private market to Health Home Care Coordinators to provide additional support transitioning and sustaining in permanent housing.
3. PSH Workgroup and CoC Staff are responsible for oversight of these strategies.

*3A-5. Cash Income Changes as Reported in HDX.

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	12%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	41%

3A-5a. Increasing Employment Income.

Applicants must:
1. describe the CoC's strategy to increase employment income;
2. describe the CoC's strategy to increase access to employment;
3. describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
4. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase jobs and income from employment.
(limit 2,000 characters)

1. CoC employs several stratgies to increase employment income. While only 12% of CoC funded program participants increased employment income; 23% of participants had employment income. a) CoC encourages programs to focus on employment goals; CoC is currently piloting and hopes to fully implement (2020) the use an acuity index for all CoC funded programs that includes an Income and Employment category which will become part of the case plan.

Performance measures will be developed to use index to measure progress with employment goals and recruits employment programs to attend HSN meetings, provide info about their programs and encourage referrals from homeless providers. Many employment opportunities here are in the service and health care sectors that do not provide a living wage. The CoC through its involvement with the Rochester Monroe Anti-Poverty Initiative is trying to address this issue with employers.

4. CoC Programs Coordinator and Monitoring Committee is responsible for oversight of these strategies.

3A-5b. Increasing Non-employment Cash Income.

Applicants must:
1. describe the CoC's strategy to increase non-employment cash income;
2. describe the CoC's strategy to increase access to non-employment cash sources;
3. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase non-employment cash income.

1. CoC employs several strategies to increase non-employment cash income. a) CoC Programs Coordinator is co-chairing the SOAR Committee that is engaged in increasing SOAR training for provider staff and tracking of SSI/SSD applications. Moving eligible people from public assistance to SSI/SSD nearly doubles their income and provides employment incentives; b) MCDHS has developed the MCDHS 101 curriculum that provides in depth information on navigating mainstream benefits; training is provided at least quarterly to ensure that case managers know how to assist people with accessing and maintaining benefits. Prioritizing those with the highest needs and Housing First principles have increased the number of people who are accessing CoC programs with no income; making access to mainstream benefits crucial to accessing and sustaining PH; c) a focus of HMIS training is teaching users how to correctly enter income information in HMIS at program entry and exit; and the importance of completing annual and interim updates to capture changes in source and amount of income; d) Annual monitoring of CoC funded projects and local application scoring is highly weighted on performance measures; accessing and increasing non-employment cash income affects scoring and ranking of projects; e) implementation of the Acuity Index described in 3A-5a will require providers to monitor income sources and amounts.

2. LAWNY is a strong CoC partner that represents participants in fair hearings regarding their access to and maintenance of public benefits. LAWNY can't serve all who need represenation so provide training to providers so they can advocate for and assist participants in navigating systems to access benefits.

3. Homeless Services Network is the primary organization responsible for overseeing these strategies.

3A-5c. Increasing Employment. Attachment Required.

Applicants must describe how the CoC:
1. promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and

2. is working with public and private organizations to provide meaningful, education and training, on-the-job training, internship, and employment opportunities for residents of permanent supportive housing that further their recovery and well-being.
(limit 2,000 characters)

1. The CoC and Homeless Services Network utilize email list serves and website to share information with providers regarding events in the community such as job fairs, employment and training program information, etc. and encourage providers to get their participants to attend them. Program participants who receive public assistance and are assessed as being employable are able to access a variety of employment programming through MCDHS. These include job club for soft skill development and job search, referral to vocational assessment, and referral to training opportunities. SOAR case managers can inform participants with SSI/SSD income on work incentives available that allow people to work and still receive benefits, then transition slowly from SSI/SSD; Veterans Outreach Center an active CoC partner offers a variety of employment services for homeless veterans and has the highest % of participants with employment income. Rochester Rehabilitation Services, Inc. attends monthly Homeless Services Network meetings to provide information on employment and training opportunities, provides a full array of employment and training services - OJT, job coaching, etc.
2. Mental health and substance abuse providers have fully incorporated peers into their treatment plans and it is increasingly being used by homeless providers providing meaningful employment for persons with lived experience. The CoC is committed to improving employment outcomes. An Employment/Training Workgroup is being formed by the CoC that will bring more partners to the table to work on addressing employment outcomes for participants. Will work on creating new partnerships with employers, temporary employment agencies, etc. and improving partnerships with community based employment and training programs. These new initiatives will align with our Moving On strategies.

3A-5d. Promoting Employment, Volunteerism, and Community Service.

Applicants must select all the steps the CoC has taken to promote employment, volunteerism and community service among people experiencing homelessness in the CoC's geographic area:

1. The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	☐
2. The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery).	☐
3. The CoC trains provider organization staff on connecting program participants with formal employment opportunities.	☐
4. The CoC trains provider organization staff on volunteer opportunities for program participants and people experiencing homelessness.	☐
5. The CoC works with organizations to create volunteer opportunities for program participants.	☐
6. The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	☐
7. Provider organizations within the CoC have incentives for employment.	☐
8. The CoC trains provider organization staff on helping program participants budget and maximize their income to maintain stability in permanent housing.	☐

3A-6. System Performance Measures   05/30/2019
Data–HDX Submission Date

**Applicants must enter the date the CoCs
submitted its FY 2018 System Performance
Measures data in HDX. (mm/dd/yyyy)**

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

Instructions

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Warning! The CoC Application score could be affected if information is incomplete on this formlet.

3B-1. Prioritizing Households with Children.

 Applicants must check each factor the CoC currently uses to prioritize households with children for assistance during FY 2019.

1. History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	X
2. Number of previous homeless episodes	X
3. Unsheltered homelessness	X
4. Criminal History	X
5. Bad credit or rental history	X
6. Head of Household with Mental/Physical Disability	X

3B-1a. Rapid Rehousing of Families with Children.

 Applicants must:
 1. describe how the CoC currently rehouses every household of families with children within 30 days of becoming homeless that addresses both housing and service needs;
 2. describe how the CoC addresses both housing and service needs to ensure families with children successfully maintain their housing once

assistance ends; and
 3. provide the organization name or position title responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of them becoming homeless.
(limit 2,000 characters)

 1. Households with children that cannot be diverted, are referred to shelter. Within 72 hours of entry, the VFSPDAT is conducted and a housing plan is started with a focus on accessing mainstream resources for income/services and housing search activities. The majority of families will self-resolve by quickly finding housing or another family member or friend to stay with. While this reduces LOT homeless, a solutions are often temporary and could result in return to homelessness. If VFSPDAT score is in the range for RRH and PSH the family is referred to the prioritization list for placement into housing w/services that will best meet their needs. A new initiative, a partnership with MCDHS and Health Home Care providers will have enrollers stationed at DHS which will connect eligible families with health home care coordinators that will stay involved with the families when they leave shelter. This added support to coordinate health and social services for families will reduce returns to homelessness particularly for those who leave shelter.
2. During a family's shelter stay a needs assessment and an independent living plan is developed. Referrals are made to community based programs as needed based on the needs assessment; i.e. – substance abuse, mental health, etc. and with new initiative most will have been linked to a health home care manager who will stay involved once in PH. Families who enter RRH will have case management for six months – one year that will make sure that appropriate linkages have been made to service providers and work on educational and employment goals. Families referred to PSH programs will have more intensive case management and will likely need to stabilize in recovery programs before addressing employment and educational goals. Providing case management and wrap around services will stabilize people in housing.
3. The ES and RRH workgroups are responsible for oversight of these strategies.

3B-1b. 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 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 any protected classes under the Fair Housing Act, and consistent with 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing.

1. CoC conducts mandatory training for all CoC- and ESG-funded housing and services providers on these topics.	☐
2. CoC conducts optional training for all CoC- and ESG-funded housing and service providers on these topics.	X
3. CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	X

4. CoC has worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within the CoC geographic area that might be out of compliance and has taken steps to work directly with those facilities to come into compliance.	X

3B-1c. Unaccompanied Youth Experiencing Homelessness–Addressing Needs.

Applicants must indicate whether the CoC's strategy to address the unique needs of unaccompanied youth experiencing homelessness who are 24 years of age and younger includes the following:

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

3B-1c.1. Unaccompanied Youth Experiencing Homelessness–Prioritization Based on Needs.

Applicants must check all that apply that describes the CoC's current strategy to prioritize unaccompanied youth based on their needs.

1. History of, or Vulnerability to, Victimization (e.g., domestic violence, sexual assault, childhood abuse)	X
2. Number of Previous Homeless Episodes	X
3. Unsheltered Homelessness	X
4. Criminal History	X
5. Bad Credit or Rental History	X

3B-1d. Youth Experiencing Homelessness–Housing and Services Strategies.

Applicants must describe how the CoC increased availability of housing and services for:
1. all youth experiencing homelessness, including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive; and
2. youth experiencing unsheltered homelessness including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive.
(limit 3,000 characters)

1.The CoC has applied for HUD Homeless Youth Demonstration funding for the last three rounds but unfortunately, we were not awarded. As part of that process a Youth Action Board (STOMP) has been formed and there is now a dedicated seat on the CoC Board for a representative from our public child welfare agency, Monroe County Dept. of Human Services (MCDHS). The CoC, Homeless Youth (HY) providers and organizations/systems that interact with homeless youth are committed to continuing planning efforts to develop new strategies to end Youth Homelessness. Our HY system provides a continuum of housing and services from street outreach, emergency shelter, transitional housing, and a dedicated RRH program for Transition Age Youth (18 - 24) recently ended its 2nd year of operation to improve access to permanent housing. HY providers work with homeless youth to connect to safe, supportive adults in the community who will continue to provide support to the youth after exiting from programs. These programs are effective: 80% of participants exit to safe housing, youth are linked to mainstream benefits and community resources. Our CoC is committed to the goal of ending Youth and Family homelessness and will be convening a workgroup to review the new Federal Strategic Plan "Home, Together" to review objectives and determine appropriate strategies and goal for ending youth homelessness for our community.

2.The Center for Youth Services (CFY) is the leading agency in our CoC for serving unaccompanied minors and homeless young adults. The CFY has partnered with the CoC and other community funders to expand, enhance, and re-envision services for homeless youth in our county. These initiatives include:
•Innovative Models; New Beginning House is an independent living program for young men of color age 18 – 24 who have not been served well by other systems and are now homeless. Partnering with a private community foundation, this program allows each young man to tailor their services and supports to their unique needs and goals to stabilize in permanent housing.
•Expanding Transitional Housing; In 2017, The Center leveraged transitional housing funding from both HUD and HHS to increase the number of transitional housing beds from 10 to 16 while also expanding the services and supports delivered on site in a building completely occupied by the program.
•Enhancing Services to Vulnerable Youth; In 2018, The Center kicked off a campaign to partner with local funders and the City Courts to provide intensive, trauma-informed, low-barrier housing for LGBTQ and trafficked youth in our community. These youth often go unsheltered and are vulnerable targets for predatory adults. This new house will open in 2019.

The collaboration with the CoC around Coordinated Entry, HMIS, and technical assistance, has allowed The Center to take on these initiatives knowing there was community support and expertise that can be drawn on as these programs evolve.

3B-1d.1. Youth Experiencing Homelessness–Measuring Effectiveness of Housing and Services Strategies.

 Applicants must:
 1. provide evidence the CoC uses to measure each of the strategies in question 3B-1d. 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 both strategies in question 3B-1d.; and
 3. describe why the CoC believes the measure it uses is an appropriate

way to determine the effectiveness of both strategies in question 3B-1d. (limit 3,000 characters)

Measures (using HMIS data) used to track effectiveness include increasing exits to safe housing, reducing length of time homeless and repeat episodes of homelessness, increasing access to mainstream benefits and community resources. For FY2017, 408 participants (199) Homeless Youth and (209)Transitional Age Youth (18-24) were served in programs exclusively serving youth. 323 Youth exited programs; 60% had successful exits - 130 went to permanent housing and 54 exited to other safe housing opportunities. Homeless youth are a very transient population so it is very common for a shelter or TH participant to not return because they have found another friend or familiy member to take them in.

The Center for Youth is just beginning its 2nd full year of operation of a Transitional Age Youth RRH program that is proving to be successful and serving a much higher number of youth than their projected number to be served. Moving forward there is consideration being given to serving less participants and providing case management and rental assistance for a longer period of time.

The Center for Youth (CFY) and CoC staff have spoken with the Jim Casey Initiative in partnership with A Way Home America and the America Bar Association that is looking at improving housing and services for homeless youth under the age of 18. We are excited that we were invited to Washington, DC on 9/25/2018 to participate in a day long session that will hear about current best practices being used across the country, what is known now about minor youth homelessness and strategize how to prevent minor youth homelessness. A formerly homeless youth from a CFY program will also be attending that will add lived experience to the discussion in DC. Hope to bring back some new ideas and possible next steps that could possibly lead to some new funding.

3B-1e. Collaboration–Education Services.

Applicants must describe:

1. the formal partnerships with:
   a. youth education providers;
   b. McKinney-Vento LEA or SEA; and
   c. school districts; and

2. how the CoC collaborates with:
   a. youth education providers;
   b. McKinney-Vento Local LEA or SEA; and
   c. school districts.
(limit 2,000 characters)

The RCSD, the largest school district in the CoC and the CFY New Beginnings School (alternative educational program), are members of HSN, and members of the HSN Steering Committee, to ensure ongoing communication around educational needs of homeless children in the shelter system who are with their parent(s) and unaccompanied youth. All CoC projects that serve families with children have designated staff that is responsible to ensure that educational needs of the children are met in a timely manner. ES and TH programs that serve unaccompanied youth and young adults have effective relationships with the McKinney-Vento Liaisons at both City and suburban school districts and

community college and university staff, and have policies and procedures detailing how youth in their programs are to remain and/or be connected to educational services. There is an annual training per year for homeless providers and McKinney-Vento contacts in the county's school district to review processes and to learn what services homeless families can request.

3B-1e.1. Informing Individuals and Families Experiencing Homeless about Education Services Eligibility.

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

For all CoC and ESG funded programs that serve persons less than 19 years of age or less than 22 if they have/had an Individualized Education Plan (IEP), CoC Written Standards require that the programs identify a staff person(s) whose reponsibility is to inform participants of their eligibility for educational services; assist as needed with obtaining school supplies and/or clothing that are needed to return/stay in school, assist as needed with providing/coordinating transportation so that students miss the least number of days as possible at both entry into program and at exit. Transportation also includes any after school programs/activities that the student participated in prior to becoming homeless. The two providers of Head Start and Early Head Start are members of the Homeless Services Network and provide information on their programs to the membership.

3B-1e.2. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.

Applicant must indicate whether the CoC has an MOU/MOA or other types of agreements with listed providers of early childhood services and supports and may add other providers not listed.

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

Applicants must select Yes or No for all of the agreements listed in 3B-

1e.2.

3B-2. Active List of Veterans Experiencing Homelessness.

Applicant must indicate whether the CoC uses an active list or by-name list to identify all veterans experiencing homelessness in the CoC.   Yes

3B-2a. VA Coordination–Ending Veterans Homelessness.

Applicants must indicate whether the CoC is actively working with the U.S. Department of Veterans Affairs (VA) and VA-funded programs to achieve the benchmarks and criteria for ending veteran homelessness.   Yes

3B-2b. Housing First for Veterans.

Applicants must indicate whether the CoC has sufficient resources to ensure each veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach.   Yes

3B-3. Racial Disparity Assessment. Attachment Required.

Applicants must:
1. select all that apply to indicate the findings from the CoC's Racial Disparity Assessment; or
2. select 7 if the CoC did not conduct a Racial Disparity Assessment.

1. People of different races or ethnicities are more likely to receive homeless assistance.	X
2. People of different races or ethnicities are less likely to receive homeless assistance.	
3. People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	
4. People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	
5. There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	X
6. The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	
7. The CoC did not conduct a racial disparity assessment.	

3B-3a. Addressing Racial Disparities.

Applicants must select all that apply to indicate the CoC's strategy to

address any racial disparities identified in its Racial Disparities Assessment:

1. The CoC is ensuring that staff at the project level are representative of the persons accessing homeless services in the CoC.	☐
2. The CoC has identified the cause(s) of racial disparities in their homeless system.	☐
3. The CoC has identified strategies to reduce disparities in their homeless system.	X
4. The CoC has implemented strategies to reduce disparities in their homeless system.	☐
5. The CoC has identified resources available to reduce disparities in their homeless system.	X
6: The CoC did not conduct a racial disparity assessment.	☐

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

Instructions:

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4A-1. Healthcare–Enrollment/Effective Utilization

Applicants must indicate, for each type of healthcare listed below, whether the CoC assists persons experiencing homelessness with enrolling in health insurance and 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:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

4A-1a. Mainstream Benefits.

 Applicants must:
1. describe how the CoC systematically keeps program staff up to date regarding mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within the geographic area;
 2. describe how the CoC disseminates the availability of mainstream resources and other assistance information to projects and how often;
 3. describe how the CoC works with projects to collaborate with healthcare organizations to assist program participants with enrolling in

health insurance;
4. describe how the CoC provides assistance with the effective utilization of Medicaid and other benefits; and
5. 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. All CoC programs provide participants with assistance in accessing mainstream benefits. A single application is utilized for SNAP, TANF, Medicaid and other public benefits; case managers throughout the CoC are SOAR trained to assist with SSI/SSD applications and/or appeals; and Legal Assistance of WNY (LAWNY) is a crucial CoC partner that provides legal services for persons unable to access benefits for which they are eligible.
2. MCDHS provides annual DHS 101 Training for community-based case managers that provides detailed training on the public assistance process and regulations. This training has proven to be invaluable for Case Managers in their advocacy efforts to get people linked to cash and non-cash mainstream benefits as quickly as possible. The Homeless Services Network (HSN) is the primary vehicle for keeping program staff up to date on changes or new services that are available and has a Training Committee that schedules DHS 101 and other skills-based trainings throughout the year. HSN Steering Committee schedules presentations on new programs and resources for each meeting.
3. The CoC H2 (Health & Housing Committee) is currently working on activities that increase collaboration between homeless providers and Health Home Care Managers to ensure that health care benefits are maintained and that health care services are coordinated for those with behavioral health and chronic health conditions.
4. The H2 committee also encourages partnerships with homeless and health care providers to address social determinants of health. Examples currently underway are imbedded health home care managers at shelters, increased resources at shelters for persons with chronic health conditions, and identifying high utilizers of Medicaid to provide support to reduce ED visits and hospitalizations.
5. HSN Steering Committee and H2 Committee are responsible for overseeing strategies regarding mainstream benefits and collaboration with Health Care systems

4A-2. Lowering Barriers to Entry Data:

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 has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition.	42
2. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	41
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	98%

4A-3. Street Outreach.

Applicants must:
1. describe the CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
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. SO programs have increased from one volunteer group that went out monthly to known locations to six outreach programs that are out multiple times per week. Outreach teams continue to go to known locations, as well as to new locations as requested where there is concern that there may be persons living in uninhabitable locations, and learn of new locations from homeless participants. SO teams provide personal care products, socks, blankets etc. to those that they encounter and are working engaging. SO assists people with accessing shelter and housing as well as navigating them through the systems providing mainstream income supports. Chronic Homeless Committee meets monthly. 1st hour of the meeting is a case conference where the different SO Teams share info on specific indivduals. Has been very helpful in finding people who have gotten referred to housing through Coordinated Entry and for checking on the well-being of individuals who are extremely vulternable. 2nd hour provides updates on numbers of people and locations where unsheltered have been found Organizes clean ups at encampments or under bridges.
2. CoC Street Outreach (SO) activities cover 100% of the CoC's geographic area.
3. SO is conducted throughout the day and evening hours. There is a schedule of locations they will be at on specific days and time, ie. - library, known locations, etc. so that people know where they are going to be if they need asssitance. When temperatures fall consistently below 32 degrees; additional outreach is conducted to get people into shelter. A warm up center is going to be available this winter and will be a new resource increase opportunities for engagement.
4.

4A-4. RRH Beds as Reported in 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 2018 and 2019.

	2018	2019	Difference
RRH beds available to serve all populations in the HIC	576	591	15

4A-5. Rehabilitation/Construction Costs–New   No
                        Projects.

Applicants must indicate whether any new project application the CoC ranked and submitted in its CoC Priority Listing in the FY 2019 CoC Program Competition is requesting $200,000 or more in funding for housing rehabilitation or new construction.

4A-6. Projects Serving Homeless under Other Federal Statutes.   No

Applicants must indicate whether the CoC is 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.

Submission Summary

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

Page	Last Updated
1A. Identification	09/15/2019
1B. Engagement	09/25/2019
1C. Coordination	09/26/2019
1D. Discharge Planning	No Input Required
1E. Local CoC Competition	09/24/2019
1F. DV Bonus	No Input Required
2A. HMIS Implementation	09/26/2019
2B. PIT Count	09/24/2019
3A. System Performance	09/26/2019
3B. Performance and Strategic Planning	09/26/2019
4A. Mainstream Benefits and Additional Policies	09/24/2019
Submission Summary	No Input Required