

## Before Starting the CoC Application

The CoC Consolidated Application is made up of two parts: the CoC Application and the CoC Priority Listing, with all of the CoC's project applications either approved and ranked, or rejected. The Collaborative Applicant is responsible for submitting both the CoC Application and the CoC Priority Listing in order for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for:

- Reviewing the FY 2015 CoC Program Competition NOFA in its entirety for specific application and program requirements.
- Using the CoC Application Detailed Instructions for assistance with completing the application in e-snaps.
- Answering all questions in the CoC Application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing so, please keep in mind that:
  - This year, CoCs will see that a few responses have been imported from the FY 2013/FY 2014 CoC Application. Due to significant changes to the CoC Application questions, most of the responses from the FY 2013/FY 2014 CoC Application could not be imported.
  - For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses.
  - For other questions, the Collaborative Applicant must be aware of responses provided by project applicants in their Project Applications.
  - Some questions require that the Collaborative Applicant attach a document to receive credit. This will be identified in the question.
  - All questions marked with an asterisk (\*) are mandatory and must be completed in order to submit the CoC Application.

For Detailed Instructions click [here](#).

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

### **Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**1A-1. CoC Name and Number:** OH-503 - Columbus/Franklin County CoC

**1A-2. Collaborative Applicant Name:** Community Shelter Board

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

**1A-4. HMIS Lead:** Community Shelter Board

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**1B-1. From the list below, select those organizations and persons that participate in CoC meetings. Then select "Yes" or "No" to indicate if CoC meeting participants are voting members or if they sit on the CoC Board. Only select "Not Applicable" if the organization or person does not exist in the CoC's geographic area.**

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board	Sits on CoC Board
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
Law Enforcement	Yes	Yes	No
Local Jail(s)	No	No	No
Hospital(s)	Yes	Yes	No
EMT/Crisis Response Team(s)	Yes	No	No
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes	Yes
Public Housing Authorities	Yes	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	No	No
Non-CoC Funded Youth Homeless Organizations	Yes	No	No
School Administrators/Homeless Liaisons	Yes	Yes	No
CoC Funded Victim Service Providers	Not Applicable	Not Applicable	Not Applicable
Non-CoC Funded Victim Service Providers	Yes	Yes	No
Street Outreach Team(s)	Yes	Yes	No
Youth advocates	Yes	No	No
Agencies that serve survivors of human trafficking	Yes	No	No
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Veterans Organizations	Yes	Yes	Yes
Faith-Based Organizations	Yes	Yes	Yes
Businesses	Yes	Yes	Yes

**1B-1a. Describe in detail how the CoC solicits and considers the full range of opinions from individuals or organizations with knowledge of homelessness in the geographic area or an interest in preventing and ending homelessness in the geographic area. Please provide two examples of organizations or individuals from the list in 1B-1 to answer this question.  
(limit 1000 characters)**

The CoC comports with HUD requirements to include a wide array of stakeholders in the governing body. This diverse body ensures comprehensive stewardship for CoC strategies and promotes collaboration and effective use of community knowledge and shared resources. The CoC leverages representatives from the Veterans Administration and Veterans Service Commission to integrate their expertise into efforts to end veteran homelessness. Both entities participate in the Strategy Group formed around the Mayor's Challenge to End Veteran Homelessness. Affordable housing developers - Affordable Housing Trust Corporation and Ohio Capital Corporation for Housing - inform decisions on long-term housing availability and development of permanent supportive housing. These entities, alongside Community Shelter Board and the Columbus Metropolitan Housing Authority are funding members of the Affordable Housing Alliance of Central Ohio with the aim of adding 27,000 low-cost apartments in the next decade.

**1B-1b. List Runaway and Homeless Youth (RHY)-funded and other youth homeless assistance providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.**

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings within the last 12 months (between October 1, 2014 and November 15, 2015).	Sat on the CoC Board as active member or official at any point during the last 12 months (between October 1, 2014 and November 15, 2015).
Huckleberry House	Yes	No	No
Star House	No	No	No



**1B-1c. List the victim service providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.**

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings within the last 12 months (between October 1, 2014 and November 15, 2015).	Sat on CoC Board as active member or official at any point during the last 12 months (between October 1, 2014 and November 15, 2015).
Lutheran Social Services - CHOICES	No	No
The Center for Family Safety and Healing	Yes	No

**1B-2. Does the CoC intend to meet the timelines for ending homelessness as defined in Opening Doors?**

Opening Doors Goal	CoC has established timeline?
End Veteran Homelessness by 2015	Yes
End Chronic Homelessness by 2017	Yes
End Family and Youth Homelessness by 2020	Yes
Set a Path to End All Homelessness by 2020	Yes

**1B-3. How does the CoC identify and assign the individuals, committees, or organizations responsible for overseeing implementation of specific strategies to prevent and end homelessness in order to meet the goals of Opening Doors?  
(limit 1000 characters)**

The CoC identifies partners who could benefit from or assist with strategy advancement. Community Shelter Board (CSB) is tasked by the CoC with the responsibility of overseeing implementation of all strategies to end homelessness. Ad hoc committees are established as needed. Committees meet regularly to discuss programs, performance, and strategy. Committees tasked with ending family, youth, chronic homelessness, and all homelessness are Adult System Operations Workgroup, Family System Operations Workgroup, and Permanent Supportive Housing Roundtable. Columbus joined the Mayors' Challenge to End Veteran Homelessness. CSB and the City of Columbus convened an ad hoc committee and held several strategy meetings that included more than 30 stakeholders to develop the plan to end veteran homelessness. The City and CSB issued an open invitation to all interested entities. The City also facilitates a "camp conversation" workgroup with outreach and housing providers to end street homelessness.

**1B-4. Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for any new projects in 2015. (limit 1000 characters)**

The CoC advertised the Notice of Funding Availability on the Community Shelter Board (Collaborative Applicant) website and invited any entity interested in applying for funding to contact the Collaborative Applicant. Community Shelter Board also issued an electronic communication to a wide variety of non-profit entities that have an interest in working with the homeless population, inviting them to submit concept proposals. The CoC welcomes participation from entities that have not previously received funds and proactively looks for opportunities to integrate more partners into CoC efforts to end homelessness. For example, the electronic communication included youth and family providers that do not currently receive CoC funds. Also, new bonus funding was awarded in the 2014 competition to an entity that did not previously receive CoC funds but had the capacity to do so. The CoC considers the experience, capacity, and stability of an organization when considering new projects.

**1B-5. How often does the CoC invite new members to join the CoC through a publicly available invitation?**

Annually

## 1C. Continuum of Care (CoC) Coordination

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**1C-1. Does the CoC coordinate with other Federal, State, local, private and other entities serving homeless individuals and families and those at risk of homelessness in the planning, operation and funding of projects? Only select "Not Applicable" if the funding source does not exist within the CoC's geographic area.**

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
HeadStart Program	Yes
Other housing and service programs funded through Federal, State and local government resources.	Yes

**1C-2. The McKinney-Vento Act, as amended, requires CoCs to participate in the Consolidated Plan(s) (Con Plan(s)) for the geographic area served by the CoC. The CoC Program interim rule at 24 CFR 578.7(c)(4) requires that the CoC provide information required to complete the Con Plan(s) within the CoC's geographic area, and 24 CFR 91.100(a)(2)(i) and 24 CFR 91.110(b)(1) requires that the State and local Con Plan jurisdiction(s) consult with the CoC. The following chart asks for information about CoC and Con Plan jurisdiction coordination, as well as CoC and ESG recipient coordination.**

CoCs can use the CoCs and Consolidated Plan Jurisdiction Crosswalk to assist in answering this question.

	Number	Percentage
Number of Con Plan jurisdictions with whom the CoC geography overlaps	2	
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	2	100.00 %
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	2	100.00 %
How many of the Con Plan jurisdictions are also ESG recipients?	2	
How many ESG recipients did the CoC participate with to make ESG funding decisions?	2	100.00 %

How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	2	100.00 %
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**1C-2a. Based on the responses selected in 1C-2, describe in greater detail how the CoC participates with the Consolidated Plan jurisdiction(s) located in the CoC's geographic area and include the frequency, extent, and type of interactions between the CoC and the Consolidated Plan jurisdiction(s).  
(limit 1000 characters)**

The City of Columbus and Franklin County are committed partners in ending homelessness in our community. The City and County provide significant funding to CSB towards the goal of ending homelessness. The CoC and CoC Board – both of which meet quarterly - include representatives from the City and County. CSB meets monthly with City and County leadership for at least an hour at a time to discuss the progress of CoC strategies and strategic planning. Weekly electronic communications and phone calls with both City and County representatives address funding issues, PR, planning, and system and program performance. CSB staff spend approximately 10 hours a week in face to face, electronic, or phone interactions with various City and County staff and elected officials. Last year we had more than 120 face to face visits with elected officials. This intense collaboration allows the community to maximize shared resources, coordinate priorities, and advance the goal of ending homelessness.

**1C-2b. Based on the responses selected in 1C-2, describe how the CoC is working with ESG recipients to determine local ESG funding decisions and how the CoC assists in the development of performance standards and evaluation of outcomes for ESG-funded activities.  
(limit 1000 characters)**

CSB leads the Columbus/Franklin County community efforts to end homelessness. The City of Columbus and Franklin County grant all of their ESG allocations to CSB. CSB consults with the City and County on the allocation of ESG funds in accordance with the CoC Plan and Consolidated Plan. The CoC approves all allocations. After approval, the City and County contract with CSB for ESG services. Annual performance standards for ESG programs are developed by CSB and presented to the CoC for approval. Quarterly performance evaluations that compare actual results with performance standards are reviewed by the CoC, City, and County. CSB is the collaborative applicant for all State ESG rapid re-housing funding in the County. CSB certifies each local CoC applicant for State ESG funding, on behalf of the CoC and provides performance outcomes. CSB serves on the State's Advisory Board on homelessness programs as the CoC representative and provides input on local system goals and objectives.

**1C-3. Describe the how the CoC coordinates with victim service providers and non-victim service providers (CoC Program funded and non-CoC funded) to ensure that survivors of domestic violence are provided housing and services that provide and maintain safety and security. Responses must address how the service providers ensure and maintain the safety and security of participants and how client choice is upheld. (limit 1000 characters)**

Our Coordinated Point of Access (CPOA) provides 24/7 phone access for at risk and homeless households. The CPOA staff asks questions to assess homeless status, including a question on domestic violence. If a victim of domestic violence is identified, the CPOA conducts a warm transfer to CHOICES, our domestic violence shelter. The CPOA does not collect any data on the caller and the warm transfer ensures their privacy. Households can also call the CHOICES hotline directly and bypass the homeless system. CHOICES accommodates all households in a secure building and offers applicable services. CHOICES collects data outside HMIS and keeps it private and secure. Only the first name and the initial of the last name are used when coordinating care. Homeless CHOICES households that do not access the homeless system have access to scattered-site PSH and financial assistance managed by CSB (CoC) that helps pay for rent and utilities so that they can move into any housing, based on client choice.

**1C-4. List each of the Public Housing Agencies (PHAs) within the CoC's geographic area. If there are more than 5 PHAs within the CoC's geographic area, list the 5 largest PHAs. For each PHA, provide the percentage of new admissions that were homeless at the time of admission between October 1, 2014 and March 31, 2015, and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program. (Full credit consideration may be given for the relevant excerpt from the PHA's administrative planning document(s) clearly showing the PHA's homeless preference, e.g. Administration Plan, Admissions and Continued Occupancy Policy (ACOP), Annual Plan, or 5-Year Plan, as appropriate).**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 10/1/14 to 3/31/15 who were homeless at entry	PHA has General or Limited Homeless Preference
Columbus Metropolitan Housing Authority	7.00%	Yes-HCV

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

**1C-5. Other than CoC, ESG, Housing Choice Voucher Programs and Public Housing, describe other subsidized or low-income housing opportunities that exist within the CoC that target persons experiencing homelessness.  
(limit 1000 characters)**

Homeport develops affordable housing using low income housing tax credits and private investments and provides support to promote long-term stability and health. Homeport organizes out-of-school programs, free produce markets, and school supply drives. PACT is a non-profit partnership led by The Ohio State University that creates a sustainable, healthy community where residents have access to safe and affordable housing, quality healthcare and education, and employment opportunities on the Near East Side of Columbus. The Southern Gateway Initiative includes new housing, health, and wellness facilities and upgraded neighborhood infrastructure in the south side of Columbus. The Initiative is funded by City of Columbus, Community Development for All People, Nationwide Children's Hospital, United Way of Central Ohio, The Columbus Foundation, Franklin County, and other private organizations. The homeless system establishes MOUs and agreements with these entities for direct referral.

**1C-6. Select the specific strategies implemented by the CoC to ensure that homelessness is not criminalized in the CoC's geographic area. Select all that apply. For "Other," you must provide a description (2000 character limit)**

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input checked="" type="checkbox"/>
No strategies have been implemented:	<input type="checkbox"/>
Outreach Collaborative strategy that includes the City of Columbus and Columbus Police Department	<input checked="" type="checkbox"/>
Crisis Intervention Team training of police officers, where a Community Shelter Board representative presents on appropriate engagement of homeless individuals and available resources.	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**1D-1. Select the systems of care within the CoC's geographic area for which there is a discharge policy in place that is mandated by the State, the CoC, or another entity for the following institutions? Check all that apply.**

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

**1D-2. Select the systems of care within the CoC's geographic area with which the CoC actively coordinates to ensure that institutionalized persons that have resided in each system of care for longer than 90 days are not discharged into homelessness. Check all that apply.**

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

**1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) and explain how the CoC plans to coordinate with the institution(s) to ensure persons discharged are not discharged into homelessness.  
(limit 1000 characters)**

The CoC does not actively coordinate with correctional facilities. Community Shelter Board participated in a local initiative called the Criminal Justice & Behavioral Health Systems Improvement Project by offering HMIS homeless data for an across-the-system data match and planning support. The 5-year data match with the justice system and the mental health system showed that 23% of people entering the shelter system had stays in jail in the previous year. However, the data match showed that individuals exiting correctional facilities are not discharged to shelter; the average time lapse between facility exit and shelter entry in 2012 was 441 days. The median time between exit and shelter entry was 285 days. This and previous studies nonetheless show a high vulnerability for individuals with correctional facility, mental health system, and shelter system overlap. To address that issue, a Bureau of Justice Assistance grant supports intensive services and housing for this population.



## 1E. Centralized or Coordinated Assessment (Coordinated Entry)

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**CoCs are required by the CoC Program interim rule to establish a Centralized or Coordinated Assessment system – also referred to as Coordinated Entry. Based on the recent Coordinated Entry Policy Brief, HUD’s primary goals for coordinated entry processes are that assistance be allocated as effectively as possible and that it be easily accessible regardless of where or how people present for assistance. Most communities lack the resources needed to meet all of the needs of people experiencing homelessness. This combined with the lack of a well-developed coordinated entry processes can result in severe hardships for persons experiencing homelessness who often face long wait times to receive assistance or are screened out of needed assistance. Coordinated entry processes help communities prioritize assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most can receive it in a timely manner. Coordinated entry processes also provide information about service needs and gaps to help communities plan their assistance and identify needed resources.**

**1E-1. Explain how the CoC’s coordinated entry process is designed to identify, engage, and assist homeless individuals and families that will ensure those who request or need assistance are connected to proper housing and services.  
(limit 1000 characters)**

The Collaborative Outreach Program engages the most vulnerable homeless individuals, living outdoors and in places not meant for human habitation. Program uses a coordinated approach across multiple community agencies to provide rapid response, engagement, assessment, case planning, and housing and support services for all unsheltered individuals in the area of coverage. If shelter is needed, the program refers individuals directly to the Coordinated Point of Access (CPOA). CPOA has specialists available 24/7 to conduct preliminary triage and assessment. Widely advertised 1800 phone # is available for call-ins. Police, soup kitchens, churches also use this number. Households that meet shelter eligibility criteria are referred to shelter, others receive referrals to other resources. In shelter, individuals’ need is assessed using the community’s Vulnerability Assessment for provision of services and housing. CSB creates monthly “hot lists” using HMIS for long term homeless individuals.

**1E-2. CoC Program and ESG Program funded projects are required to participate in the coordinated entry process, but there are many other organizations and individuals who may participate but are not required to do so. From the following list, for each type of organization or individual, select all of the applicable checkboxes that indicate how that organization or individual participates in the CoC's coordinated entry process. If the organization or person does not exist in the CoC's geographic area, select "Not Applicable." If there are other organizations or persons that participate not on this list, enter the information, click "Save" at the bottom of the screen, and then select the applicable checkboxes.**

Organization/Person Categories	Participates in Ongoing Planning and Evaluation	Makes Referrals to the Coordinated Entry Process	Receives Referrals from the Coordinated Entry Process	Operates Access Point for Coordinated Entry Process	Participates in Case Conferencing	Not Applicable
Local Government Staff/Officials	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CDBG/HOME/Entitlement Jurisdiction	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Local Jail(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
EMT/Crisis Response Team(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mental Health Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Affordable Housing Developer(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Housing Authorities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Youth Homeless Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
School Administrators/Homeless Liaisons	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Victim Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Street Outreach Team(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homeless or Formerly Homeless Persons	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Local 211 Provider	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

### Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 1F-1. For all renewal project applications submitted in the FY 2015 CoC Program Competition complete the chart below regarding the CoC's review of the Annual Performance Report(s).

How many renewal project applications were submitted in the FY 2015 CoC Program Competition?	32
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	2
How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2015 CoC Program Competition?	30
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2015 CoC Competition?	100.00%

### 1F-2. In the sections below, check the appropriate box(s) for each section to indicate how project applications were reviewed and ranked for the FY 2015 CoC Program Competition. (Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.)

Type of Project or Program (PH, TH, HMIS, SSO, RRH, etc.)	<input checked="" type="checkbox"/>
Performance outcomes from APR reports/HMIS	
Length of stay	<input checked="" type="checkbox"/>
% permanent housing exit destinations	<input checked="" type="checkbox"/>
% increases in income	<input checked="" type="checkbox"/>
% Recidivism	<input checked="" type="checkbox"/>

<b>Monitoring criteria</b>	
Participant Eligibility	<input checked="" type="checkbox"/>
Utilization rates	<input checked="" type="checkbox"/>
Drawdown rates	<input checked="" type="checkbox"/>
Frequency or Amount of Funds Recaptured by HUD	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
<b>Need for specialized population services</b>	
Youth	<input checked="" type="checkbox"/>
Victims of Domestic Violence	<input type="checkbox"/>
Families with Children	<input checked="" type="checkbox"/>
Persons Experiencing Chronic Homelessness	<input checked="" type="checkbox"/>
Veterans	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None	<input type="checkbox"/>

**1F-2a. Describe how the CoC considered the severity of needs and vulnerabilities of participants that are, or will be, served by the project applications when determining project application priority.  
(limit 1000 characters)**

The CoC, through Community Shelter Board (CSB), operates the Unified Supportive Housing System (USHS). USHS is a collaborative effort managed by The Alcohol, Drug, and Mental Health Board of Franklin County, The Columbus Metropolitan Housing Authority, and CSB, all CoC members. These partners work together with behavioral health, housing, shelter, and outreach providers. The goal of the system is to coordinate efforts to end chronic and long-term homelessness and house the community's most vulnerable population. The USHS fills new PSH units and units vacated through turnover according to HUD's housing prioritization guidelines and vulnerability assessments completed system-wide on all homeless individuals. All PSH projects serve the same population, based on USHS referrals; projects cannot be differentiated based on the population they serve. The prioritization occurs based on performance. The CoC prioritizes PSH and TH projects serving youth and families ahead of general TH projects.

**1F-3. Describe how the CoC made the local competition review, ranking, and selection criteria publicly available, and identify the public medium(s) used and the date(s) of posting. In addition, describe how the CoC made this information available to all stakeholders. (Evidence of the public posting must be attached) (limit 750 characters)**

The CoC Board approved the ranking and selection criteria for the 2015 application in April 2015. The CoC posted information regarding the Notice of Funding Availability on the Community Shelter Board's (Collaborative Applicant) website on October 2, 2015, along with information on the criteria which the CoC would consider to rank projects and the application schedule. The Community Shelter Board disseminated this ranking and process information by emailing partners throughout the CoC on September 19, 2015.

**1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts of the FY 2015 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached.)**

10/31/2015

**1F-5. Did the CoC use the reallocation process in the FY 2015 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.)**

Yes

**1F-5a. If the CoC rejected project application(s) on what date did the CoC and Collaborative Applicant notify those project applicants their project application was rejected in the local CoC competition process? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.)**

10/31/2015

**1F-6. Is the Annual Renewal Demand (ARD) in the CoC's FY 2015 CoC Priority Listing equal to or less than the ARD on the final HUD-approved FY 2015 GIW?** No

## 1G. Continuum of Care (CoC) Addressing Project Capacity

### Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 1G-1. Describe how the CoC monitors the performance of CoC Program recipients. (limit 1000 characters)

The Community Shelter Board (CSB) proposes standards; the CoC reviews and approves the standards annually. CSB incorporates these standards into annual program agreements with each sub-recipient. CSB monitors performance and provides monthly, quarterly, semi-annual, and annual data reports, which are presented to the CoC. CSB assesses performance goals compared to actual performance, using HMIS data, inclusive of bed utilization, length of time homeless, access to income, and benefits. CoC-funded projects have contractually-established data quality targets. Monitored standards that are reviewed annually include personnel, financial, program management, eligibility, and utilization of funds. Low performing agencies are subject to corrective action. CSB formally meets with each recipient twice a year to discuss performance; outcomes of these discussions are brought to the attention of the CoC. CSB regularly solicits and incorporates feedback from sub-recipients on the monitoring process.

**1G-2. Did the Collaborative Applicant review and confirm that all project applicants attached accurately completed and current dated form HUD 50070 and form HUD-2880 to the Project Applicant Profile in e-snaps?** Yes

**1G-3. Did the Collaborative Applicant include accurately completed and appropriately signed form HUD-2991(s) for all project applications submitted on the CoC Priority Listing?** Yes



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

### Intructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**2A-1. Does the CoC have a governance charter that outlines the roles and responsibilities of the CoC and the HMIS Lead, either within the charter itself or by reference to a separate document like an MOU? In all cases, the CoC's governance charter must be attached to receive credit. In addition, if applicable, any separate document, like an MOU, must also be attached to receive credit.** Yes

**2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or the attached MOU.** GC 2, 6, 8, 11, 13-17, 18-22

**2A-2. Does the CoC have a HMIS Policies and Procedures Manual? If yes, in order to receive credit the HMIS Policies and Procedures Manual must be attached to the CoC Application.** Yes

**2A-3. Are there agreements in place that outline roles and responsibilities between the HMIS Lead and the Contributing HMIS Organizations (CHOs)?** Yes

**2A-4. What is the name of the HMIS software used by the CoC (e.g., ABC Software)?**  
**Applicant will enter the HMIS software name (e.g., ABC Software).**

ServicePoint

**2A-5. What is the name of the HMIS software vendor (e.g., ABC Systems)?**  
**Applicant will enter the name of the vendor (e.g., ABC Systems).**

Bowman Systems

## 2B. Homeless Management Information System (HMIS) Funding Sources

### Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 2B-1. Select the HMIS implementation Single CoC coverage area:

\* 2B-2. In the charts below, enter the amount of funding from each funding source that contributes to the total HMIS budget for the CoC.

#### 2B-2.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	\$164,070
ESG	\$84,433
CDBG	\$0
HOME	\$0
HOPWA	\$0
Federal - HUD - Total Amount	\$248,503

#### 2B-2.2 Funding Type: Other Federal

Funding Source	Funding
Department of Education	\$0
Department of Health and Human Services	\$0
Department of Labor	\$0
Department of Agriculture	\$0
Department of Veterans Affairs	\$0
Other Federal	\$0
Other Federal - Total Amount	\$0

### 2B-2.3 Funding Type: State and Local

Funding Source	Funding
City	\$0
County	\$0
State	\$0
State and Local - Total Amount	\$0

### 2B-2.4 Funding Type: Private

Funding Source	Funding
Individual	\$0
Organization	\$0
Private - Total Amount	\$0

### 2B-2.5 Funding Type: Other

Funding Source	Funding
Participation Fees	\$10,000
Other - Total Amount	\$10,000

2B-2.6 Total Budget for Operating Year	\$258,503
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## 2C. Homeless Management Information System (HMIS) Bed Coverage

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**2C-1. Enter the date the CoC submitted the 2015 HIC data in HDX, (mm/dd/yyyy):** 04/27/2015

**2C-2. Per the 2015 Housing Inventory Count (HIC) indicate the number of beds in the 2015 HIC and in HMIS for each project type within the CoC. If a particular housing type does not exist in the CoC then enter "0" for all cells in that housing type.**

Project Type	Total Beds in 2015 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter beds	933	34	883	98.22%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	141	0	141	100.00%
Rapid Re-Housing (RRH) beds	422	0	422	100.00%
Permanent Supportive Housing (PSH) beds	2,706	0	2,013	74.39%
Other Permanent Housing (OPH) beds	0	0	0	

**2C-2a. If the bed coverage rate for any housing type is 85% or below, describe how the CoC plans to increase this percentage over the next 12 months.  
(limit 1000 characters)**

The bed coverage rate for the permanent supportive housing beds is below 85% because the programs using VASH vouchers do not enter data in HMIS. Otherwise our bed coverage rate is 100%. We unsuccessfully tried to have the local PHA enter the VASH vouchers in HMIS, but the data did not meet quality standards because of significant amount of missing data that the VA did not provide because of privacy concerns. The VA refused to participate in HMIS until recently, when the VA and HUD guidelines were announced. We are now making progress in getting the VA to enter the VASH vouchers in HMIS. At the current time we are waiting for the VA to execute the contract that allows their HMIS participation. We are hopeful that we will have the VASH vouchers fully entered in HMIS by the 2016 PIT count time.

**2C-3. HUD understands that certain projects are either not required to or discouraged from participating in HMIS, and CoCs cannot require this if they are not funded through the CoC or ESG programs. This does NOT include domestic violence providers that are prohibited from entering client data in HMIS. If any of the project types listed in question 2C-2 above has a coverage rate of 85% or below, and some or all of these rates can be attributed to beds covered by one of the following programs types, please indicate that here by selecting all that apply from the list below.  
(limit 1000 characters)**

VA Domiciliary (VA DOM):	<input type="checkbox"/>
VA Grant per diem (VA GPD):	<input type="checkbox"/>
Faith-Based projects/Rescue mission:	<input type="checkbox"/>
Youth focused projects:	<input type="checkbox"/>
HOPWA projects:	<input type="checkbox"/>
Not Applicable:	<input checked="" type="checkbox"/>

**2C-4. How often does the CoC review or assess its HMIS bed coverage?** Annually

## 2D. Homeless Management Information System (HMIS) Data Quality

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**2D-1. Indicate the percentage of unduplicated client records with null or missing values and the percentage of "Client Doesn't Know" or "Client Refused" during the time period of October 1, 2013 through September 30, 2014.**

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	0%	0%
3.3 Date of birth	0%	0%
3.4 Race	0%	0%
3.5 Ethnicity	1%	0%
3.6 Gender	0%	0%
3.7 Veteran status	0%	0%
3.8 Disabling condition	1%	0%
3.9 Residence prior to project entry	0%	0%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	1%	0%
3.15 Relationship to Head of Household	4%	0%
3.16 Client Location	1%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	7%	0%

**2D-2. Identify which of the following reports your HMIS generates. Select all that apply:**

CoC Annual Performance Report (APR):	<input checked="" type="checkbox"/>
ESG Consolidated Annual Performance and Evaluation Report (CAPER):	<input checked="" type="checkbox"/>
Annual Homeless Assessment Report (AHAR) table shells:	<input checked="" type="checkbox"/>

	<input type="checkbox"/>
None	<input type="checkbox"/>

**2D-3. If you submitted the 2015 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR?** 12

**2D-4. How frequently does the CoC review data quality in the HMIS?** Monthly

**2D-5. Select from the dropdown to indicate if standardized HMIS data quality reports are generated to review data quality at the CoC level, project level, or both?** Both Project and CoC

**2D-6. From the following list of federal partner programs, select the ones that are currently using the CoC's HMIS.**

VA Supportive Services for Veteran Families (SSVF):	<input checked="" type="checkbox"/>
VA Grant and Per Diem (GPD):	<input checked="" type="checkbox"/>
Runaway and Homeless Youth (RHY):	<input checked="" type="checkbox"/>
Projects for Assistance in Transition from Homelessness (PATH):	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

**2D-6a. If any of the federal partner programs listed in 2D-6 are not currently entering data in the CoC's HMIS and intend to begin entering data in the next 12 months, indicate the federal partner program and the anticipated start date.  
(limit 750 characters)**



not applicable

## **2E. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count**

### **Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**The data collected during the PIT count is vital for both CoCs and HUD. Communities need accurate data to determine the size and scope of homelessness at the local level so they can best plan for services and programs that will appropriately address local needs and measure progress in addressing homelessness. HUD needs accurate data to understand the extent and nature of homelessness throughout the country, and to provide Congress and the Office of Management and Budget (OMB) with information regarding services provided, gaps in service, and performance. This information helps inform Congress' funding decisions, and it is vital that the data reported is accurate and of high quality.**

**2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2015 sheltered PIT count?** Yes

**2E-2. Indicate the date of the most recent sheltered PIT count (mm/dd/yyyy):** 01/29/2015

**2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2015, was an exception granted by HUD?** Not Applicable

**2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX, (mm/dd/yyyy):** 04/27/2015

## 2F. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Methods

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2015 PIT count:

Complete Census Count:	<input checked="" type="checkbox"/>
Random sample and extrapolation:	<input type="checkbox"/>
Non-random sample and extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

### 2F-2. Indicate the methods used to gather and calculate subpopulation data for sheltered homeless persons:

HMIS:	<input type="checkbox"/>
HMIS plus extrapolation:	<input checked="" type="checkbox"/>
Interview of sheltered persons:	<input type="checkbox"/>
Sample of PIT interviews plus extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

**2F-3. Provide a brief description of your CoC's sheltered PIT count methodology and describe why your CoC selected its sheltered PIT count methodology.  
(limit 1000 characters)**

Agencies serving homeless individuals and families that do not enter data into HMIS submitted summary data by email (domestic violence shelter and youth shelter). For all programs that enter data in HMIS, CSB used a custom report to count all sheltered households for the night of the PIT count in addition to the HMIS vendor-provided report, to ensure data consistency and accuracy. CSB unduplicated the raw data across programs and aggregated at each program level. Finally, CSB aggregated data for each category of required reporting, to include both HMIS and non-HMIS data for the sheltered population. Subpopulation data was extracted from HMIS and compared with extrapolated data. This methodology ensured complete coverage for the PIT count and has been consistently used in our community over a long timeframe. The consistent methodology ensures accurate assessment of changes from year to year.

**2F-4. Describe any change in methodology from your sheltered PIT count in 2014 to 2015, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to the implementation of your sheltered PIT count methodology (e.g., enhanced training and change in partners participating in the PIT count). (limit 1000 characters)**

No methodology changes occurred in the 2015 PIT count.

**2F-5. Did your CoC change its provider coverage in the 2015 sheltered count?** No

**2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2015 sheltered count. (limit 750 characters)**

not applicable

## 2G. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Data Quality

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 2G-1. Indicate the methods used to ensure the quality of the data collected during the sheltered PIT count:

Training:	<input checked="" type="checkbox"/>
Provider follow-up:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Non-HMIS de-duplication techniques:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

### 2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2014 to 2015 that would change data quality, including changes to training volunteers and inclusion of any partner agencies in the sheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual sheltered PIT count methodology (e.g., change in sampling or extrapolation method). (limit 1000 characters)

No significant changes occurred in the 2015 PIT count. The vast majority of the programs enter data into HMIS, making the sheltered PIT count mostly a data analysis project conducted by Community Shelter Board (CSB). We are improving data quality every year. HMIS users receive extensive training in data collection and data entry techniques. CSB did not access HMIS data for the PIT count until all programs conformed to quality assurance standards and completed the monthly Quality Assurance process for January, to ensure that the data was complete and accurate. Afterwards CSB staff conducted additional data quality checks system-wide to eliminate any duplication or missing data. For data not provided through HMIS, CSB staff reviewed the information making sure of its consistency and integrity.

## 2H. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**The unsheltered PIT count assists communities and HUD to understand the characteristics and number of people with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground. CoCs are required to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, CoCs are strongly encouraged to conduct the unsheltered PIT count annually, at the same time that it does the annual sheltered PIT count. The last official PIT count required by HUD was in January 2015.**

**2H-1. Did the CoC approve the final unsheltered PIT count methodology for the most recent unsheltered PIT count?** Yes

**2H-2. Indicate the date of the most recent unsheltered PIT count (mm/dd/yyyy):** 01/29/2015

**2H-2a. If the CoC conducted the unsheltered PIT count outside of the last 10 days of January 2015, was an exception granted by HUD?** Not Applicable

**2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy):** 04/27/2015

## 2I. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count: Methods

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 2I-1. Indicate the methods used to count unsheltered homeless persons during the 2015 PIT count:

Night of the count - complete census:	<input type="text"/>
Night of the count - known locations:	<input type="text"/>
Night of the count - random sample:	<input type="text"/>
Service-based count:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Count of individuals in camps in known locations	<input checked="" type="checkbox"/>

### 2I-2. Provide a brief description of your CoC's unsheltered PIT count methodology and describe why your CoC selected its unsheltered PIT count methodology. (limit 1000 characters)

In 2014 we changed our methodology to a service-based day count and continued in 2015. We selected this method because we wanted to reach more unsheltered individuals. We reserved a location and social service agencies provided various services. We advertised in places where unsheltered homeless individuals congregate and asked our outreach providers to inform unsheltered individuals. The day of the count, we administered surveys to all who accessed the venue and used wrist bands to prevent duplication of counts. Surveys were also administered to unsheltered individuals who did not want to access the count location. We identified persons reporting as unsheltered. We collected data in Excel and verified the data against the hard copy surveys. We matched data collected with HMIS sheltered information and with our street outreach program to eliminate duplication. Persons not counted during the day count or in shelter but actively served by outreach programs were included in the count.

**2I-3. Describe any change in methodology from your unsheltered PIT count in 2014 (or 2013 if an unsheltered count was not conducted in 2014) to 2015, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training and change in partners participating in the count). (limit 1000 characters)**

No changes occurred in the 2015 PIT count.

**2I-4. Does your CoC plan on conducting an unsheltered PIT count in 2016?** Yes

(If "Yes" is selected, HUD expects the CoC to conduct an unsheltered PIT count in 2016. See the FY 2015 CoC Program NOFA, Section VII.A.4.d. for full information.)



## 2J. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count: Data Quality

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2015 unsheltered population PIT count:

Training:	<input checked="" type="checkbox"/>
"Blitz" count:	<input type="checkbox"/>
Unique identifier:	<input checked="" type="checkbox"/>
Survey question:	<input checked="" type="checkbox"/>
Enumerator observation:	<input type="checkbox"/>
Unduplication with HMIS data	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

### 2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2014 (or 2013 if an unsheltered count was not conducted in 2014) to 2015 that would affect data quality. This includes changes to training volunteers and inclusion of any partner agencies in the unsheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual methodology (e.g., change in sampling or extrapolation method). (limit 1000 characters)

No significant changes occurred in the 2015 PIT count methodology. Some of the survey questions were updated to be more specific and easier for clients to understand and answer. The vast majority of the CoC Homeless PIT Count Workgroup previously participated in the count. Additional training was offered to those administering the survey to incorporate changes to the survey document.

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

### Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 3A-1. Performance Measure: Number of Persons Homeless - Point-in-Time Count.

#### \* 3A-1a. Change in PIT Counts of Sheltered and Unsheltered Homeless Persons

Using the table below, indicate the number of persons who were homeless at a Point-in-Time (PIT) based on the 2014 and 2015 PIT counts as recorded in the Homelessness Data Exchange (HDX).

		2014 PIT (for unsheltered count, most recent year conducted)	2015 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons		1,614	1,721	107
Emergency Shelter Total		1,251	1,386	135
Safe Haven Total		0	0	0
Transitional Housing Total		130	137	7
Total Sheltered Count		1,381	1,523	142
Total Unsheltered Count		233	198	-35

### 3A-1b. Number of Sheltered Persons Homeless - HMIS.

Using HMIS data, CoCs must use the table below to indicate the number of homeless persons who were served in a sheltered environment between October 1, 2013 and September 30, 2014.

		Between October 1, 2013 and September 30, 2014
Universe: Unduplicated Total sheltered homeless persons		10,899
Emergency Shelter Total		10,611
Safe Haven Total		0
Transitional Housing Total		458

**3A-2. Performance Measure: First Time Homeless.**

**Describe the CoC's efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors for becoming homeless for the first time.**

**(limit 1000 characters)**

A recent report commissioned by The Columbus Foundation and Community Shelter Board found multiple risk factors for families becoming homeless for the first time. Those include a loss of \$72 million in state benefits to poor families and adults in our county over the last five years, as well as a robust rental market that is pricing households with low incomes out of the market. The report noted the need to develop preventive services to keep households from losing their homes. Franklin County Commissioner Brown will lead a public/private task force of key community leaders to identify, improve, and create services to keep families in their homes and halt an over-reliance on the emergency shelters. The work will result in a comprehensive, community-based plan. In addition, local funds are used to add CPOA staff to increase their assessment role and reallocation funds are sought in this application to expand the CPOA role to provide intensive diversion and prevention assistance.

**3A-3. Performance Measure: Length of Time Homeless.**

**Describe the CoC's efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless.**

**(limit 1000 characters)**

CSB, on behalf of the CoC, tracks the length of time individuals and families remain homeless using HMIS data, shelter entry and exit dates, and publishes quarterly reports. The Family Emergency Shelter System achieved 24 days average last FY through immediate assessment, quickly moving families through the system and holding all programs accountable for rapid rehousing goals. We are working to further improve referral time for next step housing. The single adult shelter system has a higher average at 55 days. Implementation of a new crisis response system for single adults has been fully implemented. It aims to reduce length of time homeless to 30 days. Single men and women are helped to move out of shelter quickly and into their own apartments. Case managers called navigators deliver intensive services focused on ending the homeless crisis quickly and stabilizing people in housing. A "hot list" of long stayers is updated monthly, as a focused and prioritized housing tool.

**\* 3A-4. Performance Measure: Successful Permanent Housing Placement or Retention.**

**In the next two questions, CoCs must indicate the success of its projects in placing persons from its projects into permanent housing.**

**3A-4a. Exits to Permanent Housing Destinations:**

In the chart below, CoCs must indicate the number of persons in CoC funded supportive services only (SSO), transitional housing (TH), and rapid re-housing (RRH) project types who exited into permanent housing destinations between October 1, 2013 and September 30, 2014.

		Between October 1, 2013 and September 30, 2014
Universe: Persons in SSO, TH and PH-RRH who exited		167
Of the persons in the Universe above, how many of those exited to permanent destinations?		153
% Successful Exits		91.62%

**3A-4b. Exit To or Retention Of Permanent Housing:**

In the chart below, CoCs must indicate the number of persons who exited from any CoC funded permanent housing project, except rapid re-housing projects, to permanent housing destinations or retained their permanent housing between October 1, 2013 and September 31, 2014.

		Between October 1, 2013 and September 30, 2014
Universe: Persons in all PH projects except PH-RRH		2,125
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?		1,945
% Successful Retentions/Exits		91.53%

**3A-5. Performance Measure: Returns to Homelessness:**

**Describe the CoC's efforts to reduce the rate of individuals and families who return to homelessness. Specifically, describe at least three strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness. (limit 1000 characters)**

CSB, on behalf of the CoC, tracks returns using HMIS data and publishes quarterly reports. We calculate returns by matching clients served in a prior reporting period with clients served in subsequent reporting periods. Follow up services are available to families after exiting shelter and rapid rehousing to minimize returns. If re-contact with the CPOA occurs, the family is assessed for eligibility in the prevention program and diversion resources are explored. For single adults, our new crisis response system aims to reduce instances of service from 3.4 in 12 months to 1.5. In the first year, we reduced returns to 1.5 instances. A centralized case management program assigns a Navigator to each client to ensure successful housing. Follow-up services after exit reduce returns. If a client re-contacts the CPOA, diversion occurs and intake staff engages the Navigator to prevent the homeless episode. For PSH, TH and RRH, all programs are required to have an eviction prevention process.

### **3A-6. Performance Measure: Job and Income Growth.**

**Describe specific strategies implemented by CoC Program-funded projects to increase the rate by which homeless individuals and families increase income from employment and non-employment sources (include at least one specific strategy for employment income and one for non-employment related income, and name the organization responsible for carrying out each strategy). (limit 1000 characters)**

We implemented a transitional work program that provides real-life work experience to PSH clients. CSB manages the program and private corporations participate and provide funding, along with the State of Ohio. Clients receive training from Goodwill, work experience in businesses, and a stipend. The intention is to increase client employment rates. Several providers implemented successful employment programs – “100 jobs in 100 days” and “50 jobs in 50 days.” For non-employment income, each provider is required to have certified staff that can apply for income assistance through the Ohio Benefits Bank, an online portal that provides public benefit applications. Case managers, upon their client’s endorsement, apply for assistance on behalf of the client, expediting the process. CSB monitors these efforts for compliance. In a specialized program operated by YWCA Columbus, benefits specialists work with clients system-wide to apply for income assistance, mainly SSI and SSDI.

**3A-6a. Describe how the CoC is working with mainstream employment organizations to aid homeless individuals and families in increasing their income. (limit 1000 characters)**

100% of CoC funded projects are required to have documented relationships with employment organizations. The Central Ohio Workforce Investment Corporation (COWIC) connects job seekers with training, resources, and employment services. Goodwill Columbus, a CSB partner, is the primary mainstream employment organization helping homeless clients grow their income, as a COWIC job center partner. Homeless individuals identified as needing to increase income are linked to Goodwill specialists. Our Goodwill transitional work program for PSH residents has worked with 134 candidates so far, or 6% of CoC PSH participants. YWCA specialists help homeless clients apply for income assistance, mainly SSI and SSDI (335 clients served over 12 months). Counselors with the Ohio Benefit Bank (OBB), a program of the Ohio Association of Foodbanks, work with clients to apply for public benefits. All CoC projects are required to be OBB-certified and 90% of participants are connected to the OBB.

### **3A-7. Performance Measure: Thoroughness of Outreach.**

**How does the CoC ensure that all people living unsheltered in the CoC's geographic area are known to and engaged by providers and outreach teams?**

**(limit 1000 characters)**

The Collaborative Outreach Program's outreach specialists engage clients living outdoors and in places not meant for human habitation, and help them move into housing or shelter quickly. Clients are linked with services and financial assistance for housing. Outreach specialists respond to requests for assistance that come through the City's 311 system, community calls, CPOA, providers that work with homeless individuals, the police, hospitals, food banks, faith-based organizations, soup kitchens and other sources. Outreach Specialists are available 24/7 and engage unsheltered individuals immediately. Data on unsheltered individuals is entered and tracked in HMIS. The collaborative outreach model leverages multiple resources by coordinating with community partners for rapid response, engagement, assessment, intake, case planning, referral to housing, and support services. The program also involves the faith based community with the intent of strengthening community collaborations.

**3A-7a. Did the CoC exclude geographic areas from the 2015 unsheltered PIT count where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g., deserts)?**

No

**3A-7b. What was the the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoC's unsheltered PIT count?**  
**(limit 1000 characters)**

No area was excluded.

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

### Objective 1: Ending Chronic Homelessness

#### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**Opening Doors, Federal Strategic Plan to Prevent and End Homelessness (as amended in 2015) establishes the national goal of ending chronic homelessness. Although the original goal was to end chronic homelessness by the end of 2015, that goal timeline has been extended to 2017. HUD is hopeful that communities that are participating in the Zero: 2016 technical assistance initiative will continue to be able to reach the goal by the end of 2016. The questions in this section focus on the strategies and resources available within a community to help meet this goal.**

**3B-1.1. Compare the total number of chronically homeless persons, which includes persons in families, in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).**

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	257	207	-50
Sheltered Count of chronically homeless persons	82	60	-22
Unsheltered Count of chronically homeless persons	175	147	-28

**3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, decrease, or no change in the overall TOTAL number of chronically homeless persons in the CoC, as well as the change in the unsheltered count, as reported in the PIT count in 2015 compared to 2014. To possibly receive full credit, both the overall total and unsheltered changes must be addressed.  
(limit 1000 characters)**



The total number of sheltered and unsheltered chronically homeless individuals decreased and there are no chronically homeless families in our CoC. The decrease is the result of an increased focus on housing chronically homeless individuals. Our Unified Supportive Housing System (USHS) expanded the number of existing PSH projects it oversees and the CoC added new PSH units to our inventory. As such, there are more PSH housing units becoming available through turnover that are designated for chronically homeless individuals. Therefore, more chronically homeless individuals receive housing. Our redesigned crisis response system offers centralized case management services that prioritize chronically homeless individuals. Monthly "hot lists" focus our housing efforts on the long-term homeless population. Our Collaborative Outreach program rapidly engages and houses unsheltered chronically homeless individuals through USHS. There were no changes to the PIT count methodology.

**3B-1.2. From the FY 2013/FY 2014 CoC Application: Describe the CoC's two year plan (2014-2015) to increase the number of permanent supportive housing beds available for chronically homeless persons and to meet the proposed numeric goals as indicated in the table above. Response should address the specific strategies and actions the CoC will take to achieve the goal of ending chronic homelessness by the end of 2015. (read only)**

Our goal is to develop one new supportive housing project each year with units designated to serve chronic homeless (CH) individuals. Our process for endorsing developer proposals includes designation of CH units within every new development.

Lack of federal capital and services funding and funding cuts that impact the local housing authority's ability to issue Section 8 vouchers for these projects pose a threat to our ability to increase the future inventory of CH units. We are asking housing providers to dedicate non-CH units to the CH population and reallocating funds to create new CH units. Through our Unified Supportive Housing System, CH applicants are given priority for housing over applicants who are not chronically homeless. Admissions staff works with applicants to assess homelessness status, complete applications, and move them into the next available unit.

We focus on creating CH beds for single men, since we have eliminated chronic homelessness for families and women.

**3B-1.2a. Of the strategies listed in the FY 2013/FY 2014 CoC Application represented in 3B-1.2, which of these strategies and actions were accomplished? (limit 1000 characters)**

During 2015 the CoC will add 244 units of permanent supportive housing to our inventory. The majority of the new units (184) are the result of FY2014 CoC bonus funds. Leasing started July 1, 2015. We are very grateful for the bonus funds that enabled the increase in PSH units. All units are designated to serve chronically homeless individuals. All housing providers agreed to prioritize chronically homeless individuals in units designated for non-chronically homeless individuals as of September 2014. Through our Unified Supportive Housing System, chronically homeless applicants have been given priority for housing over applicants who are not chronically homeless since January 2015. As of January 1, 2015 the CoC implemented CoC-wide the HUD-issued notice on housing prioritization standards.

**3B-1.3. Compare the total number of PSH beds (CoC Program and non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2015 Housing Inventory Count, as compared to those identified on the 2014 Housing Inventory Count.**

	2014	2015	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	564	789	225

**3B-1.3a. Explain the reason(s) for any increase, decrease or no change in the total number of PSH beds (CoC Program and non CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2015 Housing Inventory Count compared to those identified on the 2014 Housing Inventory Count. (limit 1000 characters)**

We increased the number of beds dedicated to the chronically homeless population by 225 beds. The entire increase is the result of new PSH capacity that dedicates 100% of the units to serve the chronically homeless population. We are very grateful to HUD for the FY2014 CoC bonus award that allowed us to add 184 new units of PSH dedicated to the chronically homeless. All existing PSH projects, CoC and non-CoC funded, either dedicate or prioritize all beds for chronically homeless individuals.

**3B-1.4. Did the CoC adopt the orders of priority in all CoC Program-funded PSH as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status ?** Yes

**3B-1.4a. If “Yes”, attach the CoC’s written standards that were updated to incorporate the order of priority in Notice CPD-14-012 and indicate the page(s) that contain the CoC’s update.** Pages 23-24

**3B-1.5. CoC Program funded Permanent Supportive Housing Project Beds prioritized for serving people experiencing chronic homelessness in FY2015 operating year.**

Percentage of CoC Program funded PSH beds prioritized for chronic homelessness	FY2015 Project Application
Based on all of the renewal project applications for PSH, enter the estimated number of CoC-funded PSH beds in projects being renewed in the FY 2015 CoC Program Competition that are not designated as dedicated beds for persons experiencing chronic homelessness.	1,179
Based on all of the renewal project applications for PSH, enter the estimated number of CoC-funded PSH beds in projects being renewed in the FY 2015 CoC Program Competition that are not designated as dedicated beds for persons experiencing chronic homelessness that will be made available through turnover in the FY 2015 operating year.	237
Based on all of the renewal project applications for PSH, enter the estimated number of PSH beds made available through turnover that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.	237
This field estimates the percentage of turnover beds that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.	100.00%

**3B-1.6. Is the CoC on track to meet the goal of ending chronic homelessness by 2017?** Yes

This question will not be scored.

**3B-1.6a. If “Yes,” what are the strategies implemented by the CoC to maximize current resources to meet this goal? If “No,” what resources or technical assistance will be implemented by the CoC to reach the goal of ending chronically homeless by 2017? (limit 1000 characters)**

The Community Shelter Board, through the Unified Supportive Housing System (USHS), implemented the HUD housing prioritization guidelines system-wide as of January 1, 2015. Chronically homeless applicants are given priority for housing over applicants who are not chronically homeless. We started to issue during 2015 “hot lists” comprised of homeless individuals who accumulated more than 100 days in shelter through one or multiple episodes of homelessness to identify shelter long-stayers and prioritize them for appropriate housing. We centralized and standardized case management across the CoC to better assess and prioritize needs. For the unsheltered individuals we bring together diverse community organizations in a focused dialogue around street homelessness to expedite the move of individuals into housing. USHS staff collaborates closely with case management and outreach staff to assess the homeless status of applicants, complete applications, and move individuals into the next available housing unit expeditiously.

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

### Objective 2: Ending Homelessness Among Households with Children and Ending Youth Homelessness

#### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**Opening Doors outlines the goal of ending family (Households with Children) and youth homelessness by 2020. The following questions focus on the various strategies that will aid communities in meeting this goal.**

#### 3B-2.1. What factors will the CoC use to prioritize households with children during the FY2015 Operating year? (Check all that apply).

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Number of previous homeless episodes:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Criminal History:	<input checked="" type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder):	<input checked="" type="checkbox"/>
Head of household has mental/physical disabilities:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

**3B-2.2. Describe the CoC's plan to rapidly rehouse every family that becomes homeless within 30 days of becoming homeless on the street or entering shelter.  
(limit 1000 characters)**

The current average length of time in shelter for families is 24 days. Families move quickly through the shelter system and a large proportion are rapidly rehoused. Each family receives multiple assessments as they enter shelter. The focus of the assessments is to determine the pathway to housing. The pathway is assigned very early in the household's shelter stay which allows the family to work on their housing plan and execute it in a timely manner. Rapid re-housing providers are engaged early in the housing process and work closely with families on the exit strategy. ESG and local financial resources are available to move families from shelter into housing. There are no unsheltered homeless families in our CoC.

**3B-2.3. Compare the number of RRH units available to serve families from the 2014 and 2015 HIC.**

	2014	2015	Difference
RRH units available to serve families in the HIC:	127	120	-7

**3B-2.4. How does the CoC ensure that emergency shelters, transitional housing, and permanent housing (PSH and RRH) providers within the CoC do not deny admission to or separate any family members from other members of their family based on age, sex, or gender when entering shelter or housing? (check all strategies that apply)**

CoC policies and procedures prohibit involuntary family separation:	<input checked="" type="checkbox"/>
There is a method for clients to alert CoC when involuntarily separated:	<input checked="" type="checkbox"/>
CoC holds trainings on preventing involuntary family separation, at least once a year:	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

**3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).**

**PIT Count of Homelessness Among Households With Children**

FY2015 CoC Application	Page 50	11/18/2015
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	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	138	98	-40
Sheltered Count of homeless households with children:	138	98	-40
Unsheltered Count of homeless households with children:	0	0	0

**3B-2.5a. Explain the reason(s) for any increase, decrease or no change in the total number of homeless households with children in the CoC as reported in the 2015 PIT count compared to the 2014 PIT count. (limit 1000 characters)**

The total PIT Count number of sheltered and unsheltered homeless households with children decreased by 40 households, due to a decrease in the sheltered count. The decrease is the result of efforts to rapidly re-house families by moving them quickly through the shelter system into stable housing. In addition, we increased diversion efforts to ensure that only families that are truly homeless access the emergency shelter system. There are no unsheltered families in our CoC. There were no changes to the PIT count methodology.

**3B-2.6. Does the CoC have strategies to address the unique needs of unaccompanied homeless youth (under age 18, and ages 18-24), including the following:**

Human trafficking and other forms of exploitation?	Yes
LGBTQ youth homelessness?	No
Exits from foster care into homelessness?	Yes
Family reunification and community engagement?	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs?	Yes
Unaccompanied minors/youth below the age of 18?	Yes

**3B-2.6a. Select all strategies that the CoC uses to address homeless youth trafficking and other forms of exploitation.**

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	<input checked="" type="checkbox"/>
Increase housing and service options for youth fleeing or attempting to flee trafficking:	<input checked="" type="checkbox"/>
Specific sampling methodology for enumerating and characterizing local youth trafficking:	<input checked="" type="checkbox"/>

Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	<input checked="" type="checkbox"/>
Community awareness training concerning youth trafficking:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

**3B-2.7. What factors will the CoC use to prioritize unaccompanied youth (under age 18, and ages 18-24) for housing and services during the FY2015 operating year? (Check all that apply)**

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Length of time homeless:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Lack of access to family and community support networks:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

**3B-2.8. Using HMIS, compare all unaccompanied youth (under age 18, and ages 18-24) served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2013 (October 1, 2012 - September 30, 2013) and FY 2014 (October 1, 2013 - September 30, 2014).**

	FY 2013 (October 1, 2012 - September 30, 2013)	FY 2014 (October 1, 2013 - September 30, 2014)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	190	171	-19

**3B-2.8a. If the number of unaccompanied youth and children, and youth-headed households with children served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 is lower than FY 2013, explain why.  
(limit 1000 characters)**



The number of unaccompanied youth decreased because our community has a specific focus on unaccompanied youth. As part of our strategy to implement a new crisis response system for single adults, we established a workgroup focused on youth that included key stakeholders that met multiple times over a three-year planning cycle. We started to report out quarterly on the transitional age youth population. We developed a new annual report for the transitional age youth population, we issued the first report at the end of 2014, part of the annual Snapshot Report and we distributed it throughout the community. We report high level data on unaccompanied youth quarterly using HMIS data. We added to HMIS programs serving unaccompanied youth, including the youth drop-in center and youth emergency shelter.

**3B-2.9. Compare funding for youth homelessness in the CoC's geographic area in CY 2015 to projected funding for CY 2016.**

	Calendar Year 2015	Calendar Year 2016	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$2,785,225.00	\$3,239,710.00	\$454,485.00
CoC Program funding for youth homelessness dedicated projects:	\$232,135.00	\$232,135.00	\$0.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$2,553,090.00	\$3,007,575.00	\$454,485.00

**3B-2.10. To what extent have youth housing and service providers and/or State or Local educational representatives, and CoC representatives participated in each other's meetings over the past 12 months?**

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	7
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	115
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	12

**3B-2.10a. Given the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local education liaisons and State educational coordinators.  
(limit 1000 characters)**

The CoC collaborates with Columbus City Schools Project Connect program, which works directly with school administrators and teachers to identify and assist homeless families. The CoC governing body includes a representative from the Columbus Public Schools Project Connect program to ensure that efforts are coordinated. Project Connect partners with the social service agencies that provide shelter and housing services to families, including YWCA Family Center, Homeless Families Foundation, The Salvation Army, and Volunteers of America. These agencies identify children living in transition and refer them to Project Connect staff to maintain children in their school of origin or ensure their immediate enrollment in schools that serve the family's temporary address.

**3B-2.11. How does the CoC make sure that homeless participants are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow. In addition, include how the CoC, together with its youth and educational partners (e.g. RHY, schools, juvenile justice and children welfare agencies), identifies participants who are eligible for CoC or ESG programs. (limit 2000 characters)**

Family shelter and supportive housing providers are required to inform the families they serve about eligible education services. They are also required to provide appropriate referrals and to closely work with education liaisons to comply with local and federal policies. Community Shelter Board, on behalf of the CoC, monitors each provider on adherence to the following policy: "Children and youth have access to public education and receive assistance exercising their rights as protected by the McKinney-Vento Homeless Assistance Act of 1987, as amended, Title VII, Subtitle B; 42 U.S.C. 11431. Heads of households are advised of their rights as they relate to the public education system...Program staff can describe measures taken to ensure that client's rights are not violated in relation to public education, including identification of and contact with the local Homeless Education Liaison serving the program's client population. There is a process for advising heads of households of their rights as they relate to the public education system. This information is posted in an area where clients have access to it. Client files provide examples of clients working with the Homeless Education Liaison or other applicable staff members to place children in public school, early childhood programs such as Head Start, Part C services in accordance with the Individuals with Disabilities Education Act, and/or other programs authorized under Subtitle B of Title VII of the McKinney-Vento Homeless Assistance Act of 1987. If a family with children is entering permanent housing, efforts are made to house the family as close as possible to its school of origin so as not to disrupt such children's education." CSB monitors annually all providers through an onsite visit requiring written evidence in the clients' file of compliance with the policy.

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

### Objective 3: Ending Veterans Homelessness

#### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**Opening Doors outlines the goal of ending Veteran homelessness by the end of 2015. The following questions focus on the various strategies that will aid communities in meeting this goal.**

#### 3B-3.1. Compare the total number of homeless Veterans in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	156	129	-27
Sheltered count of homeless veterans:	133	119	-14
Unsheltered count of homeless veterans:	23	10	-13

**3B-3.1a. Explain the reason(s) for any increase, decrease or no change in the total number of homeless veterans in the CoC as reported in the 2015 PIT count compared to the 2014 PIT count.  
(limit 1000 characters)**

The total number of sheltered and unsheltered veterans decreased because of increased focus on housing veterans through Opening Doors and the Mayor's Challenge to End Veteran Homelessness. Our CoC works closely with the VA to rapidly house veterans. Additional housing resources are available to veterans, including new VASH vouchers, new SSVF programs, and existing CoC- and non-CoC-funded housing. These resources provide good housing capacity for veterans. Maryhaven Collaborative Outreach and VA Outreach coordinate services for unsheltered veterans. The VA, SSVF providers, and shelter providers communicate consistently to identify potentially unsheltered veterans. Providers share information, if the client authorizes release. A weekly community-wide conference call provides the opportunity to coordinate housing plans for unsheltered veterans. The VA created a "by-name" list to prioritize unsheltered veterans for VASH vouchers. There were no changes to the PIT count methodology.

**3B-3.2. How is the CoC ensuring that Veterans that are eligible for VA services are identified, assessed and referred to appropriate resources, i.e. HUD-VASH and SSVF?  
(limit 1000 characters)**

The locally-funded HandsOn CPOA and Maryhaven Collaborative Outreach assess clients, including veteran status, for each person. If a veteran self-identifies, the homeless system provider immediately refers veterans to the VA via a direct phone line. Each shelter has an assigned VA staff. Providers share information, if the client authorizes release. The VA determines eligibility for services and the homeless system assigns a case manager. If VA-eligible, the case manager and VA determine a housing plan. The Veteran Service Commission provides financial assistance. If VA-ineligible, CSB pays for initial housing costs for rapid exit from homelessness. Providers coordinate veteran housing during a weekly conference call. The VA created a "by-name" list to prioritize unsheltered veterans for VASH. Veterans have access to all CoC-funded programs. In addition, locally-funded PSH operated by NCR exclusively serves veterans. The VA and others provide services using private funding sources.

**3B-3.3. For Veterans who are not eligible for homeless assistance through the U.S Department of Veterans Affairs Programs, how is the CoC prioritizing CoC Program-funded resources to serve this population?  
(limit 1000 characters)**

The CoC prioritizes VA-ineligible homeless veterans via the vulnerability assessment, through a higher score. VA ineligible veterans are referred to CoC program resources through assigned case managers, independent of their sheltered or unsheltered status. The case manager identifies a housing plan for each individual, including RRH and PSH. If PSH is needed, the case manager submits an application to the Unified Supportive Housing System (USHS). The USHS fills PSH units according to HUD's housing prioritization guidelines and the results of the vulnerability assessment. The Veteran Service Commission provides financial assistance if needed and eligible. Otherwise CSB will pay for the person's initial housing costs, to facilitate rapid exit from homelessness. Currently 12% of our PSH inventory is occupied by veterans (both VA eligible and ineligible), matching the historic ratio of homeless veterans in emergency shelters. RRH is used when PSH is not needed and CSB pays for this cost.

**3B-3.4. Compare the total number of homeless Veterans in the CoC AND the total number of unsheltered homeless Veterans in the CoC, as reported by the CoC for the 2015 PIT Count compared to the 2010 PIT Count (or 2009 if an unsheltered count was not conducted in 2010).**

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2015	% Difference
Total PIT count of sheltered and unsheltered homeless veterans:	88	129	46.59%
Unsheltered count of homeless veterans:	0	10	0.00%

**3B-3.5. Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2015.** Yes

This question will not be scored.

**3B-3.5a. If "Yes," what are the strategies being used to maximize your current resources to meet this goal? If "No," what resources or technical assistance would help you reach the goal of ending Veteran homelessness by the end of 2015? (limit 1000 characters)**

The CoC works closely with the VA. The CoC includes VA and Veteran Service Commission representatives. Columbus joined the Mayor's Challenge to End Veteran Homelessness. A large strategy group met multiple times in 2014/2015 to develop a plan to end veteran homelessness. A small workgroup was also established for day to day operations. We shared best practices with other Challenge cities. The VA leads weekly meetings to plan successful veteran exits and issues weekly reports on progress. The CoC monitors housing resources and uses all available VA capacity for veterans. We monitor HMIS to ensure that there is no duplication of services and clients receive appropriate support. Prevention strategies are implemented through the SSVF programs. We collaborate with VA employment services and Homeless Veteran Reintegration Programs to help with employment. The VA will start entering VASH vouchers in HMIS to better monitor resources. Additional resources are needed for VA-ineligible veterans.

## 4A. Accessing Mainstream Benefits

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**4A-1. Does the CoC systematically provide information to provider staff about mainstream benefits, including up-to-date resources on eligibility and mainstream program changes that can affect homeless clients?** Yes

**4A-2. Based on the CoC's FY 2015 new and renewal project applications, what percentage of projects have demonstrated that the project is assisting project participants to obtain mainstream benefits, which includes all of the following within each project: transportation assistance, use of a single application, annual follow-ups with participants, and SOAR-trained staff technical assistance to obtain SSI/SSDI?**

### FY 2015 Assistance with Mainstream Benefits

Total number of project applications in the FY 2015 competition (new and renewal):	35
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 3a, 3b, 3c, 4, and 4a on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	35
Percentage of renewal and new project applications in the FY 2015 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	100%

**4A-3. List the healthcare organizations you are collaborating with to facilitate health insurance enrollment (e.g. Medicaid, Affordable Care Act options) for program participants. For each healthcare partner, detail the specific outcomes resulting from the partnership in the establishment of benefits for program participants. (limit 1000 characters)**

The Health Center at Faith Mission: 2015 year to date completed 176 Medicaid and 4 ACA applications for homeless individuals.

Southeast FQHC at Mount Carmel, Columbus Public Health, Columbus Public Health STD Clinic, The Breathing Association, OSU Free Clinics, Southeast

Mental Health: Education; Enrollment & Reenrollment in Medicaid &

Marketplace insurance; Number of assists provided by a trained health center

O/E assistance worker - 2,278; Number of applications submitted to the

Marketplace with the assistance of a trained health center O/E assistance

worker - 1,019; Estimated number of individuals enrolled with the assistance of a trained health center O/E assistance worker - 916.

Healthcare for the Homeless program at Primary One Health: Working with 392 homeless individuals and providing healthcare and enrollment in Medicaid/ACA.

**4A-4. What are the primary ways that the CoC ensures that program participants with health insurance are able to effectively utilize the healthcare benefits available?**

Educational materials:	<input checked="checked" type="checkbox"/>
In-Person Trainings:	<input checked="checked" type="checkbox"/>
Transportation to medical appointments:	<input checked="checked" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not Applicable or None:	<input type="checkbox"/>



## 4B. Additional Policies

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**4B-1. Based on the CoC's FY 2015 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH) and SSO (non-Coordinated Entry) projects in the CoC are low barrier? Meaning that they do not screen out potential participants based on those clients possessing a) too little or little income, b) active or history of substance use, c) criminal record, with exceptions for state-mandated restrictions, and d) history of domestic violence.**

### FY 2015 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2015 competition (new and renewal):	35
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2015 competition:	35
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2015 competition that will be designated as "low barrier":	100%

**4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), RRH, SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2015 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?**

### FY 2015 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2015 competition (new and renewal):	35
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2015 competition:	35
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2015 competition that will be designated as Housing First:	100%

**4B-3. What has the CoC done to ensure awareness of and access to housing and supportive services within the CoC's geographic area to persons that could benefit from CoC-funded programs but are not currently participating in a CoC funded program? In particular, how does the CoC reach out to for persons that are least likely to request housing or services in the absence of special outreach?**

Direct outreach and marketing:	<input checked="checked" type="checkbox"/>
Use of phone or internet-based services like 211:	<input checked="checked" type="checkbox"/>
Marketing in languages commonly spoken in the community:	<input checked="checked" type="checkbox"/>
Making physical and virtual locations accessible to those with disabilities:	<input checked="checked" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

**4B-4. Compare the number of RRH units available to serve any population from the 2014 and 2015 HIC.**

	2014	2015	Difference
RRH units available to serve any population in the HIC:	151	178	27

**4B-5. Are any new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction?** Yes

**4B-6. If "Yes" in Questions 4B-5, then describe the activities that the project(s) will undertake to ensure that employment, training and other economic opportunities are directed to low or very low income persons to comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) and HUD's implementing rules at 24 CFR part 135?  
(limit 1000 characters)**

The contractor Rockford Construction will ensure hiring preferences for low and very low income persons and local businesses where a CoC-funded project is located by implementing the following initiatives:

1. Complete the required Section 3 forms for reporting purposes twice per year during the construction phase.
2. Display new job postings on site within view of public areas identifying open positions, required qualifications, and where to obtain information about the application process.
3. Advertise new job postings in local media such as newspapers.
4. Post flyers to advertise new job postings in local public areas such as low income housing areas, retail areas, and community organizations.

In addition to the above efforts, Rockford Construction may select and implement additional efforts from the Appendix to Part 135 of the Title 24-Housing and Development guide.

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

**4B-7a. If "Yes" in Question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons defined as homeless in accordance with 24 CFR 578.89. Description must include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)**

not applicable

**4B-8. Has the project been affected by a major disaster, as declared by President Obama under Title IV of the Robert T. Stafford Act in the 12 months prior to the opening of the FY 2015 CoC Program Competition?** No

**4B-8a. If "Yes" in Question 4B-8, describe the impact of the natural disaster on specific projects in the CoC and how this affected the CoC's ability to address homelessness and provide the necessary reporting to HUD. (limit 1500 characters)**

not applicable

**4B-9. Did the CoC or any of its CoC program recipients/subrecipients request technical assistance from HUD in the past two years (since the submission of the FY 2012 application)? This response does not affect the scoring of this application.** No

**4B-9a. If "Yes" to Question 4B-9, check the box(es) for which technical assistance was requested.**

This response does not affect the scoring of this application.

CoC Governance:	<input type="checkbox"/>
CoC Systems Performance Measurement:	<input type="checkbox"/>
Coordinated Entry:	<input type="checkbox"/>
Data reporting and data analysis:	<input type="checkbox"/>
HMIS:	<input type="checkbox"/>
Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	<input type="checkbox"/>
Maximizing the use of mainstream resources:	<input type="checkbox"/>
Retooling transitional housing:	<input type="checkbox"/>
Rapid re-housing:	<input type="checkbox"/>
Under-performing program recipient, subrecipient or project:	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input checked="" type="checkbox"/>

**4B-9b. If TA was received, indicate the type(s) of TA received, using the categories listed in 4B-9a, the month and year it was received and then indicate the value of the TA to the CoC/recipient/subrecipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.**

This response does not affect the scoring of this application.

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance

## 4C. Attachments

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

For required attachments related to rejected projects, if the CoC did not reject any projects then attach a document that says "Does Not Apply".

Document Type	Required?	Document Description	Date Attached
01. 2015 CoC Consolidated Application: Evidence of the CoC's Communication to Rejected Projects	Yes	2015 CoC Consolid...	11/04/2015
02. 2015 CoC Consolidated Application: Public Posting Evidence	Yes	2015 CoC Consolid...	11/03/2015
03. CoC Rating and Review Procedure	Yes	CoC Rating and Re...	10/09/2015
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	CoC Rating and Re...	11/03/2015
05. CoCs Process for Reallocating	Yes	CoC's Process for...	11/03/2015
06. CoC's Governance Charter	Yes	CoC's Governance ...	11/04/2015
07. HMIS Policy and Procedures Manual	Yes	HMIS Policies and...	10/09/2015
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA Administratio...	10/09/2015
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No		
11. CoC Written Standards for Order of Priority	No	CoC Written Stand...	10/09/2015
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes	No		
13. Other	No	HMIS Lead and CHO...	11/04/2015
14. Other	No		
15. Other	No		

## **Attachment Details**

**Document Description:** 2015 CoC Consolidated Application: Evidence of the CoC's Communication to Rejected Projects

## **Attachment Details**

**Document Description:** 2015 CoC Consolidated Application: Public Posting Evidence

## **Attachment Details**

**Document Description:** CoC Rating and Review Procedure

## **Attachment Details**

**Document Description:** CoC Rating and Review Procedure: Public Posting Evidence

## **Attachment Details**

**Document Description:** CoC's Process for Reallocating

## **Attachment Details**

**Document Description:** CoC's Governance Charter

## **Attachment Details**

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

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** PHA Administration Plan

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** CoC Written Standards for Order of Priority

## **Attachment Details**

**Document Description:**

## **Attachment Details**



**Document Description:** HMIS Lead and CHO Agreement

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## Submission Summary

Page	Last Updated
1A. Identification	11/16/2015
1B. CoC Engagement	11/16/2015
1C. Coordination	11/18/2015
1D. CoC Discharge Planning	11/16/2015
1E. Coordinated Assessment	11/16/2015
1F. Project Review	11/16/2015
1G. Addressing Project Capacity	11/16/2015
2A. HMIS Implementation	11/16/2015
2B. HMIS Funding Sources	11/16/2015
2C. HMIS Beds	11/16/2015
2D. HMIS Data Quality	11/16/2015
2E. Sheltered PIT	11/16/2015
2F. Sheltered Data - Methods	11/16/2015
2G. Sheltered Data - Quality	11/16/2015
2H. Unsheltered PIT	11/16/2015
2I. Unsheltered Data - Methods	11/16/2015
2J. Unsheltered Data - Quality	11/16/2015
3A. System Performance	11/16/2015
3B. Objective 1	11/16/2015
3B. Objective 2	11/16/2015
3B. Objective 3	11/16/2015
4A. Benefits	11/16/2015
4B. Additional Policies	11/16/2015
4C. Attachments	11/16/2015
Submission Summary	No Input Required

Not applicable. The CoC did not reject any projects. The date of 10/31/2015 cited in 1F-5a is the date that the CoC would have notified any rejected projects, if any project had been rejected.

---

**From:** Lianna Barbu

**Sent:** Saturday, October 31, 2015 9:58 AM

**To:** Heather Notter; Alex Murphy; Amanda Glauer (aglauer@huck-house.org); Amanda Owen (aowen@ymcacolumbus.org); Andrea Ropp; Angela Stroller-Zervas; Anthony Penn; Antonio Caffey; Art Helldoerfer (ahelldoerfer@ymcacolumbus.org); Becky Westerfelt (rwesterfelt@huck-house.org); Beth Fetzer-Rice; Betsy McGraw; Charles Williams; Colleen Bain; Dave Kayuha; James Alexander (jalexander@maryhaven.com); Janet Bridges; Julie Embree; Kathryn Saylor; Kathy Hatfield (khatfield@chninc.org); Kim Eberst (Kim.Eberst@voago.org); Samantha Shuler (sshuler@chninc.org); Laura Black; Laura Brenner; Lebsock, Ron; Lynda LeClerc (lleclerc@huck-house.org); Marsha Zimmerman; Matt Leiterman (mleitterman@chninc.org); Michelle Norris; Mike Preston (mpreston@nationalchurchresidences.org); Miranda Cox (cox@southeastinc.com); Peggy Anderson (peggyanderson@archio.org); Steve Albanese (salbanese@maryhaven.com); Stewart A. Smith (ssmith@ywcacolumbus.org); Sue Reamsnyder; Tiffany Nobles ; Vivian Russell (vrussell@maryhaven.com) ; Will Spinner; Brigitte Lisath (blisath@amethyst-inc.org); Kerr, Nicole (nkerr@columbus-area.com); Sue Darby; Faith Williams (fwilliams@ywcacolumbus.org); mchieffo@ywcacolumbus.org; Patty Devlin

**Cc:** Janet Bridges; Michelle Heritage

**Subject:** RE: FY2015 CoC application project ranking

Good Morning,

Please see attached the final FY2015 CoC Application Project Ranking as recorded in esnaps. All projects were ranked and no project was rejected. You can also find the ranking, along the FY2015 CoC Application on CSB's website, at the link below:

<http://www.csb.org/?id=how.community.rlfc.hud>

Thank you for your work on the project applications.

Lianna Barbu

Operations Director

111 Liberty Street, Suite 150

Columbus, OH 43215

614-715-2535



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## resources for our partners

## news

## publications

## about us

## get involved

### FY 2015 Notice of Funding Availability

The U.S. Department of Housing and Urban Development (HUD) has released the FY 2015 Continuum of Care (CoC) Program Competition Notice of Funding Availability. The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by non-profit providers, State, and local governments to quickly re-house homeless individuals, families, persons fleeing domestic violence, and youth while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by homeless; and to optimize self-sufficiency among those experiencing homelessness. CoC's were required to designate a Collaborative Applicant to submit a consolidated CoC application for funding for the community as a whole, and the Community Shelter Board (CSB) is Franklin County's collaborative applicant. Please see this document for information on how the Franklin County CoC ranks projects for inclusion in the CoC application. Please contact CSB if you have a new, eligible program that you would like to discuss for this year's CoC application.

### 2015

- > FY 2015 Continuum of Care Application
- > FY 2015 Continuum of Care Project Priority Listing
- > Match and Leverage for Continuum of Care Projects
- > 2015 RLFC Prioritization Options
- > 2015 Continuum of Care Application Schedule
- > Continuum of Care Process for Funding Reallocation
- > 2015 Continuum of Care Application Final Ranking

### 2014

- > 2014 Continuum of Care Project Priority Listing
- > 2014 RLFC Rating and Review
- > Columbus 2014 Project Ranking

### 2013

- > 2013 Continuum of Care Consolidated Application
- > 2013 RLFC Rating and Review
- > Columbus 2013 Project Ranking

### 2012

- > 2012 CoC Exhibit 1

### 2011

- > 2011 CoC Exhibit 1

### 2010

- > 2010 CoC Exhibit 1

### 2009

- > 2009 CoC Exhibit 1

### 2008

- > 2008 CoC Exhibit 1
- > 2008 CoC Evaluation

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The Community Shelter Board receives support from the City of Columbus, the Franklin County Board of Commissioners, the United Way of Central Ohio, The Columbus Foundation, Nationwide, the U.S. Department of Housing and Urban Development, the State of Ohio, and other public and private donors.

Community Shelter Board, 111 Liberty Street, Ste 150, Columbus, Ohio 43215 614.221.9195 voice 614.221.9199 fax  
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**To:** Heather Notter; Alex Murphy; Amanda Glauer ([aglauer@huck-house.org](mailto:aglauer@huck-house.org)); Amanda Owen ([aowen@ymcacolumbus.org](mailto:aowen@ymcacolumbus.org)); Andrea Ropp; Angela Stroller-Zervas; Anthony Penn; Antonio Caffey; Art Helldoerfer ([ahelldoerfer@ymcacolumbus.org](mailto:ahelldoerfer@ymcacolumbus.org)); Becky Westerfelt ([rwesterfelt@huck-house.org](mailto:rwesterfelt@huck-house.org)); Beth Fetzer-Rice; Betsy McGraw; Charles Williams; Colleen Bain; Dave Kayuha; James Alexander ([jalexander@maryhaven.com](mailto:jalexander@maryhaven.com)); Janet Bridges; Julie Embree; Kathryn Saylor; Kathy Hatfield ([khatfield@chninc.org](mailto:khatfield@chninc.org)); Kim Eberst ([Kim.Eberst@voago.org](mailto:Kim.Eberst@voago.org)); Samantha Shuler ([sshuler@chninc.org](mailto:sshuler@chninc.org)); Laura Black; Laura Brenner; Lebsock, Ron; Lynda LeClerc ([lleclerc@huck-house.org](mailto:lleclerc@huck-house.org)); Marsha Zimmerman; Matt Leiterman ([mleiterman@chninc.org](mailto:mleiterman@chninc.org)); Michelle Norris; Mike Preston ([mpreston@nationalchurchresidences.org](mailto:mpreston@nationalchurchresidences.org)); Miranda Cox ([cox@southeastinc.com](mailto:cox@southeastinc.com)); Peggy Anderson ([peggyanderson@arcohio.org](mailto:peggyanderson@arcohio.org)); Steve Albanese ([salbanese@maryhaven.com](mailto:salbanese@maryhaven.com)); Stewart A. Smith ([ssmith@ywcacolumbus.org](mailto:ssmith@ywcacolumbus.org)); Sue Reamsnyder; Tiffany Nobles ; Vivian Russell ([vrussell@maryhaven.com](mailto:vrussell@maryhaven.com)) ; Will Spinner; Brigitte Lisath ([blisath@amethyst-inc.org](mailto:blisath@amethyst-inc.org)); Kerr, Nicole ([nkerr@columbus-area.com](mailto:nkerr@columbus-area.com)); Sue Darby; Faith Williams ([fwilliams@ywcacolumbus.org](mailto:fwilliams@ywcacolumbus.org)); mchieffo@ywcacolumbus.org; Patty Devlin

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<http://www.csb.org/?id=how.community.rlfh.hud>

Thank you for your work on the project applications.

Lianna Barbu

Operations Director

111 Liberty Street, Suite 150

Columbus, OH 43215

614-715-2535

**From:** Lianna Barbu

**Sent:** Thursday, October 22, 2015 10:35 AM

**To:** Heather Notter; Alex Murphy; Amanda Glauer ([aglauer@huck-house.org](mailto:aglauer@huck-house.org)); Amanda Owen ([aowen@ymcacolumbus.org](mailto:aowen@ymcacolumbus.org)); Andrea Ropp; Angela Stroller-Zervas; Anthony Penn; Antonio Caffey; Art Helldoerfer ([ahelldoerfer@ymcacolumbus.org](mailto:ahelldoerfer@ymcacolumbus.org)); Becky Westerfelt ([rwesterfelt@huck-house.org](mailto:rwesterfelt@huck-house.org)); Beth Fetzer-Rice; Betsy McGraw; Charles Williams; Colleen Bain; Dave Kayuha; James Alexander ([jalexander@maryhaven.com](mailto:jalexander@maryhaven.com)); Janet Bridges; Julie Embree; Kathryn Saylor; Kathy Hatfield ([khatfield@chninc.org](mailto:khatfield@chninc.org)); Kim Eberst ([Kim.Eberst@voago.org](mailto:Kim.Eberst@voago.org)); Samantha Shuler ([sshuler@chninc.org](mailto:sshuler@chninc.org)); Laura Black; Laura Brenner; Lebsock, Ron; Lynda LeClerc ([lleclerc@huck-house.org](mailto:lleclerc@huck-house.org)); Marsha Zimmerman; Matt Leiterman ([mleiterman@chninc.org](mailto:mleiterman@chninc.org)); Michelle Norris; Mike Preston ([mpreston@nationalchurchresidences.org](mailto:mpreston@nationalchurchresidences.org)); Miranda Cox ([cox@southeastinc.com](mailto:cox@southeastinc.com)); Peggy Anderson ([peggyanderson@arcohio.org](mailto:peggyanderson@arcohio.org)); Steve Albanese ([salbanese@maryhaven.com](mailto:salbanese@maryhaven.com)); Stewart A. Smith ([ssmith@ywcacolumbus.org](mailto:ssmith@ywcacolumbus.org)); Sue Reamsnyder; Tiffany Nobles ; Vivian Russell ([vrussell@maryhaven.com](mailto:vrussell@maryhaven.com)) ; Will Spinner; Brigitte Lisath ([blisath@amethyst-inc.org](mailto:blisath@amethyst-inc.org)); Kerr, Nicole ([nkerr@columbus-area.com](mailto:nkerr@columbus-area.com)); Sue Darby; Faith Williams ([fwilliams@ywcacolumbus.org](mailto:fwilliams@ywcacolumbus.org)); mchieffo@ywcacolumbus.org; Patty Devlin

**Cc:** Janet Bridges; Michelle Heritage

**Subject:** FY2015 CoC application project ranking

Good Morning,

Please see attached the FY2015 CoC application project ranking as approved by the Rebuilding Lives Funder Collaborative Board (CoC Board). The ranking will be presented to the Rebuilding Lives Funder Collaborative for their review and approval, prior to submittal to HUD on November 19.

Please let me know if you have any questions.

Thank you

Lianna Barbu

Operations Director

111 Liberty Street, Suite 150

Columbus, OH 43215

614-715-2535

## 2015 Prioritization Options

Date CoC Application Opened in e-snaps:

Friday, September 18, 2015

CoC Application Due Date to HUD:

Friday, November 20, 2015

Columbus/Franklin County Annual Renewal Demand (ARD):

\$10,896,951

### 2015 HUD Funding Available (may change based on HUD clarifications):

Tier 1	(85%)	\$9,262,408
Tier 2	(15% plus bonus funding)	\$3,269,085
Permanent Housing Bonus (included in Tier 2):		\$1,634,542
CoC Planning Funding	(not ranked)	\$326,909
UFA Funding	(not ranked)	\$163,454

HUD did not establish an order of priority for 2015. Highest scores will be awarded to PSH, RRH and TH programs serving youth. Based on prior year's prioritization, the following guideline will be used (both Tier 1 and 2):

- Renewal PSH, RRH and TH for youth
- New PSH through reallocation or bonus for 100% CH
- New RRH through reallocation
- All other renewal TH
- SSO for CPOA
- Renewal HMIS
- All other SSO

## Rebuilding Lives Funder Collaborative Process

### Scoring process:

Renewal projects	Points Available	Description
1 <sup>st</sup> Priority – New or reallocated projects renewing for the first time		
Program Evaluation ranking		HUD emphasizes performance of funded programs. The latest program evaluation available (FY15) ranks each project based on its performance for the period 7/1/2014 – 12/31/2014
High	9	
Medium	5	
Low/Not rated	1	
Usage of HUD grant funds		HUD emphasizes the effective utilization of available funds. Programs will be required to provide the total grant amount and the amount that was drawn down from HUD for the most recent closed grant cycle.
100% funds used	10	
80-99% funds used	8	
60-79% funds used	5	
40-59% funds used	2	
0-39% funds used	0	
Maximum possible points	19	
Minimum possible points	1	

## Timing

- **October 16, 2015: Draft Applications are due to CSB by 5:00pm** – Each CoC applicant agency must submit one copy of its draft project application(s) electronically to Heather Notter's attention at CSB.
- **October 30, 2015: Final Applications are due to CSB by 5:00pm** – Each CoC applicant agency must submit the final project application(s) via HUD's e-snaps system. Per the FY2015 NOFA, the CoC must notify all project applicants, no later than fifteen (15) days before the application deadline, of the inclusion of each project application in the CoC Consolidated Application submission.

## Naming Guidelines

Each project should follow the naming template "Agency Name or Acronym 2015 Program Name". For example "CHN 2015 Safe Haven".

Please follow the instructional guidelines that were shared, locate your last year's application and review for applicability of the responses for the questions that are similar.

### Ranking process:

- < Under Tier 1 ranking, the first time renewal projects (new or reallocated) will be ranked first
- < Projects will be ranked in descending order, based on the accumulated total points, and ranking options.
- < If two or more projects receive the same number of points, the ranking will be randomized by project.
- < Under Tier 1 ranking, the HMIS project will be ranked last (unless HUD prioritization trumps this option).
- < HUD prioritization criteria will govern the ranking positions in any options considered.

### Special Projects

- < Projects serving families and youth

### Option 1 (descending score based, renewals prioritized)

- < List all **renewal** projects (include first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1 and HUD prioritization, up to **Tier 1 amount or closest amount**
- < If there is a tie for the last ranked, renewal, non-special project in Tier 1, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall, continuum of care level funding amount (less dollars are risked) will be moved to the first ranking in Tier 2.
- < All other projects are listed in Tier 2, in the order of HUD's prioritization
- < List reallocation projects in Tier 2 (unless gap permits Tier 1)

### Option 1a (descending score based, renewals prioritized) (in FY2015 SAME as Option 1)

- < List all **renewal** projects (include first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1 and **not considering HUD prioritization**, up to **Tier 1 amount or closest amount**
- < If there is a tie for the last ranked, renewal, non-special project in Tier 1, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on



the overall, continuum of care level funding amount (less dollars are risked) will be moved to the first ranking in Tier 2.

- < All other projects are listed in Tier 2, in the order of HUD's prioritization
- < List reallocation projects in Tier 2 (unless gap permits Tier 1)

#### **Option 2 (descending score based, reallocation in Tier 1)**

- < List all **renewal** projects (include first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1 and HUD prioritization, up to **Tier 1 amount or closest amount less the amount allocated for the next bullet**
- < Capture any reallocation project(s) in Tier 1, after the renewal projects
- < If there is a tie for the last ranked, renewal, non-special project in Tier 1, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall, continuum of care level funding amount (less dollars are risked) will be moved to the first ranking in Tier 2.
- < All other projects are listed in Tier II, in the order of HUD's prioritization
- < List reallocation projects in Tier 1

#### **Option 2a (descending score based, reallocation in Tier 1) (in FY2015 SAME as Option 2)**

- < List all **renewal** projects (include first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1 and **not considering HUD prioritization**, up to **Tier 1 amount or closest amount less the amount allocated for the next bullet**
- < Capture any reallocation project(s) in Tier 1, after the renewal projects
- < If there is a tie for the last ranked, renewal, non-special project in Tier 1, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall, continuum of care level funding amount (less dollars are risked) will be moved to the first ranking in Tier 2.
- < All other projects are listed in Tier II, in the order of HUD's prioritization
- < List reallocation projects in Tier 1

#### **Option 3 (descending performance based, prioritize any reallocations)**

- < List all **renewal** projects in the order of their performance (HIGH, MEDIUM, LOW) and HUD prioritization, (include first time renewals and HMIS project as detailed above) in Tier 1, up to **Tier 1 amount or closest amount less the amount allocated for the next bullet**
- < Capture the reallocation project(s) in Tier 1, after the renewal projects
- < If there is a tie for the last ranked, renewal, non-special project in Tier 1, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall, continuum of care level funding amount (less dollars are risked) will be moved to the first ranking(s) in Tier 2.
- < Identify Tier 2 projects, **lower performing**, based on HUD guidance ("low" performers)
- < Projects rated as "low" performers based on the FY15 Program Evaluation are listed in Tier 2 in the order of HUD's prioritization (renewal)
- < If the amount is not sufficient to meet the minimum amount of **Tier 2 amount** needed for Tier 2 ranking, renewal projects rated as "MEDIUM" will be listed in descending order of their score. If there is a tie for the last ranked, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall, continuum of care level funding amount (less dollars are risked) will be moved last.

#### Option 4 (program priority based)

- < List all **renewal** projects (include first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1 and HUD prioritization, up to **Tier 1 amount or closest amount less the amount allocated for the next two bullets**
- < Identify **lower priority** projects, based on HUD guidance, and remove from Tier 1
- < Capture any reallocation project(s) in Tier 1, after the renewal projects
- < If there is a tie for the last ranked, renewal, non-special project in Tier 1, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall, continuum of care level funding amount (less dollars are risked) will be moved to the first ranking(s) in Tier 2.
- < The Identified Tier 2 projects, **lower priority**, will be moved in Tier 2
  - o Transitional housing projects, (non-youth serving and non-rapid re-housing) are listed in Tier 2 in order of scoring
  - o Other projects are listed in Tier 2 in the order of HUD's prioritization

#### Option 5 (spread the cuts across all programs) – WILL NOT BE USED IN 2015

- < List all **renewal** projects (include first time renewals and HMIS project as detailed above) in the order of their scoring and HUD prioritization for Tier 1, up to **Tier 1 amount or closest amount**
- < Apply the HUD published funding decrease (amount at risk in Tier 2) to all renewal projects, by decreasing funding across the board, by a calculated percentage
- < List reallocation project(s) in Tier 2

#### Option 6 (spread the cuts across all programs that scored low) – WILL NOT BE USED IN 2015

- < List all **renewal** projects (include first time renewals and HMIS project as detailed above) in the order of their scoring and HUD prioritization for Tier 1, up to **Tier 1 amount or closest amount**
- < Apply the HUD published funding decrease (amount at risk in Tier 2) to all renewal projects that scored below a certain level (10 points), by decreasing funding across these projects, by a calculated percentage



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- > 2015 RLFC Prioritization Options
- > 2015 Continuum of Care Application Schedule

### 2014

- > 2014 Continuum of Care Project Priority Listing
- > 2014 RLFC Rating and Review
- > Columbus 2014 Project Ranking

### 2013

- > 2013 Continuum of Care Consolidated Application
- > 2013 RLFC Rating and Review
- > Columbus 2013 Project Ranking

### 2012

- > 2012 CoC Exhibit 1

### 2011

- > 2011 CoC Exhibit 1

### 2010

- > 2010 CoC Exhibit 1

### 2009

- > 2009 CoC Exhibit 1

### 2008

- > 2008 CoC Exhibit 1
- > 2008 CoC Evaluation

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**From:** Lianna Barbu

**Sent:** Saturday, September 19, 2015 9:18 AM

**To:** Alex Murphy; Amanda Glauer (aglauer@huck-house.org); Amanda Owen (aowen@ymcacolumbus.org); Andrea Ropp; Angela Stroller-Zervas; Anthony Penn; Antonio Caffey; Art Helldoerfer (ahelldoerfer@ymcacolumbus.org); Becky Westerfelt (rwesterfelt@huck-house.org); Beth Fetzer-Rice; Betsy McGraw; Charles Williams; Colleen Bain; Dave Kayuha; James Alexander (jalexander@maryhaven.com); Janet Bridges; Julie Embree; Kathryn Saylor; Kathy Hatfield (khatfield@chninc.org); Kim Eberst (Kim.Eberst@voago.org); Samantha Shuler (sshuler@chninc.org); Laura Black; Laura Brenner; Lebsock, Ron; Lynda LeClerc (lleclerc@huck-house.org); Marsha Zimmerman; Matt Leiterman (mleiterman@chninc.org); Michelle Norris; Mike Preston (mpreston@nationalchurchresidences.org); Miranda Cox (cox@southeastinc.com); Peggy Anderson (peggyanderson@archio.org); Steve Albanese (salbanese@maryhaven.com); Stewart A. Smith (ssmith@ywcacolumbus.org); Sue Reamsnyder; Tiffany Nobles; Vivian Russell (vrussell@maryhaven.com); Will Spinner; Brigitte Lisath (blisath@amethyst-inc.org); Kerr, Nicole (nkerr@columbus-area.com); Sue Darby; Faith Williams (fwilliams@ywcacolumbus.org); mchieffo@ywcacolumbus.org

**Cc:** Heather Notter

**Subject:** RE: 2015 CoC NOFA - application process is open - PLEASE READ

**Importance:** High

As the CoC application process unfolds we will communicate often and will send important information that must be followed. Please take time to read all these communications as they will help in having a smooth process.

Attached is the prioritization document for 2015.

The link to the NOFA is below:

[https://www.hudexchange.info/resource/4688/fy-2015-coc-program-nofa/?utm\\_source=HUD+Exchange+Mailing+List&utm\\_campaign=13b6930006-FY+2015+CoC+Program+Comp+Now+Open&utm\\_medium=email&utm\\_term=0\\_f32b935a5f-13b6930006-18765189](https://www.hudexchange.info/resource/4688/fy-2015-coc-program-nofa/?utm_source=HUD+Exchange+Mailing+List&utm_campaign=13b6930006-FY+2015+CoC+Program+Comp+Now+Open&utm_medium=email&utm_term=0_f32b935a5f-13b6930006-18765189)

There are several guides at the link below that will help you with completing the application:  
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

Please pay special attention to the following guides:

[\*\*Renewal Project Application Instructional Guide\*\*](#)

[\*\*New Project Application Instructional Guide\*\*](#)

[\*\*Performance Measures - Project Application Instructional Guide\*\*](#)

[\*\*Budgets - Project Application Instructional Guide\*\*](#)

We received an exemption from HUD and we can resubmit the GIW to include all the amendments to projects to date, which will correct all past inconsistencies with budgets and changes we had to make to programs. We will send you the final GIW as soon as we get approval from HUD, not later than September 29.

Thank you

Lianna Barbu  
Operations Director

111 Liberty Street, Suite 150  
Columbus, OH 43215  
614-715-2535

**From:** Lianna Barbu

**Sent:** Thursday, September 17, 2015 9:21 PM

**To:** Alex Murphy; Amanda Glauer ([aglauer@huck-house.org](mailto:aglauer@huck-house.org)); Amanda Owen ([aowen@ymcacolumbus.org](mailto:aowen@ymcacolumbus.org)); Andrea Ropp; Angela Stroller-Zervas; Anthony Penn; Antonio Caffey; Art Helldoerfer ([ahelldoerfer@ymcacolumbus.org](mailto:ahelldoerfer@ymcacolumbus.org)); Becky Westerfelt ([rwesterfelt@huck-house.org](mailto:rwesterfelt@huck-house.org)); Beth Fetzer-Rice; Betsy McGraw; Charles Williams; Colleen Bain; Dave Kayuha; James Alexander ([jalexander@maryhaven.com](mailto:jalexander@maryhaven.com)); Janet Bridges; Julie Embree; Kathryn Saylor; Kathy Hatfield ([khatfield@chninc.org](mailto:khatfield@chninc.org)); Kim Eberst ([Kim.Eberst@voago.org](mailto:Kim.Eberst@voago.org)); Samantha Shuler ([sshuler@chninc.org](mailto:sshuler@chninc.org)); Laura Black; Laura Brenner; Lebsock, Ron; Lianna Barbu; Lynda LeClerc ([lleclerc@huck-house.org](mailto:lleclerc@huck-house.org)); Marsha Zimmerman; Matt Leiterman ([mleiterman@chninc.org](mailto:mleiterman@chninc.org)); Michelle Norris; Mike Preston ([mpreston@nationalchurchresidences.org](mailto:mpreston@nationalchurchresidences.org)); Miranda Cox ([cox@southeastinc.com](mailto:cox@southeastinc.com)); Peggy Anderson ([peggyanderson@arcohio.org](mailto:peggyanderson@arcohio.org)); Steve Albanese ([salbanese@maryhaven.com](mailto:salbanese@maryhaven.com)); Stewart A. Smith ([ssmith@ywcacolumbus.org](mailto:ssmith@ywcacolumbus.org)); Sue Reamsnyder; Tiffany Nobles; Vivian Russell ([vrussell@maryhaven.com](mailto:vrussell@maryhaven.com)); Will Spinner; Brigitte Lisath ([blisath@amethyst-inc.org](mailto:blisath@amethyst-inc.org)); Kerr, Nicole ([nkerr@columbus-area.com](mailto:nkerr@columbus-area.com)); Sue Darby; Faith Williams ([fwilliams@ywcacolumbus.org](mailto:fwilliams@ywcacolumbus.org)); [mchieffo@ywcacolumbus.org](mailto:mchieffo@ywcacolumbus.org)

**Cc:** Heather Notter

**Subject:** 2015 CoC NOFA - application process is open

Good morning,

HUD will open the annual application process on Friday. We will send you the official link to the NOFA as soon as it is available. We highly recommend that you print out the document and read through it.

The full application is due to HUD on **November 20**. Here are a couple of significant dates that we have to meet in order to conform with NOFA rules:

- **October 16, 2015: Draft Applications are due to CSB by 5:00pm** – Each CoC applicant agency must submit one copy of its draft project application(s) **electronically (email)** to Heather Notter's attention at CSB. If the application is not submitted your project will lose its funding.
- **October 30, 2015: Final Applications are due to CSB by 5:00pm** – Each CoC applicant agency must submit the final project application(s) as approved by CSB **via HUD's e-snaps system**. Per the FY2015 NOFA, the CoC must notify all project applicants, no later than fifteen (15) days before the application deadline (November 6), of the inclusion of each project application in the CoC Consolidated Application submission. If the application is not submitted by this deadline your project will lose its funding.

You can start creating your projects. Our request is that each project follows the naming template **"Agency Name or Acronym 2015 Program Name"**. For example **"CHN 2015 Safe Haven"**. This way we can easily identify your project and the application year. For your budgets please use the HUD approved GIW (attached), until further notice.

Please let me know if you have questions.  
Thank you



Lianna Barbu

Operations Director

111 Liberty Street, Suite 150

Columbus, OH 43215

direct: 614-715-2535

614-221-9195 x 115

[www.csb.org](http://www.csb.org)



## CoC Process for Funding Reallocation

### Policy:

HUD CoC funding reallocation can occur following the scenarios below:

1. **Sub-recipient no longer interested in continuing the project or part of the project.** The procedure below is implemented as soon as the CoC or Community Shelter Board is made aware by the current sub-recipient of the intent to close or decrease the size of the project.
2. **Sub-recipient no longer needs the CoC funding as other funding is available for the project or part of the project.** The procedure below is implemented as soon as the CoC or Community Shelter Board is made aware by the current sub-recipient that HUD funding is no longer needed for the project or part of the project.
3. **Sub-recipient underperforms and the Rebuilding Lives Funder Collaborative (RLFC) (CoC) and its board decide to reallocate the full or partial funding of the project to a new sub-recipient.** The procedure below is implemented as soon as the RLFC and the RLFC Board make the decision to defund a current sub-recipient, a project or part of a project due to underperformance. Underperformance is defined as any of the following:
  - a. Continued underperformance as it relates to local and federal performance outcomes
  - b. Continued underperformance as it relates to efficient use of available project capacity, the project is not using its available capacity
  - c. Continued underperformance as it relates to full drawdowns of allocated HUD CoC funds
  - d. Continued underperformance as it relates to compliance with local and federal project review and certification standards
  - e. Misuse of federal funds and not following federal legislation with no plans to come in compliance are grounds for immediate defunding. In this case Community Shelter Board, on behalf of the RLFC will take immediate steps to accelerate the procedure below as to not put at risk the households served by the underperforming project.

### Procedure:

Community Shelter Board, on behalf of the RLFC, issues an electronic Request for Proposals for new projects interested in receiving HUC CoC funds, as soon as it is determined that funding is available for reallocation. The electronic request for proposals is issued broadly, to all providers serving the homeless population. A Concept Paper that can be found on CSB's website at <http://www.csb.org/?id=resources.money.applying> is required to be submitted by all entities interested in applying. The Concept Paper can be replaced by the CoC Project Application if HUD funding application timing is such that the normal development steps cannot be followed.

The RLFC Board will review the Concept Paper at their scheduled meeting and will recommend implementation of a single or multiple projects, dependent on the funding availability.

If a site-based PSH development is proposed, the project development steps must be followed, as detailed in the Information Packet posted on CSB's website at the link below.

[http://www.csb.org/Files/Docs/RL%20Information%20Packet%20-%20Revised%208%204%2015%20\(2\).pdf](http://www.csb.org/Files/Docs/RL%20Information%20Packet%20-%20Revised%208%204%2015%20(2).pdf)

The RLFC has final decision making authority on all new projects created through reallocation. A resolution confirming their decision is voted on by members of the RLFC.

## Heather Notter

---

**From:** Lianna Barbu  
**Sent:** Tuesday, February 03, 2015 12:38 PM  
**To:** (jwagar@ywcacolumbus.org); Alex Murphy; Amanda Glauer (aglauer@huck-house.org); Amanda Owen (aowen@ymcacolumbus.org); Andrea Ropp; Angela Stroller-Zervas; Anthony Penn; Antonio Caffey; Art Helldoerfer (ahelldoerfer@ymcacolumbus.org); Becky Westerfelt (rwesterfelt@huck-house.org); Beth Fetzer-Rice; Caroline Reed (creed@amethyst-inc.org); Colleen Bain; Dave Kayuha; Grant Schroeder (gschroeder@MARYHAVEN.COM); James Alexander (jalexander@maryhaven.com); Julie Embree; Kathryn Saylor; Kathy Hatfield (khatfield@chninc.org); Kim Eberst (Kim.Eberst@voago.org); Larry Martin; Laura Black; Lebsack, Ron; Lianna Barbu; Lynda LeClerc (lleclerc@huck-house.org); Marsha Zimmerman; Matt Leiterman (mleitterman@chninc.org); Michelle Norris; Mike Preston (mpreston@nationalchurchresidences.org); Miranda Cox (coxm@southeastinc.com); Peggy Anderson (peggyanderson@arcoho.org); Steve Albanese (salbanese@maryhaven.com); Stewart A. Smith (ssmith@ywcacolumbus.org); Sue Reamsnyder; Sue Villilo; Terry Moore; Tiffany Nobles ; Vivian Russell (vrussell@maryhaven.com) ; Will Spinner; 'Susan Weaver'; 'Joy E. Chivers (joy.chivers@sbcglobal.net)'; 'Adrienne Corbett (acorbett@homelessfamiliesfoundation.org)'; 'Becky Westerfelt (rwesterfelt@huck-house.org)'; 'Paul H. Coleman (pcoleman@maryhaven.com)'; 'Thomas W. Slemmer (tslemmer@ncr.org)'; 'Francis J. Kirk (Frank.kirk@use.salvationarmy.org)'; 'Bill Lee (leeb@southeastinc.com)'; 'Dennis J. Kresak (Dennis.Kresak@voago.org)'; 'Elfi Di Bella (edibella@ywcacolumbus.org)'; 'Icrowell@lssco.org'; Peggy Anderson, MSW, LISW-S; ksaylor@amethyst-inc.org; John Bickley; 'Lynda LeClerc (lleclerc@huck-house.org)'; 'Sue Villilo (svillilo@lssco.org)'; 'James Alexander (jalexander@maryhaven.com)'; 'Colleen Bain Gold (cbain@ncr.org)'; 'Beth Fetzer-Rice (BFetzer-Rice@use.salvationarmy.org)'; Laura Black; 'Steve Albanese'; 'khatfield@chninc.org'; Amy Price; Susan Reamsnyder; Caroline Reed; Michael Preston; Cheryl Brewer; caffeya@southeastinc.com; astoller-zervas@ywcacolumbus.org; apenn@columbus-area.com; Sue Darby; Kimberly Follett (Kimberly.Follett@voago.org); Faith Williams (fwilliams@ywcacolumbus.org)  
**Cc:** Janet Bridges; Noel Welsh; Michelle Heritage  
**Subject:** 2015 CoC Application  
**Importance:** High

Good Afternoon,

HUD issued this morning the Grant Inventory Worksheet (GIW) that signals the start of the **2015 CoC Application process** for grant terms starting **7/1/2016**.

It looks like HUD will conduct their annual application process much earlier than in previous years so it is time to prepare.

For the 2015 funding year we have the following funding availability:

1. This year, we have available **\$116,850 for a new project**. The funds come from the current YWCA Rental Assistance program – the project will not need these funds starting 7/1/2016 due to the rehabilitation work that is being done at the Griswold building and availability of Section 8 vouchers once this work is completed. We have to find a **new host** for this funding so we will not lose it. **The funds can be used for a rental assistance (25% match required) or leasing project, to create new housing units for homeless individuals and/or families. Permanent supportive housing or**



**rapid rehousing projects are eligible. The target population is chronic homeless, but the new HUD prioritization standards do apply if there are no chronic homeless households.**

2. In addition, we may have available app. \$350,000 in HUD bonus funding (we do not know for sure the availability or amount of funding, for the 2014 round it turned out that the funding available was 1.4 mil) for a **new permanent supportive housing or rapid rehousing** project. If at the \$350k level, the bonus funding is awarded to Community Housing Network's new Terrace Place project. In case the funding is similar to the 2014 availability, I would like to gage your interest in a **new rental assistance (25% match required) or leasing project, to create new housing units for homeless individuals and/or families.** The funding available would be dependent on the maximum amount we can apply for less the amount CHN Terrace Place was awarded and the possibility of applying for two new projects during the same funding year.

**As a current recipient of HUD Continuum of Care funds or service and housing provider please let me know if you are interested in applying for funds under # 1 and/or #2.**

Please respond by **EOB February 20.**

The GIW must be submitted to HUD by February 16 (federal holiday ☺) so we actually have to submit the document on February 13. Given the short timeframe we have **we will issue the completed GIW to partner agencies not later than February 11 with a hard deadline for feedback by EOB on February 12.**

Please let me know if you have any questions  
Thank you

  
communityshelterboard

Lianna Barbu  
Operations Director  
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Columbus, OH 43215  
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614-221-9195 x 115  
[www.csb.org](http://www.csb.org)



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### FY 2015 Notice of Funding Availability

The U.S. Department of Housing and Urban Development (HUD) has released the FY 2015 Continuum of Care (CoC) Program Competition Notice of Funding Availability. The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by non-profit providers, State, and local governments to quickly re-house homeless individuals, families, persons fleeing domestic violence, and youth while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by homeless; and to optimize self-sufficiency among those experiencing homelessness. CoC's were required to designate a Collaborative Applicant to submit a consolidated CoC application for funding for the community as a whole, and the Community Shelter Board (CSB) is Franklin County's collaborative applicant. Please see this document for information on how the Franklin County CoC ranks projects for inclusion in the CoC application. Please contact CSB if you have a new, eligible program that you would like to discuss for this year's CoC application.

### 2015

- > Match and Leverage for Continuum of Care Projects
- > 2015 RLFC Prioritization Options
- > 2015 Continuum of Care Application Schedule
- > Continuum of Care Process for Funding Reallocation

### 2014

- > 2014 Continuum of Care Project Priority Listing
- > 2014 RLFC Rating and Review
- > Columbus 2014 Project Ranking

### 2013

- > 2013 Continuum of Care Consolidated Application
- > 2013 RLFC Rating and Review
- > Columbus 2013 Project Ranking

### 2012

- > 2012 CoC Exhibit 1

### 2011

- > 2011 CoC Exhibit 1

### 2010

- > 2010 CoC Exhibit 1

### 2009

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- > 2008 CoC Exhibit 1
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**Rebuilding Lives Funder Collaborative  
111 Liberty Street, Suite 150  
Columbus, Ohio 43215**

**June 3, 2015**

**Resolution to Approve the Governance Structure and the Annual Plan of the  
Rebuilding Lives Funder Collaborative**

**Resolution**

WHEREAS, through the HEARTH legislation, the CoC is asked to make a number of decisions regarding the role of the CoC and the governance of the CoC;

THEREFORE, be it resolved that the Rebuilding Lives Funder Collaborative voted to accept the updated Columbus and Franklin County Continuum of Care Governance and Policy Statements as presented, inclusive of the RLFC membership, the RLFC Board membership and its authority and the written process to select new members for the RLFC and RLFC Board;

THEREFORE, be it resolved that the Rebuilding Lives Funder Collaborative voted to accept the 2015-2016 Annual Plan as presented;

THEREFORE, be it resolved that the Rebuilding Lives Funder Collaborative agrees to reauthorize the RLFC Board to act on its behalf according to the responsibilities outlined in the Columbus and Franklin County Continuum of Care Governance and Policy Statements and the 2015-2016 Annual Plan;

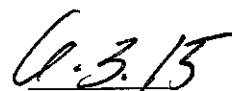
THEREFORE, be it resolved that the Rebuilding Lives Funder Collaborative agrees to reauthorize Community Shelter Board to be the Collaborative Applicant for the community, as defined by HUD through the HEARTH legislation and apply for HUD funding on its behalf;

THEREFORE, be it resolved that the Rebuilding Lives Funder Collaborative agrees to reauthorize Community Shelter Board as the Unified Funding Agency for the community, as defined by HUD through the HEARTH legislation and its implementation as required by HUD;

**Approved by voice vote.**

Witnessed by:

  
Michelle Heritage, Chair

  
Date

**Rebuilding Lives Funder Collaborative Board  
111 Liberty Street, Suite 150  
Columbus, Ohio 43215**

**May 28, 2015**

**Resolution to Approve the Homeless Management Information System Lead and  
Policies and Procedures and associated materials**

**Resolution**

WHEREAS, the Department of Housing and Urban Development (HUD) issued two components of the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) legislation, the interim regulations for the Emergency Solutions Grant program and Continuum of Care program;

WHEREAS, through this legislation HUD defined the Continuum of Care (CoC) and the role of the CoC to include: operating the CoC, designating and operating a Homeless Management Information System (HMIS) and CoC planning;

WHEREAS, Community Shelter Board serves as the HMIS lead agency for the CoC and has policies for operating Columbus ServicePoint (CSP), the community's local HMIS;

WHEREAS, the Rebuilding Lives Funder Collaborative Board authorized Community Shelter Board as the HMIS Lead for the community, with the role of maintaining the community's HMIS in accordance with HUD requirements and gave CSB the authority to make system-wide decisions regarding the HMIS;

WHEREAS, HUD requires approval by the Rebuilding Lives Funder Collaborative Board of HMIS policies and procedures, a privacy plan, security plan and data quality plan for operating a HMIS;

WHEREAS, there are no significant changes noted for the HMIS Policies and Procedures, privacy plan and security plan since the previous approval of these documents on May 20, 2014

WHEREAS the data quality plan for operating a HMIS was updated significantly to reflect the newly issued HUD 2014 HMIS Data Standards;

THEREFORE, be it resolved that the Rebuilding Lives Funder Collaborative Board following the approved Columbus & Franklin County Continuum of Care Governance and Policy Statements, voted to reauthorized Community Shelter Board as the HMIS Lead for the Columbus and Franklin County CoC and to accept the Privacy and Data Security Policy, the Client Tracking and Quality Assurance (QA) Standards and the Columbus ServicePoint Policies and Procedures as presented;

**Approved by voice vote.**

Witnessed by:

  
Michelle Heritage, Chair

  
Date

# Columbus & Franklin County Continuum of Care Governance and Policy Statements

## Overview

### Continuum of Care Structure under HEARTH

The Continuum of Care (CoC) is the group composed of representatives of relevant organizations ...that are organized to plan for and provide, as necessary, a system of outreach, engagement, and assessment; emergency shelter; rapid re-housing; transitional housing; permanent housing; and prevention strategies to address the various needs of homeless or at risk of homelessness persons for a specific geographic area. The Continuum is responsible for coordinating and implementing a system for its geographic area to meet the needs of the homeless population and subpopulations within the geographic area.

The CoC primary responsibilities under the HEARTH Act include the following:

- < Operating the CoC
- < Designating and operating an HMIS
- < CoC planning

In Columbus and Franklin County the CoC role and responsibilities is fulfilled by a committee called the Rebuilding Lives Funder Collaborative (RLFC). The RLFC provides stewardship for all the strategies developed under the Rebuilding Lives (RL) Plan and provides funding for the capital, services and operations of supportive housing in Columbus & Franklin County, coordinates activities for the new plan, promotes collaboration to achieve goals and strategies, and secures resources for programs and projects. For purposes of clarity, RLFC will be used when referring to CoC activities.

The policy statements below govern the work of the RLFC. The policies are organized into different areas. The RLFC will meet annually to review and approve its annual plan and policies.

The categories are:

- < Structure
- < HUD Mandated Activities
- < RL Plan Activities
- < Community Shelter Board Activities
- < Homeless or Formerly Homeless Citizens Activities
- < Provider Activities
- < Other Activities

## Structure

### 1. Membership

The RLFC membership will comport with HUD requirements as listed below. The RLFC will annually review and approve its membership, inclusive of new members.

An RLFC Board (Board) will be formed with representatives of the RLFC that will meet regularly and is given authority by the RLFC to make decisions on its behalf.

A total of 35 members shall be annually approved for participation. The RLFC Board will recommend annually members for participation on the RLFC and rotation of members will be considered if and when appropriate, using the table below. Regular attendance is expected by the RLFC representative or their delegate, as long as the delegate holds decision making authority. If a delegate is needed for a meeting, the official member must inform Community Shelter Board (CSB) as soon as possible ahead of the meeting so that CSB can assure there are no conflicts of interest. CSB's Executive Director shall chair the RLFC and the RLFC Board.

RLFC Structure	Organizational Representative
Non-profit homeless providers (rotating provider consideration)	Community Shelter Board  YMCA
Victim service providers (rotating provider consideration)	The Center for Family Safety and Healing
Faith-based organizations (rotating consideration)	Stowe Mission of Central Ohio
Governments	City of Columbus Columbus Mayor's Office Columbus City Council Franklin County
Businesses (rotating consideration)	The Columbus Foundation Capital Crossroads and Discovery SID CSB Board Member CSB Board Member CSB Board Member
Advocates	Columbus Coalition for the Homeless Corporation for Supportive Housing Legal Aid Society of Columbus
Public Housing Agencies	Columbus Metropolitan Housing Authority
School districts	Columbus City Schools – Project Connect
Social Service Providers (rotating consideration)	Goodwill Franklin County Children Services Franklin County Dept of Job and Family Services Franklin County Office on Aging Franklin County Board of Developmental Disabilities United Way of Central Ohio

Mental Health Agencies	ADAMH Board Twin Valley Behavioral Healthcare
Hospitals (rotating provider consideration)	OhioHealth
Universities (rotating provider consideration)	Columbus State Community College
Affordable Housing Developers	Affordable Housing Trust Corporation Ohio Capital Corporation for Housing
Law Enforcement	Columbus Police Department
Organizations that serve homeless and formerly homeless veterans	Veterans Administration Veterans Service Commission
Homeless and formerly homeless persons (rotating consideration)	Citizens Advisory Council (CAC) Citizens Advisory Council (CAC)

The RLFC is expected to meet in May, August and November of each year, in open meetings. CSB staff shall give notice of each meeting of the RLFC, to each member of the RLFC, by mailing or emailing the same to each member at least seven (7) days prior to the holding of such meeting and posting the meeting agenda on CSB's website.

CSB provides staff support for the RLFC.

## RLFC Responsibilities:

### Operations of the CoC

- Adopt and follow a written process to select the RLFC Board (The process must be reviewed, updated and approved at least once every 5 years.)
- Appoint members to the RLFC Board every two years
- Renew authority of the RLFC Board
- Review and approve annual membership inclusive of new members
- Review and approve the Annual Plan and the RLFC Governance and Policy Statements.
- Appoint additional committees, subcommittees or work groups
- Review, as needed, decisions made by the RLFC Board, inclusive of:
  - o Performance targets
  - o Provider performance and outcomes of ESG and CoC funded programs
  - o Actions against poor performers
- Establish and operate a coordinated assessment system for homeless individuals and families (delegated to CSB)
- Establish and consistently follow written standards for the provision of ESG and CoC assistance (delegated to CSB)

### CoC Planning

- Receive community and public policy updates relevant to homelessness issues
- Receive updates on the Rebuilding Lives Plan, the local plan to end homelessness
- Plan and conduct a sheltered and unsheltered point-in-time count of homeless persons (delegated to CSB)
- Conduct an annual gaps analyses of the homeless needs and services (delegated to CSB)
- Provide required information to complete the local Consolidate Plan(s) (delegated to CSB)

- Review and act on the annual funding allocations, inclusive of ESG and CoC funds and establish funding priorities (delegated to RLFC Board)
- Review and act on the HUD CoC Application including all relevant charts and tables
- Review and act on any programs that should be removed from HUD funding and any proposed funding reallocations
- Review and make final determination on provider appeals, if provider is not in agreement with the RLFC Board determination
- Review and act annually on the proposed new supportive housing bonus project
- Designate a Collaborative Applicant
- Review and act on any other RLFC Board recommendations

### **HMIS Operations (delegated to the RLFC Board)**

- Designate a single HMIS for the CoC
- Designate an HMIS Lead
- Ensure consistent participation in HMIS (delegated to CSB)
- Ensure the HMIS compliance with HUD requirements (delegated to CSB)
- Review and approve the HMIS policies and procedures, privacy plan, security plan and data quality plan (delegated to CSB)

### **Decision Making**

Quorum: A majority of the RLFC members shall constitute a quorum at all meetings thereof. The meeting will be adjourned if no quorum is present and no voting will occur in such case. Robert's Rules of Order will be followed and a simple majority voting is necessary for any resolution of the committee to be passed.

## **2. RLFC Board**

The RLFC Board is formed with representatives of the RLFC. The group meets regularly and is given authority by the RLFC to make decisions on its behalf.

The RLFC Board will be the RLFC's Executive Committee, comprised of the following representatives:

Organizational Representative
1. City of Columbus
2. Franklin County
3. Citizens Advisory Council (homeless or formerly homeless representative)
4. ADAMH
5. CMHA
6. UWCO
7. The Columbus Foundation
8. The Columbus Coalition for the Homeless
9. Affordable Housing Trust Corporation
10. CSB Board Member
11. CSB Executive Director, Chair

Regular attendance is expected by the RLFC Board representative or their delegate, as long as the delegate holds decision making authority. If a delegate is needed for a meeting, the official



member must inform CSB as soon as possible ahead of the meeting so that CSB can assure there are no conflicts of interest.

The RLFC Board is expected to meet in April, August and November of each year. CSB may, from time to time, request the RLFC Board to meet more frequently to meet HUD imposed requirements.

CSB staff shall give notice of each meeting of the RLFC Board, to each member of the RLFC Board, by mailing or emailing the same to each member at least seven (7) days prior to the holding of such meeting.

CSB provides staff support for the RLFC Board.

### **RLFC Board Responsibilities:**

#### **Operations of the CoC**

- Review and recommend annual membership to the RLFC
- Review and recommend bi-annually membership to the RLFC Board
- Review and recommend to the RLFC the Annual Plan and the RLFC Governance and Policy Statements

#### **CoC Planning**

- Receive community and public policy updates relevant to homelessness issues
- Receive updates on the Rebuilding Lives Plan and take actions that will move the plan forward
- Provide feedback and information, as needed, to the local government (City/County) on their Consolidated Plan
- Review and act on the annual funding allocations, inclusive of ESG and CoC funds and establish funding priorities
- Review and recommend RLFC action on the HUD CoC Application including all relevant charts and tables
- Review and act on provider appeals as necessary
- Review and act on the annual Point in Time Count
- Review and act on the annual Housing Inventory Chart and Gap Analyses
- Review and act on any other HUD mandated activity

#### **Performance Monitoring**

- Review existing projects and programs and recommend actions to the RLFC
- Review and recommend to the RLFC any programs that should be removed from HUD funding and any proposed funding reallocations
- Recommend to the RLFC actions against poor performers
- Review existing projects and make recommendations to the full RLFC for its consideration, action and inclusion in the consolidated HUD CoC application.
- Review ongoing projects that have participated in QII at the request of the provider and/or CSB.

- Review and approve annual performance standards and evaluation of outcomes for programs funded under the ESG and CoC programs

### **New Programs**

- Review and incorporate feedback from the RLFC provider group on new projects and any other relevant topics
- Review and incorporate feedback from the CAC group on new projects and any other relevant topics
- Hear presentation from any new project developer about its proposal. The project developer will also be asked to make a presentation to the RLFC Board to respond to questions about its proposal.
- Make recommendations to the full RLFC for its consideration, action and inclusion in the consolidated HUD CoC application of any proposed new supportive housing bonus project
- Review and recommend the new permanent supportive housing (PSH) priority for consideration by the Ohio Housing Finance Agency

### **HMIS Operations**

- Designate a single HMIS for the CoC
- Designate an HMIS Lead
- Ensure consistent participation in HMIS (delegated to CSB). Monitor that all recipients of financial assistance under the CoC and ESG programs and any programs funded previously through McKinney-Vento Act (SHP, SPC, SRO) are using the HMIS to collect client-level data on persons served.
- Ensure the HMIS compliance with HUD requirements (delegated to CSB)
- Review and approve the HMIS policies and procedures, privacy plan, security plan and data quality plan for the operation and administration of the local HMIS

If the provider is not satisfied with a decision made by CSB (for funded providers) or the RLFC Board (for all providers), the provider may appeal this decision to CSB's Board to Trustees (for funded providers) or the RLFC (for non-funded providers).

### **Decision Making**

Quorum: A majority of the RLFC Board members shall constitute a quorum at all meetings thereof. The meeting will be adjourned if no quorum is present and no voting will occur in such case.

Robert's Rules of Order will be followed and a simple majority voting is necessary for any resolution of the committee to be passed. Voting by proxy is allowed only in circumstances wherein subrecipients of HUD funding request budget amendments. Quorum for a vote by proxy may only constitute the full roster of RLFC Board members. Voting by proxy may be completed via mail, facsimile, or electronic mail, and the complete record of each vote by proxy shall be collected and maintained by CSB. In order for a budget amendment vote by proxy to be finalized, a majority of all RLFC Board members must represent the leading vote.

No RLFC Board member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents.

### **3. Conflict of Interest**

Any individual participating in or influencing decision making must identify actual or perceived conflicts of interest as they arise and comply with the letter and spirit of this policy. Disclosure should occur at the earliest possible time and if possible, prior to the discussion of any such issue. Individuals with a conflict of interest should abstain from voting on any issue in which they may have a conflict. An individual with a conflict of interest, who is also the committee chair, shall yield that position during discussion and abstain from voting on the item.

Annual written disclosure statements will be provided by each committee member by June 30. Members will not be permitted to participate until the statement is on file at CSB.

### **4. New member elections**

For the RLFC membership, the RLFC Board will propose new member participation each year, using the membership composition described in section 1. The RLFC Board will receive recommendations for consideration from the CAC, CSB Board and the Columbus Coalition for the Homeless for their respective organizations' representation. CSB will post on the [csb.org](http://csb.org) website by March 1 of each year that nominations for RLFC membership are open. The nomination period will remain open until the RLFC Board meeting in April. The RLFC Board will consider the nominations and recommendations at their April meeting. The RLFC Board will have to reach consensus when recommending new members for the RLFC. In this context, consensus means that first a unanimous vote will be attempted. If unanimity cannot be achieved, a positive vote by two-thirds (2/3) of the members (7) is needed for a new member to be recommended. The RLFC will vote on the RLFC Board recommendations at its May meeting. These meetings are open to the public. The new membership will take effect July 1 for the following fiscal year.

For the RLFC Board membership, the RLFC Board will propose new member participation every other year. The RLFC Board will receive recommendations for consideration from the CAC, CSB Board and the Columbus Coalition for the Homeless for their respective organizations' representation. These representatives must be members of the RLFC. The RLFC Board will have to reach consensus when recommending new members for the RLFC Board. In this context, consensus means that first a unanimous vote will be attempted. If unanimity cannot be achieved, a positive vote by two-thirds (2/3) of the members (7) is needed for a new member to be recommended. The RLFC Board membership will not exceed 11. A minimum of 2 and a maximum of 5 new members will be recommended every two years. In proposing new members, the RLFC Board will be mindful that the RLFC Board membership must be free of any factual or perceived conflict of interest. The recommendations will be made at the April RLFC Board meeting. The RLFC will vote on the RLFC Board recommendations at its May meeting with the new membership taking effect July 1 for the following two fiscal years.

## 5. RL Plan Activities

The RLFC will not serve as the convener for the plan's strategies, but will provide stewardship and oversight for the overall community plan to end homelessness, the Rebuilding Lives Plan.

The role of the Strategy Conveners is as follows:

- < Form a planning group
- < Identify resources for planning
- < Report progress to the RLFC
- < May (or may not) serve as lead implementing agency
- < Suggest resources for implementation
- < Assist the RLFC with securing resources.

Throughout the implementation of the RL Plan, evaluation efforts will assess the degree to which the plan is executed and will track the success of each strategy. Columbus ServicePoint (CSP) our community's Homeless Management Information System (HMIS) will be used as the primary data source. CSP will be used for enhancing data collection activities related to the RL Plan. It will also be used as a monitoring, outcomes measurement and performance-based contracting tool across systems and to inform the community about the progress of the RL Plan and meet HUD requirements.

## Community Shelter Board Activities

The Community Shelter Board will be the primary organization supporting all of the groups involved with moving the RL Plan forward. In addition to its roles as a convener of some of the RL Plan strategies, CSB will be responsible for the following:

### Operations of the CoC

- < Chair the RLFC and RLFC Board and serve as the fiscal agent
- < Staff the RLFC and RLFC Board and provide support
- < Issue annually a public request for new RLFC member nomination
- < Act as the Collaborative Applicant for the Columbus and Franklin County RLFC, per HUD's HEARTH legislation
- < Act as the Unified Funding Agency for the Columbus and Franklin County RLFC, per HUD's HEARTH legislation
- < Act as the HMIS Lead for the Columbus and Franklin County RLFC, per HUD's HEARTH legislation
- < Act as the subrecipient of the Emergency Solutions Grant (ESG) funds for the Columbus and Franklin County RLFC

### CoC Planning

- < Implement the requirements of the HEARTH legislation as mandated by HUD
- < Prepare and present to the RLFC Board annual funding allocations, inclusive of ESG and CoC funds and semi-annual updates on funding allocations
- < Provide program and system level performance monitoring and evaluations of outcomes

- < Establish and operate a coordinated assessment system for homeless individuals and families
- < Establish and consistently follow written standards for the provision of ESG and CoC assistance
- < Communicate the Rebuilding Lives (RL) Plan progress to the community, including an annual Report Card
- < Meet the HUD record keeping requirements, inclusive of CoC records
- < Plan and conduct a sheltered and unsheltered point-in-time count of homeless persons
- < Conduct an annual gaps analyses of the homeless needs and services
- < Provide required information to complete the local Consolidate Plan(s)
- < Certify the applicants/projects for ODSA grants

### **HMIS Operations**

- < Ensure consistent participation in HMIS (delegated to CSB)
- < Ensure the HMIS compliance with HUD requirements (delegated to CSB)
- < Prepare the HMIS policies and procedures, privacy plan, security plan and data quality plan (delegated to CSB)
- < Operate as the HMIS Lead and make system-wide decisions regarding the HMIS that impact all covered homeless organizations. HMIS Lead means the entity designated by the RLFC Board in accordance with 24 CFR part 580 to operate the Continuum's HMIS on the RLFC's behalf.

### **6. Point in Time Count Plan**

Consistent with HUD requirements and in concert with the Ohio Count, an annual Point In Time Count will be conducted. Participation in the Homeless Count Work Group will be open to all interested. The RLFC Board will review and approve the Point in Time Count Plan annually and empower CSB to lead coordination efforts to conduct the count.

### **7. HUD Application Process**

The RLFC will meet annually to review and act on the HUD CoC Application including all relevant charts and tables. CSB will coordinate the applicant submission of CoC project applications, prepare the CoC Application and submit the consolidated application on behalf of the RLFC.

### **8. ODSA Application Processes**

To fulfill the ODSA Homeless Assistance programs application processes, CSB will certify applicants/projects on behalf of the RLFC Board and make recommendations to ODSA. Agencies that disagree with CSB will appeal to the RLFC Board via electronic appeals.

### **9. Letter of Support and Certification**

Programs and services which meet the needs of homeless families and individuals in Franklin County, Ohio are eligible to request letters of support or certification from the RLFC Board and CSB. The RLFC Board will only provide letters of support or certification to agencies which have a record of providing quality services to persons who are homeless or at risk of homelessness, and for projects that are consistent with the local priorities established by the

RLFC. New agencies must demonstrate the ability to provide high quality services. Projects may receive letters of support or certification if they:

- < Document the need for the program;
- < Provide a clearly defined program with attainable outcomes;
- < Demonstrate collaboration with other community-based organizations;
- < Demonstrate the provision of high quality services; and
- < Deliver services in a highly cost-effective manner.

## **10. Program Performance Standards**

Program performance standards will be established by CSB and recommended to the RLFC Board for approval and will incorporate HUD requirements and local standards. CSB will incorporate these standards into annual program agreements with each provider agency. An annual Program Outcome Plan (POP) will be part of the agreement. If CSB and the agency disagree on the annual POP, the agency may appeal to the RLFC Board (if not CSB-funded) or CSB Board Chair (if CSB-funded). CSB will monitor program performance and provide monthly, quarterly, semi-annual and annual data reports. Program performance standards will be reviewed annually by the RLFC Board.

## **11. Quality Improvement Intervention**

CSB will address programs of ongoing concern through a Quality Improvement Intervention (QII) process. The QII process is based on quarterly one-on-one dialogues between CSB and the provider agency and considers agency plans and progress on addressing program issues. CSB and provider agency enter into quarterly QII if a program experiences long-standing and/or serious program issues and/or systemic agency concerns. If the agency and/or CSB find that the QII process is not working, either may refer the concerns/issues to the RLFC Board for handling. The provider will be given an opportunity to present its case to the RLFC Board before it makes its recommendation to the RLFC.

Through its evaluative work, CSB will establish performance ratings every year of each HUD and CSB funded programs. Based on these ratings, CSB will recommend the RLFC Board programs that should not continue to receive funding through the annual HUD application process due to underperformance. All programs rated as “Low” performers through CSB’s annual Program Evaluation will be discussed at the RLFC Board. CSB will recommend the RLFC Board any funding reallocations that should occur based on program performance and need.

The RLFC will be the final decision maker regarding any programs that should be removed from HUD funding and any proposed funding reallocations.

## **12. Meeting Support**

CSB will provide meeting support for the RLFC and RLFC Board and all other committee meetings by scheduling meetings, developing agendas, issuing meeting materials and posting all relevant documents to [www.csb.org](http://www.csb.org).



- < RLFC and RLFC Board members may suggest agenda items
- < Agenda and meeting materials will be released one week prior to scheduled meetings.
- < The agenda will be reviewed and adopted at the start of the meeting; changes may be offered for consideration.
- < Meeting notes will be produced and distributed within 30 days of the meeting.
- < Materials will be distributed electronically or through mail to all RLFC and RLFC Board members and provider agency designees.

### 13. Costs

Every effort will be made to keep process costs to the minimum necessary to achieve full funding. CSB will work to raise funds to support the processes of the RLFC, including central administrative requirements related to HMIS and the PIT Count.

### HMIS/CSP Lead Roles and Activities / Columbus ServicePoint Implementation

CSB, as the RLFC designated HMIS Lead will maintain the community's Homeless Management Information System (HMIS) – Columbus ServicePoint – in compliance with HUD standards and coordinate all related activities including training, maintenance and technical assistance to agencies. Each participating agency or Contributing HMIS Organization (CHO) will be expected to participate in the CSP Administrators Group which oversees CSP operations. Annually, CSB will conduct an anonymous Administrator/User survey and provide the results of that survey to the RLFC Board.

CSB has the following roles:

- < Responsible for making decisions about HMIS management and administration.
- < Designate a single information system as the official HMIS software for the geographic area.
- < Develop all policies and plans the HMIS lead is required to develop. Annually update the Security Plan, Data Quality Plan and Privacy Policy.
- < Develop a governance charter and document all assignments and designations consistent with the governance charter. The charter is to contain, at the minimum:
  - A requirement that the HMIS Lead enter into written HMIS Participation Agreements with each Contributing Homeless Organization (CHO) requiring the CHO to comply with this part and imposing sanctions for failure to comply;
  - The participation fee charged by the HMIS; and
  - Such additional requirements as may be issued by notice from time to time.

- 14.** Ensure the operation of and consistent participation by recipients of funds from the Emergency Solutions Grants Program and from the other programs authorized by Title IV of the McKinney-Vento Act. Duties include establishing the HMIS; conducting oversight of the HMIS; and taking corrective action, if needed, to ensure that the HMIS is compliant with all HUD requirements; Ensure that all recipients of financial assistance under the Continuum of Care program and the Emergency Solutions Grant program and any programs funded previously through McKinney-Vento Act (SHP, SPC, SRO) are using the HMIS to collect client-level data on persons served.

15. Develop written HMIS policies and procedures for all CHOs for the operation of the HMIS;
16. Execute a written HMIS Participation Agreement with each CHO, which includes the obligations and authority of the HMIS Lead and CHO, the requirements of the security plan with which the CHO must abide, the requirements of the privacy policy with which the CHO must abide, the sanctions for violating the HMIS Participation Agreement (e.g., imposing a financial penalty, requiring completion of standardized or specialized training, suspending or revoking user licenses, suspending or revoking system privileges, or pursuing criminal prosecution), and an agreement that the HMIS Lead and the CHO will process Protected Identifying Information consistent with the agreement. The HMIS Participation Agreement may address other activities to meet local needs;
17. Serve as the applicant to HUD for grant funds to be used for HMIS activities for the Continuum of Care's geographic area, as directed by the RLFC, and, if selected for an award by HUD, enter into a grant agreement with HUD to carry out the HUD-approved activities;
18. Monitor and enforce compliance by all CHOs with the requirements of this part and report on compliance to RLFC Board and HUD;
19. The HMIS Lead must submit a security plan, a data quality plan, and a privacy policy to the RLFC Board for approval within [the date that is 6 months after the effective date of the final rule to be inserted at final rule stage] and within 6 months after the date that any change is made to the local HMIS. The HMIS Lead must review and update the plans and policy at least annually. During this process, the HMIS Lead must seek and incorporate feedback from the RLFC Board and CHO. The HMIS Lead must implement the plans and policy within 6 months of the date of approval by the RLFC Board.
20. The HMIS Lead must develop a privacy policy. At a minimum, the privacy policy must include data collection limitations; purpose and use limitations; allowable uses and disclosures; openness description; access and correction standards; accountability standards; protections for victims of domestic violence, dating violence, sexual assault, and stalking; and such additional information and standards as may be established by HUD in notice.
21. The HMIS Lead must establish a security plan which meets the minimum requirements for a security plan as established by HUD in notice.
22. The HMIS Lead must designate a security officer to be responsible for ensuring compliance with applicable security standards. The HMIS Lead must designate one staff member as the HMIS security officer.
23. The HMIS Lead must ensure that each covered homeless organization designates a security officer and conduct workforce security measures.
24. The HMIS Lead must conduct workforce security screening; The HMIS Lead must ensure that each CHO conduct criminal background checks on the HMIS security officer and on all administrative users. Unless otherwise required by HUD, background checks may be conducted only once for administrative users.



25. The HMIS Lead must report security incidents. Each HMIS Lead must implement a policy and chain of communication for reporting and responding to security incidents, including a HUD-determined predefined threshold when reporting is mandatory, as established by HUD in notice.
26. The HMIS Lead must establish a disaster recovery plan. The HMIS Lead must develop a disaster recovery plan, which must include at a minimum, protocols for communication with staff, the RLFC Board, and CHOs and other requirements established by HUD in notice.
27. The HMIS Lead must conduct an annual security review. Each HMIS Lead must complete an annual security review to ensure the implementation of the security requirements for itself and CHOs. This security review must include completion of a security checklist ensuring that each of the security standards is implemented in accordance with the HMIS security plan.
28. The HMIS Lead must ensure that each user completes security training at least annually and prior to given access to the HMIS.
29. The HMIS Lead must ensure that each covered homeless organization conducts an annual security review.
30. The HMIS Lead must set data quality benchmarks including bed coverage rates and service-volume coverage rates.
31. The HMIS Lead must develop and implement a data quality plan.
32. The HMIS Lead may archive data in the HMIS but follow standards published in the Federal Register notices.
33. The HMIS Lead must, at least annually, or upon request from HUD submit an unduplicated count of clients served and an analysis of unduplicated counts.
34. The HMIS Lead shall submit reports to HUD as required.

## **Provider Activities**

### **35. Provider Input**

The RLFC values input and participation by the HUD providers in all processes. These shall include:

- < Designated seats on all committees.
- < The opportunity to review and comment on new projects prior to RLFC Board review.
- < The opportunity to review and comment on RLFC annual plan, policies, and program standards.

### **36. Provider Program Requirements and Rights**

Provider agencies are the cornerstone of success for the implementation of the RL Plan. A collaborative, streamlined system with clear goals and objectives will result in continued success for provider agencies. Provider agency roles include the following:

- < Continue to develop and implement high-quality programs and services

- < Work together with conveners, collaborators, and funders to build support for programs
- < Share and implement best practices and collaborate with other providers
- < Work together with funders to evaluate programs and engage in quality improvement activities
- < Participate in advocacy efforts

The RLFC expects that Providers will meet requirements to receive HUD Funding and intends to treat all providers fairly in evaluating performance.

#### **Requirements:**

- < Meet relevant program and HUD standards and achieve program outcome goals.
- < Submit an annual program outcome plan in line with HUD and RLFC requirements and update program descriptions through the annual CSB Gateway process.
- < Submit CoC project application per HUD timeline.
- < Submit required data through Columbus ServicePoint.
- < Submit a copy of HUD APR to CSB concurrent with submission to HUD.

#### **Rights:**

- < Participate in Quality Improvement Intervention (QII) prior to HUD funds being reduced or eliminated by the RLFC.
- < Appeal to the RLFC if it disagrees with a recommendation by the RLFC Board.
- < Request a waiver from compliance with specific program performance standards.
- < Submit Concept Papers and Project Plans for new supportive housing projects, for the consideration of the RLFC Board and the RLFC, in accordance with the standards for development of new projects, found at [www.csb.org](http://www.csb.org).

### **37. Committees**

The following committees are currently operational. These committees are also staffed by Community Shelter Board representatives.

**Adult System Operations Workgroup (ASOW)** – a provider group comprised of representatives of non-profit agencies operating emergency shelters for single adults, the coordinated point of access to emergency shelter and outreach providers. The group meets at least monthly, more often during the winter overflow season, to further the provision of services for homeless single adults.

**Family System Operations Workgroup (FSOW)** – a provider group comprised of representatives of non-profit agencies operating the emergency shelter for families and the front door to the family shelter, the local domestic violence provider, providers of direct housing/rapid re-housing services and providers of family prevention activities. The group meets monthly to further the provision of services for homeless families.

**Permanent Supportive Housing Roundtable** – a provider group comprised of representatives of non-profit agencies operating the permanent supportive housing programs

in the community, the local mental health and substance abuse board and the local housing authority. The group meets quarterly to improve the provision of permanent supportive housing system and services for formerly homeless single adults and families.

**HMIS (CSP) Administrators Group** - a provider group comprised of representatives of non-profit agencies using the local homeless management information system, Columbus ServicePoint (CSP). Each agency that has access to CSP must have a designated primary and backup administrator. Both are invited to participate at this quarterly meeting where new HMIS developments are discussed and improvements to the system and proposed and implemented.

**Citizens Advisory Council (CAC)** The Citizens Advisory Council is a CSB sponsored group that has membership comprised of homeless and formerly homeless individuals. This group meets monthly.

The RLFC values input and participation by the CAC in all processes. These shall include:

- < Designated seats on committees.
- < The opportunity to review and comment on new projects prior to RLFC Board review.
- < The opportunity to review and comment on RLFC annual plan, policies, and program standards.

**Point in Time Count Workgroup** – a group comprised of representatives of non-profit agencies operating emergency shelters, the coordinated point of access to emergency shelter outreach providers, local homeless advocacy groups and other social service agencies. The group meets starting in the fall of each year and until the annual point in time count occurs and all the counting is finalized. The purpose of the group is to plan and implement the annual point in time count of unsheltered homeless individuals.

# HMIS Governance

## 1. Purpose

The Rebuilding Lives Funder Collaborative (RLFC), the Columbus and Franklin County Continuum of Care (CoC) operates a Homeless Management Information System (HMIS), Columbus ServicePoint (CSP), to record and store client-level information about the numbers, characteristics, and needs of persons who use homeless housing and supportive services and for persons at risk of homelessness.

CSP is used to aggregate data about the extent and nature of homelessness over time; produce an unduplicated count of homeless persons; understand patterns of service use; and measure the effectiveness of homeless assistance projects and programs. Data produced is used for planning, education and reporting purposes.

The goal of the CSP is to support the delivery of homeless and housing services in Columbus and Franklin County. The CSP is:

- a benefit to individual clients through enhanced service delivery
- a tool for the provider agencies in managing programs and services
- a guide for CSB and its funders regarding community resource needs and service delivery

While accomplishing these goals, the RLFC recognizes the primacy of client needs in the design and management of the CSP. These needs include both the need continually to improve the quality of homeless and housing services with the goal of eliminating homelessness in Columbus and Franklin County, and the need vigilantly to maintain client confidentiality, treating the personal data of our most vulnerable populations with respect and care. As the guardians entrusted with this personal data, we have both a moral and a legal obligation to ensure that this data is being collected, accessed and used appropriately. The needs of the people we serve are the driving forces behind the CSP.

## 2. RLFC Responsibilities

The RLFC has HMIS responsibilities as described in the Columbus and Franklin County Continuum of Care Governance and Policy Statements as approved by the RLFC and the following:

- Designating a single information system as the official HMIS software for the geographic area.
- Designating an HMIS Lead to operate the system.
- Providing for governance of the HMIS Lead, including:
  - The requirement that the HMIS Lead enter into written CSP Participation Agreements with each Contributing HMIS Organization (CHO) requiring the CHO to comply with federal regulations regarding HMIS and imposing sanctions for failure to comply; and
  - The participation fee, if any, charged by the HMIS Lead;
- Maintaining documentation evidencing compliance with this part and with the governance charter; and
- Reviewing, revising and approving the policies and plans required by federal regulation.

## **3. Designations**

### **3.1. HMIS System**

The RLFC designates Bowman Systems' ServicePoint operated by the Community Shelter Board as the official HMIS for the CoC's geographic area.

### **3.2. HMIS Lead**

The RLFC designates the Community Shelter Board as the HMIS Lead (CSP Lead) to operate the CoC's HMIS, CSP.

## **4. Responsibilities of the CSP Lead**

The CSP Lead has HMIS responsibilities as described in the Columbus and Franklin County Continuum of Care Governance and Policy Statements as approved by the RLFC. The CSP Lead is responsible for:

- Ensuring the operation of and consistent participation by recipients of CoC and Emergency Solutions Grants (ESG) Program funds, including oversight of the CSP and any necessary corrective action to ensure that the CSP is in compliance federal requirements;
- Developing written CSP policies and procedures in accordance with § 580.31 for all CHOs;
- Executing a written CSP Participation Agreement with each CHO, which includes the obligations and authority of the CSP Lead and CHO, the requirements of the security plan and privacy policy with which the CHO must abide, sanctions for violating the CSP Participation Agreement, and an agreement that the CSP Lead and the CHO will process Protected Identifying Information consistent with the agreement;
- Serving as the applicant to the US Department of Housing and Urban Development (HUD) for CoC grant funds to be used for CSP activities for the CoC's geographic area, as directed by the RLFC, and entering into grant agreements with HUD to carry out the HUD-approved CSP activities;
- Monitoring and enforcing compliance by all CHOs with HUD requirements and reporting on compliance to the RLFC and HUD;
- Monitoring data quality and taking necessary actions to maintain input of high-quality data from all CHOs;
- The CSP Lead must submit annually a security plan, an updated data quality plan, and a privacy policy to the RLFC Board for review and approval. The CSP Lead must review and update the plans and policy at least annually. During this process, the CSP Lead must seek and incorporate feedback from the CSP Administrators Group and CHO. The CSP Lead must implement the plans and policy within 6 months of the date of approval by the RLFC Board.

## **5. Duties of the CSP Lead**

The CSP Lead shall retain decision-making authority and responsibility related to basic CSP project management functions. The CSP Lead shall oversee the operation and management of the CSP, in accordance with the HMIS/CSP Lead Roles and Responsibilities described in the Columbus and Franklin County Continuum of Care Governance and Policy Statements as approved by the RLFC and in accordance with the CSP Additional Documentation and Forms described in section 9 below.

The CSP Lead will monitor the data system for compliance with all HUD Data and Technical Standards.

### **5.1. CSP Policies and Procedures**

The CSP Lead must adopt written policies and procedures for the operation of the CSP that apply to the CSP Lead, its CHOs, and the RLFC. These policies and procedures must comply with all applicable Federal law and regulations, and applicable state or local governmental requirements. The CSP Lead may not establish local standards for any CHO that contradicts, undermines, or interferes with the implementation of the HMIS standards as prescribed in this part.

### **5.2. Unduplicated Count**

The CSP Lead must, at least once annually, or upon request from HUD, submit to the RLFC an unduplicated count of clients served and an analysis of unduplicated counts, when requested by HUD.

### **5.3. Reporting**

The CSP Lead shall submit reports to HUD as required.

The CSP Lead shall oversee and monitor CSP data collection and production of the following reports:

- Sheltered point-in-time count;
- Housing Inventory Chart;
- Annual Homeless Assessment Report (AHAR); and
- Annual Performance Reports (APRs).

### **5.4. Privacy**

The CSP Lead must develop a privacy policy. At a minimum, the privacy policy must include data collection limitations; purpose and use limitations; allowable uses and disclosures; openness description; access and correction standards; accountability standards; protections for victims of domestic violence, dating violence, sexual assault, and stalking; and such additional information and standards as may be established by HUD in notice. Every organization with access to protected identifying information must implement procedures to ensure and monitor its compliance with applicable agreements and the requirements of this part, including enforcement of sanctions for noncompliance.

### **5.5. CSP Standards**

The CSP Lead, in contracting with the HMIS vendor, must require the HMIS vendor and the software to comply with HMIS standards issued by HUD as part of its contract.

### **5.6. Participation Fee**

The CSP Lead shall collectively charge the CHOs for a participation fee not to exceed \$11,000 per year, billed annually at the start of each fiscal year, for existing licenses. Each CHO will be provided one user license at the fee of \$250. All other user licenses will carry a fee calculated so that altogether the collective participation fee will not exceed \$11,000.

In addition, each CHO will be provided with two viewer reporting licenses at no cost (a reporting license may be purchased instead of the viewer license, with the CHO paying the difference in cost). Any additional reporting licenses will be provided at full cost to the CHO, currently \$90 for a viewer license and \$170 for a reporting license.

CHOs will purchase additional user licenses throughout the year from the CSP vendor through the CSP Lead. The cost for user licenses will be determined by the vendor, and will not be changed by the CSP Lead.

## **5.7. Training and Technical Assistance**

The CSP Lead shall be responsible for the following:

- Schedule, coordinate and hold quarterly CSP Administrator meetings
- Ensure required basic training is available to CHO staff and accessible on a regular basis.
- Ensure technical assistance and help desk support is available and accessible to CHOs on a regular basis.
- Ensure CHOs have access to reports, technical assistance, and training required to develop a data quality improvement plan when necessary.

## **6. Responsibilities of the RLFC Board**

The RLFC Board has HMIS responsibilities as described in the Columbus and Franklin County Continuum of Care Governance and Policy Statements as approved by the RLFC. The RLFC Board will work with the CSP Lead to:

- Develop, annually review, and, as necessary, revise for RLFC Board approval a privacy plan, security plan, and data quality plan for the CSP, as well as any other CSP policies and procedures required by HUD.
- Develop for RLFC Board approval and implement a plan for monitoring the CSP to ensure that:
  - Recipients and subrecipients consistently participate in CSP;
  - CSP is satisfying the requirements of all regulations and notices issued by HUD;
  - The CSP Lead is fulfilling the obligations outlined in its CSP Governance Charter and Agreement with the CSP, including the obligation to enter into written participation agreements with each contributing CSP organization.

## **7. Responsibilities of the CHO**

A CHO must comply with federal regulations regarding CSP.

A CHO must comply with Federal, state, and local laws that require additional privacy or confidentiality protections. When a privacy or security standard conflicts with other Federal, state, and local laws to which the CHO must adhere, the CHO must contact the CSP Lead and collaboratively update the applicable policies for the CHO to accurately reflect the additional protections.

## **8. Joint CSP Lead-CHO Responsibility for Privacy**

The CSP Lead and the CHO using the CSP are jointly responsible for ensuring that CSP processing capabilities remain consistent with the privacy obligations of the CHO.

## **9. CSP Additional Documentation and Forms**

Documentation and forms below are posted on the CSP Lead's website, [www.csb.org](http://www.csb.org).

- CSP User Guide

This document is password protected. CHO Administrators may access this information by contacting the CSP Lead Administrator to acquire the password.

- FY2016 CSP Policies & Procedures  
Policies and Procedures for the optimal operation of CSP are described in this Manual. The policies cover operational, security, privacy and other data related standards that agencies need to follow to ensure good functionality of the community's homeless management information system.
- CSP Client Tracking and QA Standards Data Dictionary
- FY16 Client Acknowledgement for Data Collection
- FY16 CSP Administrator Designation Form
- FY16 CSP Program Implementation Request Form
- FY16 CSP User Agreement
- FY16 License Request Form
- FY16 License Relinquishment Form
- FY16 Agency Privacy Policy
- FY16 Agency Privacy Posting



# **Community Shelter Board**

Columbus ServicePoint

## **Policies and Procedures**

Last Revised: 11/2014

## TABLE OF CONTENTS

<b>1. INTRODUCTION .....</b>	<b>1</b>
1.1 COMMUNITY SHELTER BOARD .....	1
1.2 PROJECT SUMMARY .....	1
1.3 GOVERNING PRINCIPLES .....	2
1.4 TERMINOLOGY .....	2
1.5 OWNERSHIP .....	3
<b>2. IMPLEMENTATION OVERVIEW .....</b>	<b>5</b>
2.1 RELATIONSHIP TO CHOS .....	5
2.2 RELATIONSHIP TO BOWMAN INTERNET SYSTEMS .....	5
2.3 CENTRAL SERVER .....	5
2.4 SECURITY INFRASTRUCTURE .....	6
<b>3. ROLES AND RESPONSIBILITIES .....</b>	<b>8</b>
3.1 PROJECT ORGANIZATION .....	8
3.1.1 <i>Project Management</i> .....	8
3.1.2 <i>Agency Administrator</i> .....	9
3.1.3 <i>User Access Levels</i> .....	10
3.1.4 <i>CSB Communication with CHOs</i> .....	11
3.1.5 <i>CHO Communications with CSB</i> .....	12
3.1.6 <i>System Availability</i> .....	13
3.1.7 <i>Ethical Data Use</i> .....	14
3.1.8 <i>CHO Grievances</i> .....	15
3.1.9 <i>Client Grievance</i> .....	16
3.1.10 <i>CHO Hardware/Software Requirements</i> .....	17
3.1.11 <i>CHO Technical Support Requirements</i> .....	18
3.1.12 <i>CSP Documentation (Policies &amp; Procedures, User's Manual, QA Standards &amp; Data Dictionary, and CSP related forms) Updates</i> .....	18
3.2 SECURITY .....	20
3.2.1 <i>User Access</i> .....	20
3.2.2 <i>User Changes</i> .....	21
3.2.3 <i>Passwords</i> .....	22
3.2.4 <i>Password Recovery</i> .....	23
3.2.5 <i>Extracted Data</i> .....	24
3.2.6 <i>Data Access Location</i> .....	25
3.2.7 <i>Hardware &amp; Software Security Measures</i> .....	26
3.2.8 <i>Multiple Log-on Restriction Policy</i> .....	27
3.2.9 <i>Remote Access Policy</i> .....	28
3.3.0 <i>Digital Data Retention Policy</i> .....	28
<b>4. STANDARD OPERATIONS .....</b>	<b>31</b>
4.1 ACCESS TO THE CSP .....	31
4.1.1 <i>CSP Agency Agreements</i> .....	31
4.1.2 <i>New User Licenses</i> .....	32
4.1.3 <i>Existing Licenses Redistribution</i> .....	33
4.1.4 <i>CSP License Invoicing</i> .....	34
4.1.5 <i>User Activation</i> .....	35
4.1.6 <i>CSP User License Ownership</i> .....	36
4.1.7 <i>CSP User Agreements</i> .....	37
4.1.8 <i>CSP User Authorization</i> .....	38
4.1.9 <i>CSP User Agreement Breach</i> .....	39
4.1.10 <i>Training</i> .....	40

4.2 DATA COLLECTION .....	41
4.2.1 <i>Required Data Collection/Fields</i> .....	41
4.2.2 <i>Appropriate Data Collection</i> .....	42
4.2.3 <i>CSP Protected Personal Data Collection and Privacy Protection</i> .....	43
4.2.4 <i>Educating Clients of Privacy Rights</i> .....	44
4.2.5 <i>Scanned Document Management</i> .....	45
4.3 DATA ENTRY .....	45
4.3.1 <i>ShelterPoint Data Entry (applies only to emergency shelters)</i> .....	46
4.3.2 <i>Customizations</i> .....	47
4.3.3 <i>Additional Customization</i> .....	48
4.3.4 <i>Data Corrections</i> .....	49
4.3.5 <i>Annual Data Freeze</i> .....	50
4.3.6 <i>Data Entry for Couples in Supportive Housing Programs</i> .....	51
4.4 QUALITY CONTROL.....	51
4.4.1 <i>Data Integrity</i> .....	52
4.4.2 <i>Data Integrity Expectations</i> .....	53
4.4.3 <i>Quality Assurance</i> .....	54
4.5 DATA RETRIEVAL .....	57
4.5.1 <i>Contributing HMIS Organizations (CHOs)</i> .....	57
4.5.2 <i>CSB Access</i> .....	58
4.5.3 <i>Public Access</i> .....	59
4.5.4 <i>Data Retrieval Support</i> .....	60
4.5.5 <i>Appropriate Data Retrieval</i> .....	61
4.5.6 <i>Naming ReportWriter Saved Queries</i> .....	62
4.5.7 <i>Inter-Agency Data Sharing</i> .....	63
4.5.8 <i>Agency Data Sharing</i> .....	63
4.6 CONTRACT TERMINATION.....	65
4.6.1 <i>Initiated by CHO</i> .....	65
4.6.2 <i>Initiated by the Community Shelter Board</i> .....	67
4.7 PROGRAMS IN CSP.....	67
4.7.1 <i>Adding a New Program in CSP</i> .....	67
4.7.2 <i>Making Changes to Existing Programs</i> .....	68
4.7.3 <i>Maintaining a CSP Program Matrix</i> .....	70

# 1. Introduction

## ***1.1 Community Shelter Board***

### **VISION**

Ending homelessness in our community.

### **MISSION**

To end homelessness, we...

- Innovate Solutions
- Create Collaborations
- Invest in Quality Programs

## ***1.2 Project Summary***

The Columbus ServicePoint (CSP) is used to collect, monitor, and evaluate homeless and housing services in Columbus and Franklin County. Currently, over 120 users in 16 agencies are using CSP to collect data for 50 homeless and housing related programs that cover 2,914 units throughout Franklin County. The CSP project is supported by CSB through a Data and Evaluation Department staffed by a full time CSB Database Administrator, Data and Evaluation Manager, and Operations Director.

HUD requires each local CoC to have an HMIS that complies with the HUD standards, is used by all HUD funded entities in the continuum and is able to produce aggregate reporting at system and community level. CSB's HMIS did not fully comply with these new standards, which led to the need to upgrade the system.

To comply with the above requirements, a community-wide HMIS Selection Committee has been convened and supported by CSB to implement a plan to upgrade the existing HMIS.

The HMIS upgrade project seeks to identify and install an HMIS which is sufficiently robust to meet the current and future data collection, information sharing, and reporting needs of CSB and its partner agencies. The primary considerations were:

- Compliance with HUD standards
- Upgrade/replacement of existing software and system hardware
- Desire for an intuitive user interface which prohibits inadvertent creation of duplicate client records
- Better meet the needs of CSB, partner agencies, funders, and the community for accurate and timely reports on homelessness
- Improved monitoring of system and program outcomes, including ability to analyze trends
- Ability to support a new, Central Intake and Assessment Center for both Emergency Shelter and Permanent Supportive Housing (expected recommendation from the Rebuilding Lives Updated Strategy)

The HMIS Upgrade RFP was issued in January of 2007 and six proposals were received. In May 2007, after a thorough review of the proposals, the HMIS Selection Committee deemed that three

vendors warranted further consideration. A thorough due diligence process was performed for each of the three vendors to determine the best system. The Committee recommended on September 11, 2007 to start contract negotiations with Bowman Systems as the vendor for the upgraded HMIS. The recommendation was presented and adopted by the CoC Steering Committee on October 9, 2007. Implementation of the new system was started in November 2007. The eight-month implementation process was coordinated through a community-wide implementation planning team with representation from all agencies using HMIS. The implementation due date and “go live” date was July 14, 2008.

### ***1.3 Governing Principles***

The goal of the Columbus ServicePoint (CSP) is to support the delivery of homeless and housing services in Columbus and Franklin County. The CSP is:

- a benefit to individual clients through enhanced service delivery
- a tool for the provider agencies in managing programs and services
- a guide for CSB and its funders regarding community resource needs and service delivery

While accomplishing these goals, CSB recognizes the primacy of client needs in the design and management of the CSP. These needs include both the need continually to improve the quality of homeless and housing services with the goal of eliminating homelessness in Columbus and Franklin County, and the need vigilantly to maintain client confidentiality, treating the personal data of our most vulnerable populations with respect and care. As the guardians entrusted with this personal data, we have both a moral and a legal obligation to ensure that this data is being collected, accessed and used appropriately. The needs of the people we serve are the driving forces behind the CSP.

With this in mind, the CSP will also be:

- a **confidential and secure environment** protecting the collection and use of client data

### ***1.4 Terminology***

Many of the terms used in this Policies and Procedures Manual may be new to many users. Definitions of some of these terms are as follows:

**Authentication:** The process of identifying a user in order to grant access to a system or resource. Usually based on a username and password.

**Bowman Internet Systems:** Also known as Bowman. The company who wrote the software used for the CSP.

**CSP:** Columbus ServicePoint, the specific HMIS utilized in Columbus, Ohio. Currently the HMIS uses software called ServicePoint produced by Bowman Internet Systems.

**Contributing HMIS Organization (CHO):** Any agency, organization or group who has signed an CSP Agency Agreement with CSB and is allowed access and contributes data to the CSP database. These agencies connect independently to the database via the Internet.

**Continuum of Care Project:** Project receiving funding from the US Department of Housing and Urban Development through the competitive Continuum of Care application process.

**CSB:** Community Shelter Board. CSB is an intermediary funding and planning organization in Columbus, Ohio, with the goal of eliminating homelessness in Columbus and Franklin County.

**CSB Database Administrator:** The job title of the person at CSB who is the System Administrator for the CSP.

**Database:** An electronic system for organizing data so it can easily be searched and retrieved. Usually organized by fields and records.

**Encryption:** Translation of data from plain text to a complex code. Only those with the ability to unencrypt the encrypted data can read the data. Provides security.

**Firewall:** A method of controlling access to a private network, to provide security of data. Firewalls can use software, hardware, or a combination of both to control access.

**Partner Agency:** Agencies receiving funding from the Community Shelter Board.

**Server:** A computer on a network that manages resources for use by other computers in the network. For example, a file server stores files that other computers (with appropriate permissions) can access. One file server can “serve” many files to many client computers. A database server stores a data file and performs database queries for client computers.

**ServicePoint:** A software package written by Bowman Internet Systems which tracks data about people in housing crisis in order to determine individual needs and provide aggregate data for reporting and planning. This software is web-based, and uses a standard graphical user interface similar to Microsoft Windows.

**Agency Administrator:** The person responsible for system administration at the agency level. Responsible for adding and deleting users, basic trouble-shooting, and organizational contact with the CSB Database Administrator.

**System Administrator:** The person with the highest level of user access in ServicePoint. This user has full access to all user and administrative functions. The name of the level of access is “System Administrator II.”

**User:** An individual who uses a particular software package; in the case of the CSP, the ServicePoint software.

**User License:** An agreement with a software company that allows an individual to use the product. In the case of ServicePoint, user licenses are agreements between CSB and Bowman Internet Systems that govern individual connections to the CSP.

## ***1.5 Ownership***

The CSP, and any and all data stored in the CSP, is the property of the Community Shelter Board. CSB has final control over the creation, maintenance and security of the CSP. In order to ensure the integrity and security of sensitive client confidential information and other data maintained in the database, CSB will require all CHOs to sign the CSP Agency Agreement prior to being given access to the CSP. The CSP Agency Agreement includes terms regarding the maintenance of the confidentiality of client information, provisions regarding the duration of access, an

acknowledgement of receipt of the Policies and Procedures Manual, and an agreement to abide by policies and procedures related to the CSP including all security provisions contained therein.

Violations of the CSP Agency Agreement, including without limitation the failure to comply with the policies and procedures related to the CSP, may subject the Contributing HMIS Organization (CHO) to discipline and termination of access to the CSP and/or to termination of other CSB contracts.

## **2. Implementation Overview**

### ***2.1 Relationship to CHOs***

Contributing HMIS Organizations (CHOs) are those agencies allowed by CSB to connect to the CSP for the purposes of data entry, data editing and data reporting. These agencies are CSB Partner Agencies, Continuum of Care Projects, and Other Agencies. Partner Agencies are agencies receiving funding directly from the Community Shelter Board. Continuum of Care Projects receive funding from the US Department of Housing and Urban Development through the competitive Continuum of Care application process. Other Agencies choose to participate in the CSP though they do not receive funding from the Community Shelter Board.

Relationships between CSB and CHOs are governed by any standing agency-specific agreements already in place (such as the Program and Master Provider Agreements), the CSP Agency Agreement, and the contents of the Policies and Procedures Manual. All CHOs, regardless of type, are required to abide by the policies and procedures outlined in this manual.

### ***2.2 Relationship to Bowman Internet Systems***

CSB contracts with Bowman Internet Systems on an annual basis. Through this contract, Bowman Internet Systems provides software maintenance, application support, and database maintenance and hosting. CSB has purchased software and user licenses, for a one-time fee, to be used in the CSP project. CSB is responsible for maintaining the CSP contract with Bowman Internet Systems, and the CSB Database Administrator is the designated contact to Bowman Internet Systems. The CSB Database Administrator is responsible for providing the main conduit for communications between CHOs and Bowman in order to provide coherent and timely information exchange.

While most communications with Bowman Internet Systems related to the CSP will be channeled through the CSB Database Administrator, CHOs may choose to contract independently with Bowman to acquire further database customization or other services not related to the CSP. In such cases, the individual agency is solely responsible for negotiation of, and payment for, these services, as well as all communication with Bowman regarding these matters.

### ***2.3 Central Server***

The CSP is hosted on Bowman's servers, located in a larger office complex with 24-hour security. The Bowman network is protected by strong firewalls, and all traffic is logged and monitored by System Administrators. The database server utilizes RAID disk mirroring to protect data in the event of hard drive failure, and all data is backed up to tape on a nightly basis and secured in an off-site, fire proof storage facility.

ServicePoint is our HMIS software package. ServicePoint was created by Bowman Internet Systems to provide robust client tracking, case management and reporting. This software utilizes a web interface to provide greater accessibility to agencies. ServicePoint grants access only to authorized users and employs a third-party security vendor, Verisign, to provide commercial-grade, 128-bit SSL data encryption. ServicePoint also utilizes username and password authentication, as well as multiple security levels to control the amount of access a valid user can have.



## ***2.4 Security Infrastructure***

CSB, by paying a monthly fee, is taking advantage of Bowman's maintenance and hosting services for the CSP. Bowman employs a full time staff of experts dedicated to keeping their clients up, running, and secure, using the latest technology. This technology includes physical security, Cisco firewalls, authentication through Verisign certificates, Windows secure server technology, and 128-bit encryption of usernames, passwords, and all data passing to and from the database. It is the job of the CSB Database Administrator to maintain a point of contact between Bowman and CSB and keep track of security issues at the central database.

### **This arrangement provides protection against:**

**Physical Attack:** The Bowman servers are located in a physically secure building, where security guards are employed to monitor security from 7:00 a.m. to 7:00 p.m. Monday through Friday, and from 8:00 a.m. to 4:00 p.m. on Saturdays. During off-hours, a card key is required to enter the building. Within the building, the Bowman offices are also locked with a separate key structure.

**Network Attack:** Bowman uses Cisco firewalls to prevent unauthorized remote access to the database server. A firewall is a software application which blocks all incoming electronic traffic except traffic that is explicitly permitted. Permissions are configured manually by network administrators. This combination of firewalls and virus protection software will detect and prevent most viruses, Trojan horses, worms, malicious mobile codes or email bombs from damaging our database.

**Denial of Service:** The combination of firewalls and routine monitoring of network traffic by skilled professional (in this case, Bowman network administrator) will detect and prevent an attacker from flooding our server to the point of failure.

**Exploitation of Operating System Vulnerabilities:** As a part of the maintenance contract, network administrators at Bowman are responsible for updating the server with the latest software patches and fixes of known operating system weaknesses. Keeping abreast of software patches and reports of new vulnerabilities is the best way to avoid falling prey to these attacks.

**Exploitation of Software Vulnerabilities:** Because we rely on the same company who created the ServicePoint software to host our system, we can be sure that any security holes discovered in the ServicePoint software will be addressed by technicians with access to timely and accurate information about the core program. We will not need to rely on second or third-hand software alerts, or the installation of patches and upgrades by network administrators unfamiliar with the product. This is a great advantage in combating application-specific security issues.

**User Falsification:** Using a public-key infrastructure and signed digital certificates, the latest security technology available, Verisign provides a safe and reliable method of authenticating users. These methods, which they do employ traditional user names and passwords at their base, encrypt data and provide a software-enabled check and counter-check methodology that make stealing identities or masquerading as an authorized user virtually impossible. In addition, these methods produce one-time use session keys that foil a replay attack, as user credentials will never be signed and encrypted in precisely the same way twice.

**Data Traps:** Verisign provides 128-bit SSL encryption of all data passing from agency to server, or server to agency. Encryption is the translation of data from a readable "clear text" to an encoded hash using complex mathematical algorithms. SSL, short for secure sockets layer, is a data transport protocol which encrypts data using a public-key infrastructure. 128-bit SSL encryption is the strongest encryption allowed by the U.S. Department of Commerce; it is estimated that data encrypted with 128-bit encryption would take a trillion-trillion years to crack using today's

technology. When data is encrypted, even if packets could be captured or recorded as they travel across the Internet, they could not be decoded and read.

**Server Falsification:** The public-key infrastructure provided by Verisign provides not only authentication of the agency, but also authentication of the web site, and hence, authentication of the hosting server. Authentication is provided through digital certificates verified by Verisign, and is an integral part of the login process. Mutual authentication prevents a rogue web site from masquerading as our secure web site and drawing sensitive data.

**Social Engineering:** These are attacks in which a social situation (for example, a customer service call from a third-party company) is manipulated so that an unauthorized user gains access to protected information, such as a client data, or user names and passwords. The biggest deterrent to social engineering is clear policies and procedures. It is much harder for users to be manipulated into providing confidential information if they have clear and thoughtful rules to follow when providing such information. CSB will provide clear and thoughtful policies and procedures around issues of ServicePoint data confidentiality, and confidentiality of user names and passwords. These procedures will be designed to speed problem resolution and minimize the chance of a user being manipulated into divulging confidential data through confusion or a sincere desire to help someone in need.

**Misuse of Privileges:** ServicePoint provides several levels of user access to the database. Each level has access to a particular subset of information, and particular abilities to manipulate information. CSB will provide clear “job descriptions” for each level of access, to ensure that each user is assigned an appropriate level of access. CSB will also provide clear protocol and procedures for handling data needs and requests that fall outside of a particular user’s job description. Finally, CSB will provide clear procedures for handling changes in access levels and users, as well as for password recovery and other access issues. These procedures will be designed to clarify and streamline the daily work of legitimate users, and minimize the chance of legitimate users misusing privileges even towards legitimate ends.

**Local Physical Attack:** Agency computers are necessarily more physically vulnerable than our central server. As no ServicePoint data is stored on the local computer, however, the physical vulnerability of these computers does not constitute a significant threat to client confidentiality regarding this data. However, any user access data, such as a password, that is stored on a computer or in a written file, does constitute a risk to client confidentiality. The CSP policies and procedures will include provisions for the appropriate handling of client access data.

## 3. Roles and Responsibilities

### *3.1 Project Organization*

#### 3.1.1 Project Management

**Policy:** CSB is responsible for organization and management of the CSP.

**Explanation:** As the coordinating body for the CSP system, CSB is responsible for all system-wide policies, procedures, communication and coordination. CSB is the primary contact with Bowman Internet Systems, and with its help, will implement all necessary system-wide changes and updates.

**Procedure:** CSB seeks to provide a uniform CSP which will yield the most consistent data for client management, agency reporting, and service planning. The primary position at CSB for CSP management is the CSB Database Administrator. All system-wide questions and issues should be directed to the CSB Database Administrator. The Database Administrator reports to the CSB Operations Director. The Operations Director will also designate a Back-up Database Administrator. CSB Executive Director, as head of the Community Shelter Board, is ultimately responsible for all final decisions regarding planning and implementation of the CSP.

### 3.1.2 Agency Administrator

**Policy:** Each CHO will designate an Agency Administrator. The Agency Administrator must have an email address.

**Explanation:** The Agency Administrator is the primary CSP contact at the agency. This person will be responsible for:

- Providing a single point of communication between the CHO's end users and the CSB Database Administrator around CSP issues
- Ensuring the stability of the agency connection to the Internet and ServicePoint, either directly or in communication with other technical professionals
- Training agency end-users
- Providing support for the generation of agency reports
- Managing agency user licenses
- Monitoring compliance with standards of client confidentiality and data collection, entry, and retrieval
- Participating in Agency Administrators training and regular meetings
- Participating in CSB's CSP Implementation Team for continuous improvement of the system's functionality and as the advisors and consultants to the CSB Database Administrator

Designating one primary CSP contact and power-user at each agency increases the effectiveness of communication both between and within agencies.

**Procedure:** Each CHO should designate its Agency Administrator and send that person's name and contact information to the CSB Database Administrator. Changes to that information should be promptly reported to the CSB Database Administrator. Each CHO should designate a back-up Agency Administrator and send the person's information to CSB Database Administrator.

### 3.1.3 User Access Levels

**Policy:** All CSP Users will have an appropriate level of access to CSP data.

**Explanation:** ServicePoint allows multiple levels of user access to data contained in the database. Access is assigned when new users are added to the system and can be altered as needs change. For security purposes, appropriate access levels should be assigned to all users.

**Procedure:** The Agency Administrator, in consultation with the CSB Database Administrator, will assign appropriate user levels when adding new users. In the interest of client data security, the Agency Administrator will always attempt to assign the most restrictive access which allows efficient job performance.

### 3.1.4 CSB Communication with CHOs

**Policy:** The CSB Database Administrator is responsible for relevant and timely communication with each agency regarding the CSP.

**Explanation:** The CSB Database Administrator will communicate system-wide changes and other relevant information to agencies as needed. The CSB Database Administrator will also maintain a high level of availability to CHOs. While specific problem resolution may take longer, the CSB Database Administrator will strive to respond to CHO questions and issues within one business day of receipt.

**Procedure:** General communications from the CSB Database Administrator will be directed towards the agency Agency Administrator, most of the time through email communication. Specific communications will be addressed to the person or people involved. The CSB Database Administrator will be available via email, phone, and mail. The CSB website and ServicePoint will also be used to distribute CSP information. Agency Administrators are responsible for ensuring all their agency users are informed of appropriate CSP related communications. Agency Administrators are also responsible for distributing that information to any additional people at their agency who may need to receive it, including, but not limited to, Executive Directors, client intake workers, and data entry specialists.

### 3.1.5 CHO Communications with CSB

**Policy:** CHOs are responsible for communicating needs and questions regarding the CSP directly to the CSB Database Administrator.

**Explanation:** CHOs will communicate needs and questions directly to the CSB Database Administrator.

**Procedure:** Users at CHOs will communicate needs, issues and questions to their Agency Administrator. If the Agency Administrator is unable to resolve the issue, the Agency Administrator will contact the CSB Database Administrator via email, phone or mail. The goal of the CSB Database Administrator is to respond to CHO needs within one business day of the first contact.

### 3.1.6 System Availability

**Policy:** CSB and Bowman Internet Systems will provide a highly available database server and will inform users in advance of any planned interruption in service.

**Explanation:** It is the intent of CSB and Bowman Internet Systems that the CSP database server will be available 24 hours a day, 7 days a week, 52 weeks a year to incoming connections. However, no computer system achieves 100% uptime. In the event of planned server downtime, the CSB Database Administrator will inform agencies as much in advance as possible in order to allow CHOs to plan their access patterns accordingly.

**Procedure:** In the event that the database server is or will be unavailable due to disaster or routine maintenance, Bowman Internet Systems will contact the CSB Database Administrator. The CSB Database Administrator will contact Agency Administrators and inform them of the cause and duration of the interruption in service. The CSB Database Administrator will log all downtime for purposes of system evaluation.



### 3.1.7 Ethical Data Use

**Policy:** Data contained in the CSP will only be used to support the delivery of homeless and housing services in Columbus and Franklin County. Each CSP User will affirm the principles of ethical data use and client confidentiality contained in the CSP Policies and Procedures Manual and the CSP User Agreement.

**Explanation:** CSB recognizes that the specific purpose for which the CSP was created limits the uses of the data it contains to those which conform to this initial purpose. The data collected in the CSP is the personal information of people in the Columbus and Franklin County community who are experiencing a housing crisis. It is the responsibility of the guardians of that data to ensure that it is only used to the ends to which it was collected.

**Procedure:** All CSP users will sign an CSP User Agreement before being given access to the CSP. Any individual or CHO misusing, or attempting to misuse, CSP data will be denied access to the database, and his/her/its relationship with CSB will be terminated.

### 3.1.8 CHO Grievances

**Policy:** CHOs will contact the CSB Database Administrator to resolve CSP problems.

**Explanation:** CSB is responsible for the operation of the CSP. Any problems with the operation or policies of the CSP are to be discussed with the Community Shelter Board. CSB has final decision-making power over all aspects of the CSP.

**Procedure:** CHOs will bring CSP problems to the attention of the CSB Database Administrator. If these problems cannot be resolved by the CSB Database Administrator, the CSB Database Administrator will take them to the CSB Operations Director, and finally to the CSB Executive Director. CSB Executive Director shall have the final say in all matters regarding the CSP.

### 3.1.9 Client Grievance

**Policy:** Clients will contact the CHO with which they have a grievance for resolution of CSP problems. CHOs will report all CSP-related client grievances to the Community Shelter Board.

**Explanation:** Each agency is responsible for answering questions and complaints from their own clients regarding the CSP. CSB is responsible for the overall use of the CSP, and will respond if users or agencies fail to follow the terms of the CSP agency agreements, breach client confidentiality, or misuse client data. Agencies are obligated to report all CSP-related client problems and complaints to the Community Shelter Board, which will determine the need for further action.

**Procedure:** Clients will bring CSP complaints directly to the agency with which they have a grievance. Agencies will provide a copy of the CSP Policies and Procedures Manual upon request, and respond to client issues. Agencies will send copies of all client grievance forms recording CSP-related client problems and complaints to the CSB Database Administrator. The CSB Database Administrator will record all grievances and will report these complaints to the CSB Operations Director, who will take any necessary action. CSB will keep a log of all complaints and concerns, and will respond to individual complaints and patterns of concern with appropriate actions. These actions might include further investigation of incidents, clarification or review of policies, or sanctioning of users and agencies if users or agencies are found to have violated standards set forth in CSP Agency Agreements or the Policies and Procedures Manual.

### 3.1.10 CHO Hardware/Software Requirements

**Policy:** CHOs will provide their own computer and method of connecting to Internet, and thus to the CSP.

**Explanation:** Because ServicePoint is a web-enabled software, all that is required to use the database is a computer, a valid username and password, and the ability to connect to the Internet by broadband or other high-speed connection using Microsoft Internet Explorer or Mozilla Firefox. There is no unusual hardware or additional ServicePoint-related software or software installation required. Bowman guidelines are:

## WORKSTATIONS

*ServicePoint 5* relies on the client machine more than previous versions. Therefore, faster machines will have better results; where in the past most of the performance was related to the server and connection speed. Fast internet connection and browser speed are still important, which is why Internet Explorer 8 and 9 are recommended over IE7. Some performance tests indicate IE8 can double the speed of IE7.

#### MEMORY

- If Win7 – 4 Gig recommended, (2 Gig minimum)
- If Vista – 4 Gig recommended, (2 Gig minimum)
- If XP – 2 Gig recommended, (1 Gig minimum)

#### MONITOR

Screen Display - 1024 by 768 (XGA) or higher (1280x768 strongly advised)

#### PROCESSOR

Avoid using single-core CPUs

#### INTERNET CONNECTION

Broadband

#### BROWSER

Firefox is recommended; IE is acceptable; still experiencing issues with Chrome

**Procedure:** It is the responsibility of the CHO to provide a computer and connection to the Internet. If desired by the CHO, the CSB Database Administrator will provide advice as to the type of computer and connection.

### 3.1.11 CHO Technical Support Requirements

**Policy:** CHOs will provide their own technical support for all hardware and software employed to connect to the CSP.

**Explanation:** The equipment used to connect to the CSP is the responsibility of the CHO.

**Procedure:** Agencies will provide internal technical support for the hardware, software and Internet connections necessary to connect to the CSP according to their own organizational needs.

### 3.1.12 CSP Documentation (Policies & Procedures, User's Manual, QA Standards & Data Dictionary, and CSP related forms) Updates

**Policy:** CSB will provide a CSP Policies & Procedures Manual for all CSP Agency Administrators, and a CSP Users' Manual, QA Standards & Data Dictionary, and relevant forms for all CSP users. These documents will be kept up to date and in compliance with all HUD policies and requirements.

**Explanation:**

The purpose of the CSP policies and procedures is to provide Agency Administrators with guidance in maintaining compliance with HUD and Continuum of Care requirements and standards. They include information about how the software product is to be managed from an Agency Administrator perspective and the roles and responsibilities of an Agency Administrator and their CHO. CSB will provide an electronic copy of the Policies and Procedures Manual containing procedures that are held in common for all CHOs.

An internal users' manual provides software users with information about how the software product is used in a particular community. CSB will provide an electronic Users' Manual containing procedures that are held in common for all CHOs and common CSP related forms. The CSP Users' Manual will provide specific technical instruction to CSP users about how to use ServicePoint. The QA Standards & Data Dictionary provides users with detailed information on the quality assurance standards and the data requirements for all programs and CHOs. CSB will provide an electronic copy of the QA Standards & Data Dictionary for all CHOs.

**Procedure:** The CSB Database Administrator will update the Policies & Procedures, CSP Users' Manual, QA Standards & Data Dictionary and commons CSP related forms annually, by the beginning of each new fiscal year. The CSP documents will be reviewed and kept up to date and in compliance with all HUD policies and requirements. In the event HUD issues interim changes to the requirements, affected policies and procedures and related documentation will be reviewed and updated at that time as well. The updates will be reviewed and approved by the CSB Operations Director. The updates will be communicated and discussed with the CSP Agency Administrators during the quarterly CSP Administrator meetings. If HUD requirements necessitate immediate implementation of changes, this will be communicated to all Agency Administrators electronically, as soon as available. Regular CSP trainings will include an overview of these documents and their role. These documents will be available for download at [www.csb.org](http://www.csb.org). The CSP User's Manual will be password protected, please inquire of the CSB Database Administrator for the current password.

## ***3.2 Security***

### **3.2.1 User Access**

**Policy:** Agency Administrators will provide unique usernames and initial passwords to each agency user. Usernames will be unique for each user and will be comprised of the initial of the user's first name and the user's full last name, all lower case. Usernames and passwords may not be exchanged or shared with other users. The CSB Database Administrator will have access to the list of usernames.

**Explanation:** Unique usernames and passwords are the most basic building block of data security. Not only is each username assigned a specific access level, but in order to provide to clients an accurate record of who has altered his or her record, when it was altered, and what the changes were, it is necessary to log a username with every change. Exchanging usernames seriously compromises security and accountability to clients.

**Procedure:** Agency Administrators will provide unique usernames comprised of the user's first initial and full last name, all lower case, and initial passwords to each user upon completion of training and signing of a confidentiality agreement and receipt of the Policies and Procedures Manual. The sharing of usernames will be considered a breach of the CSP Agency Agreement.

### 3.2.2 User Changes

**Policy:** The CHO Agency Administrator will make any necessary changes to the role of CHO users.

**Explanation:** The Agency Administrator has the ability to add/delete user accounts and re-distribute user licenses to accommodate agency reorganization.

**Procedure:** The Agency Administrator will make any necessary changes to the list of agency users. Changes in Agency Administrators and backup Agency Administrators must be reported to the CSB Database Administrator.



### 3.2.3 Passwords

**Policy:** Users will have access to the CSP via a username and password. Passwords will be reset every 45 days. Passwords must consist of at least 8 characters and include at least two digits. Users will keep passwords confidential.

**Explanation:** Users will have access to the CSB CSP via a username and password. These methods of access are unique to each user and confidential. Users are responsible for keeping their passwords confidential. For security reasons, passwords will automatically be reset every 45 days.

**Procedure:** The CHO Agency Administrator will issue a username and password to each new user who has completed training directed by the CHO. Every 45 days, passwords are reset automatically. On the 45<sup>th</sup> day, when the user logs in, the system will require the user to create a new password and enter it twice before accessing the database.

### 3.2.4 Password Recovery

**Policy:** The CHO Agency Administrator will reset a user's password in the event the password is forgotten. CSB's Database Administrator will reset an Agency Administrator's password in the event the password is forgotten.

**Explanation:** In the event of a forgotten password, the CHO Agency Administrator will reset that password, deleting the old password and allowing the user to connect using a new temporary password.

**Procedure:** In the event of a forgotten password, the user whose password is forgotten will contact the Agency Administrator. The Agency Administrator will reset the user password, and issue a temporary password to allow the user to login and choose a new password. The new password will be valid from that time forward, until the next forced change.

### 3.2.5 Extracted Data

**Policy:** CSP users will maintain the security of any client data extracted from the database and stored locally, including all data used in custom reporting. CSP users will not electronically transmit any unencrypted client data across a public network.

**Explanation:** The custom report-writer function of ServicePoint and ART allows client data to be downloaded to an encrypted file on the local computer. Once that file is unencrypted by the user, confidential client data is left vulnerable on the local computer, unless additional measures are taken. Such measures might include restricting access to the file by adding a password. For security reasons, unencrypted data may not be sent over a network that is open to the public. For example, while unencrypted data might be stored on a server and accessed by a client computer within the private local area network, the same unencrypted data may not be sent via email to a client computer not within the same local area network. CSP users should apply the same standards of security to local files containing client data as to the CSP database itself.

**Procedure:** Data extracted from the database and stored locally will be stored in a secure location and will not be transmitted outside of the private local area network unless it is properly protected. Security questions will be addressed to the CSB Database Administrator.

### 3.2.6 Data Access Location

**Policy:** Users will ensure the confidentiality of client data, following all security policies in the CSP Policies and Procedures Manual and adhering to the standards of ethical data use, regardless of the location of the connecting computer.

**Explanation:** Because ServicePoint is web-enabled software, users could conceivably connect to the database from locations other than the agency itself, using computers other than agency-owned computers. If such a connection is made, the highest levels of security must be applied, and client confidentiality must still be maintained. For situations where this type of access may be needed regularly, please see the Remote Access Policy 3.2.8.

**Procedure:** All Policies and Procedures and security standards will be enforced regardless of the location of the connecting computer.

### 3.2.7 Hardware & Software Security Measures

**Policy:** The Agency Administrator will ensure all hardware and software used to access and/or store CSP data is in a secure location where access is restricted to authorized staff. The Agency Administrator will also ensure all computers used to access and/or store CSP data employ software security and access restriction measures.

**Explanation:** Because ServicePoint enables authorized users to download raw client-level data via the Custom ReportWriter or ART to their hard drive or other electronic media, access to such computers and/or disks must be restricted to authorized personnel only.

**Procedure:** The Agency Administrator will ensure that any computers used to access ServicePoint and any disks used to store custom report information are located in a secure area where access is available to authorized personnel only. The Agency Administrator will also ensure that these same computers and disks utilize the following security measures listed below.

Computers:

- Locking screen savers
- Virus protection with auto update
- Individual network firewalls

Storage disks:

- Encryption (Examples of software which can be used for file encryption are special-purpose software (e.g., GNU Privacy Guard and PGP), file archivers, and even some text editors (e.g., emacs or vi))
- Password protected

### 3.2.8 Multiple Log-on Restriction Policy

**Policy:** Individual CSP users must not be able to log on to the CSP from more than one workstation at a time, or be able to access client level data (Protected Personal Information) from more than one location at a time.

**Explanation:** Columbus ServicePoint provides the ability to run reports *and download client-level data to local computer networks*. To ensure the security and accountability for such data, users must not be able to log on to more than one workstation at a time.

**Procedure:** There are two acceptable scenarios for compliance:

1. When user logs on at the 2<sup>nd</sup> workstation, the system can provide a message notifying the user that they must first log off of the 1<sup>st</sup> workstation, or
2. When the user logs on at the 2<sup>nd</sup> workstation, the system can automatically log the user off of the 1<sup>st</sup> workstation and allow access at the 2<sup>nd</sup> workstation.

### 3.2.9 Remote Access Policy

**Explanation:** Because ServicePoint enables authorized users to access client-level data via the internet on web-capable devices, remote access must be restricted to authorized personnel and uses only.

**Policy:** Columbus ServicePoint (CSP) is intended to be accessed only on-site from the CHO's network, desktops, laptops and mini-computers that are web capable.

In special circumstances user access from remote locations may be permitted after application and approval by both the Agency and System Administrators.

The Remote Access Policy and Agreement is an extension of the User Agreement and CSP Policies and Procedures manual. The USER shall comply with all Policies, Procedures, Agreements and all rules governing CSP.

The Agency Administrator has the responsibility to assure the user is in compliance with this and all other Policies, Procedures, Agreements and rules governing CSP. The Agency Administrator will regularly, at least annually, audit remote access by associating dates and times to the user's time sheet.

All staff that access CSP remotely must meet the standards detailed in the System Security policies and procedures (see Policy and Procedures) and may only access it for activities directly related to their job.

**Examples of Remote Access:**

1. CHO offices on secure networks to support agency use of the system.
2. Training Centers on secure networks when providing services or training in the field.
3. Private Homes office on secure networks to provide client assistance and real-time data entry of client data.
4. Agency Administrators or System Administrators only: Private Home office on secure networks to provide system support as needed.

*Continued on next page.*

**Procedure: Requirements for Remote Access of CSP include (This policy covers access by individuals under items 3 and 4 above.):**

- Remote access will only be allowed on secure networks. (User will not access CSP on any non-protected, free, or other network or Wi-Fi).
- Remote access is allowed only through a Virtual Private Network (VPN)
- Data from CSP will not be downloaded to any remote access site at any time for any reason.
- All CSP data (hardcopy) will be securely stored and/or disposed of in such a manner as to protect the information.
- Monitors need to be equipped with security screens at all times.
- System security provisions will apply to all systems where CSP is accessed and the CHO employing the User will certify such systems for compliance.
- User must certify compliance with all CSP Policies, Procedures and Agreements.
- User must follow all confidentiality and privacy rules.
- User must assure access only for activities directly related to their job.
- User must allow for direct inspection of the remote access location by the Agency Administrator and compliance will be certified by the CHO.
- User must access CSP remotely from a private home office area.
- User must access CSP remotely from a dedicated computer station, used for work purposes only and certified as such by the CHO.
- User must keep Agency Administrator informed of any IP address changes in a timely manner.
- Agency Administrators must inform the System Administrator of any IP address changes in a timely manner.
- Agency and System Administrators must keep an up to date log of Remote Access Users' IP Addresses.

**Remote Access Authorization**

Application for remote access must be made by completing the CSP Remote Access Agreement and submitting a completed form to the Agency Administrator.

Upon receipt the Agency Administrator will review and confirm the need for the applicant to have remote access. The signed agreement will then be forwarded to the System Administrator for final approval.

The System Administrator will sign and retain the CSP Remote Access Agreement, thus authorizing remote access for the identified user. The System Administrator will advise both the Agency Administrator and the User that approval has been granted.

Violation of this or any CSP policy or agreement may result in the termination of the User License or Agency Participation.



### 3.3.0 Digital Data Retention Policy

**Policy:** Client PPI stored on any digital medium will be purged, if no longer in use, 7 years after the data was created or last changed (unless a statutory, regulatory, contractual or other requirement mandates longer retention). Also, when digital medium where client PPI has been stored is to be decommissioned, it will be reformatted more than once before reusing or disposing of the medium.

**Explanation:** PPI that is no longer needed must be removed in such a way as to reliably ensure the data cannot be retrieved by unauthorized persons. Because digital medium cannot be reliably erased via single reformatting, multiple (at least twice) reformatting is necessary to ensure the data cannot be retrieved.

**Procedure:** Every three years digital files where PPI is stored will be reviewed and client PPI that is no longer needed will be deleted or otherwise removed in such a way as to reliably ensure the data cannot be restored.

At any time digital medium (computers, servers, data storage devices, etc.) where PPI has been stored is to be decommissioned, IT will be instructed to reformat the medium at least twice prior to repurposing or disposing of said medium.

## 4. Standard Operations

### *4.1 Access to the CSP*

#### 4.1.1 CSP Agency Agreements

**Policy:** The Executive Director (or other empowered officer) of any agency wishing to connect to the CSP will sign an CSP Agency Agreement with CSB before any member of that agency will be granted access.

**Explanation:** Only agencies that have agreed to the terms set out in the CSP Agency Agreement will be allowed access to the CSP. The CSP Agency Agreement will include terms and duration of access, an acknowledgement of receipt of the Policies and Procedures Manual, and an agreement to abide by all provisions contained therein.

**Procedure:** CHOs will be given a copy of the CSP Agency Agreement, the Policies and Procedures Manual, and any other relevant paperwork in time for adequate review and signature. Once that paperwork has been reviewed and signed, agency users will be trained to use ServicePoint. Once training has been completed, each user will be issued a username and password. Signing of the Agency Agreement is a precursor to training and user access.

#### 4.1.2 New User Licenses

**Policy:** If necessary, CHOs will purchase additional User Licenses from Bowman Internet Systems through the Community Shelter Board. The cost for User Licenses will be determined by Bowman Internet Systems, and will not be changed by the Community Shelter Board.

**Explanation:** As CHOs grow and the number of CSP users increases, CHOs may need to purchase additional User licenses. This purchase can be made at any time. Licenses are purchased online, through the ServicePoint program, by the user with System Administrator privileges – the CSB Database Administrator. Bowman then invoices CSB for the cost of the licenses.

**Procedure:** CHOs wishing to purchase additional User Licenses will complete a License Request Form included as an attachment to the CSP Policies and Procedures Manual. The CHO will return this form, with a check to cover the costs of the licenses, to the CSB Database Administrator. The CSB Database Administrator will purchase the User Licenses from Bowman and forward the check and copy of the request form to the CSB Finance Department for the deposit. The CSB Database Administrator will then notify the CHO when the additional licenses are available.

### 4.1.3 Existing Licenses Redistribution

**Policy:** CSB will conduct an annual reallocation process of unused licenses, to start in May of each year for the next FY.

**Explanation:** Based on the contract that CSB has with Bowman System the annual maintenance fee for each license is \$270, while the purchase cost for a new license is \$225. Given the high cost of purchasing and maintaining the licenses, it is not feasible for the agencies and CSB to keep a large amount of unused licenses in stock and it is more cost effective to reallocate licenses if they are needed, throughout the system.

**Procedure:** CSB has an annual reallocation process of unused licenses, to start in May of each year for the next FY, per the following schedule:

Date	Step
May15	Agencies receive email from CSB asking them for number of licenses that agency would need for next FY.
May15 – June 1	Agencies respond back to CSB using the License Relinquishment form, or the License Request Form. If the agency is requesting new licenses for the new FY, a check for the appropriate amount must accompany the completed and signed request form.
June 5	Agencies receive email from CSB with summary of licenses needed for next FY and the available pool of unused licenses.
June 10 - June 15	CSB re-allocates relinquished licenses to agencies who have requested new licenses for the new FY on a lottery basis, 1 license/agency, based on the available pool, until the pool is exhausted. Re-allocated licenses will be made available on July 1 <sup>st</sup> . Those agencies who receive a re-allocated license will be reimburse for the price of that license.
June15 – June 19	If there are still licenses left in the pool, CSB will ask Bowman to remove these licenses from the Columbus ServicePoint contract. If more licenses are needed, the respective agencies will be informed and the licenses ordered from Bowman. Re-allocated and newly purchased licenses will be made available on July 1 <sup>st</sup> .
July 1	CSB will invoice each agency for the annual maintenance cost, based on the number of current licenses for the upcoming FY.

At any point in the FY, or if there are no available “reallocation” licenses agencies can purchase new licenses for \$225/license. In addition to the “new license fee” the agencies will also have to contribute the agreed upon annual maintenance fee/license, based on the current number of licenses, starting with the next FY.

#### 4.1.4 CSP License Invoicing

**Policy:** CSB will invoice each agency for each new license at the time of purchase and CSB will invoice the applicable annual CSP license support fees at the start of each fiscal year.

**Explanation:** Bowman Systems charges a one-time purchase fee for each license due at time of purchase and an annual support fee for each license purchased which they bill on a quarterly basis to CSB .

**Procedure:** The CSB Database Administrator will calculate and submit to the CSB Finance and Grants Department the total amount to be invoiced to each agency for applicable license support fees at the beginning of each fiscal year. The applicable fees will be re-examined in May of each year per CSB's license redistribution policy. When an agency purchases a new license CSB Database Administrator will submit to the CSB Finance and Grants Department the total of the one time purchase price to be invoiced to the agency immediately. CSB Database Administrator will issue the new license upon receipt of payment from the agency.

#### 4.1.5 User Activation

**Policy:** Each new user will be issued a username and password to access the CSP upon approval by the CHO and completion of ServicePoint training directed by the CHO and signing of the CSP User Agreement.

**Explanation:** CHOs will determine which of their employees will have access to the CSP. Every user must receive appropriate ServicePoint training before being issued a username and password.

**Procedure:** Agency Administrators will distribute user licenses for their CHO, adding and deleting users as needed. The CSB Database Administrator and the Agency Administrators will be responsible for training new users. The CSB Database Administrator will provide training to Agency Administrators and will supplement this training as necessary. The initial username and password will be temporary and the user will have to be CSP certified within 30 days of his/her CSP access in order to continue operations in CSP.

#### 4.1.6 CSP User License Ownership

**Policy:** CSB maintains ownership of user licenses when a program terminates or discontinues use of the CSP or when CHOs decide to reduce their number of CSP licenses. Licenses will be redistributed yearly, through a CSB directed process.

**Explanation:** CSB retains ownership rights of all CSP user licenses in the event that a program terminates or is otherwise discontinued from CSP participation or when CHOs decide to reduce their number of CSP licenses.

**Procedure:** When a program discontinues CSP participation or wishes to reduce their number of CSP users/licenses the CSB Database Administrator will delete all user accounts affected and reallocate the licenses back to CSB for termination or redistribution. The CSB Database Administrator is responsible for managing the allocation of all user licenses within the CSP.

#### 4.1.7 CSP User Agreements

**Policy:** Each CHO User will sign a CSP User Agreement before being granted access to the CSP.

**Explanation:** Before being granted access to the CSP, each user must sign an CSP User Agreement, stating that he or she has received training, will abide by the CSP Policies and Procedures Manual, will appropriately maintain the confidentiality of client data, and will only collect, enter and retrieve data in the CSP relevant to the delivery of services to people in housing crisis in Columbus and Franklin County.

**Procedure:** The CHO Agency Administrator will distribute CSP User Agreements to new CSP Users for signature. The user will sign the CSP User Agreement. The Agency Administrator will collect and store signed CSP User Agreements for all users. The existence of signed CSP User Agreements will be verified in the annual CSP on-site review.



#### 4.1.8 CSP User Authorization

**Policy:** All CSP users are required to have a signed CSP User Agreement on file at CSB. All CSP users are required to have a CSP certification on file at CSB.

**Explanation:** It is necessary to ensure that only authorized and trained personnel with a signed CSP User Agreement on file with CSB receives access to the CSP.

**Procedure:** Agency Administrators are required to file a signed CSP User Agreement for each user with CSB prior to the user receiving access to the CSP. Agency Administrators are also required to delete a user's account and notify CSB immediately by fax or email when a user's need for access changes (i.e. termination or employment, taking a new position, etc.). CSB's Database Administrator will maintain a file for these user agreements and reconcile the active user list in the CSP to the hard copy files of signed CSP User Agreement at least once each month. If it is found that there are users in the system that do not have a signed agreement on file those user accounts will be immediately deactivated and an email notification sent to the Agency Administrator. An agency found to be noncompliant in this regard will require corrective action to be taken. For the sake of expedience it is acceptable to fax a copy of the agreement and mail the original to CSB. The fax should consist of the signed user agreement marked "NEW USER". Agency Administrators and CSB are required to keep a copy of the user's CSP certification on file. No end-user will be permitted to access CSP more than 30 days, without having CSP certification.

#### 4.1.9 CSP User Agreement Breach

**Policy:** CSB will take corrective action when a breach of the CSP User Agreement is discovered.

**Explanation:** CSB will enforce the CSP Agreements signed by CHO Executive Directors, Agency Administrators, and end users.

**Procedure:** When a breach is detected the user account of the person or persons involved will immediately be deactivated by the CSB Database Administrator and notification sent to the Agency Administrator and/or the Agency Executive Director if necessary. All agency users may be deactivated for a serious breach. The CSB Database Administrator is responsible for notifying the Operations and the CSB Executive Director of the agency breach.

#### 4.1.10 Training

**Policy:** CSB will provide adequate and timely ServicePoint training.

**Explanation:** CSB will provide training in the ServicePoint software.

**Procedure:** The CSB Database Administrator will provide training to all new users. Agency Administrators will be given additional training relevant to their position. Agency Administrators are expected to train new agency staff with the assistance of the CSB Database Administrator. The CSB Database Administrator will provide periodic training updates and refreshers for all users, based on need.

Monthly virtual user trainings will be scheduled by the CSB Database Administrator. New CSP users will be required to attend a CSB virtual training within 30 days from their CSP access. Successful completion of the virtual training and a test will be followed by CSP Certification of the user. If the user fails to become certified within 30 days of its CSP access, his/her access to CSP will be turned off.

## ***4.2 Data Collection***

### **4.2.1 Required Data Collection/Fields**

**Policy:** CHOs will collect and enter into CSP a required set of data variables for each client which will be specified in the CSP Agency Agreement.

**Explanation:** Each CSP Agency Agreement will specify the data elements which must be collected for each client contact. CHOs may choose to collect and enter more client information for their own case management and planning purposes as is permissible under applicable law.

**Procedure:** The CSP Agency Agreement will contain a listing of data elements to be collected and entered in CSP for each client contact.

#### 4.2.2 Appropriate Data Collection

**Policy:** CSP users will only collect client data relevant to the delivery of services to people in housing crises in Columbus and Franklin County.

**Explanation:** The purpose of the CSP is to support the delivery of homeless and housing services in Columbus and Franklin County. The database should not be used to collect or track information not related to serving people in housing crises or planning for the elimination of homelessness.

**Procedure:** CSP users will ask CSB Database Administrator for any necessary clarification of appropriate data collection. CSB will periodically audit pick-lists and agency specific fields to ensure the database is being used appropriately.

### 4.2.3 CSP Protected Personal Data Collection and Privacy Protection

**Policy:** CSB and CHO will ensure that all required client data will be captured in the CSP while maintaining the confidentiality and security of the data in conformity with all current regulations related to the client's rights for privacy and data confidentiality.

**Explanation:** Clients have the right to expect provider agencies to collect and manage their protected personal data in a manner that is secure and maintains their privacy. Clients have the right to know why agencies are electronically collecting their information and how it will be used.

**Procedures:**

1. The CHO shall have a privacy notice sign posted at each intake desk, minimally the one provided by CSB . The sign will be posted in an area accessible and easily viewed by clients.
2. The CHO shall have a written privacy policy, minimally the one provided by CSB , to cover the electronic data collection, use and maintenance of the client's protected personal information. Clients should be made aware of the privacy policy. The policy shall be posted on the agency's website and shared with the client upon request. The policy should be reviewed at least annually and updated as needed.
3. The CHO will present each client with a Client Acknowledgement for Electronic Data Collection form and inform the client about the provisions of the form. The CHO shall attempt to obtain a signed Client Acknowledgement for Electronic Data Collection form from each client before data is entered into the database and will maintain this form on file at the agency, in the client's file.
4. In case the acknowledgment form is not signed, the CHO will still have to electronically collect in the CSP any and all CSP required data elements provided by the client to the agency. The agency may also elect to implement a more restrictive client privacy policy than the one provided by CSB with respect to other data that is not CSP required data elements. Based on current HUD regulations, CSB does not require client consent for the electronic data collection.
5. If the CHO has a more restrictive privacy policy than the one provided by CSB that disallows the collection and/or entry of the protected personal information (name, birth date and social security number) in CSP without written client consent and the client refuses to provide written consent, the agency must enter the by creating an Unnamed record for tracking purposes. This a function within CSP which involves entering the client's protected personal information (name, birth date and social security number) which the system then uses to create a unique record identifier. The system then strips PPI out of the record. If the client consents with the electronic data collection, the agency must electronically collect in the CSP any and all CSP required data elements provided by the client to the agency. Generally, the more restrictive CSP related privacy policy should be implemented only by agencies that by law are required to have privacy standards more restrictive than the HUD standards (i.e. HIPAA, etc).
6. The agency must provide CSB with its client privacy policy at the beginning of each CSB program year, with any updates made throughout the previous program year.

#### 4.2.4 Educating Clients of Privacy Rights

**Policy:** The Agency Administrator will maintain a current privacy policy and a privacy notice which includes the uses and disclosures of information.

**Explanation:** Clients have a right to expect service agencies to collect and manage their protected personal data in a manner that is secure and maintains their privacy.

**Procedure:** The Agency Administrator will ensure that a written privacy policy and a privacy notice is in place and up to date. The Agency Administrator will also ensure that the privacy notice is posted in an area accessible and easily viewed by clients. The clients should be informed of their rights under the privacy policy and should receive the policy if requested. This policy should be reviewed at least annually and updated as needed. CSB will provide, as part of the Policies and Procedure Manual, the most current Privacy Policy and Privacy Notice. The CHOs should minimally adopt the documents provided by CSB.

## 4.2.5 Scanned Document Management

**Policy:** CSB is responsible for organization and management of the CSP. It is necessary to standardize the way the document upload feature is utilized in order to ensure the information uploaded is usable system-wide.

**Explanation:** CSB desires that essential client documentation be scanned and uploaded to CSP. CSP, as a client document repository will be a useful tool to case managers helping clients exit quickly from emergency shelters into stable housing. Client documentation will be available quickly avoiding delays in client services.

**Procedure:** CSB seeks to provide a uniform CSP which will yield the most consistent data for client management, agency reporting, and service planning. To this end, CSB is providing the following standards as guidelines for the utilization of the document upload feature.

**Classification of Uploaded Documents:**

- Permanent Documents (Birth Certificate, Social Security Card, Photo ID, Certification of Disability, etc.)
- Temporary Documents (DCA Applications, Point-In-Time Eligibility Determination Documentation, etc.)

**Security on Uploaded Documents:**

- Permanent Documents OPEN
- Temporary Documents CLOSED

**Documents to be uploaded:**

- Only documents relevant to achieving goal plan and accessing housing and services should be uploaded, for example DCA Applications uploaded should include (but are not limited to):
  - Lease
  - Eviction Notice
  - Income Documentation
  - Check Request
  - Calculations Sheet
  - Prevention or Rapid Re-housing Assessment form
  - W-9
  - Property Management Agreement
  - Income sources form
  - Client signature form
  - Proof of Tenancy form
  - Verification of prospective housing
  - Homeless Certification
  - Self-declaration of housing status
  - Application checklist
  - Project welcome Home form
  - Furniture Bank Request
  - Printout from county auditor's website
  - Utility notice
- Avoid duplication; if the document is already uploaded don't upload again.

**Naming Standards for uploading documents:**

- Format: Client ID#. Document Title. Date Saved
- Example: 77045. DCA Application Rent and Deposit. 120409

**Uploaded Document retention:**

- Permanent Documents: In perpetuity or until client profile is inactive for 7 years or more as per the current data archiving standard.
- Temporary Documents
  - DCA Applications will be deleted by CSB DCA Program Manager once downloaded.
  - Other: deleted by provider when client exits the program.
- Older documents should not be deleted when an updated version is uploaded.



## 4.3 Data Entry

### 4.3.1 ShelterPoint Data Entry (applies only to emergency shelters)

**Policy: The ShelterPoint module in CSP is meant to serve as a tracking tool for actual shelter bed use. Clients admitted in shelter will be entered in ShelterPoint.**

**Explanation:** To ensure consistency in how emergency shelter beds are used, all clients admitted into the emergency shelter will be entered in CSP, via the ShelterPoint module.

**Procedure:** All clients served by the shelter must be entered into ServicePoint and ShelterPoint.

- Clients who receive overnight accommodation must be checked into ShelterPoint no later than 9:00 a.m. the next day.
- All clients who do not return for shelter (no show) or who otherwise did not use their bed (e.g. out on pass) MUST BE CHECKED OUT of ShelterPoint by 9:00 a.m. the next morning.
- Client status in ShelterPoint *must not be changed* between 9:00 a.m. to 11:00 a.m., Monday through Friday, as this is when CSB will be generating reports from ShelterPoint for the prior evening.
  - The report that is generated by CSB each day is called the Daily Bedlist Report. It is the Agency Administrator's task to review this report each day and verify the accuracy of the numbers posted.
  - Agency Administrators should notify CSB promptly when inaccuracies in the Daily Bedlist Report are identified and give an estimated time for corrections within ServicePoint to be completed.
- Clients who exit the shelter, after having slept in a bed the previous night, must only be checked out of ShelterPoint and have an exit date entered in ServicePoint *after* 11:00 a.m.

#### **Example**

John Doe receives an intake and begins his stay at the shelter on Monday. On Wednesday evening he misses curfew and is a no show. He returns on Thursday at 6:00 p.m. and is readmitted to the shelter and then exits the following Monday.

In this situation,

- Mr. Doe will be entered into ServicePoint and ShelterPoint on Monday (by no later than 9:00 a.m. Tuesday morning). If for some reason data entry cannot be done real-time it will be necessary to back-date the record to the client's actual date and time of entry.
- Since he didn't return Wednesday evening, he would be checked out of ShelterPoint Thursday, no later than 9:00 a.m. (the system will automatically apply the Exit to the client's EntryExit record as well.)
- After returning on Thursday he is then checked back into ShelterPoint (and ServicePoint if exited previously) no later than Friday at 9:00 a.m.
- The following Monday, he is checked out from ShelterPoint on Monday (after 11:00 a.m.).

### 4.3.2 Customizations

**Policy:** CHOs will have the option of collecting additional data elements in CSP.

**Explanation:** Custom, additional assessments might be created by the CSB Database Administrator at the request of CHO. Custom Assessments will contain questions that will be used to collect the additional data elements.

**Procedure:** CSB Database Administrator, at the request and in collaboration with the Agency Administrators will create custom assessments for CHOs.

### 4.3.3 Additional Customization

**Policy:** CHOs will purchase any additional database customization directly from Bowman Internet Systems. CSB will not provide additional customization. However any proposed customizations must be approved by CSB.

**Explanation:** It is the responsibility of individual agencies to determine the best way to use ServicePoint for internal data collection, tracking, and reporting. This may include purchasing additional customization directly from Bowman. CSB must review and approve any proposed customizations to ensure the integrity of the overall system.

**Procedure:** CHOs will provide a proposal to CSB and contact Bowman Internet Systems directly with additional customization needs.

#### 4.3.4 Data Corrections

**Policy:** Data should not be changed once the System and Program Indicator Report (SPIR) has been published.

**Explanation:** Once data has been found compliant through the quarterly Quality Assurance review process the data is then utilized for funder, Continuum of Care, Board and Community Reporting. To maintain the integrity of this reporting it is necessary to be able to provide numbers and statistics consistently over time.

CSB data entry standards require that all data is completely and accurately entered in the CSP by the 4<sup>th</sup> working day of the month after which there is a period of Quality Assurance reviews. It is the Agency Administrator's responsibility that data is entered completely and accurately on an ongoing basis through agency-level QA policies and procedures.

If data is found to be incomplete or incorrect during the QA period it is permissible to make changes up through the last day of the designated cure period. After compliance has been achieved no changes or corrections to the data which has been reviewed should be necessary.

**Procedure:** Agency Administrators will facilitate efficient and accurate data entry through training and monitoring of data entry personnel. Agency Administrators will ensure data is accurately entered in a timely manner through rigorous quality assurance practices. If agency discovers data inconsistencies after the quarterly QA period, administrator should contact CSB's Database Administrator. In agreement with CSB's Database Administrator, changes may be allowed to data.

### 4.3.5 Annual Data Freeze

**Policy:** Annually, as of October 1<sup>st</sup> no changes will be allowed to data records which have an exit date on or before the last day of the previous fiscal year. The fiscal year data will effectively be “frozen” on an annual basis.

**Explanation:** Once data has been found compliant through the quarterly and annual Quality Assurance review process the data is then utilized for funder, Continuum of Care, Board and Community Reporting. To maintain the integrity of this reporting it is necessary to provide consistent historical numbers and statistics over time.

CSB data entry standards require that all data is completely and accurately entered in the CSP by the 4<sup>th</sup> working day of the month after which there is a period of Quality Assurance reviews. At the end of a fiscal year, data for the entire year as well as the final quarter is reviewed for QA. It is the Agency Administrator’s responsibility that data is entered completely and accurately on an ongoing basis through agency-level QA policies and procedures.

If CSB and/or agencies discover a major inconsistency in previous fiscal year’s data after October 1<sup>st</sup> the anomaly will be reviewed by CSB and action decided on a case by case basis.

**Procedure:** Agency Administrators will ensure through staff training and communication that changes will not be made to previous fiscal year data as of October 1<sup>st</sup>. Agency Administrators will facilitate efficient and accurate data entry through training and monitoring of data entry personnel. Agency Administrators will ensure data is accurately entered in a timely manner through rigorous quality assurance practices. If an agency discovers data inconsistencies in the previous fiscal year’s data after the October 1st cut off date, the administrator should contact CSB’s Database Administrator. The anomaly will be reviewed by CSB and action decided on a case by case basis.

### 4.3.6 Data Entry for Couples in Supportive Housing Programs

**Procedure:**

For HUD Chronically Homeless units, both members of a couple must meet the Chronically Homeless definition and as such both need to be entered in CSP and reported on as individuals.

For Rebuilding Lives (RL) only units, an RL eligible client may share a unit with a nonRL-eligible client. Because only the RL clients must be accounted for, the couple should be entered in CSP as a household with the RL-eligible client as the head of household. By the same token, if both members of the couple are RL-eligible clients, then both need to be entered in CSP and reported on as individuals.

For other, non-HUD Chronic Homeless or Rebuilding Lives units, the couple should be entered in CSP as a household with the HOH as the primary disabled member.

Unit Type	Eligibility	CSP Data Entry
HUD Chronic Homeless (includes RL units designated as such)	Both members of couple must meet HUD Chronic Homeless criteria	Enter as singles
Rebuilding Lives (not HUD Chronic Homeless)	Only one member must meet Rebuilding Lives criteria	a. If only one member is RL eligible, enter as household with the RL-eligible member as HoH; b. If both are RL eligible, enter as singles
HUD (not HUD Chronic Homeless or Rebuilding Lives) - S+C, other	Only one member must meet HUD homeless criteria	Enter as household with the HoH as the primary disabled member Unless the Live-in caregiver is family, a spouse or is also receiving services through the program, it is not necessary to enter a Live-in caregiver in CSP.
HOPWA S+C Units	Live-in caregivers	

***Explanation: Couples present a challenge in data entry and reporting as different funders view them differently. The Columbus community encourages programs to serve couples, wherever possible, in the supportive housing programs.***

## ***4.4 Quality Control***

### **4.4.1 Data Integrity**

**Policy:** CSP users will be responsible for the accuracy of their data entry.

**Explanation:** Individual users are responsible for the accuracy and quality of their own data entry.

**Procedure:** In order to test the integrity of the data contained in the CSP, the CSB Database Administrator will perform regular data integrity checks on the CSP. Any patterns of error will be reported to the Agency Administrator. When patterns of error have been discovered, users will be required to correct data entry techniques and will be monitored for compliance.

#### 4.4.2 Data Integrity Expectations

**Policy:** CHOs will provide the following levels of data accuracy and timeliness:

- All data entered will be accurate
- Entry Dates and Exit Dates must match intake and exit forms within the client file and must be completed for each individual served.
- Blanks or “unknown” entries in required data fields will not exceed 5% per month
- All services provided will be compatible with providing program
- In all reports of shelter provided for a client, the client must be eligible to receive shelter services from the listed provider
- Entry data will be completed in CSP as real-time as possible. Data entry for all other services provided will be entered within 48 hours. Allowing for quality checks and corrections for any given calendar month-end, these must be completed within CSP by the fourth working day of the following calendar month
- Don’t Know & Refused entries in required data fields will not exceed 5% per month.

**Explanation:** Users will enter client data as provided by the client and, preferably, confirmed by documents. Of the fields required in the CSP Agency Agreement, less than 5% of the total fields will be left blank in one month. For example, assuming no other required fields are left blank, the last zip code field should not be left blank for more than 5% of clients entered during one month. Similarly, the use of the entry “unknown” must not exceed 5% in any calendar month. When service records are added, no services entered will be entered as provided by programs that do not provide that type of service. For example, rental assistance should not be entered as provided by a program that only provides emergency shelter. When service records for shelter stays are added, the client must meet the most basic requirements of the program listed as providing shelter. For example, no clients listed as women should have shelter stays in shelters restricted to men. Agencies will strive to complete entry data as real-time as possible, other services and items will be entered within 48 hours of provision. Data entry for all services provided in one month must be entered into the CSP by the fourth working day of the following month. For example, if April 30<sup>th</sup> falls on a Friday, data for April must be entered by close of business Thursday, May 6.

**Procedure:** The CSB Database Administrator will perform regular data integrity checks on the CSP. Any patterns of error at a CHO will be reported to the Agency Administrator. When patterns of error have been discovered, users will be required to correct data entry techniques and will be monitored for compliance.



### 4.4.3 Quality Assurance

**Policy:** CSB will perform at least a quarterly quality assurance process for data entered by each CHO, related to the CSP.

**Explanation:** To keep the data integrity at the program and system level, CHOs and CSB perform a quality assurance process, at least quarterly, for data entered in CSP.

**Procedure:**

Starting with FY2010, all agencies are required to run monthly the Client Duplicate report and inform the CSB Database Administrator of any client duplicates found, by the 4<sup>th</sup> working day following the end of a month (by fax). This report becomes an integral part of the Monthly/Quarterly quality assurance process.

*The Monthly QA review* roster is based on the results of the initial run of the preceding Quarterly QA run. If an agency receives a noncompliant rating on the initial run of a quarterly QA review that agency will receive monthly reviews for the next two months.

- **The purpose of the Monthly QA is to encourage Agency Administrators to monitor their compliance status and catch problems early. We are also looking to focus an agency's attention on the QA problems.**
- Review for the previous month is run by the Agency Administrator by the 5<sup>th</sup> working day of the month.
- Results are distributed (or emailed) to CSB Database Administrator by the 6<sup>th</sup> working day of the month.
- Administrators are expected to set their own schedule to review and effect a cure prior to the end of the third month of the quarter.
- Agencies will not have to do a monthly report for the third month of each quarter as this is when the Quarterly QA is run.

*The Quarterly QA review* schedule is 2-tiered:

- For the initial run the Agency Administrator and Executive Director receive compliance results.
  - **The purpose of this step is to help Agency Administrators in determining the data integrity problems from the previous quarter and allow them sufficient time to correct the errors prior to inclusion in community reports.**
  - Review is run by the Agency Administrator by the 9<sup>th</sup> working day of the month following the end of the quarter.
  - Summaries are distributed (emailed or faxed) to the CSB Database Administrator by the 10<sup>th</sup> working day of the month.
  - Non-compliance will result in the Agency Administrator (and Executive Director) receiving a Non-Compliance Memo by the 11<sup>th</sup> working day of the month.
  - Noncompliant agencies are given **5** working days to cure.

- All noncompliant agencies on this run will be added to the Monthly QA Roster.
- Compliance will result in a formal letter addressed to the Agency Administrator and their Executive Director.
- The 2nd run is only for those agencies found noncompliant in the 1st run; Agency CSP Administrator and Executive Director receive the results.
  - **The purpose of the 2<sup>nd</sup> run is to make sure that all agencies are compliant with the minimal CSB data quality standards which in turn allow us to present the agency and system data in community reports and help the planning process to cover the ongoing homelessness related needs of our community.**
  - CSB CSP Administrator will do the 2<sup>nd</sup> review on the 17<sup>th</sup> working day of the month.
  - Results are distributed within 3 working days.
  - Compliance will result in a formal letter addressed to the Agency Administrator and their Executive Director.
  - Noncompliance results in a hard-breach letter being issued and signed by CSB's Executive Director.

Any agencies receiving a hard-breach letter may have funding suspended until a cure has been achieved. CSB will not include that agency's data in the Quarterly and/or Semi-Annual System and Program Indicator Report (SPIR) and the program will be listed as a "program of concern". The System Results in the SPIR will be revised after the agency becomes compliant. Agency results will NOT be changed.

CSB will not include the agency data in the SPIR or any other reports if we are not confident in the reliability of that particular agency's data in CSP, independent of the QA results.

#### CPOA and Quality Assurance Accountability

The Coordinated Point of Access (CPOA) staff collects and enters the majority of the required data elements for each single adult shelter client, however all serving agencies remain accountable for the accurate representation of the client's data within CSP. Programs receiving clients directed to their shelters via CPOA must review all required data elements and ensure all are entered and accurate as of the client's entry. When shelter staff discover an omission or mistake it should be promptly reported to CPOA for entry or correction as needed. Proof of this report should be included in the client's file.

#### 4.4.4 On-Site Review

**Policy:** CSB will perform annual on-site reviews at each CHO of data processes related to the CSP.

**Explanation:** On-site reviews enable CSB to monitor compliance with the Policies and Procedures Manual and CSP Agency Agreements.

**Procedure:** This review will be part of the Annual Program Review and Certification process. The PR&C Administrative Procedures detail the annual on-site review.

## ***4.5 Data Retrieval***

### **4.5.1 Contributing HMIS Organizations (CHOs)**

**Policy:** CHOs will have access to retrieve any individual and aggregate data entered by their own programs. CHOs will not have access to retrieve aggregate data for other agencies or system-wide.

**Explanation:** Any data entered within an agency is available for reporting. Data entered by other agencies will not be available, unless there are explicit data-sharing agreements in place.

**Procedure:** When using the report writer or ART module, users will only be able to extract data from those records to which they have access. The report-writer and ART will limit user access and only report data from records to which the individual user has access.

#### 4.5.2 CSB Access

**Policy:** The Community Shelter Board will have access to retrieve all data in the CSP. CSB will not access individual client data for purposes other than direct client service-related activities, reporting, maintenance, and checking for data integrity.

**Explanation:** The CSB Data & Evaluation and Programs and Planning departments have access to all data in the database. No other staff member of CSB will have access to client-level data. CSB will protect client confidentiality in all reporting.

**Procedure:** The CSB Operations Director will be responsible for ensuring that no individual client data is retrieved for purposes other than direct client service, reporting, maintenance, and performing data integrity checks. The CSB Operations Director will oversee all reporting for the Community Shelter Board.

### 4.5.3 Public Access

**Policy:** CSB will address all requests for data from entities other than CHOs or clients. Individual client data will be provided, upon request, to the CHO which entered the data, CSB's funder for the specific program for which individual client data is requested, outside organizations under contract with CSB for research, data matching, and evaluation purposes, or the client him or herself. Proper authorization is required for all requests.

**Explanation:** Any requests for reports or information from an individual or group who has not been explicitly granted access to the CSP will be directed to the Community Shelter Board. No individual client data will be provided to meet these requests without proper authorization.

**Procedure:** All requests for data from anyone other than a CHO or a client will be directed to the CSB Database Administrator. As part of the mission to end homelessness in Columbus and Franklin County, it is the Community Shelter Board's policy to provide aggregate data on homelessness and housing issues in this area. CSB will also issue periodic public reports about homelessness and housing issues in Columbus and Franklin County. No individual client data will be reported in any of these reports. CSB may share client level data with contracted entities as follows: CSB's funder for the specific program for which individual client data is requested, outside organizations under contract with CSB for research, data matching, and evaluation purposes. The results of this analysis will always be reported in aggregate form, client level data will not be publicly shared under any circumstance.

#### 4.5.4 Data Retrieval Support

**Policy:** Agencies will create and run agency-level reports. CSB will provide its own reports to agencies for their own use.

**Explanation:** The Agency Administrator has the ability to create and execute reports on agency-wide data. This allows agencies to customize reports and use them to support agency-level goals.

**Procedure:** The Agency Administrator will be trained in reporting by Bowman Internet Systems or by the CSB Database Administrator. The CSB Database Administrator will provide the template for reports specifically required by the Community Shelter Board. The CSB Database Administrator will be a resource for report creation.

#### 4.5.5 Appropriate Data Retrieval

**Policy:** CSP users will only retrieve client data relevant to the delivery of services to people in housing crises in Columbus and Franklin County.

**Explanation:** The purpose of the CSP is to support the delivery of homeless and housing services in Columbus and Franklin County. The database should not be used to retrieve or report information not related to serving people in housing crises.

**Procedure:** Agency Administrators will ask the CSB Database Administrator for any necessary clarification of appropriate data retrieval.



#### 4.5.6 Naming ReportWriter Saved Queries

**Policy:** Users will follow a standard formula when naming a saved query within the ReportWriter tool.

**Explanation:** Utilizing a standard formula to name saved report queries will allow for quicker look up, repeated use and less duplication of saved queries.

**Procedure:** Users will utilize the following formula when naming a saved query within the ReportWriter tool: Agency>Program>Reporting Period (or “Template” if meant to be changeable reporting period)>Purpose; see following examples:

CSB Test Program 070105 – 123105 LOS Report

*OR*

CSB Test Program Template LOS Report

### 4.5.7 Inter-Agency Data Sharing

**Policy:** Data included in the Profile, Columbus Assessment (HUD 40118) EntryExit, and Service Transaction section of a client record will be able to be viewed by all users with the exceptions below. CHOs will determine the security settings of the additional information entered in CSP.

**Explanation:** When new clients and new service records are entered into ServicePoint, the information, by default is open to be viewed by users from other CHOs. Open sections of the record can be seen and changed by users from another CHO, There are a few agencies that are regulated by HIPAA Standards and those Agencies' records, by default, are closed. Closed sections of the record can neither be seen nor changed by users from another CHO. Regardless of status, all sections of each record will appear in aggregate reports

Currently, the following are the agencies that are entering and sharing information in CSP:

Amethyst	Communities In Schools	ARCOhio
Community Housing Network	Faith Mission/Faith Housing	Gladden Community House
Homeless Families Foundation	Huckleberry House	Lutheran Social Services
Maryhaven	National Church Residences	CMHA
The Salvation Army	Southeast, Inc.	Volunteers of America of Greater Ohio
YMCA	YWCA	HOCOho

**Procedure:** It is the intent of CSB to allow as much data sharing as appropriate and necessitated by the clients' needs and the services provided to meet those needs. Client profiles are set as "Open", HUD-40118 Assessment data is set as "Open" as are Service Transactions and EntryExit records. HIPAA regulations, as followed by some of the CHOs take precedence over the above Policy and Procedure. HIPAA regulated agencies will have all their clients' data CLOSED.

#### 4.5.8 Agency Data Sharing

**Policy:** CHOs can share their data for research and data analyses purposes with prior approval by CSB.

**Explanation:** Columbus ServicePoint provides the ability to run reports and download client-level data by all CHOs. CHOs are encouraged to analyze their data and make programmatic decisions based on the information contained in Columbus ServicePoint. Data sharing must be done in conjunction with careful consideration of data confidentiality and privacy protocols.

**Procedure:** The following steps are required by each CHO that wishes to share its data with an external contractor or vendor for research and data analysis purposes:

3. Data sharing will have to be approved by CSB
4. The provider will have to submit to CSB the data sharing agreement that will need to contain, at the minimum:
  - a. Scope of the analyses/research that must be limited to the data that pertains to the individuals served by provider
  - b. Information transmittal protocols
  - c. Data confidentiality/privacy protocols
  - d. Data handling after the analyses/research is complete

## ***4.6 Contract Termination***

### **4.6.1 Initiated by CHO**

**Policy:** The termination of the CSP Agency Agreement by the agency will affect other contractual relationships with the Community Shelter Board. In the event of termination of the CSP Agency Agreement, all data entered into the CSP will remain an active part of the CSP, and records will keep their original security settings.

**Explanation:** While agencies may terminate relationships with CSB and the CSP, the data entered will remain part of the database. This is necessary for the database to provide accurate information over time and information that can be used to guide planning for community services in Columbus and Franklin County. The termination of the CSP Agency Agreement will affect any other contractual relationships with the Community Shelter Board.

**Procedure:** Partner Agencies are required to participate in the CSP as a condition of their funding. For Partner Agencies, termination of the CSP Agency Agreement will be addressed in the context of the larger contract with CSB. For the other CHOs terminating the CSP Agency Agreement, the person signing the initiating agency contract (or a person in the same position within the agency) will notify the Executive Director of CSB with a date of termination of contract. The Executive Director of CSB will notify the CSB Database Administrator. In all cases of termination of CSP Agency Agreements, the CSB Database Administrator will inactivate all users from that CHO on the date of termination of contract.

#### 4.6.2 Initiated by the Community Shelter Board

**Policy:** CSB will terminate the CSP Agency Agreement for non-compliance with the terms of that contract upon 30 days written notice to the CHO. CSB will require any CSP violations to be rectified before CSP Agency Agreement termination is final. CSB may also terminate the CSP Agency Agreement with or without cause upon 30 days written notice to the CHO and according to the terms specified in the CSP Agency Agreement. The termination of the CSP Agency Agreement by CSB may affect other contractual relationships with the Community Shelter Board. In the event of termination of the CSP Agency Agreement, all data entered into the CSP will keep their initial security settings.

**Explanation:** While CSB may terminate the CSP Agency Agreement with the CHO, the data entered by the CHO prior to termination of contract will remain part of the database. This is necessary for the database to provide accurate information over time and information that can be used to guide planning for community services in Columbus and Franklin County. The termination of the CSP Agency Agreement may affect other contractual relationships with the Community Shelter Board.

**Procedure:** CSB Partner Agencies are required to participate in the CSP as a condition of their funding. For Partner Agencies, termination of the CSP Agency Agreement will be addressed in the context of the larger contract with CSB. When terminating the CSP Agency Agreement, the Executive Director of CSB will notify the person from the CHO who signed the CSP Agency Agreement (or a person in the same position within the agency) within 30 days from the date of termination of contract. The Executive Director of CSB will also notify the CSB Database Administrator. In all cases of termination of CSP Agency Agreements, the CSB Database Administrator will inactivate all users from that CHO on the date of termination of contract.

## ***4.7 Programs in CSP***

### **4.7.1 Adding a New Program in CSP**

**Policy:** Agency Administrators will follow the prescribed procedure to notify CSB 's Database Administrator prior to implementing a new program within the CSP. CSB Database Administrator will follow a standard formula when naming a new program within CSP.

**Explanation:** When a new program is to be added or activated within CSP the Agency Administrator is required to submit the requested information via the provided form prior to implementation. The CSB Database Administrator will follow a standard pattern when creating a name for new programs being added to the CSP and will obtain approval from the Data & Evaluation department prior to implementation.

**Procedure:** When a new program is to be added or activated within the CSP, the following steps will occur:

1. At least 60 days prior to the anticipated implementation date, Agency Administrators will complete a "CSP Program Implementation Request Form" and submit it to the CSB Database Administrator.
2. If being newly added in CSP, the CSB Database Administrator will ensure that the following standard formula is used when creating a name within CSP:  
Agency (Abbreviation) – CSB Contract/Program Name  
Example:  
CSB Test Program
3. The CSB Database Administrator will present the completed request form and recommended program name to the Data & Evaluation Department for review and approval.
4. The CSB Database Administrator will notify the Agency Administrator of approval status at least 30 days prior to the requested CSP implementation date.
5. The CSB Database Administrator will assist the Agency Administrator with the CSP implementation as needed.

## 4.7.2 Making Changes to Existing Programs

**Policy:** The Agency Administrator will notify the CSB Database Administrator of programmatic changes per the procedure below.

**Explanation:** Agencies must notify CSB of any program changes which will affect data collection, data entry, data quality and/or data reporting. Agency Administrators will accomplish this via the provided form which requests details such as (but not limited to) funding status, program type, quality assurance participation, program start and end date, capacity, bedlist specifications etc.

**Procedure:**

1. The Agency Administrator will notify the CSB Database Administrator of any applicable programmatic changes to existing programs which may have an effect on data collection, data entry, data quality or data reporting (i.e. program expansion of capacity or scope; termination; deactivation; discontinuance of CSP participation, etc.) Notification will be made in writing at least 45 business days before the proposed implementation date of the change.
2. CSB's Database Administrator will circulate the completed form to the Department of Data & Evaluation workgroup for review & comment.
3. Recommendations and timeline for assistance will be returned to the agency no fewer than 10 business days prior to the requested implementation date.
4. The CSB Database Administrator will assist with changes within the CSP as necessary.

While the Agency Administrators have the access to make changes to programs within the system, it is required that any changes first be reviewed with the CSB Database Administrator to determine the overall effect of the changes and to allow for documentation of changes as well as the arrangement of any necessary support.

### 4.7.3 Maintaining a CSP Program Matrix

**Policy:** The CSB Database Administrator will maintain a complete and up to date Program Matrix of the CSP.

**Explanation:** The Program Matrix is a complete index of all programs existing in the CSP, their status and other details such as (but not limited to) funding status, program type, quality assurance participation, program start and end date, etc.

**Procedure:** The CSB Database Administrator will record changes being made to any existing program in the CSP (termination, deactivation, etc.) and the addition of the new program via the Program Matrix, upon receipt of the proper documentation from the Agency Administrator and after the finalization of the implementation plan. The CSB Database Administrator is responsible for ensuring the Program Matrix reflects any and all changes to programs within the CSP. The CSB Database Administrator will review the Program Matrix with the Data & Evaluation workgroup on a monthly basis.





**COLUMBUS METROPOLITAN HOUSING AUTHORITY**  
COMMUNITY. COMMITMENT. COLLABORATION.

October 8, 2015

Michele Heritage  
Community Shelter Board  
111 Liberty Street, Suite 150  
Columbus, OH 43215

Michele,

The Columbus Metropolitan Housing Authority (CMHA) is a committed partner in the Columbus and Franklin County Continuum of Care and the work to end homelessness in our community. The local goal is to open one new permanent supportive housing project every year and so far, with the support of the Housing Choice Voucher (HCV) program, this goal has been met.

CMHA prioritizes homeless individuals and families for housing in the HCV program. The admission preference for the homeless population is included in CMHA's Housing Choice Voucher Administrative Plan.

CMHA has 2,077 project-based vouchers allocated to permanent supportive housing projects across Columbus and Franklin County. When clients complete program goals and no longer need the breadth of supportive services they had under PSH, CMHA issues a free-standing voucher to the client so they can find a new affordable housing solution. The PSH development is then able to provide more homeless individuals and families with access to stable housing.

CMHA is committed to adding more project based vouchers into new permanent supportive housing programs based on the available HCV capacity. At this time CMHA is very close to reaching its 20% allocation cap of project based vouchers regulated by HUD. To that end, CMHA is advocating that HUD increase the cap from 20% to 25% to increase the availability of vouchers that could be available for use in housing the homeless population.

Sincerely,

Ron Lebsock  
SVP Housing Programs

## **2. CMHA ADMISSION PREFERENCES**

CMHA has established the following Local Admission Preferences that will be used to select applicants to be placed on a Wait List and be issued a Housing Choice Voucher:

- A. Under 30% of Area Median Income (HUD 75% Program requirement)
- B. Family Composition Preference
  - 1. Families with 2 or more persons
  - 2. Families that include a person with disabilities.
  - 3. A household headed by a disabled or elderly person (62 years or older)
  - 4. Single persons who are age 62 or older, displaced, **homeless** or is a person with disabilities.
- C. Families residing in or who have been hired to work in the eight county Columbus Metropolitan Area (Franklin, Union, Delaware, Madison, Pickaway, Licking, Union and Fairfield).
- D. An active duty military or veteran's preference pursuant to the Ohio Revised Code
- E. Families not receiving any permanent rental assistance. Rental assistance is defined as any type of federal, state, or local housing rental assistance payment that is currently received by the family. Examples include, but are not necessarily limited to, HOPWA, HOME, Section 202 rental assistance, Shelter Plus Care, Ohio Department of Alcohol and Drug Addiction Services and/or Mental Health rental assistance, Housing Choice Voucher Project-Based, or Public Housing Programs. Rental Assistance does not include any type of rental assistance that is categorized as temporary or transitional in nature.
- F. Referrals from social service and housing organizations providing supportive services to participants in CMHA's Project-Based Voucher Program.
- G. Referrals from local supportive service organizations that have agreements with CMHA to provide supportive services to homeless, displaced and/or disabled persons and families and other at-risk populations, including referrals from Columbus Community Shelter Board agencies and the Franklin County ADAMH Board.

## **3. ASSIGNMENT OF ADMISSION PREFERENCE POINTS**

As Preliminary Applications are submitted and placed in the Lottery Pool, Admission Preference Points will be assigned without verification on a provisional basis. At the time Full Applications

# **Unified Supportive Housing System Vacancy Management and Lease Up Narrative Manual and Policies & Procedures**



## Narrative Manual Table of Contents

A.	Purpose	3
B.	Background	3
C.	Goal	3
D.	Key Terms and Acronyms	3
E.	General Eligibility	5
F.	PSH Unit Eligibility Requirements	6
G.	Eligibility Determination	10
H.	Rights & Responsibilities	10
I.	Provider Agency Expectations	11
J.	Housing Provider Expectations	12
K.	USHS Program Manager Expectations	13
L.	Timeline for Prospective Applicant File Processing	13
M.	USHS Appeals Due Process	16
N.	USHS Grievance Process	17
O.	Prospective Applicant Rejection of Housing	17
P.	Appeal for Re-entry into the USHS Pool following Prospective Applicant's Rejection of Housing Opportunity	18
Q.	Appeal to the USHS Review Panel	18
R.	Recordkeeping	18

## Policies & Procedures Table of Contents

Referrals to USHS	19
Acceptance of Forms	20
Determination of Prospective Applicant Eligibility	21
Prospective Applicant Matching & System Prioritization	22
Refreshing the Eligible Pool	27
USHS Referral to Housing Provider	28
Vacancy Management and Lease-Up	29
Housing Provider Rejection of Prospective Applicant	30
Prospective Applicant Rejection of Housing	31
Documentation of Homelessness	32
Determination of Severity of Service Needs or Vulnerability	34
Documentation of a Certified Disability	35
Transfers between Programs	36



## **Narrative Manual**

### **A. Purpose**

This set of policies and procedures provides administrative guidance and structure for the vacancy management and lease up processes of projects within the Unified Supportive Housing System.

### **B. Background**

The Unified Supportive Housing System (USHS) is a collaborative effort managed by The Alcohol, Drug, and Mental Health Board of Franklin County (ADAMH), the Columbus Metropolitan Housing Authority (CMHA) and the Community Shelter Board (CSB). These partners work together with other agencies in the community including behavioral health, housing, shelter, and outreach providers. Funds from the Osteopathic Heritage Foundation, Fannie Mae and Battelle were used to develop the Unified Supportive Housing System.

### **C. Goal**

A major goal of the system is to coordinate efforts to place the most vulnerable of the community's population into housing.

### **D. Key Terms and Acronyms**

**Certification of Disability (COD)** Award letter or print out from the Social Security Administration (SSA) verifying receipt of disability benefits (SSDI or SSI) or a signed Certification of Disability form.

**Columbus ServicePoint** Our community's homeless management information system (HMIS). Partner Agencies collect client data and enter it in this electronic database.

**Housing Provider** Agencies which manage housing projects within the USHS.

**HUD Chronically Homeless** An unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more OR has had at least four (4) episodes of homelessness in the past three (3) years. HUD updated the CH definition to include families – a single adult, part of a household, that meets the chronic homeless definition automatically qualifies the family as chronically homeless.

**Individual Housing Stabilization Plan Time**-defined plan used to identify and prioritize actions related to keeping housing and tenant's individual goals.

**Non-Rebuilding Lives** Household with a disabling condition. Disabled individuals may be homeless or at risk of becoming homeless including those who are exiting institutional settings (treatment programs, hospitals, nursing homes, correctional institutions). This eligibility applies to Veteran, Medical, and Disabled Non-Homeless units.

**Notification of Incompatibility (NOI)** The written notification a Provider Agency receives from the USHS Program Manager when a Prospective Applicant is deemed incompatible with USHS Policies & Procedures or Provider Agency's Tenant Selection Plan, making the obtainment of housing through USHS unlikely.

**Permanent Supportive Housing (PSH)** Community-based housing, without a designated length of stay, inclusive of supportive services focused on assisting individuals experiencing homelessness with disabilities to live independently. Permanent Supportive Housing can be single or scattered site.

**Prospective Applicant** An individual who is literally homeless and meets eligibility guidelines for the USHS.

**Prospective Applicant File** File which includes signed, dated and current ROI, COD, documentation of homelessness (if applicable), copy of current state-issued photo ID with Franklin County address, accurate birth certificate, social security card or printout from the Social Security Administration verifying social security number, Vulnerability Assessment, and proof of all income and eligibility forms. All of the above documentation must be included for Prospective Applicant File to be complete.

**Provider Agency** Agencies working with USHS that have direct contact with Prospective Applicants such as Emergency Shelters, Outreach Providers and the Navigator Program. For ADAMH units, ADAMH staff working with their Provider Agencies will fulfill these responsibilities; for units that the Housing Provider controls (non-homeless and non-ADAMH), the Housing Provider will fulfill these responsibilities.

**Rebuilding Lives (RL)** Currently homeless individual with a disabling condition who has either been homeless for at least 120 days OR has had at least four (4) episodes of homelessness. (RL) defines an eligible household as a household with a disabling condition who has a history of homelessness and is either currently homeless or is living in a direct housing/rapid re-housing unit currently supported by Community Shelter Board for at least 120 days OR has had at least four (4) episodes of homelessness.

**Release of Information (ROI)** Legal document authorizing the release of Prospective Applicant information.

**Tenant Selection Plan** Housing Provider's description of the eligibility requirements for admission into the housing program, including such things as income limits and exclusionary criteria. It is a policy utilized to ensure fair, consistent and equal treatment of Prospective Applicants.

**USHS Program Manager** CSB staff member responsible for processing documents to determine preliminary eligibility for housing through vacancy management and lease-up procedures.

**Verification of Street Homeless Form** Form utilized by USHS-approved outreach worker to verify street homelessness to be used monthly to document homeless in the absence of a Columbus ServicePoint record.

**Vulnerability Assessment** Standard tool used to measure severity of service needs for individuals experiencing homelessness.

Alcohol, Drug and Mental Health Board (ADAMH)	Date of Birth (DOB)	Permanent Supportive Housing (PSH)	Social Security Insurance (SSI)
Certification of Disability (COD)	Department of Housing and Urban Development (HUD)	Release of Information (ROI)	Social Security Number (SSN)
Columbus Metropolitan Housing Authority (CMHA)	Federal Adjustment Bureau, Inc. (FABCO)	Social Security Administration (SSA)	Temporary Assistance for Needy Families (TANF)
Community Shelter Board (CSB)	Ohio Department of Jobs & Family Services (ODJFS)	Social Security Disability (SSDI)	Unified Supportive Housing System (USHS)

## **E. General Eligibility**

USHS serves single adults, couples and families, where at least one member of the household has a certified disability. These individuals may be literally homeless or transitioning out of institutional settings, such as hospitals, jails, prisons or nursing homes, where they have resided for less than 91 days and were homeless at time of admission into the institution.

Eligibility for housing is also dependent on the housing project and unit size. The information submitted on the Prospective Applicant's behalf will be utilized by the USHS Program Manager to determine preliminary eligibility and appropriate placement in USHS housing units. Prospective Applicants cannot be recommended to the Housing Provider prior to USHS eligibility screening and review.

ADAMH and other low-income units may not require homelessness as part of their eligibility guidelines.

Further documentation and eligibility screenings may be requested by the Housing Provider and CMHA (as required) prior to a Prospective Applicant's approval and/or placement in a unit.

## **F. PSH Unit Eligibility Requirements**

### **1. All USHS Units**

All persons considered for placement in USHS units must meet the following eligibility, per the details below:

- a. Disability.** Prospective Applicants must have documentation of a certified disability. The household must provide documentation that one member of the household is disabled. Two forms of documentation will be accepted: (1) Certification of Disability form signed by an Authorized (Licensed) Professional or (2) Social Security Disability Insurance (SSDI) or Social Security Insurance (SSI) printout providing proof of benefits, dated within 90 days from submission.
- b. Proof of Identity and Social Security Number.** Prospective Applicants must have verification of each adult household member's identity. All household members 18 or older must provide a clean copy of valid government-issued photo identification or driver's license. Prospective Applicant must provide a copy of his or her social security card or SSA verification of social security number and birth certificate or letter/form requesting birth certificate for each household member including dependents under the age of 18.
- c. Household Composition.** Prospective Applicants must have verification of household information. All Prospective Applicant households must have a printout from the ODJFS, regardless of current benefit status. This printout is documentation of household composition.
- d. Income Documentation.** All Prospective Applicants must have verification of income. All adults in the Prospective Applicant's household must provide proof of receipt of benefits which may include, but are not limited to: wages from employment, veterans' benefits, SSI, SSDI, unemployment, general public assistance, gift income, child support, alimony, food stamps, Medicaid, Medicare, pensions, TANF, or worker's compensation, dated within 30 days from submission.

A completed, signed and dated Declaration of Zero Income form is required for all adults who do not have income. Household income cannot exceed that of the HUD defined "very low income," 50% of Area Median Income (AMI). Priority will be given to households with "extremely low income," 30% of AMI. Income documentation may need to be updated before submission to the Housing Provider.



- e. **Complete Prospective Applicant File.** All Prospective Applicants must have completed all required forms. In addition to the above, the Prospective Applicant must complete and sign all paperwork. A Prospective Applicant File is active for 6 months from the date of Prospective Applicant's signature.

## 2. All CMHA Subsidy Units

- a. **Drug-Related or Violent Criminal Activity.** Prospective Applicants cannot have conviction of or eviction from CMHA or other federal voucher housing program due to drug-related criminal activity or violent criminal activity within the past three years of final eligibility determination date, including criminal activity by any family member listed in a family's Prospective Applicant File.
- b. **Exceptions** may be made for Prospective Applicants with criminal convictions of illegal use or possession (without the intent to manufacture, sell or distribute), of a controlled substance occurring more than 18 months before CMHA's decision to terminate or deny assistance. If USHS housing unit has a CMHA voucher or subsidy, CMHA has sole discretion for exceptions to criminal history of eligibility requirements.
- c. **For units that have Section 8 vouchers.** Prospective Applicants who left the voucher program involuntarily due to eviction or violation of program rules are ineligible for housing for a three-year period after said departure, which begins at the termination date of the previous housing assistance or court-approved eviction date.

This three-year ineligibility is reduced to one year for the Rebuilding Lives program, which includes the chronically homeless. This eligibility requirement does not apply to units not receiving a voucher; the Housing Provider may make its decision based on its Tenant Selection Plan.

- d. **CMHA life-time ban from housing.** Applies (1) to Prospective Applicants who manufactured or produced methamphetamine on the premises of any federally assisted housing, (2) if a member of the family has committed fraud, bribery, or any other corrupt or criminal act in connection with any federal housing program at any time, and (3) if a family member is subject to a lifetime registration as a sexual offender at any time.
- e. **Outstanding Debt.** Prospective Applicants cannot have an outstanding debt owed to CMHA. Placement in USHS housing units that have CMHA vouchers or subsidies cannot occur until all outstanding debts are paid to CMHA. In the event CMHA has determined that a Prospective Applicant has committed fraud, a lifetime ban is in effect, regardless of repayment. Financial assistance through CSB may be available to assist homeless Prospective Applicants with outstanding debts owed to CMHA. This eligibility requirement does not apply to units not receiving a voucher.

- f. **Violation of Family Obligation.** Prospective Applicants cannot have left previous tenancy under the Section 8 Program in violation of a family obligation under the Housing Choice Voucher Program. Those individuals who have previously left tenancy in violation of a family obligation are not eligible for Section 8 vouchers and are not able to apply for most USHS housing units. This eligibility requirement does not apply to units not receiving a voucher.

### 3. All Tax Credit Units

Prospective Applicants must not be currently enrolled as a full-time student, unless Prospective Applicant falls under one of the following five exceptions outlined in Section 42 of the IRS Code:

- a. Prospective Applicant is receiving assistance under Title IV of the Social Security Act (e.g., TANF).
- b. Prospective Applicant was previously under the care and placement responsibility of the local county children services agency (i.e., foster care).
- c. Prospective Applicant is enrolled in a government-sponsored job training program.
- d. Prospective Applicant is married and eligible to file a joint income tax return.
- e. Prospective Applicant is a single parent household with at least one dependent child. The parent is not the dependent of another individual and the child is only a dependent of the resident or the other, non-resident parent.
- f. Prospective Applicant is a part-time student or is pursuing a GED.
- g. Prospective Applicant must meet the income eligibility criteria as set forth by the housing project.

### 4. All Family Units

Prospective Applicants must have at least one dependent child (a child under 18 years of age) to be considered for family units in USHS housing.

## 5. Miscellaneous Eligibility

May be required for some units, based on Tenant Selection Plans:

- a. **Prospective Applicants** may not have conviction of a sexual offense or be required to register as a sex offender. Those individuals convicted of any type of sex offense or required to register as a sex offender are, in most cases, ineligible for units within USHS.
- b. **Prospective Applicants** may not have conviction for or eviction from housing due to arson. Prospective applicants who left prior housing due to arson are, in most cases, ineligible for units within USHS. Exceptions may be made for prospective applicants by the Housing Provider, based on their Tenant Selection Plan.
- c. Housing program may serve a specific gender. Gender specific housing programs will make reasonable accommodations for transgendered individuals when possible.
- d. **Prospective Applicant must** have proof of homelessness based on Rebuilding Lives or Chronic Homelessness criteria and a Vulnerability Assessment.
- e. **Prospective Applicant must** be Medicaid eligible. Head of Household must have evidence of a disability that qualifies him or her for Medicaid benefits.

## G. Eligibility Determination

Provider Agencies will submit Indications of Interest, Releases of Information and all required documentation (as outlined in Section F) to the USHS Program Manager. The information in the Prospective Applicant File will be utilized by the USHS Program Manager to determine preliminary eligibility and appropriate placement in USHS housing units. After USHS referral to the Housing Provider, further documentation and eligibility screenings will be conducted by the Housing Provider and CMHA (as required) prior to a Prospective Applicant's approval and/or placement in a unit.

## **H. Rights & Responsibilities**

Provider Agencies are responsible for ensuring Prospective Applicants' rights are protected and that Prospective Applicants are informed of their rights and responsibilities. Participants shall have these rights explained to them verbally and in writing when they fill out the Indications of Interest.

### **1. Prospective Applicant Rights**

Reasonable efforts must be made to ensure that all participants, regardless of language or ability, understand their rights and responsibilities. At a minimum, Prospective Applicant rights should include:

- The right to be treated with dignity and respect;
- The right to privacy;
- The right to be treated with cultural sensitivity;
- The right to have an advocate present during the appeals process;
- The right to request a reasonable accommodation in accordance with the Housing Provider's Tenant Selection Plan;
- The right to accept housing offered or to reject substandard housing; and
- The right to confidentiality and information regarding when confidential information will be disclosed, to whom, and for what purpose, as well as the right to deny disclosure. Prospective Applicants must be informed that participation in USHS requires such information be collected and provided. Prospective Applicants who choose not to release such information are ineligible for placement in USHS units.

### **2. Nondiscrimination Requirements**

Community Shelter Board will comply with the nondiscrimination provisions of federal civil rights laws, including, but not limited to, the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act and Title II or III of the Americans with Disabilities Act, as applicable.

### **3. Housing Accommodations**

If a Prospective Applicant has a physical disability that limits access to the PSH site offered, the Provider Agency will submit a statement by a medical doctor to USHS as soon as access challenges become known. The statement will be on official letterhead and request that the Prospective Applicant be offered the next available unit when he/she is eligible.

Additionally if a PSH unit would put a Prospective Applicant at risk of bodily harm from another resident due to past history of domestic dispute, physical altercation, or abuse, the Provider Agency will provide a statement from the Prospective Applicant to accompany his/her file.

#### **4. Privacy Protections**

All information gathered about the Prospective Applicant listing personally identifying information including first and last name, a home or other physical address, contact information, social security number, and any other information, including date of birth, racial or ethnic background, or religious affiliation, that in combination with any other non-personally identifying information would serve to identify any individual will be properly used with the consent of the Prospective Applicant.

#### **I. Provider Agency Expectations**

Provider Agencies requesting USHS placement services in homeless units shall utilize the Vulnerability Assessment and duration of homeless time to identify the eligible individuals. These individuals must be literally homelessness with certified disability. Provider Agencies are expected to assist in the completion of all necessary forms for housing services. The Provider Agency shall be accountable for the following steps:

1. Observance of all written USHS policies and procedures.
2. Attendance at USHS training sessions.
3. Certification of any staff member who will submit a Prospective Applicant application.
4. Use of current forms to refer Prospective Applicants.
5. Submission of said forms and other necessary documentation to USHS Program Manager.
6. Continuous contact (when possible) with Prospective Applicant so further information or documentation can be collected as needed.
7. Contact with the Housing Provider as needed on Prospective Applicant's behalf.
8. Notification to the Prospective Applicant of his or her status in the process.
9. Serve as the primary contact for the Prospective Applicant while his/her application is in the USHS Pools. (The USHS Program Manager is not intended to have direct contact with applicants.)
10. Initiation of the Review Panel process to settle disputes.

11. Keep all components of the USHS application up to date in order to keep the application active on behalf of the Prospective Applicant, following the schedule below:

Document	Validity
Income Verification	30 days
COD	180 days
Vulnerability Assessment	180 days
ROI	180 days
Prospective Applicant File	180 days

**Table 1**

#### **J. Housing Provider Expectations**

1. Housing Providers requesting USHS placement services shall identify housing opportunities to ensure that vacancies are filled by the most vulnerable Prospective Applicants.
2. Adhere to all USHS written policies and procedures.
3. Notification to the USHS Program Manager of vacancies, lease-up and Prospective Applicant eligibility.
4. Continuous correspondence with Provider Agency for Prospective Applicant contact and follow up.
5. Notification of housing outcomes (Approval, Barriers or Denial) to the Provider Agency and USHS Program Manager.
6. After a Potential Applicant is approved for housing, the Housing Provider will notify the USHS Program Manager and Provider Agency via email that Potential Applicant has successfully moved into his or her unit.

## **K. USHS Program Manager Expectations**

The USHS Program Manager will follow written policies and procedures to determine Prospective Applicant eligibility, homeless status and vulnerability, to ensure implementation of HUD and local standards. Only the most vulnerable Prospective Applicants matching Housing Provider eligibility will be forwarded to fill vacancies.

1. Adhere to all USHS written policies and procedures.
2. Review of Prospective Applicant File.
3. Determination of eligibility and possible housing incompatibility (i.e., history of arson, conviction of distribution and manufacturing of drugs, sexual offender status or sexual based offenses, recent criminal history, open or unresolved court cases and active warrants).
4. Notification of ineligibility and possible housing barriers to Provider Agencies.
5. Scoring of Vulnerability Assessment.
6. Maintenance of prioritized pool of eligible Prospective Applicants.
7. Follow up with Housing Providers and Provider Agencies as needed.
8. Notification of housing referral to Provider Agency.
9. Provide ongoing training opportunities to Housing Providers and Provider Agencies on utilization of required forms and documentation.

## **L. Timeline for Prospective Applicant File Processing**

1. Upon receipt of Prospective Applicant File, the USHS Program Manager will check the file for completeness. Provider Agencies will be notified by the USHS Program Manager within two (2) business days if the submitted file is incomplete. Provider Agencies will be asked to retrieve the Prospective Applicant File within two (2) business days. Provider Agencies will retrieve the incomplete files from USHS within two (2) business days. Completed files may be resubmitted at any time.
2. The USHS Program Manager will conduct an eligibility screening on all Prospective Applicants within two (2) business days of receipt of a completed file.
3. The USHS Program Manager will send a list of names, DOBs and SSNs to CMHA monthly or more often, as needed. CMHA will complete records checks on Prospective Applicants (including violations and current housing with CMHA) and notify the USHS Program Manager of the results within two (2) business days of CMHA's receipt of the list of names, DOBs, and SSNs from the USHS Program Manager.

4. The USHS Program Manager will also send a list of names, DOBs and SSNs and signed ROIs to ADAMH to match service utilization by noon on the first and third Tuesday of every month. ADAMH will return the results of service utilization data matching to the USHS Program Manager by Thursday of that week, within two (2) business days.
5. The USHS Program Manager will complete a criminal background check on all HUD Chronically Homeless Prospective Applicants within two (2) business days of file receipt. The USHS Program Manager will complete criminal background check for USHS Non-Rebuilding Lives special populations including Veterans, ADAMH, Medical, and Disabled/Non-Homeless within two (2) business days of file receipt. The USHS Program Manager will complete background checks for Rebuilding Lives Homeless Prospective Applicants before referring a file to the Housing Provider.
6. If, during the determination of eligibility, the USHS Program Manager finds that a Prospective Applicant is unlikely to receive placement within USHS units, the USHS Program Manager will send the Provider Agency a written “Notification of Incompatibility” within two (2) business days of such finding. The Provider Agency will inform the Prospective Applicant within two (2) business days of receipt of such notification from the USHS Program Manager.
7. If a potential vacancy has been identified, the Housing Provider will notify USHS of the vacancy within one (1) business day. Notification will occur by fax or email to the USHS Program Manager using the USHS Unit Vacancy Notification Form.
8. USHS Program Manager will identify the highest prioritized Prospective Applicant from the eligible pool and forward that name to the Housing Provider. If two (2) or more Prospective Applicants have the same, highest priority within the appropriate pool, the USHS Program Manager will randomly select the Prospective Applicant to be forwarded to the Housing Provider.

The prioritization occurs as outlined in the Prospective Applicant Matching & System Prioritization procedure. The USHS Program Manager will attempt to fill the vacancy within two (2) business days. If Prospective Applicants cannot be located within the time frame, USHS will notify the Housing Provider of this delay within two (2) business days of the receipt of the Unit Vacancy Notification Form.

After transferring Prospective Applicant File(s) to the Housing Provider, the USHS Program Manager will send an email to the Prospective Applicant’s Provider Agency informing it of the transfer. At this point, the Housing Provider will manage all contact with Provider Agencies and Prospective Applicant(s).

9. The Housing Provider will contact each Prospective Applicant received from USHS within two (2) business days and schedule an interview with such Prospective Applicant.



10. The Housing Provider will interview Prospective Applicants referred from USHS and complete eligibility verification according to Housing Provider's Tenant Selection Plan within ten (10) business days of receipt of Prospective Applicant Files from the USHS Program Manager.
11. Resolution of the Prospective Applicant's situation (either housed or rejected) should occur no later than 30 days from the date that the Prospective Applicant is forwarded to the Housing Provider.
12. If the Housing Provider denies the Prospective Applicant (e.g., based on its Tenant Selection Plan), the Housing Provider must notify the Prospective Applicant and the Prospective Applicant's last known Provider Agency and provide an explanation in writing to the USHS Program Manager within two (2) business days of the date of the denial.
13. If the Prospective Applicant refuses the Housing Provider's unit for any reason, the Housing Provider will notify the Prospective Applicant's last known Provider Agency and provide an explanation in writing to the USHS Program Manager within two (2) business days of the date of refusal.
14. USHS will provide another Prospective Applicant to the Housing Provider within two (2) business days of receipt of Housing Provider's explanation for denial or refusal of the previously referred Prospective Applicant. The process will repeat beginning with step #8.

For all lease-up projects:

1. Six months prior to the intended start of a lease-up project, USHS will notify Provider Agencies of the upcoming availability of units. The unit type, subsidy type, eligibility criteria and amount of available units will be shared with Provider Agencies. USHS will request additional referrals into the eligible pools to provide referrals to the Housing Provider for lease up.
2. The USHS Program Manager will send a list of names, DOBs and SSNs and signed ROIs to ADAMH to match on service utilization by noon on Tuesday of every week, starting with three (3) months prior to the project's lease-up date. ADAMH will return the results of service utilization data matching to the USHS Program Manager by Thursday of each week or within two (2) business days.
3. USHS will refer eligible Prospective Applicants to the Housing Provider to fill each unit within the Housing Provider's housing project within the planned lease-up timeframe and according to the Tenant Selection Plan.
4. The Housing Provider will notify the USHS Program Manager within one (1) business day of all units at the new project being leased. The USHS Program Manager will contact the Provider Agencies that assisted the remaining Prospective Applicants who did not receive housing within three (3) business days of such notification.

5. After the USHS Program Manager's notification that the project is fully leased, the Provider Agencies will notify immediately or as soon as possible all remaining Prospective Applicants that they have not been accepted for housing at the respective project.
6. The Housing Provider will send a weekly update on Prospective Applicant move-ins to the USHS Program Manager.

### **M. USHS Appeals Due Process**

Prospective Applicants may appeal eligibility decisions of USHS at the system level (if USHS decision), and/or at the Housing Provider level if the Housing Provider denies Prospective Applicants for housing.

Please see **Section O: Prospective Applicant Rejection of Housing**, for guidance on continued eligibility in the pool after a Prospective Applicant rejects housing opportunity.

#### **1. Appeal of USHS Eligibility Determination**

Upon submission, USHS will review the Prospective Applicant File for completeness, accuracy, and adherence to program policies and procedures. If the Prospective Applicant is determined to be ineligible for USHS housing, USHS will notify the Prospective Applicant and the Provider Agency. The Provider Agency will notify the Prospective Applicant and provide information on the right to appeal through the USHS Grievance Process and the Appeal to the USHS Review Panel.

#### **2. Appeal of Housing Provider Denial**

A Prospective Applicant has the right to appeal the Housing Provider's decision to deny the Prospective Applicant placement at the Housing Provider's housing site. This appeals process will be governed by the Housing Provider's current appeals process. Prospective Applicants who do not meet eligibility and/or are denied service must be informed by designated staff, provided an explanation of the reasons for denial, and told how to appeal the denial per the Housing Provider's current appeals process. Information on the Housing Provider's appeals process will be provided to the Provider Agency and the Prospective Applicant by the Housing Provider.

## **N. USHS Grievance Process**

A Prospective Applicant has the right to file a grievance with the USHS if he or she believes his or her rights were violated during the eligibility screening process. Grievances shall be filed with USHS in writing within five (5) business days of the alleged violation of rights or cause of grievance. Failure to file within this period does not preclude a grievance from being addressed. The Prospective Applicant will be provided an informal hearing with the USHS Program Manager and a system representative (representative of ADAMH, CMHA, or CSB) and the option of a representative from the Prospective Applicant's Provider Agency or other representative of the Prospective Applicant's choice in an effort to resolve the grievance. If a grievance cannot be resolved through this informal process, Prospective Applicant may appeal his or her grievance to the USHS Review Panel.

## **O. Prospective Applicant Rejection of Housing**

USHS will offer up to two housing units to the Prospective Applicant from the housing inventory available within USHS, as all housing within USHS is considered safe, decent, and affordable. If/when a Prospective Applicant rejects housing for the 2nd time his/her file will be returned to the Provider Agency for placement in other suitable community housing outside of the USHS Pool. The Prospective Applicant will be ineligible for USHS housing for a one (1) year period after s/he rejects the 2nd housing unit from the housing inventory available within USHS. Provider Agency will continue to seek appropriate housing for the Prospective Applicant and will follow corresponding shelter guidelines, including but not limited to individualized housing stabilization plans.

The only two exceptions to refusing housing and remaining in the USHS pool are those listed in Section H(3): Housing Accommodations. USHS encourages all Provider Agencies to submit more than one community application for individuals they are working with who are experiencing homelessness.

## **P. Appeal for Re-entry into the USHS Pool following Prospective Applicant's Rejection of Housing Opportunity**

The Provider Agency appeals to the CSB's Director of Programs and Planning presenting extenuating circumstances making the second housing option impossible to accept by the Prospective Applicant. If the Provider Agency is not satisfied with the outcome, the Provider Agency can request that an appeal be heard by CSB's Executive Director, or designee, for final determination.

## **Q. Appeal to the USHS Review Panel**

The USHS Review Panel will be used when a grievance cannot be resolved through other means. Notice of such an appeal must be made in writing to the USHS Review Panel. The Review Panel will consist of one designee from each of ADAMH, CMHA, CSB, Housing Provider, and the Citizens Advisory Council (CAC). The Review Panel shall meet within ten (10) days of receipt of the appeal to hear the grievance, will make a clear determination at its meeting, and provide written notice of its determination to the Prospective Applicant and the Prospective Applicant's Provider Agency. Thereafter, the Prospective Applicant has the option of pursuing additional redress through any available channels.

Please see Policies & Procedures beginning on page 17 for details on each step within the USHS process.

## **R. Recordkeeping**

### **1. USHS Program Files**

All USHS program files will be maintained onsite for the current and previous fiscal year, then maintained offsite in secure storage for four (4) years.

### **2. USHS Prospective Applicant Files**

All USHS Prospective Applicant Files for individuals and families who were successfully housed through USHS will be maintained onsite for the current and previous three (3) fiscal years and then maintained offsite in secure storage for an additional five (5) years.

## Polices & Procedures

### **Procedure Name: Referrals to USHS**

#### Policy:

Prospective Applicants' referrals to USHS for placement in housing will be accepted by USHS on an ongoing basis.

#### Procedures:

1. Prospective Applicants who do not sign a Release of Information (ROI) are not eligible and cannot be considered for USHS housing.
2. After the Prospective Applicant File is complete, the Provider Agency will send the completed forms and documentation to USHS.
3. The ROI will expire six (6) months from the date of the Prospective Applicant's signature. The Prospective Applicant will need to sign and submit a new ROI before or when the original ROI expires to maintain active status for housing consideration.

**Adopted:** March 2010

**Revised:** October 2014

## **Procedure Name: Acceptance of Forms**

### **Policy:**

The USHS Program Manager will not accept incomplete Prospective Applicant Files. An incomplete file is one that does not adhere to these policies and procedures and includes a file without the following: a signature and/or date, appropriate disability documentation, current and legible applicant documentation or incomplete/missing information.

### **Procedures:**

1. All forms will be organized with the File Submission Checklist as the first page and will be certified as accurate by the Provider Agency representative and his or her supervisor.
2. Only one set of forms will be accepted per household.
3. Provider Agency case workers will be notified within two (2) business days if incomplete forms are received. Provider Agency case workers must pick up incomplete files within two (2) business days or the file will be shredded. Complete files may be resubmitted at any time.

**Adopted:** March 2010

**Revised:** October 2014

## **Procedure Name: Determination of Prospective Applicant Eligibility**

### **Policy:**

The USHS Program Manager must review all Prospective Applicants' eligibility for USHS housing units. Prospective Applicants cannot be recommended to the Housing Provider prior to USHS eligibility screening and review.

### **Procedures:**

The USHS Program Manager will:

1. Conduct criminal background screening and national sex offender search using the Ohio Electronic Sex Offender Registration and Notification website (ESORN) and the Franklin County Municipal Court website to check Prospective Applicants' eligibility as files are received, immediately for HUD Chronically Homeless Prospective Applicants and prior to forwarding Rebuilding Lives or other Prospective Applicants to the Housing Provider.
2. Send a list of names, DOBs, and SSNs to CMHA for records checks by the fourth Monday of each month or as needed. During lease-up, if the eligibility pools are exhausted, a list of potential applicants will be sent to CMHA on a weekly basis.
3. Send a list of names, DOBs, SSNs and ROIs of all new Prospective Applicants and those who previously received a score of zero (0) utilization, to ADAMH for Prospective Applicant data matching on service utilization by noon, the first and third Tuesday of every month. During lease-up, a list of Prospective Applicants will be sent to ADAMH weekly, each Tuesday, starting with three (3) months prior to the project's lease-up date. Data matching will be done only on the Prospective Applicants for the units that have homelessness eligibility criteria.
4. For family units, the USHS Program Manager will verify that a printout from ODJFS used to verify household composition, is present before forwarding Prospective Applicants to the Housing Provider.
5. Conduct credit checks through FABCO to check Prospective Applicants' eligibility.

CMHA will:

1. Compare this list against its database to determine if any of those on the list are not likely to receive a housing subsidy due to prior conduct in other CMHA housing programs, current housing in CMHA units or due to some other offense.
2. Send the results of the record check back to USHS within two (2) business days. During lease-up, the results will be expedited.

ADAMH will:

1. Compare this list against its database to determine service utilization and return a score for each individual, ranging from zero (0) to six (6) dependent on the individual's use of ADAMH services.
2. Send the results of the data match to USHS on Thursdays or within two (2) business days from the service match request.

**Adopted:** July 2011

**Revised:** October 2014



## **Procedure Name: Prospective Applicant Matching & System Prioritization**

### **Policy:**

All Prospective Applicants will be prioritized for potential housing placement in their respective eligibility pools, prior to referral to the Housing Provider. Those with the longest history of homelessness and the most severe service needs are given first priority. This process was created to allow PSH to target individuals with the greatest barriers toward obtaining and maintaining housing on their own, and not on a first come, first serve basis. Individuals experiencing HUD Chronic Homelessness will have priority over Non-HUD Chronically Homeless Prospective Applicants. The purpose of a prioritized and scored pool is to ensure that:

- HUD Chronically Homeless Prospective Applicants are prioritized in the USHS process.
- The most vulnerable Prospective Applicants receive a higher score, ensuring that they are housed within their category in order of need.
- All Prospective Applicants receive an equal opportunity for housing consideration based on their service needs and eligibility.

### **Procedures:**

**1. Pools:** The USHS Program Manager will sort Prospective Applicants into pools.

- a. HUD Chronically Homeless single adults and couples. For couples, at least one individual must be identified as HUD Chronically Homeless.
- b. HUD Chronically Homeless families.
- c. Rebuilding Lives single adults and couples.
- d. Rebuilding Lives families.
- e. Non-Homeless single adults with a disability and couples and families where at least one individual has a disability.

## **2. USHS HUD Chronically Homeless Prioritization**

The USHS Program Manager will sort HUD Chronically Homeless Prospective Applicants into a separate pool, which will be prioritized in accordance with HUD regulations and recommendations. This pool will be prioritized once a month and is separated by household status (i.e., single, couple, and family).

### Priority Order

1. Applicants who are HUD Chronically Homeless with the longest history of homelessness, exceeding 365 days and the most severe service needs based on the Vulnerability Score.
2. Applicants who are HUD Chronically Homeless with the longest history of homelessness, exceeding 365 days.
3. Applicants who are HUD Chronically Homeless with the most severe service needs based on the Vulnerability Score.
4. All applicants who are HUD Chronically Homeless, but do not meet any of the aforementioned eligibility criteria.

If there are no HUD Chronically Homeless individuals, the USHS Rebuilding Lives and Homeless Prioritization procedure will be followed.

### **3. USHS Rebuilding Lives and Homeless Prioritization**

The USHS Program Manager will sort Rebuilding Lives Prospective Applicants into a separate pool, which will be prioritized in accordance with HUD regulations and recommendations. This pool will be prioritized once a month and is separated by household status (i.e., single, couple, and family).

### Priority Order

1. Rebuilding Lives Prospective Applicants who have the most severe service needs based on the Vulnerability Score. This includes persons exiting an institution where they have resided for less than 91 days but met this standard before entry.
2. Rebuilding Lives Prospective Applicants including persons exiting an institution where they have resided for less than 91 days and were homeless prior to entry.
3. Prospective Applicants coming from places not meant for human habitation, safe havens, or emergency shelters, including persons exiting an institution where they have resided for less than 91 days and were homeless prior to entry.
4. Prospective Applicants coming from transitional housing, where prior to residing there they lived on the streets or in emergency shelter.

#### **4. Non-Homeless Prospective Applicant Prioritization**

- a.** Non-Homeless Prospective Applicants with a disability will not be scored by the USHS Program Manager when the Housing Provider is exclusively filling vacancies designated for non-homeless, medical or ADAMH units.
- b.** Non-Homeless Prospective Applicants will be prioritized depending on Housing Provider. For those units, the Housing Provider will ensure that the USHS Program Manager has sufficient Prospective Applicants to fill available units.
- c.** ADAMH Prospective Applicants who are currently residing in residential ADAMH housing will be prioritized by residential length of stay and any other prioritization method that the sponsor for these units prefers to use.

#### **5. Vulnerability Scoring**

- a.** The USHS Program Manager will evaluate ADAMH service utilization and Applicants vulnerability when allotting each Prospective Applicant a vulnerability score based upon the Vulnerability Assessment. All files will be submitted to a standard evaluation system which is universal and scored based on severe service needs.
- b.** Service utilization will be provided through ADAMH data matching and will result in a score for each individual, ranging from zero (0) to six (6) dependent on the Prospective Applicant's use of ADAMH services.
- c.** Severity of service need is assessed through the Vulnerability Assessment. All homeless single adults are required to have, as part of the Prospective Applicant File, a Vulnerability Assessment completed within six (6) months from the date of receipt of completed file. The USHS Program Manager will score the Vulnerability Assessment and will assign a score ranging from zero (0) to thirty eight (38) for each Prospective Applicant.
- d.** Prospective Applicant needs to provide documentation of a medically confirmed pregnancy at the time of intake submission and at the time her application is identified by the USHS Program Manager.
- e.** Prospective Applicant's total scores will be a combination of both components (service utilization and severity of service need), with the highest possible score of thirty eight (38) and the lowest possible score of zero (0).
- f.** If there are several Prospective Applicants with the same score and they cannot be prioritized by the length of their homelessness, the priority file will be drawn by randomized pick to determine placement into the open unit. The assignment will be indicated on Prospective Applicant File.

## 6. Pool Maintenance

The prioritization process will be conducted monthly. During a project lease-up, the prioritization process will be conducted more often, as needed (if the eligible pools are exhausted). A rank list for each pool will be constructed monthly.

**Adopted:** July 2011

**Revised:** October 2014

## **Procedure Name: Refreshing the Eligible Pool**

### **Policy:**

Eligible pools will be refreshed monthly and more frequently if needed (if the eligible pools are exhausted) during a new project lease-up. All Prospective Applicant Files will be maintained by the USHS Program Manager after submission to USHS. Prospective Applicant information will be updated as necessary.

### **Procedures:**

The USHS Program Manager will refresh the eligible pool by:

1. Sorting Prospective Applicants into relevant eligible pools based on Prospective Applicant eligibility (monthly and if the pools are exhausted, then weekly).
2. Conducting a data match with ADAMH to determine service utilization (see the Determination of Prospective Applicant Eligibility procedure).
3. Running records checks through CMHA (see the Determination of Prospective Applicant Eligibility procedure).
4. Scoring Prospective Applicants and prioritizing them based on the Prospective Applicant Matching & System Prioritization procedure (monthly and, if the pools are exhausted, then as needed).
5. The pools will be established by the last business day of the month to be used to fill vacancies in the upcoming month. If the pools are exhausted, this process may occur as needed.

**Adopted:** March 2010

**Revised:** October 2014

## **Procedure Name: USHS Referral to Housing Provider**

### **Policy:**

The USHS Program Manager will send potentially eligible Prospective Applicants to the Housing Provider from the maintained eligibility pools. Additional requests for Prospective Applicant files will be sent to Provider Agencies, as necessary to prepare for lease up.

### **Procedures:**

1. For homeless units, the USHS Program Manager will first look up the Prospective Applicant's information in the Columbus ServicePoint (CSP) database. If Prospective Applicant meets the current homelessness requirements for the unit, the USHS Program Manager will contact the Prospective Applicant's Provider Agency to determine if the Prospective Applicant is still in need of housing and wishes to move to the open unit.
2. For non-homeless units, the USHS Program Manager will contact Prospective Applicant's Provider Agency to determine if the Prospective Applicant is still in need of housing and wishes to move to the open unit.
3. After establishing Prospective Applicant's interest, the USHS Program Manager will request updated documentation as necessary.

Please see **Section I: Provider Agency Expectations Table 1**, for guidance on validity of documentation.

4. The USHS Program Manager will run a credit check with FABCO.
5. The USHS Program Manager will verify that Prospective Applicant File contains a printout from ODJFS. This printout is used to verify or confirm household composition.
6. The USHS Program Manager will make a copy of the Prospective Applicant File and forward the original file to the Housing Provider.

**Adopted:** March 2010

**Revised:** October 2014

## **Procedure Name: Vacancy Management or Lease-Up**

### **Policy:**

The USHS Program Manager will send Prospective Applicants to the Housing Provider for identified vacancies.

### **Procedures:**

1. The USHS Program Manager will fill vacancies by utilizing the prioritized pool.
2. USHS Program Manager will identify the highest prioritized Prospective Applicant from the HUD Chronically Homeless eligibility pool and forward the file to the Housing Provider.
3. The USHS Program Manager will notify the Provider Agency informing it that its Prospective Applicant was forwarded to the Housing Provider.
4. After the file(s) are given to the Housing Provider to fill the vacancy, the Housing Provider will manage all contact with Prospective Applicant and Provider Agency.
5. The Housing Provider will contact each Prospective Applicant to coordinate placement at the housing project and schedule an interview with the Prospective Applicant.
6. The Housing Provider will interview Prospective Applicant referred from USHS and complete eligibility verification according to Housing Provider's Tenant Selection Plan.
7. Resolution of the Prospective Applicant's situation should occur no later than thirty (30) days from the date that the Prospective Applicant File was forwarded to the Housing Provider. If the Housing Provider does not resolve the situation within thirty (30) days, it will notify the USHS Program Manager and Provider Agency within two (2) days of missed move-in date.
8. The Housing Provider and Provider Agency will directly communicate with the Prospective Applicant in terms of his/her housing application status once the application has been moved forward by the USHS Program Manager.
9. The Housing Provider will notify the USHS Program Manager and the Provider Agency, via email, within two (2) days of Prospective Applicant's move into the open unit.

**Adopted:** March 2010

**Revised:** October 2014

## **Procedure Name: Housing Provider Rejection of Prospective Applicant**

### **Policy:**

Housing Providers may deny an eligible Prospective Applicant for any legally permissible reason as outlined in the Housing Provider's Tenant Selection Plan. Prospective Applicants have the right to appeal this denial to the Housing Provider. A Prospective Applicant's denial from placement at one housing site will not preclude the Prospective Applicant from receiving any other housing unit through USHS. Denial from housing will have no disparaging effect on the Prospective Applicant's ability to receive other housing.

Prospective Applicants are given two opportunities to reject a housing unit for any reason. Case workers will continue to seek appropriate housing for them.

### **Procedures:**

1. Housing Providers may deny an eligible Prospective Applicant for any legally permissible reason as outlined in the Housing Provider's Tenant Selection Plan. Housing Provider will return the Prospective Applicant File and a written explanation for this denial to the USHS Program Manager within two (2) days.
2. A Prospective Applicant's denial from placement at one housing site will not preclude the Prospective Applicant from receiving another housing unit through USHS. Denial from housing will have no disparaging effect on the Prospective Applicant's ability to receive other housing.
3. Prospective Applicants have a right to appeal Housing Provider denial by following the Housing Provider's guidelines for appeals.
4. The USHS Program Manager will submit the Housing Provider another eligible Prospective Applicant File to be considered for the vacant unit.

**Adopted:** June 2011

**Revised:** October 2014



## **Procedure Name: Prospective Applicant Rejection of Housing**

### **Policy:**

Prospective Applicants are given up to two (2) opportunities to accept a housing opportunity. The selection of a Prospective Applicant from the pool for referral is based on prioritization and eligibility for the available unit. This option will be a safe, decent and affordable housing opportunity with access to supportive services. Accommodations will be made only for reasons found in Section H(3):Housing Accommodations.

If a Prospective Applicant rejects two (2) housing opportunities, he or she will be ineligible for USHS housing for one (1) calendar year. At this time, his or her Provider Agency will continue to seek an appropriate non-USHS housing opportunity.

### **Procedures:**

1. If the Prospective Applicant rejects housing, the Housing Provider will return the Prospective Applicant File and a written explanation for this rejection to the USHS Program Manager within two (2) days of rejection.
2. After the Prospective Applicant has rejected a housing opportunity, his or her file will be returned to the USHS Program Manager for processing.
3. Prospective Applicants have a right to appeal exclusion from the USHS pool in accordance with Section P: Appeal for Re-entry into the USHS Pool following Prospective Applicant's Rejection of Housing Opportunity.

**Adopted:** June 2011

**Revised:** October 2014

## **Procedure Name: Documentation of Homelessness**

### **Policy:**

The Prospective Applicant must be homeless at time of application, if applying for homeless housing units. An individual or family is literally homeless if they live or reside in a place not meant for human habitation or an emergency shelter. If an individual is in an institutional situation, they must have met the definition of literal homeless immediately prior to entry and have resided in the institution less than 91 days.

### **Procedures:**

#### **1. Evidence of Homeless Status**

Evidence of an individual or head of household's current living situation may be documented by:

- a. Columbus ServicePoint data.
- b. A written monthly observation by an approved outreach worker on a Verification of Street Homelessness form.
- c. For individuals leaving an institutional care facility, the Provider Agency needs to provide exit paperwork from the institution clearly documenting entry, admission and exit/discharge dates.

Prospective Applicants must be literally homeless, and this status must be verified at the following points in the housing process through the USHS:

- At the time the Prospective Applicant File is submitted to the USHS.
- At the time of lease signing with the Housing Provider.

#### **2. Evidence of Homelessness Duration**

The duration of homelessness is necessary to determine if the Prospective Applicant is HUD Chronically Homeless or Non-HUD Chronically Homeless for the purposes of housing prioritization. There must be documentation to establish duration of homeless. Evidence of duration of homelessness can be documented in the following ways:

- a. Print out of Columbus ServicePoint data; and/or
- b. For Prospective Applicants' currently experiencing street homeless, a written observation by an approved outreach worker must be completed monthly. This observation may be documented on a Verification of Street Homelessness form. A single documented encounter with an outreach Provider Agency on a

single day within one month is sufficient to consider an individual or family as homeless for the entire month unless there is any evidence that the household has had a break in homeless status during that month (e.g., evidence in Columbus ServicePoint of a stay in transitional housing).

## **Definitions**

- a.** The duration of homelessness for a HUD Chronically Homeless individual is at least one calendar year without a break or at least four separate episodes in the last 3 years where the cumulative total length of the occasions equals at least 12 months.
- b.** The duration of homelessness for Non-HUD Chronically Homeless Rebuilding Lives individuals is at least 120 days or at least four episodes of homelessness over a lifetime.
- c.** A break in homelessness is considered at least seven (7) or more consecutive nights for which homelessness is not documented.

## **3. Length of Episodes**

To properly document the length of time homeless, it is important to document the start and end date of each occasion of homelessness. An episode must be at least seven (7) days in length and separated by at least thirty (30) days.

Approved outreach workers must acknowledge any known gaps in street homelessness including entry into shelter, transitional housing or housing. They should not utilize Verification of Street Homelessness form to cover occasions where the Prospective Applicant was not experiencing street homelessness.

**Adopted:** October 2014

## **Procedure Name: Determination of Severity of Service Needs or Vulnerability**

### **Policy:**

Prospective Applicant must demonstrate a severity of service needs. Severity of service needs, defined as a history of high utilization of crisis services, significant health challenges, behavioral health challenges or functional impairments. These needs require a significant level of support in order to maintain permanent housing. USHS utilizes the Vulnerability Assessment and service matches with the ADAMH to determine severity of service needs.

### **Procedures:**

1. Every single adult Prospective Applicant in USHS will complete a Vulnerability Assessment as a part of the Prospective Applicant File.
2. The USHS Program Manager will use the Vulnerability Assessment in conjunction with the ADAMH service match to score Prospective Applicant File for pool prioritization.

**Adopted:** October 2014

## **Procedure Name: Documentation of a Certified Disability**

### **Policy:**

For USHS purposes, documentation of a certified disability must be for one or more of the qualifying conditions listed here: substance use disorder, serious mental illness, developmental disability, post-traumatic stress disorder, cognitive impairments resulting from traumatic brain injury, chronic physical illness or physical disability.

### **Certification of Disability documentation must include one of the following:**

- a.** COD from a professional licensed by the state to diagnose and treat the condition;
- b.** Written verification of SSI or SSDI from the SSA; or
- c.** Copies of a disability check (e.g., SSDI check or Veterans Disability Compensation).

### **Procedures:**

- 1.** COD forms must be signed by an “Authorized Professional,” which is defined by HUD as a physician, advanced nurse practitioner (CNP or CNS), or a state licensed clinician. State licensed clinicians must be independently licensed by the Ohio Counselor, Social Worker and Marriage and Family Therapist Board and can include counselors and/or social workers (LPCC/PCC, LICDC, or LISW).
- 2.** For CMHA housing, disability based solely on any drug or alcohol dependence is not acceptable.

**Adopted:** March 2010

**Revised:** October 2014

## **DRAFT**

### **Procedure Name: Transfers between Programs**

#### **Policy:**

Current PSH tenants within units managed by USHS are able to transfer to other PSH units within USHS, only when a documented tenant need presents.

Moving a tenant from a more service-intense 24/7 program to a less structured or sober housing model is cost effective for the system. It allows for a more vulnerable individual to be placed in an intensive PSH unit while moving an individual in recovery to a less intensive or structured environment.

When a Provider Agency accepts a transfer from another PSH project, it must keep records on file demonstrating that the tenant:

1. Is transferring from another PSH project;
2. The reason for the transfer; and
3. Met the eligibility requirements for PSH prior to entering the original PSH project. The USHS Program Manager will decide on the tenant's eligibility for housing based on the available vacancies and tenant need.

#### **Procedures:**

1. Tenants wishing to transfer from one project to another have to meet the eligibility criteria for the specific program/unit. This eligibility will be checked by the USHS Program Manager. The USHS Program Manager will decide on the tenant's eligibility for housing based on the available vacancies and tenant need.
2. Tenants may be able to transfer from a homeless unit to a non-homeless unit or another homeless unit within USHS. PSH projects may serve individuals and families from other PSH projects who met the eligibility requirements for permanent housing if the program participants were eligible for the original PSH and this eligibility is documented.
3. Housing Provider must show that the proposed move is based on the emergent need of and for the benefit of the tenant and keeps in line with their Individual Housing Stabilization Plans and would allow the tenant to achieve more independence.
4. All requests for transfers must be submitted to USHS for eligibility checks and transfer prioritization. The submission will include, documentation needed to sustain eligibility, per the USHS procedure above.

5. In the case of the elimination of a housing project due to reallocation of funds or other reasons, the Housing Provider must work with tenants to identify alternate placements or work on housing stability and exit plans that will help tenants prepare to exit by the PSH project's closing.
6. If the PSH unit is no longer appropriate for the household size or household composition due to the birth of a child, permanent return of child to a parent or family reunification, the Housing Provider should consider transferring the tenant to another PSH unit within USHS that addresses the tenant's housing and service needs.

HUD doesn't consider two people in a one-bedroom unit to be "overcrowded." Therefore, if the tenant continues to meet all other eligibility criteria for residing in a one-bedroom unit and wishes to continue to reside there, then the tenant may continue to stay.

7. Housing Provider will follow lease terms for tenant deposit refund upon tenant transfer.
8. Tenant will receive deposit refund, in accordance with lease terms. Tenant is ultimately responsible for using deposit refund and/or personal funds to pay deposit to new Housing Provider and any move-related expenses. DCA funds cannot be utilized for this purpose.

**Adopted:** May 2011

**Revised:** May 2014

**HUD Guidance Received 2014**

**Agency:**

**Contract: \_\_\_\_-16-CSP**

### **CSP AGENCY AGREEMENT**

THIS CSP AGENCY AGREEMENT (this "Agreement") is made and entered into effective July 1, 2015 (the "Effective Date"), by and between Community Shelter Board, an Ohio non-profit corporation ("CSB") and \_\_\_\_\_ ("Agency") pursuant to the terms of a certain Master Provider Agreement between CSB and Agency (the "Master Provider Agreement"). Capitalized terms used but not defined herein shall have the meanings given to them in the Master Provider Agreement.

### **BACKGROUND INFORMATION**

A. CSB coordinates and funds programs providing homeless prevention and diversion, outreach, emergency shelter, housing and supportive services to persons who are homeless, formerly homeless, or in housing crises in the metropolitan Columbus, Ohio and Franklin County area ("Homeless Services"), and supports and improves the availability and provision of Homeless Services through the facilitation of quality review activities and allocation of available community resources based on data reported through the local homelessness management information system, Columbus ServicePoint ("CSP").

B. CSP includes software and database functions operated by CSB and used to collect and analyze information about clients utilizing Homeless Services in the metropolitan Columbus, Ohio and Franklin County area.

C. Agency is a provider of Homeless Services to clients in and around such geographic area, and Agency agrees to utilize the CSP and provide data and information to CSB to be included in the CSP database.

### **PROVISIONS**

NOW, THEREFORE, based upon the foregoing recitals and for and in consideration of the mutual promises and obligations stated below, CSB and Agency hereby agree as follows:

**1. Term of Agreement.** This Agreement shall be in force and effect for a period of fifteen (15) consecutive months, commencing on July 1, 2015 and ending September 30, 2016, unless sooner terminated as provided herein or in the Master Provider Agreement.

If the Agency breaches any term of this Agreement, CSB has the right to immediately terminate this Agreement upon providing written notice to Agency.

This Agreement may be terminated by either party without cause upon thirty (30) days prior written notice to the other party.

This Agreement shall automatically terminate upon the termination of the Master Provider Agreement.



Additional termination rights are set forth in the Master Provider Agreement and other provisions of this Agreement.

Upon termination of this Agreement, Agency shall have no right to access the CSP database. All CSP requirements regarding confidentiality and privacy of client information shall survive termination or expiration of this Agreement.

**2. Program Outcomes Plan.** Agency's Program Outcomes Plan is attached hereto as **Schedule 1** ("Program Outcomes Plan") and made a part hereof. Agency shall provide services in accordance with its Program Outcomes Plan. Agency's failure to meet any of the goals set forth in its Program Outcomes Plan may result in suspension or termination of this Agreement.

**FOR AGENCIES THAT RECEIVE CoC FUNDING ONLY (no CSB FUNDING) – ARCO, AM**  
**Program Outcomes Plan, Program Description Form and Budget.**

The Provider's Program Outcomes Plan(s) is attached as **Schedule 1** and the Program Description Form(s) is attached as **Schedule 2** ("Program Description Form"). Provider's Budget is attached hereto as **Schedule 3** (the "Budget") and made a part hereof. The Provider shall provide services in accordance with annual Program Performance Standards as approved by the Rebuilding Lives Funder Collaborative, as detailed in the Provider's Program Outcomes Plan and Program Description Form. The Provider's failure to meet any of the goals set forth in the Provider's Program Outcomes Plan may result in suspension or termination of this Agreement. The Provider shall immediately notify CSB in writing of any changes in the Budget by submitting revisions to the budget form to CSB no later than seven (7) days after the change occurs.

**3. CSP Participation.** CSB may schedule CSP staff training or other meetings or sessions from time to time and, upon notification of these meetings or sessions, Agency shall ensure the attendance of its appropriate personnel.

**4. Monitoring and Inspection by CSB.** In accordance with the Master Provider Agreement, CSB shall conduct an annual Program Review & Certification to ensure compliance with the applicable Partner Agency Standards found in the Guide to CSB. If CSB determines that Agency is non-compliant after completion of the Program Review & Certification, CSB may enter into conditional contracting with Agency in current and/or subsequent years.

In addition, at any time during normal business hours and as often as CSB may deem necessary, Agency shall make available to CSB or its representatives or designees access to Agency's records, Data, and any other data relating to matters covered by this Agreement or any agreement between CSB and Agency for examination and audit, and Agency shall photocopy, at Agency's expense, such documents as requested by CSB. The term "Data" is defined as detailed data regarding all clients served and Homeless Services provided by Agency.

**5. Amendments/Conforming Changes.** Agency shall enter into any amendment that CSB, in its sole and absolute discretion, deems necessary in order to conform this Agreement with any federal, state or local governmental laws, regulations, guidelines or policies; provided, however, that with respect to any proposed amendment pursuant to the foregoing that results in any change in Agency's obligations undertaken under this Agreement, Agency may elect in writing, within thirty (30) days of receipt of such proposed amendment, to not execute the amendment and to terminate this Agreement.

This Agreement may also be amended as provided in the Master Provider Agreement.

6. **CSP.** The parties hereby acknowledge and agree that additional provisions regarding the CSP are included in the Master Provider Agreement.

7. **Conflicting Terms.** The terms of this Agreement are intended to supplement the general terms of the Master Provider Agreement in force and effect from time to time. If, however, any terms of this Agreement conflict with the terms of the Master Provider Agreement, the terms of this Agreement shall control.

IN WITNESS WHEREOF, the parties have entered into this Agreement.

**[AGENCY]**

**COMMUNITY SHELTER BOARD**

By:\_\_\_\_\_

By:\_\_\_\_\_

Title:\_\_\_\_\_

Michelle Heritage  
Title: Executive Director

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

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

Schedule 1 – Program Outcomes Plan