Before Starting the CoC Application

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

The Collaborative Applicant is responsible for reviewing the following:

- 1. The FY 2019 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
- 2. The FY 2019 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
- 3. All information provided to ensure it is correct and current.
- 4. Responses provided by project applicants in their Project Applications.5. The application to ensure all documentation, including attachment are provided.
- 6. Questions marked with an asterisk (*), which are mandatory and require a response.

1A. Continuum of Care (CoC) Identification

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions. Please submit technical questions to the HUD Exchange Ask-A-Question at https://www.hudexchange.info/program-support/my-question/

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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:

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

1B-1. CoC Meeting Participants.

For the period of May 1, 2018 to April 30, 2019, applicants must indicate whether the Organization/Person listed:

- 1. participated in CoC meetings;
- 2. voted, including selecting CoC Board members; and
- 3. participated in the CoC's coordinated entry system.

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

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

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

Applicants must describe how the CoC:

- 1. solicits and considers opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
- 2. communicates information during public meetings or other forums the CoC uses to solicit public information;
- 3. takes into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness; and
- 4. ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats, e.g., PDF. (limit 2,000 characters)
- 1) The CoC governing body includes a broad array of stakeholders with knowledge of and interest in preventing and ending homelessness. Meetings are open to the public. Workgroups on Veteran, family, single adult, and youth homelessness meet regularly to monitor progress and implement improvements. Our CoC's strategic plan and youth plan were developed via multiple public convenings and focused workgroups that incorporated opinions and ideas of many partners involved in preventing and ending homelessness. 2) The CoC holds 3-4 meetings per year and details are posted on the CoC website. During meetings, staff communicates information needed to make decisions, including outcomes, system gaps, funding, and impact of the population growth. The CoC participates in the Prevent Family Homelessness Collaborative, Affordable Housing Alliance, and Regional Housing Strategy Advisory Board. Our strategic plan and youth plan are updated via regular convenings that include all stakeholders. 3) A Citizens Advisory Council (CAC)

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comprised of homeless/formerly homeless individuals meets monthly and has 2 representatives on the CoC governing body. The CoC considers input from the CAC before approving new initiatives. The Youth Action Board (YAB) comprised of homeless/formerly homeless youth guides youth system development and has a representative on the CoC governing body. The CAC, YAB, and other CoC workgroups continuously gather input from partners to inform ongoing strategies. Public forums and meetings are integral to developing and maintaining our strategic plan and youth plan. The CoC collaborates with landlords, health systems, and law enforcement. 4) The CoC accommodates the needs of individuals with disabilities. Materials are published on the CoC website prior to meetings and distributed to members in PDF format via email and/or mailed as hard copies, depending on individual preference. Materials are projected on large screens and explained verbally during meetings.

1B-2. Open Invitation for New Members.

Applicants must describe:

- 1. the invitation process;
- 2. how the CoC communicates the invitation process to solicit new members;
- 3. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats;
- 4. how often the CoC solicits new members; and
- 5. any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC. (limit 2,000 characters)
- Annually, the CoC Board reviews nominations for the CoC at their April or May meeting and considers whether additional individuals or organizations would improve the CoC's community perspective and expertise. The CoC Board makes membership recommendations to the full CoC. The CoC considers the CoC Board recommendations during their May meeting, discusses any additional suggestions, and votes to determine which individuals or organizations will be invited to join the CoC with a July 1 effective date. The CoC Chair makes the official invitation to the selected entity. Each new member attends an orientation session to familiarize them with the functions and responsibilities of the CoC. 2) The CoC governing body issues in March of each year a call for nominations – both for individuals and organizations – via a website post and email to a broad array of stakeholders and community partners. When there is an unexpected vacancy on the CoC or CoC Board, the CoC Chair requests nominations from CoC members for the vacancy. The CoC governing body accepts nominations from any source, including selfnominations. 3) The CoC is committed to accommodating the communication needs of individuals with disabilities. Calls for nominations and other announcements are emailed and published on the CoC's website. Meeting materials are distributed to members in PDF format via email and/or mailed as hard copies, depending on individual preference. Materials are both projected on large screens and explained verbally during meetings. 4) The CoC solicits new members annually. 5) The CoC governing body works closely with the Citizens Advisory Council (CAC), which consists of homeless and formerly homeless individuals, to designate two representatives to serve on the CoC governing body. One of the CAC representatives also serves on the CoC

Board. The Youth Action Board – which includes homeless or formerly homeless youth – also designates a representative to serve on the CoC governing body.

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

Applicants must describe:

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

(limit 2,000 characters)

1) Community Shelter Board (CSB) solicits proposals for new Permanent Housing (PH) projects for consideration by the CoC for each competition. CSB sends the opportunity via email to a wide array of organizations, including organizations that have not previously received CoC funding. CSB also posts the call for proposals on its website. The notification includes instructions for the applications to be submitted and a deadline. The CoC advertises Notices of Funding Availability on the CoC website. Application schedules and instructions are also posted on the website. 2) The CoC determines which new projects to include in the application based on the CoC review process. All new projects are required to submit Concept Papers that detail the type of project, target population, expected funding sources, and projected results. The CoC Board and CoC review the Concept Papers. The CoC evaluates the Concept Papers based on community need using the system gaps analysis and applicants' capacity to successfully operate the project, meet compliance standards, and administer federal funds. The CoC prioritizes Concept Papers prior to the NOFA's release. The final determination regarding the projects to be included in the competition occurs during the application process, based on available funding. The CoC welcomes participation from entities that have not previously received CoC funds and proactively seeks opportunities to involve additional partners. For example, this year's application includes proposals from an entity new to our CoC. 3) The CoC solicited proposals for new PH projects on February 8, 2019, and announced the opening of the application process for the FY19 Competition for the prioritized projects on July 9, 2019. 4) The CoC is committed to accommodating the communication needs of individuals with disabilities. Public notices are posted in PDF format on CSB's and the CoC's website. Reasonable accommodations to the application process are made as needed. 5) N/A.

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1C. Continuum of Care (CoC) Coordination

Instructions:

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

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

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

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1C-2. CoC Consultation with ESG Program Recipients.

Applicants must describe how the CoC:

- 1. consulted with ESG Program recipients in planning and allocating ESG funds:
- 2. participated in the evaluating and reporting performance of ESG Program recipients and subrecipients; and
- 3. ensured local homelessness information is communicated and addressed in the Consolidated Plan updates. (limit 2,000 characters)
- 1) City of Columbus and Franklin County (ESG recipients) representatives are members of both the CoC Board and the CoC. The City and County are active participants in the CoC governance and funding allocation conversations that are part of the CoC meetings. The current CoC Chair is the City representative. The City and County grant all ESG allocations to Community Shelter Board (CSB) as the CoC UFA. The City, County, and CSB propose ESG allocations to the CoC in accordance with the Consolidated Plan. The CoC also serves on the State Advisory Board on homelessness and provides input on state objectives and proposed ESG funding allocations. CSB is the collaborative applicant and sub-recipient of all State ESG RRH funding in the county, which is also allocated in accordance with the State Consolidated Plan. The CoC governing body approves annually all funding allocations. 2) CSB develops annual ESG performance standards for CoC approval. The CoC, City, and County receive quarterly performance evaluations that are based on these standards and use HMIS data. These evaluations include program-level reporting of all ESG funded projects. The CoC also reviews HIC and PIT data including system capacity by program type, a system gap analysis, and the System Performance Measures. Funding allocations and performance outcomes determined through collaboration between ESG recipients and the CoC are codified in formal contracts between the City, County, and State as the ESG recipients and CSB as the ESG sub-recipient. 3) On behalf of the CoC, CSB regularly shares system updates and reports with the City, County, and State through email distribution lists, regular meetings, and various workgroups. CSB works with the City, County, and State to update the Consolidated Plan and ensure local homelessness information is accurately incorporated into the Plan's strategies. The most recent information provided for the Consolidated Plan update was in July 2019.

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

Applicants must indicate whether the CoC provided Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area.

1C-2b. Providing Other Data to Consolidated Yes

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Plan Jurisdictions.

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

1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.

Applicants must describe:

- 1. the CoC's protocols, including protocols for coordinated entry and the CoC's emergency transfer plan, that prioritize safety and incorporate trauma-informed, victim-centered services; and
- 2. how the CoC, through its coordinated entry, maximizes client choice for housing and services while ensuring safety and confidentiality. (limit 2,000 characters)
- 1) Individuals are screened for experiences of domestic violence (DV), dating violence, sexual assault, and stalking when they access the CPOA and/or engage with outreach specialists. Households fleeing DV situations are referred to the local DV shelter, CHOICES, funded by HHS. CHOICES doubled its capacity in 2019 and all households imminently at-risk of harm and needing safe accommodation are sheltered. CHOICES does not participate in the local HMIS and the shelter location is not publicly disclosed. People who have experienced DV are prioritized for specialized trauma-informed, victim-centered CoC-funded DV RRH services. The program uses an HMIS-comparable database to track program participants' information. The Unified Supportive Housing System (USHS) – which manages PSH units in our CoC – works with PSH providers to quickly and safely implement standardized protocols when participants need to transfer to a different location because of DV. Programs notify USHS when a priority transfer is required because of violence or the threat of violence and USHS quickly identifies alternative, safe housing. Each program is required to have an emergency transfer plan and the CoC monitors all programs annually to ensure that this plan is implemented consistently. 2) DV, dating violence, sexual assault, and stalking survivors have access to the CoC's entire portfolio of homelessness prevention, emergency shelter, RRH, TH, and PSH programs, including CoC, ESG, DOJ, and HHS-funded programs. The wide array of resources ensures that the system maximizes client choice and tailors assistance to best meet the needs of each program participant in a safe and secure way. For example, survivors have options for either single site PSH with 24/7 front desk and security or scattered site housing in the community, based on need. The CoC works with CHOICES and other systems of care to further integrate DV services, shelter, and housing options into the homeless system and train system staff.

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

Applicants must describe how the CoC coordinates with victim services providers to provide training, at least on an annual basis, for:

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1. CoC area project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence; and

2. Coordinated Entry staff that addresses safety and best practices (e.g., Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence. (limit 2,000 characters)

1) In collaboration with CHOICES shelter for victims of domestic violence (DV), Community Shelter Board (CSB) developed and routinely promotes an introductory webinar training on DV available to all CoC project staff via CSB's website. All CoC project staff are required to receive training upon hire and annually thereafter on best practices in serving survivors of DV, dating violence, sexual assault, and stalking. This training includes participant choice, safety planning, confidentiality, and how to refer and transport survivors to CHOICES shelter safely without jeopardizing their security. Project staff receives training at least annually on Trauma-Informed and Victim-Centered Care and how to collect and share survivors' information without inputting personal identifying data in HMIS. If survivors enter a non-DV homeless assistance program, staff enters the information into HMIS anonymously to protect privacy and prevent inadvertent disclosure of identities and locations. This year three CSB staff and fifteen system staff (including Coordinated Entry staff) participated in a train-thetrainer workshop taught by Cleveland Mediation Center on effective diversion practices, including training on trauma-informed, victim-centered services. CSB monitors projects annually to ensure training plans are up-to-date. 2) Coordinated Entry staff receive training upon hire and annually thereafter on best practices in serving survivors of DV, dating violence, sexual assault, and stalking. This training includes participant choice, safety planning, confidentiality, and how to refer and transport survivors to CHOICES safely without jeopardizing their security. Coordinated Entry staff receives training at least annually on Trauma-Informed and Victim-Centered Care and how to collect and share survivors' information without inputting personal identifying data in HMIS. Coordinated Entry staff also have access to CSB's recorded webinar training on DV and are monitored by CSB annually.

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

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

CHOICES shelter for victims of domestic violence collects data outside HMIS to preserve survivors' security and safety. CHOICES provides aggregate anonymous data to the CoC to include in the annual PIT and HIC reports and annual numbers served data, as needed by the CoC. The CoC's specialized domestic violence rapid re-housing program also collects data outside HMIS in a comparable stand-alone database called Empower DB. Community Shelter Board (CSB) has access to Empower DB de-identified aggregate data on households that have experienced DV and receive RRH services. CSB reports outcomes based on this data to the CoC and HUD. The CoC also collects via HMIS data on persons experiencing homelessness who report having experienced domestic violence, dating violence, sexual assault, and stalking. The CoC conducted a youth needs assessment that included information on

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domestic violence, dating violence, sexual assault, and stalking among youth experiencing homelessness. The CoC uses the data from CHOICES, Empower DB, HMIS, and the youth needs assessment to assess the community needs related to domestic violence, dating violence, sexual assault, and stalking and continuously improve programs serving this population.

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

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On
Columbus Metropolitan Housing Authority	10.00%	Yes-HCV	No

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

Applicants must:

- 1. provide the steps the CoC has taken, with the two largest PHAs within the CoC's geographic area or the two PHAs the CoC has working relationships with, to adopt a homeless admission preference—if the CoC only has one PHA within its geographic area, applicants may respond for one; or
- 2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)
- 1) Columbus Metropolitan Housing Authority (CMHA), the CoC's PHA, is a member of the CoC governing body and is a committed partner in our community's work to prevent and end homelessness. CMHA prioritizes individuals and families experiencing homelessness for housing in the Housing Choice Voucher (HCV) program. The admission preference for the homeless population is included in CMHA's Housing Choice Voucher Administrative Plan. CMHA has 808 project-based vouchers allocated to PSH projects across the CoC. CMHA closely collaborates with PSH projects to administer units in accordance with CoC and local standards and to develop new PSH projects. CMHA is a committed partner, ensuring that new site-based PSH projects have access to HCV subsidies to successfully operate, absent other funding sources. 2) Not applicable.

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

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

Yes

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

The CoC and the local PHA, Columbus Metropolitan Housing Authority (CMHA), have a limited Moving On Strategy. When clients are ready to move up to independent housing, CMHA issues a free-standing voucher to the clients who live in units that have an HCV subsidy, so they can find a new affordable housing solution. The PSH project is then able to provide stable housing and services for another disabled household experiencing homelessness, prioritizing those with the longest time homeless and the highest service needs.

1C-5. Protecting Against Discrimination.

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

In observance of 24 CFR 5.105(a)(2), CoC policies ensure that shelter and housing assistance are available to any individual or group presenting for assistance together with or without children, regardless of marital status or relationship, actual or perceived sexual orientation, or gender identity, and irrespective of age, relationship, or whether a member of the household has a disability. Community Shelter Board (CSB), the UFA, monitors all programs annually for adherence to this policy and the Fair Housing Act. Programs are required to have written, up-to-date policies and procedures that comprehensively address non-discrimination, equal opportunity, cultural competency, clients' rights, and disability-related supportive services. Programs affirmatively further fair housing through written marketing strategies that target those least likely to apply without regard to race, color, national origin, sex gender identity, sexual orientation, religion, age, familial status, or disability. The CoC in 2019 worked with all PSH programs to update tenant selection plans to further reduce housing entry barriers and prevent discrimination. Emergency shelters make every effort to accommodate program participants' gender preferences and ensure they feel safe and welcomed throughout their shelter stay, starting with an inclusive screening process to assess what housing and service options households need and prefer. Shelters work with local equity programs to develop more robust training on equal access practices. All programs have a formal grievance process. CSB is the ombudsman for the system and acts promptly on any concerns, including allegations of discrimination. The CoC's strategic plan includes a goal to further promote equity. We are reviewing and adjusting policies and developing training resources. CoC and system-wide program staff participated in training on racial discrimination in housing and homelessness to improve awareness, cultural competency, and services.

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

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Applicant: Columbus/Franklin County Continuum of Care

Project: OH-503 CoC Registration FY2019

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Applicants must indicate whether the CoC implemented an antidiscrimination policy and conduct training:

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the CoC conduct annual CoC-wide training with providers on how to effectively address discrimination based on any protected class under the Fair Housing Act?	Yes
3. Did the CoC conduct annual training on how to effectively address discrimination based on any protected class under 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing?	Yes

*1C-6. Criminalization of Homelessness.

Applicants must select all that apply that describe the strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area.

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

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

Applicants must:

1. demonstrate the coordinated entry system covers the entire CoC geographic area;

- 2. demonstrate the coordinated entry system reaches people who are least likely to apply for homelessness assistance in the absence of special outreach; and
- 3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner. (limit 2,000 characters)
- 1) The coordinated entry system covers the entire CoC geographic area using a widely-advertised local CPoA phone number with access to a live person

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24/7/365. The outreach team engages people at known camp locations and seeks out new locations where people experiencing homelessness congregate. We are establishing additional population-specific (e.g., youth) access points. 2) Outreach collaborates with the City, County, and businesses to engage people. Collaboration with other systems of care (health care, faith-based, social service, community programs, law enforcement) identifies people who need support but are unlikely to seek assistance. Programs are affirmatively marketed to eliqible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability who are unlikely to engage without special outreach. We work with the children's hospital, pregnant women programs, and veteran's programs on screening, referral tools, and training to reach people who may not call CPoA. 3) We use standardized screening tools iteratively to identify, assess, prioritize, and determine eligibility for people in a housing crisis. CPoA and outreach screen and assist people and prioritize for shelter only those with no safe alternative housing. Shelters and RRH programs adhere to HUD CPD-17-01 by using a standardized screening tool and process, including data already collected in HMIS, to identify the highest priority households for targeted family, youth, and single adult RRH. RRH is prioritized for families with children, pregnant women, Veterans, youth, people with disabilities and DV, and people with severe service needs. The Unified Supportive Housing System (USHS) continuously screens active system clients for PSH using HMIS data and case conferencing. USHS adheres to HUD CPD-16-11, prioritizing chronically homeless households first, then long-term homeless households with severe service needs using a standardized service needs assessment tool.

Applicant: Columbus/Franklin County Continuum of Care

Project: OH-503 CoC Registration FY2019

1D. Continuum of Care (CoC) Discharge Planning

OH-503

COC_REG_2019_170538

Instructions:

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

1D-1. Discharge Planning Coordination.

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

Foster Care:	Х
Health Care:	Х
Mental Health Care:	Х
Correctional Facilities:	Х
None:	

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Applicant: Columbus/Franklin County Continuum of Care

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1E. Local CoC Competition

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions. Please submit technical questions to the HUD Exchange Ask-A-Question at https://www.hudexchange.info/program-support/my-question/

Resources:

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

*1E-1. Local CoC Competition–Announcement, Established Deadline, Applicant Notifications. Attachments Required.

Applicants must indicate whether the CoC:

1. informed project applicants in its local competition announcement about point values or other ranking criteria the CoC would use to rank projects on the CoC Project Listings for submission to HUD for the FY 2019 CoC Program Competition;	Yes
2. established a local competition deadline, and posted publicly, for project applications that was no later than 30 days before the FY 2019 CoC Program Competition Application submission deadline;	Yes
3. notified applicants that their project application(s) were being rejected or reduced, in writing along with the reason for the decision, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline; and	Did not reject or reduce any project
4. notified applicants that their project applications were accepted and ranked on the CoC Priority Listing in writing, outside of esnaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline.	Yes

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

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

1. Used objective criteria to review and rank projects for funding (e.g., cost effectiveness of the project, performance data, type of population served);	Yes
2. Included one factor related to improving system performance (e.g., exits to permanent housing (PH) destinations, retention of PH, length of time homeless, returns to homelessness, job/income growth, etc.); and	Yes
3. Included a specific method for evaluating projects submitted by victim services providers that utilized data generated from a comparable database and evaluated these projects on the degree they improve safety for the population served.	Yes

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

Applicants must describe:

1. the specific severity of needs and vulnerabilities the CoC considered when reviewing and ranking projects; and

2. how the CoC takes severity of needs and vulnerabilities into account when reviewing and ranking projects. (limit 2,000 characters)

1) All CoC programs prioritize families with children, pregnant women, Veterans, youth, people with severe service needs, and people with disabilities as identified by HMIS data, case conferencing, by-name active lists, and standardized system-wide tools that screen people for chronic homelessness, homeless time, criminal history, prior evictions, disabling conditions, current and past substance abuse, low or no income, and domestic violence and victimization. Standardized CPoA processes ensure that shelter and TH are prioritized for those with no other safe appropriate housing. The Unified Supportive Housing System uses a standardized severe service needs assessment that takes into account the above barriers to fill new and vacated PSH units according to HUD CPD-16-11. RRH programs use progressive engagement to address service needs and provide aftercare once people are housed to promote stability. Community Shelter Board (UFA) monitors programs annually to ensure compliance with prioritization policies and practices. Since all programs in the system adhere to these prioritization and assessment guidelines, all programs provide housing and services to the hardest to serve populations and can be evaluated, compared, and ranked evenly. 2) The CoC takes into account during the review, ranking, and rating process that our community's single CoC-funded TH project serves a priority population (youth) and that our community's two CoC-funded RRH projects serve priority populations (families and survivors of domestic violence). The CoC prioritizes projects based on performance because all projects provide housing and services to the hardest to serve populations and priority populations. Projects that most effectively serve vulnerable and severe service need populations receive higher performance ratings, which improves the programs ranking. All projects in the CoC application adhere to system-wide standardized RRH, PSH, and TH prioritization and assessment requirements.

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

Applicants must:

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

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Application.

Public Posting of Objective Review and Ranking Process		Public Posting of CoC Consolidated Application including: CoC Application, CoC Priority Listing, Project Listings	
1. Email	x	1. Email	X
2. Mail		2. Mail	
3. Advertising in Local Newspaper(s)		3. Advertising in Local Newspaper(s)	
4. Advertising on Radio or Television		4. Advertising on Radio or Television	
5. Social Media (Twitter, Facebook, etc.)		5. Social Media (Twitter, Facebook, etc.)	
6. Did Not Publicly Post Review and Ranking Process		6. Did Not Publicly Post CoC Consolidated Application	

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

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

Reallocation: 1%

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

Applicants must:

- 1. describe the CoC written process for reallocation;
- 2. indicate whether the CoC approved the reallocation process;
- 3. describe how the CoC communicated to all applicants the reallocation process;
- 4. describe how the CoC identified projects that were low performing or for which there is less need; and
- 5. describe how the CoC determined whether projects that were deemed low performing would be reallocated. (limit 2,000 characters)
- 1) Per the CoC's written process, reallocation can occur when a sub-recipient is no longer interested in continuing a project, no longer needs CoC funding for a project, or underperforms on performance outcomes, project capacity, drawdowns, and/or compliance. 2) The CoC approves the reallocation process annually. 3) The CoC communicated the reallocation process to applicants by posting it on the CoC website July 9, 2019. 4) The CoC identifies low performing projects through careful review of quarterly performance and monthly occupancy reports produced by Community Shelter Board (CSB), the UFA. Annual performance evaluations produced by CSB compare program

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outcome goals with actual performance to determine consistency with CoC and HUD standards. Each project is assigned a performance rating of High, Medium, or Low: High achieve at least 75% of measured outcomes and at least one successful housing outcome: Medium achieve at least 50% but less than 75% of measured outcomes; Low achieve less than 50% of measured outcomes. Projects rated as Low or experiencing long-standing and/or serious program issues and/or systemic concerns undergo a Quality Improvement Intervention process that includes enhanced oversight and technical assistance. The CoC identifies projects for which there is less need through an annual needs assessment, ongoing coordination with system and community partners, and monthly spend-down monitoring. 5) For low performing projects, enhanced oversight and technical assistance are often successful in correcting performance and compliance issues. The CoC has the capacity to reallocate, but prefers to help partners improve capacity and correct deficiencies before reallocating funds. We also change sub-recipients as an alternative to reallocation. The CoC reallocates only when these efforts are unsuccessful. The CoC's robust, comprehensive performance evaluation system has not detected a high and persistent level of underperformance among CoC projects.

Applicant: Columbus/Franklin County Continuum of Care

Project: OH-503 CoC Registration FY2019

OH-503 COC_REG_2019_170538

DV Bonus

Instructions

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1F-1 DV Bonus Projects.

Applicants must indicate whether the CoC is Yes requesting DV Bonus projects which are included on the CoC Priority Listing:

1F-1a. Applicants must indicate the type(s) of project(s) included in the CoC Priority Listing.

1. PH-RRH	X
2. Joint TH/RRH	
3. SSO Coordinated Entry	

Applicants must click "Save" after checking SSO Coordinated Entry to view questions 1F-3 and 1F-3a.

*1F-2. Number of Domestic Violence Survivors in CoC's Geographic Area.

Applicants must report the number of DV survivors in the CoC's geographic area that:

Need Housing or Services	1,578.00	
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the CoC is Currently Serving	869.00
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1F-2a. Local Need for DV Projects.

Applicants must describe:

- 1. how the CoC calculated the number of DV survivors needing housing or service in question 1F-2; and
- 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source). (limit 500 characters)
- 1) The CoC serves an estimated 1,989 homeless domestic violence (DV) survivor households annually. 10% of families and 20% of single adults need PSH (368) and 75% of the remaining households need RRH (1,210). 2) The data source is HMIS and anonymized data from CHOICES DV shelter from a comparable system. The CHOICES data was aggregated. Some CHOICES participants are also served in the non-DV shelters and we applied a 30% duplication rate to the data to estimate the total households served.

1F-4. PH-RRH and Joint TH and PH-RRH Project Applicant Capacity.

Applicants must provide information for each unique project applicant applying for PH-RRH and Joint TH and PH-RRH DV Bonus projects which the CoC is including in its CoC Priority Listing—using the list feature below.

Applicant Name	DUNS Number
YMCA of Central Ohio	075036962

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1F-4. PH-RRH and Joint TH and PH-RRH Project

Applicant Capacity

DUNS Number:	075036962
Applicant Name:	YMCA of Central Ohio
Rate of Housing Placement of DV Survivors-Percentage:	56.00%
Rate of Housing Retention of DV Survivors-Percentage:	75.00%

1F-4a. Rate of Housing Placement and Housing Retention.

Applicants must describe:

- 1. how the project applicant calculated the rate of housing placement and rate of housing retention reported in the chart above; and
- 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source). (limit 500 characters)
- 1) Our DV RRH project started 7/1/19, so we don't have current housing and retention rates for survivors. The housing placement rate in 1F-4 is for our current single adult RRH program operated by YMCA, the best available proxy for the DV RRH program. 2) HMIS was used as the data source. In our community, returns to homelessness for those who exit to permanent housing are around 25% at 24 months. We expect similar rates for DV RRH.

1F-4b. DV Survivor Housing.

Applicants must describe how project applicant ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing. (limit 2,000 characters)

When a client enters the RRH program for survivors of domestic violence, the case manager begins to discuss housing options with the client from the first interaction. The program participant and case manager create an Individualized Service Plan at intake, with housing as the top priority. Case managers help participants focus on resolving their housing crisis quickly, prioritizing participant preference on type and location of housing, safety, and affordability. Case managers help participants address issues that contributed to or may extend the housing crisis, including obtaining or replacing documents that may have been lost or destroyed, addressing credit issues, and assisting with legal issues. Case managers work with Franklin County Children Services as needed on child reunification and take into account how such issues influence appropriate housing identification. Participants drive their own search according to their own preferences, and case managers use a progressive engagement approach to provide the appropriate level of support and help participants find housing. Services are more intensive during the housing search phase, to minimize the time households spend in shelter and identify housing as quickly as possible. Case managers actively seek new rental listings and develop and maintain good relationships with area landlords to facilitate access for households with barriers to obtaining housing. Case managers work with the CoC's Community

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Housing Manager, who recruits and develops relationships with landlords, to identify housing options. Case managers prioritize for resolution barriers that directly impede quick re-housing, reserving support on other issues for the aftercare service period once permanent housing is secured. Aftercare services include linkage to employment, benefits, physical and mental health, and other community resources. Aftercare services are designed to ensure that households regain stability and do not return to homelessness.

1F-4c. DV Survivor Safety.

Applicants must describe how project applicant:

- 1. ensured the safety of DV survivors experiencing homelessness by:
- (a) training staff on safety planning;
- (b) adjusting intake space to better ensure a private conversation;
- (c) conducting separate interviews/intake with each member of a couple;
- (d) working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;
- (e) maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant;
- (f) keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors; and
- 2. measured its ability to ensure the safety of DV survivors the project served.

(limit 2,000 characters)

1a) CHOICES shelter for domestic violence (DV), our community's DV expert, provides annual training for all system (including RRH) staff on safety planning and trauma-informed and victim-centered approaches to assess safety needs. Netcare Access, the mental health system front door, trains CPoA staff on serving survivors. 1b) Intake occurs in private offices behind closed doors. Staff protect confidentiality and ensure comfort and safety. 1c) Intakes are conducted separately with each member of a couple. 1d) Case managers use traumainformed and victim-centered approaches to help survivors consider safety needs. They discuss appropriate housing solutions and the benefits and drawbacks of housing options, such as security features, access control, proximity to abusers and assistance, and transportation. Post-housing aftercare services allow staff to help participants adjust safety plans as needed. Participants can reach out for help after services end. All programs have emergency transfer plans that are immediately activated if there is any indication that a participant may be subject to violence or the threat of violence. 1e) All congregate living spaces meet safety and security standards, including shelters where survivors stay during the housing search. Shelters have 24/7 security, alarms, cameras, good lighting, and door and window locks. 1f) The location of CHOICES shelter for DV is confidential. There are no other dedicated spaces set aside for survivors. Once housed, participants' location and other personal information remains confidential. 2) Participants work with case managers on safety plans. Plans are tailored for mental and emotional health, employment, public safety, protection orders, family members, finances, and technology. The program measures its ability to ensure safety via management oversight and participant feedback. A robust Quality Assurance process ensures that each participant's safety plan evolves as they move from shelter to housing.

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1F-4d. Trauma-Informed, Victim-Centered Approaches.

Applicants must describe:

1. project applicant's experience in utilizing trauma-informed, victimcentered approaches to meet needs of DV survivors; and

2. how, if funded, the project will utilize trauma-informed, victim-centered approaches to meet needs of DV survivors by:

(a) prioritizing participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;

- (b) establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
- (c) providing program participants access to information on trauma, e.g., training staff on providing program participant with information on trauma;
- (d) placing emphasis on the participant's strengths, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
- (e) centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
- (f) delivering opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and

(g) offering support for parenting, e.g., parenting classes, childcare.(limit 4,000 characters)

- 1) The applicant currently operates emergency shelters and RRH programs (including a RRH program that serves survivors) and consistently uses trauma-informed, victim-centered approaches. Staff are experienced in understanding, recognizing, and responding to the effects of trauma and emphasize physical, psychological, and emotional safety to help survivors rebuild a sense of control and empowerment. Participants drive their housing search with the support of case managers who use progressive engagement to tailor assistance to each household's situation. CHOICES shelter for domestic violence (DV), our community's expert on serving survivors, trains staff on trauma-informed and victim-centered approaches upon hire and at least annually.
- 2a) All interactions between survivors and case managers are trauma-informed and victim-centered to ensure that program participants feel safe and supported so they can communicate their housing and service needs and actively participate in re-housing and safety planning efforts. Case managers prioritize participant choice and use motivational interviewing to help participants assess and pursue goals.
- 2b) The program does not use punitive interventions and maintains a positive and supportive environment at all times. Staff is mindful to not re-traumatize participants and management consistently reinforces training in traumainformed care, victim-centered services, and cultural humility. Staff respects participants' preferences for housing and services.
- 2c) The program maintains partnerships with mental, emotional, and physical health care providers and refer program participants to these resources as needed, according to participant choice. Netcare Access, our community's CPoA and mental health system front door, can refer people to treatment, groups, and programs that specialize in trauma-informed care. CHOICES can provide access to resources and programs for staff and participants that support

survivors.

2d) Case managers use motivational interviewing and strengths-based approaches in all interactions with program participants. Case managers encourage participants to set and work toward housing and non-housing goals and provide linkages to community resources. Staff and participants collaborate on housing stabilization plans that prioritize housing, and include goals related to employment, health care, and safety. All plans start with an assessment of participants' strengths and emphasize the positive steps that each participant can take to gain stability.

2e) All staff receive training on nondiscrimination and cultural responsiveness, inclusivity, and humility upon hire and at least annually. Services are available to any individual or group presenting for assistance together with or without children, regardless of marital status or relationship, actual or perceived sexual orientation, or gender identity, and irrespective of age, relationship, or whether a member of the household has a disability. RRH staff received training on racial discrimination in housing and homelessness to improve awareness, cultural competency, and services.

2f) The program works with a wide array of community partners and routinely links participants to services such as food pantries, employment support, education opportunities, benefits, group therapy, and health care, as needed and according to participants' preferences. Netcare Access can refer people to treatment, groups, and programs that specialize in trauma-informed care. CHOICES can provide access to resources and programs to support survivors. 2g) The program works with community partners and links participants to child care services and parenting classes and resources, as needed and according to participant preference. Staff coordinate with community programs that serve pregnant women and provide health services, resources, and parenting classes before and after birth.

1F-4e. Meeting Service Needs of DV Survivors.

Applicants must describe how the project applicant met services needs and ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing while addressing their safety needs, including:

- Child Custody
- Legal Services
- Criminal History
- Bad Credit History
- Education
- Job Training
- Employment
- Physical/Mental Healthcare
- Drug and Alcohol Treatment
- Childcare

(limit 2,000 characters)

Quick re-housing is the highest priority, and case managers work with participants using trauma-informed and victim-centered approaches to identify safe housing options that meet their needs and preferences. Safety planning is also prioritized and safety plans evolve as participants work toward stability.

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Staff cultivate relationships with landlords who will give program participants a chance, even if they have criminal history, bad credit, low income, or health challenges. The program works with community partners to address any other participant needs. Staff is trained on what resources and programs are available, how to help participants identify the services they need and want, and how to refer participants to those resources. Staff work closely with CHOICES, our community's domestic violence shelter, for training and access to resources specifically designed for survivors. Staff refer people to Columbus Legal Aid for child custody and eviction issues and other legal services. Case managers work with Franklin County Children Services on family reunification efforts. The CoC and RRH programs collaborate with the Workforce Development Board and Goodwill to make employment resources and opportunities – including job training, resume/interview assistance, and job fairs – available to participants. Staff link participants to GED programs and other education opportunities. The program maintains partnerships with health care partners for participants' physical, emotional, and mental health needs and for drug and alcohol treatment, based on participant choice. Case managers help with applications for Medicaid and other benefits. Services and linkages continue after participants are housed to help them maintain safety and stability. Participants can reach out to case managers even after services end if they face setbacks or have safety concerns. Case managers will re-engage to help them identify and access needed resources, adjust safety plans, and retain stable housing.

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

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2A-1. HMIS Vendor Identification. Wellsky

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

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

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

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	1,186	120	1,066	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	121	33	88	100.00%
Rapid Re-Housing (RRH) beds	497	0	497	100.00%
Permanent Supportive Housing (PSH) beds	2,686	0	2,623	97.65%
Other Permanent Housing (OPH) beds	0	0	0	

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

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

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

Not applicable.

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

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

*2A-4. HIC HDX Submission Date.

Applicants must enter the date the CoC 04/19/2019 submitted the 2019 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy)

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

Instructions:

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2B-1. PIT Count Date. 01/24/2019 Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).

2B-2. PIT Count Data-HDX Submission Date. 04/19/2019
Applicants must enter the date the CoC
submitted its PIT count data in HDX
(mm/dd/yyyy).

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

Applicants must describe:

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

Not applicable.

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

Applicants must select whether the CoC No added or removed emergency shelter,

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transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially-declared disaster, resulting in a change to the CoC's 2019 sheltered PIT count.

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

Applicants must describe:

- 1. any changes in the unsheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and
- 2. how the changes affected the CoC's unsheltered PIT count results; or 3. state "Not Applicable" if there were no changes. (limit 2,000 characters)
- 1) We implemented electronic data collection for the 2019 unsheltered count, using iPads. We worked to standardize HMIS data collection and quality assurance protocols for all street outreach providers to improve identification of those who are unsheltered, including those who meet chronic homeless criteria. 2) The electronic data collection improved the quality of the data, eliminated inherent transcribing errors, and made unsheltered data available quicker than in previous years. Data completeness was also better using the electronic form.

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

Applicants must:

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

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

Applicants must describe how the CoC engaged stakeholders serving youth experiencing homelessness to:

- 1. plan the 2019 PIT count;
- 2. select locations where youth experiencing homelessness are most likely to be identified; and
- 3. involve youth in counting during the 2019 PIT count. (limit 2,000 characters)
- (1) Our local youth outreach organization (Huckleberry House) and local youth drop-in centers (Huckleberry House YOP Shop and Star House) participated in planning meetings for the 2019 PIT Count. They helped identify and map locations where youth stay and worked with local gathering points to create "come be counted" locations for youth who were not engaged during the early morning or school counts. (2) Volunteers collected surveys at Huckleberry House YOP Shop and Star House and at locations identified by youth providers as places where homeless youth congregate. For example, a specific youth count was conducted at a local library in the evening. Columbus City Schools

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Project Connect – a program that helps families experiencing homelessness keep children in their home school – administered surveys to any literally homeless youth identified in school on the day of the count. (3) Huckleberry House and Star House recruited youth volunteers to administer PIT surveys during the count.

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

Applicants must describe the CoC's actions implemented in its 2019 PIT count to better count:

- 1. individuals and families experiencing chronic homelessness;
- 2. families with children experiencing homelessness; and
- 3. Veterans experiencing homelessness. (limit 2,000 characters)
- 1) In addition to canvassing known locations and working with outreach providers to identify target areas, the CoC has continued over the past year to work with our local PATH program to improve and more effectively incorporate PATH outreach data into the PIT count. We also worked to standardize HMIS data collection and quality assurance protocols for street outreach providers to improve identification of those who are unsheltered, including those who meet chronic homeless criteria. System partners review an HMIS-derived by-name active list of chronically homeless individuals monthly. The list was crossreferenced with the 2019 client-level PIT Count. 2) Our community has made a commitment to ensuring access to emergency shelter for all families with children. Consequently, very few families are unsheltered, and all sheltered families are included in HMIS. Standardized HMIS data collection and quality assurance protocols for emergency shelter and street outreach allow us to reliably identify sheltered and unsheltered families. A comprehensive daily byname list using HMIS data identifies all homeless families, enabling the availability of accurate and up-to-date data for the PIT count. 3) Our community has made a commitment to ensuring access to shelter for all Veterans, so few Veterans are unsheltered and all sheltered Veterans are included in HMIS. We use case conferencing and maintain a by-name list of Veterans using HMIS data that is updated each business day, enabling us to accurately identify all homeless Veterans for the PIT count. We continue to include all local VA HCHV community contract beds, GPD beds and VA-funded Outreach served clients in HMIS, enabling the availability of accurate and up-to-date data for the PIT count. Standardized HMIS data collection and quality assurance protocols for emergency shelter and street outreach allow us to reliably identify sheltered and unsheltered Veterans.

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

Instructions

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*3A-1. First Time Homeless as Reported in HDX.

Applicants must:

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

5,862

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

Applicants must:

- 1. describe the process the CoC developed to identify risk factors the CoC uses to identify persons becoming homeless for the first time; 2. describe the CoC's strategy to address individuals and families at risk
- of becoming homeless; and
- 3. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time. (limit 2,000 characters)
- 1) The CoC conducts an annual evaluation examining self-reported factors contributing to homelessness to inform, strengthen, and target prevention efforts for persons becoming homeless for the first time. The CoC determined that reduced benefits and higher rents are primary risk factors for homelessness by collaborating with Abt Associates and The Columbus Foundation on a 2015 report that identified causes of homelessness and housing instability in our community. Since then, the affordable housing crisis in our community has become more severe and more households are facing housing instability. 2) Community Shelter Board (CSB, the UFA), the Prevent Family Homelessness Collaborative, and Franklin County Department of Job and Family Services

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1 12010 CCC Application	1 490 02	00/20/2010

developed standardized risk typology and screening tools, along with training and response/referral guidance, for families and individuals at highest risk of homelessness. We are developing new community-based access points for screening and assistance to identify and help households at high-risk of homelessness before they need to call CPoA's hotline. Improved screening helps focus on those for whom literal homelessness will occur absent assistance. A coordinated homelessness prevention hub integrated into our CPoA assists families at high risk of imminent homelessness. Families contacting the CPoA's homeless hotline are connected to prevention resources to help avoid entering emergency shelter. At-risk pregnant women can access specialized prevention services using TANF and local funding. At-risk Veterans can access SSVF prevention resources. Families involved with child protective services can access a prevention program funded by Franklin County Children Services. The Collaborative also worked with Legal Aid and local officials to adjust eviction procedures and provide additional resources and guidance to those facing eviction. 3) Community Shelter Board is responsible for this strategy.

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

Applicants must:

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

60

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

Applicants must:

- 1. describe the CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
- 2. describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
- 3. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless. (limit 2,000 characters)
- 1) Shelters have a strong housing orientation and screen guests for referral to RRH programs. We prioritize for RRH families with children, pregnant women, Veterans, youth, people with disabilities, those fleeing domestic violence, and those with severe service needs and long homeless times. We are improving screening and prioritization to provide more individualized and intensive services for households with the longest time homeless. We are improving street outreach capacity to provide re-housing assistance and coordinate with hospitals, corrections, and behavioral health providers to better identify and re-house high system utilizers. RRH case managers help households develop housing plans, engage landlords, remove barriers, link to assistance and employment, and promote stability. We implemented a landlord recruitment and retention initiative, including marketing and outreach, to improve access to rental units in our tight housing market. We support community efforts to increase availability of safe, affordable rental housing. We aggressively pursue resources and opportunities to increase the supply of RRH and PSH units and

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1 12013 COO Application	1 490 55	03/20/2013

expand re-housing assistance. Quicker access to units and more affordable housing will reduce length-of-stay. 2) We use weekly and monthly HMIS reports to review households with the longest homeless time. We use a standardized system-wide needs assessment and case conferencing to identify and engage those with the longest homeless time and most severe service needs. CoC projects prioritize for RRH assistance families, pregnant women, Veterans, transition-age youth, people with disabilities, and people with severe needs. The Unified Supportive Housing System fills all PSH units according to HUD Notice CPD-16-11 and uses a standardized invitation and application process for those prioritized for PSH. 3) Community Shelter Board is responsible for this strategy.

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

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	48%
2. Report the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	93%

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

Applicants must:

- 1. describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations;
- 2. provide the organization name or position title responsible for overseeing the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations;
- 3. describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations; and
- 4. provide the organization name or position title responsible for overseeing the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.

(limit 2,000 characters)

1) Shelters and RRH programs collaborate to quickly house people, link them to resources, and provide aftercare to ensure stability. Shelters screen people after entry and refer to RRH those who are prioritized for assistance: families with children, pregnant women, Veterans, youth, people with disabilities, those fleeing domestic violence, and people with severe service needs and long homeless times because these populations are less likely to successfully exit without tailored support. Case managers help households develop housing

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plans, work with landlords, remove barriers, secure housing, and promote stability through linkage to income supports and services. TH programs stabilize households prior to permanent housing placement to increase the likelihood of success at exit. RRH, TH, and shelter providers can access financial assistance to pay security deposits and first few months of rent. The assistance is flexible and offered based on the household's needs and landlord requirements, improving the positive housing rate. Our system-wide landlord recruitment and retention initiative and active support of community efforts to increase affordable housing enhances participants' ability to obtain and retain stable housing. No safe haven programs are available in the CoC. 2) Community Shelter Board (CSB) is responsible for overseeing this strategy. 3) Housing stability for persons in permanent housing is already very high at 93%. To maintain and improve this rate, PSH providers engage with residents frequently to identify anyone who may become precariously housed and take action to re-stabilize them. PSH residents can access a variety of services, including linkage to employment and income supports. At least annually, PSH providers assess residents' readiness and willingness to move to independent housing. Residents are not exited from PSH until they feel confident that they can retain housing stability without PSH assistance. 4) CSB is responsible for this strategy.

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

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX.	10%
2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX.	19%

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

Applicants must:

- 1. describe the strategy the CoC has implemented to identify individuals and persons in families who return to homelessness;
- 2. describe the CoC's strategy to reduce the rate of additional returns to homelessness; and
- 3. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families return to homelessness. (limit 2,000 characters)
- 1) Community Shelter Board (CSB, the UFA) tracks returns via HMIS and conducts an annual evaluation at program and system levels, including recidivism rates. CSB examines programs with recidivism rates outside the norm to identify factors contributing to higher or lower rates. Collaboration between emergency shelter and RRH programs via case conferencing and system workgroup meetings help inform the CoC of factors that impact returns to homelessness. The Housing Assistance Screening Tool administered by emergency shelters identifies a household's prior use of re-housing assistance

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so programs can adjust next-step assistance. 2) To reduce recidivism, we prioritize assistance for those with the highest barriers: families with children, pregnant women, Veterans, youth, people fleeing domestic violence, people with disabilities, and those with severe service needs and long homeless times. RRH case managers help households develop housing plans and remove barriers. They provide aftercare and resources in case of setbacks, including tenant rights education and creating plans for responding to future crises. Housed individuals and families are encouraged to contact their case manager if they encounter a housing crisis, even after services end, to problem-solve and reduce recidivism. For PSH, the Unified Supportive Housing System prioritizes chronically homeless individuals first and then those with the most time homeless and most severe needs. All RRH and PSH programs have robust eviction prevention procedures. Prevention programs focus on those at highest risk of homelessness, including those most likely to return to homelessness. Programs link participants to community-based supports to improve access to resources and increase resiliency to future setbacks. Linkages may include employment services, education, mental/emotional/physical health services, benefits, Veterans resources, youth services, and child care and parenting resources. 3) CSB oversees the strategy.

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

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	10%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	28%

3A-5a. Increasing Employment Income.

Applicants must:

- 1. describe the CoC's strategy to increase employment income;
- 2. describe the CoC's strategy to increase access to employment;
- 3. describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
- 4. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase jobs and income from employment. (limit 2,000 characters)
- 1) Increased access to employment is a prioritized goal in the CoC's strategic plan. We are improving integration with workforce development resources, access to employment resources, and supporting community efforts to increase employment income for low-wage earners and reduce pay disparities. Programs encourage participants to include earned income growth in regularly-updated individualized housing stabilization plans. For participants who are underemployed or lack consistent employment, programs help identify higher-

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paying and more regular work. Linkage to GED, education, and career development programs is available to help participants access higher-paying jobs. These efforts resulted in a 4-percentage point increase in earned income for stayers between FY17 and FY18. 2) Participants receive help with job searches and applications, transportation, and uniforms and professional attire. Programs have resource rooms where participants can access job sites and work on resumes. Some programs have employment specialists on site to provide more individualized support. One PSH provider operates a Right Track Program that consists of classroom experience followed by a paid training position within the provider's housing facilities. More than 50% of participants who complete this program move into traditional jobs in the community. 3) Several programs have successful employment and work equity programs that include training, workshops, and collaboration with employers. The CoC has identified private employers who are willing to hire people with histories of criminal behavior, addiction, homelessness, and other barriers. Community Shelter Board (CSB) and Workforce Development Board (WDB) of Central Ohio are conducting an employment needs assessment to identify existing resources and develop pilot projects to improve connectivity between the homeless and workforce systems. 4) Franklin County Department of Job and Family Services, WDB, and CSB oversee this strategy.

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

Applicants must:

- 1. describe the CoC's strategy to increase non-employment cash income;
- 2. describe the CoC's strategy to increase access to non-employment cash sources;
- 3. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase non-employment cash income.
- 1) Increased access to benefits is a prioritized goal in the CoC's strategic plan. Programs encourage participants to take advantage of all non-employment cash income benefits for which they are eligible, including SSI, SSDI, and TANF. CSB regularly disseminates to partners resources, opportunities, and best practices for effectively linking participants to benefits. Case managers help program participants complete applications. The Homeless Hotline, part of our CPoA, screens callers for health insurance to help assess coverage gaps. Community Shelter Board (CSB), the UFA, is working with the Alcohol, Drug, and Mental Health Board of Franklin County and others to more effectively leverage Medicaid and other health care resources. Helping participants fully use their healthcare benefits frees up cash income, contributing to housing stability. These efforts resulted in a 5-percentage point (PP) increase in nonemployment income for system-stayers and an 11 PP increase for systemleavers between FY17 and FY18. 2) Franklin County Department of Job and Family Services (JFS) regularly have staff onsite at our CoC's two family shelters to expedite access to benefits. These benefits support RRH efforts. The CoC has SOAR-trained staff who help participants apply for SSI and SSDI benefits. Program staff refer participants to JFS for benefits assistance not available onsite. All Veterans are screened for access to non-employment cash income through a refined coordinated entry system specifically designed for Veterans in partnership with the VA. Those in need of and eligible for both VA and non-VA benefits are linked through this process. Annual assessments of PSH clients assess receipt of non-employment cash income and individualized

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housing stabilization plans include goals for increasing these income sources, based on the individual's need and eligibility. Case managers regularly review and update these goals with program participants. 3) JFS and CSB oversee this strategy.

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

Applicants must describe how the CoC:

- 1. promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and
- 2. is working with public and private organizations to provide meaningful, education and training, on-the-job training, internship, and employment opportunities for residents of permanent supportive housing that further their recovery and well-being. (limit 2,000 characters)
- 1) The CoC has partnerships with Goodwill and other private employers and organizations that hold regular job fairs and provide access to employment opportunities. Providers meet regularly with the Community Workforce Action Team and Community Employment Assistance Network to cultivate new hiring partners, gather job leads, and provide networking opportunities for participants. Programs post job opportunities in central locations, have resource rooms for job search and applications, and help with transportation and professional attire. The CoC works with private employers who are willing to hire individuals with disabilities and histories of criminal behavior, addiction, and homelessness. The Job2Housing RRH program focuses on employment. Community Shelter Board (CSB, the UFA) and Workforce Development Board (WDB) of Central Ohio are collaborating on a joint initiative to address barriers to employment for people who are experiencing or have experienced homelessness. The first stage of the initiative includes an in-depth needs assessment, an analysis of existing employment-related resources and interventions in our community, and a comprehensive review of best practices. Based on the results of these reviews, CSB, WDB, and system partners will develop interventions and system-wide screening tools and will pilot each proposed intervention to determine which approaches most effectively increase employment. 2) PSH providers have multiple partnerships with public and private employment organizations. They have also developed curricula, with participant input, that include developing soft skills, identifying career interests, mock interviews, goal-setting, and job searching techniques. Job coaching is available, as well as linkage to GED, vocational training, and post-secondary education programs. PSH providers assist with client-driven job searches and help participants identify and apply for meaningful opportunities that enhance participants' housing stability.

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

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

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

3A-6. System Performance Measures 05/28/2019 **Data–HDX Submission Date**

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

Applicant: Columbus/Franklin County Continuum of Care

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OH-503 COC_REG_2019_170538

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

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions. Please submit technical questions to the HUD Exchange Ask-A-Question at https://www.hudexchange.info/program-support/my-question/

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources
The FY 2019 CoC Program Competition Notice of Funding Availability at: https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices

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

3B-1. Prioritizing Households with Children.

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

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

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

Applicants must:

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

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assistance ends; and

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

1) Emergency shelters screen families within 1-2 business days of entry for housing and service needs. We prioritize RRH for pregnant women and families with children and severe service needs. Specialized RRH programs serve youth and people fleeing domestic violence. Shelter and RRH staff conduct RRH intake within 2 business days after families are assigned to a RRH program. Case conferencing with shelters, RRH, and PSH programs help re-house families quickly. An HMIS report identifying long-staying families is generated weekly and discussed in bi-weekly case conferencing meetings, along with high-complexity families. Case managers help families develop housing plans, engage landlords, remove barriers, connect to services, and maintain housing stability. Due to the local affordable housing crisis, the CoC implemented a system-wide landlord recruitment initiative, including marketing and outreach, to improve access to rental units. The CoC supports community efforts to increase the availability of and access to safe and affordable rental housing to meet the needs of families who are homeless or at-risk of homelessness. Increasing access to and supply of affordable housing will help families exit shelter faster and retain housing more easily. The CoC aggressively pursues resources and opportunities to increase the supply of units. 2) RRH case managers provide aftercare to ensure that families maintain stability. RRH assistance, including financial assistance, employment support, and crisis planning, is tailored to each family's need and assistance ends only when there is a high likelihood of success. We implemented a standardized case review and closure process to help case managers decide when services should end, which improves housing retention. Housed families are encouraged to contact their former case manager if they encounter a housing crisis, even after services end, to problemsolve and reduce recidivism. 3) Community Shelter Board oversees this strategy.

3B-1b. Antidiscrimination Policies.

Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent housing (PSH and RRH)) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on any protected classes under the Fair Housing Act, and consistent with 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or - Insured Housing.

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

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

Х

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

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

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

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

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

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

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

Applicants must describe how the CoC increased availability of housing and services for:

- 1. all youth experiencing homelessness, including creating new youthfocused projects or modifying current projects to be more youth-specific or youth-inclusive; and
- 2. youth experiencing unsheltered homelessness including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive. (limit 3,000 characters)

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1) Our 2018 YHDP award galvanized partners and is enabling us to improve housing and services for youth. YHDP projects began 7/1/2019 and are working to quickly increase housing and services for youth experiencing homelessness. The CoC is developing more effective collaboration with youth-serving entities in our community through a new youth-focused RRH project, a joint TH/RRH project, and a new PSH project for youth scheduled to open in fall 2020. The CoC has hired a full-time youth system manager to implement the CoC's strategy articulated in A Place to Call Home for Youth, our coordinated community plan (CCP) to prevent and end youth homelessness. In addition to YHDP funding, the CoC was awarded other public and private grants to support CCP planning and implementation and tailored homelessness prevention and RRH assistance for pregnant and parenting youth. Youth are one of the priority populations for the CoC's RRH programs. All youth-focused projects adhere to Housing First, Trauma Informed Care, and Positive Youth Development practices and use a progressive engagement approach. Based on input from our community's Youth Action Board and other youth forums, we are pursuing more flexible shelter and housing options. 2) For unsheltered and unsafely housed youth, the CoC has a new YHDP-funded Coordinated Access and Rapid Resolution (CARR) Team, which conducts youth-specific outreach, immediately screens youth for re-housing assistance, and is further developing and maintaining an up-to-date by-name active list of youth experiencing unsheltered homelessness. This mobile team of youth specialists improves youth access to services and housing and supports youth in achieving education, employment, income, health, and well-being goals. The CARR Team uses Housing First, trauma-informed care, positive youth development, and progressive engagement approaches to support and assist unsheltered youth. Staff are trained to support youth who have experienced trafficking and other forms of exploitation. Along with the other YHDP-funded projects that started operation 7/1/2019, the CARR Team will increase the availability of youthfocused housing and services. The CoC is implementing youth-focused case conferencing to address complex issues and ensure robust coordination between system partners. The CoC is developing multiple access points, shelter options, and services that are tailored for youth. System partners are implementing comprehensive outreach strategies involving a wide array of public system partners (e.g., high schools, libraries, recreation centers, college student centers, public transportation) to ensure youth are quickly engaged, screened, and connected to needed shelter, housing, and services. The CoC has developed and implemented a system-wide landlord recruitment and retention initiative, and actively supports community efforts to increase the availability of and greater access to safe and affordable rental housing.

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

Applicants must:

- 1. provide evidence the CoC uses to measure each of the strategies in question 3B-1d. to increase the availability of housing and services for youth experiencing homelessness;
- 2. describe the measure(s) the CoC uses to calculate the effectiveness of both strategies in question 3B-1d.; and
- 3. describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of both strategies in question 3B-1d. (limit 3,000 characters)

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1) The YHDP projects increase housing and services availability for sheltered and unsheltered youth. The YHDP projects, which started 7/1/2019, include a new youth-dedicated PSH project, tailored RRH and TH for sheltered and unsheltered youth, and prioritization of transition-age youth and people fleeing domestic violence for RRH services system-wide. The CoC is developing new coordinated entry access points for youth and outreach that will enable better tracking, identification, and linkage and provide a better understanding of youth homelessness in our community. The YHDP Coordinated Community Plan (CCP) provides a comprehensive approach for estimating demand for housing and services based on the size, characteristics, and service needs of youth and the interventions needed to fill current gaps. The CCP also includes a comprehensive measurement framework to assess the success of the CCP strategies. A new quarterly performance dashboard was implemented in early 2019 focused on transition-age youth and showing the performance of each youth-specific intervention in our CoC. Dependent on funding, an external evaluation will also asses the strategies' effectiveness. 2) The CoC uses HMIS data and feedback from the Youth Action Board (YAB). ĆSB, on behalf of the CoC, issues quarterly performance reports and annually a Snapshot report that has a section dedicated to youth homelessness data. These reports will track the impact of the added resources by mainly showing a decrease in youth homelessness, an increase in the success rate at exit for homeless youth, and a reduction in returns to homelessness. Additional measures track the effectiveness of programs through length of program participation, diversion rates, successful referrals to services, education- and employment-related goals, goals related to the person's well-being, housing stability, and income. Feedback from the YAB will focus efforts on the needs of youth and tailor the new initiatives to best fit those needs. The CoC also gathers an annual aggregated count of homeless youth from local education agencies, as submitted to the U.S. Department of Education via the EdFacts data system. 3) We expect these measures to evolve over time as the YHDP projects and other youth-focused initiatives develop and we gain more experience on what interventions work well for youth. Using HMIS data, our CoC has experience measuring system and program performance to ensure effectiveness and efficiency, and the youth-specific measures were vetted with the CoC's Youth Committee, YAB, and YHDP technical assistance providers. The qualitative feedback from youth participating in our CoC governance structure and YAB will augment data-derived performance measurement and allow the CoC to evaluate the qualitative effects of strategies and continuously improve initiatives to reduce youth homelessness.

3B-1e. Collaboration-Education Services.

Applicants must describe:

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

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(limit 2,000 characters)

 Columbus State Community College has a voting representative on the CoC governing body. 1b) Columbus City Schools Project Connect (the community's largest LEA) has a voting representative on the CoC governing body. 1c) Columbus City Schools and South-Western City Schools have formal Memoranda of Understanding with the CoC, codifying collaboration on the CoC's coordinated community plan to prevent and end youth homelessness. Senior Columbus City Schools staff actively participates on the CoC Youth Committee. 2a) The CoC collaborates with Columbus State Community College to assist youth who are experiencing homelessness or at-risk of experiencing homelessness either continue or pursue educational opportunities. CoC-funded youth provider Huckleberry House collaborates with local high schools and GED providers on educational opportunities for youth served in Huckleberry House's youth shelter and the CoC-funded transitional housing program. Both of our community's family emergency shelters include Head Start program locations. 2b) McKinney-Vento LEA Columbus City Schools participates in the CoC Youth Committee. 2c) Columbus City Schools Project Connect works with social service agencies that provide shelter and housing services to families. These agencies identify children living in transition and refer them to Project Connect to keep children in their school of origin or ensure immediate enrollment in the school serving the family's temporary address. School buses provide daily transportation for children staying in our community's two family emergency shelters, taking children to and from their school of origin. Project Connect attends family system operations workgroup meetings, as needed. Additional partnership opportunities with the Franklin County Educational Services Center are being developed as part of the YHDP Coordinated Community Plan and CoC Youth Committee efforts.

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

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

Each program in the homeless system is required to ensure that 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. Community Shelter Board (UFA), on behalf of the CoC, monitors all programs annually for evidence that program staff proactively ensure that program participants' rights are not violated in regard to public education, including contact with the local Homeless Education Liaison. Each program must demonstrate consistent implementation of processes for advising heads of households of their rights upon entry into any homelessness program. Participant files for households with children must demonstrate collaboration with the Homeless Education Liaison 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 school-aged children enters emergency shelter, Columbus City Schools Project Connect is informed immediately and the child(ren) will continue to attend school at their school of origin, using the Project Connect

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busses that pick children up from emergency shelters and transport them to their schools every morning. If a family with children is entering permanent housing, the program staff makes efforts to house the family as close as possible to its school of origin so as not to disrupt children's education.

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

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

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

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

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

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

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

3B-2b. Housing First for Veterans.

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

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Applicant: Columbus/Franklin County Continuum of Care

OH-503 Project: OH-503 CoC Registration FY2019 COC_REG_2019_170538

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

Applicants must:

1. select all that apply to indicate the findings from the CoC's Racial **Disparity Assessment; or**

2. select 7 if the CoC did not conduct a Racial Disparity Assessment.

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

3B-3a. Addressing Racial Disparities.

Applicants must select all that apply to indicate the CoC's strategy to address any racial disparities identified in its Racial Disparities Assessment:

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

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

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions. Please submit technical questions to the HUD Exchange Ask-A-Question at https://www.hudexchange.info/program-support/my-question/

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources
The FY 2019 CoC Program Competition Notice of Funding Availability at: https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices

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

4A-1. Healthcare-Enrollment/Effective Utilization

Applicants must indicate, for each type of healthcare listed below, whether the CoC assists persons experiencing homelessness with enrolling in health insurance and effectively utilizing Medicaid and other benefits.

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

4A-1a. Mainstream Benefits.

Applicants must:

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

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health insurance;

- 4. describe how the CoC provides assistance with the effective utilization of Medicaid and other benefits; and
- 5. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy for mainstream benefits. (limit 2,000 characters)
- 1) Community Shelter Board (CSB), the UFA, keeps program staff up-to-date regarding mainstream resources by regularly seeking and disseminating information to partners about cash assistance, non-cash benefits, Food Stamps, meal sites, food programs, mental health and substance abuse treatment services, and other resources. CSB, on behalf of the CoC, monitors all programs annually to ensure that system staff is trained and capable of helping program participants enroll in and utilize mainstream benefits. 2) CSB disseminates resources, best practices, and other assistance information during weekly system operations workgroup meetings and through email communications as updates become available. The Homeless Hotline, part of our CPoA, screens callers for health insurance to help assess coverage gaps. 3) CSB works with organizations that provide mainstream benefits to present information on their programs during system meetings. For example, CSB is working with Molina Healthcare on an initiative to notify Molina when one of their customers enters the homeless crisis response system. Molina can then help them fully use their healthcare benefits, contributing to regained housing stability. CSB will use the results of this initiative to collaborate with other health care organizations. 4) CSB is collaborating with the local Alcohol, Drug, and Mental Health Board to best leverage Medicaid on behalf of homeless program participants. In the next year, CSB (the HMIS lead) will test the capabilities of HMIS as a tool for the Medicaid billing process. CSB is also learning from other communities' best practices on maximizing Medicaid revenues and encouraging local providers to become Medicaid billers for eligible services. CSB works closely with the VA to ensure that Veterans have access to VA health care resources. Full use of health benefits reduces the income households spend on health care, enhancing housing stability. 5) CSB is responsible for overseeing this strategy.

4A-2. Lowering Barriers to Entry Data:

Applicants must report:

1. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition.	33
2. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	33
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	

4A-3. Street Outreach.

Applicants must:

describe the CoC's street outreach efforts, including the methods it

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uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;

- 2. state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;
- 3. describe how often the CoC conducts street outreach; and
- 4. describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)
- 1) The CoC's outreach team proactively engages unsheltered people. The cross-agency team collaborates with PATH and VA Outreach to provide coverage, engagement, assessment, housing search and placement, and services. The outreach team is widely known in the community and works with the City, County, hospitals, businesses, law enforcement, and social service and faith-based organizations to respond when unsheltered persons are identified on streets, in camps, and in vehicles. Procedures were put in place system-wide to standardize outreach activities and improve coverage and engagement of unsheltered individuals across the region. New YHDP-funded programs include outreach via access points designed to more effectively engage unsheltered youth. 2) The CoC's street outreach covers 100% of the CoC's geographic area. 3) Outreach Specialists conduct outreach daily. Specialists repeat contact and engagement attempts with each individual at least monthly with the goal of placing the person in housing or emergency shelter. The Outreach team works with CPoA to link people to community resources and shelter. 4) The outreach team proactively seeks new locations where people experiencing homelessness congregate. Collaboration with the City, County, and businesses help identify opportunities to engage unsheltered people throughout the geographic area. Communication with other systems of care (health care providers, faith-based organizations, social service providers, community programs, and law enforcement) identifies people who need help, but are unlikely to seek assistance. Specialists can access translators for people who speak languages other than English and have training on how to communicate with those with cognitive and physical disabilities.

4A-4. RRH Beds as Reported in HIC.

Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2018 and 2019.

	2018	2019	Difference
RRH beds available to serve all populations in the HIC	734	497	-237

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

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

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rehabilitation or new construction.

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

Applicants must indicate whether the CoC is requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other federal statutes.

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
_FY 2019 CoC Competition Report (HDX Report)	Yes	FY 2019 CoC Compe	08/29/2019
1C-4.PHA Administration Plan–Moving On Multifamily Assisted Housing Owners' Preference.	No		
1C-4. PHA Administrative Plan Homeless Preference.	No	PHA Administratio	08/29/2019
1C-7. Centralized or Coordinated Assessment System.	Yes	CE Assessment Tool	08/29/2019
1E-1.Public Posting–15-Day Notification Outside e- snaps–Projects Accepted.	Yes	Projects Accepted	09/16/2019
1E-1. Public Posting–15-Day Notification Outside e- snaps–Projects Rejected or Reduced.	Yes	Projects Rejected	09/16/2019
1E-1.Public Posting–30-Day Local Competition Deadline.	Yes	Local Competition	08/29/2019
1E-1. Public Posting–Local Competition Announcement.	Yes	Local Competition	09/25/2019
1E-4.Public Posting–CoC- Approved Consolidated Application	Yes	CoC-Approved Cons	09/16/2019
3A. Written Agreement with Local Education or Training Organization.	No	Local Education o	08/29/2019
3A. Written Agreement with State or Local Workforce Development Board.	No	State or Local Wo	08/29/2019
3B-3. Summary of Racial Disparity Assessment.	Yes	Racial Disparity	08/29/2019
4A-7a. Project List-Homeless under Other Federal Statutes.	No		
Other	No	3B-1e.2 Early Chi	08/29/2019
Other	No		

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Othor	No	1
Other	No	

Applicant: Columbus/Franklin County Continuum of Care

Project: OH-503 CoC Registration FY2019

OH-503 COC_REG_2019_170538

Attachment Details

Document Description: FY 2019 CoC Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description: PHA Administration Plan Preference

Attachment Details

Document Description: CE Assessment Tool

Attachment Details

Document Description: Projects Accepted Notification

Attachment Details

Document Description: Projects Rejected or Reduced Notification

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Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Public Announcement

Attachment Details

Document Description: CoC-Approved Consolidated Application

Attachment Details

Document Description: Local Education or Training Organization

Agreement

Attachment Details

Document Description: State or Local Workforce Agreement

Attachment Details

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Applicant: Columbus/Franklin County Continuum of Care

Project: OH-503 CoC Registration FY2019

OH-503 COC_REG_2019_170538

Document Description: Racial Disparity Assessment Summary

Attachment Details

Document Description:

Attachment Details

Document Description: 3B-1e.2 Early Childhood Services Providers

Agreement

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/16/2019
1B. Engagement	09/16/2019
1C. Coordination	09/16/2019
1D. Discharge Planning	No Input Required
1E. Local CoC Competition	09/16/2019
1F. DV Bonus	09/16/2019
2A. HMIS Implementation	09/16/2019
2B. PIT Count	09/16/2019
3A. System Performance	09/16/2019
3B. Performance and Strategic Planning	09/16/2019
4A. Mainstream Benefits and Additional Policies	09/16/2019
4B. Attachments	09/25/2019

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FY2019 CoC Application

Submission Summary

No Input Required

PIT Count Data for OH-503 - Columbus/Franklin County CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count	1724	1691	1807	1907
Emergency Shelter Total	1244	1,229	1,427	1447
Safe Haven Total	0	0	0	0
Transitional Housing Total	141	122	92	78
Total Sheltered Count	1385	1351	1519	1525
Total Unsheltered Count	339	340	288	382

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	160	229	137	97
Sheltered Count of Chronically Homeless Persons	44	94	41	24
Unsheltered Count of Chronically Homeless Persons	116	135	96	73

PIT Count Data for OH-503 - Columbus/Franklin County CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	142	129	169	159
Sheltered Count of Homeless Households with Children	142	129	167	154
Unsheltered Count of Homeless Households with Children	0	0	2	5

Homeless Veteran PIT Counts

	2011	2016	2017	2018	2019
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	145	133	140	100	92
Sheltered Count of Homeless Veterans	116	103	119	86	76
Unsheltered Count of Homeless Veterans	29	30	21	14	16

2019 HDX Competition Report HIC Data for OH-503 - Columbus/Franklin County CoC

HMIS Bed Coverage Rate

Timio Bea Goverage Nate				
Project Type	Total Beds in 2019 HIC	Total Beds in 2019 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	1186	120	1066	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	121	33	88	100.00%
Rapid Re-Housing (RRH) Beds	497	0	497	100.00%
Permanent Supportive Housing (PSH) Beds	2686	0	2623	97.65%
Other Permanent Housing (OPH) Beds	0	0	0	NA
Total Beds	4,490	153	4274	98.55%

HIC Data for OH-503 - Columbus/Franklin County CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC	2019 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	796	1006	1082	2246

Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH units available to serve families on the HIC	95	92	109	89

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH beds available to serve all populations on the HIC	436	392	734	497

FY2018 - Performance Measurement Module (Sys PM)

Summary Report for OH-503 - Columbus/Franklin County CoC

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference
1.1 Persons in ES and SH	9388	9232	51	57	6	39	43	4
1.2 Persons in ES, SH, and TH	9529	9314	55	60	5	40	44	4

b. This measure is based on data element 3.17.

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

The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.

FY2018 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	9673	9313	172	204	32	54	69	15
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	9817	9398	179	210	31	57	71	14

FY2018 - Performance Measurement Module (Sys PM)

Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

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

After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	to a Permanent Housing than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years		
	Destination (2 Years Prior)	FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns
Exit was from SO	190	17	9%	10	5%	20	11%	47	25%
Exit was from ES	4552	445	10%	470	10%	400	9%	1315	29%
Exit was from TH	347	28	8%	15	4%	21	6%	64	18%
Exit was from SH	0	0		0		0		0	
Exit was from PH	1107	109	10%	109	10%	98	9%	316	29%
TOTAL Returns to Homelessness	6196	599	10%	604	10%	539	9%	1742	28%

Measure 3: Number of Homeless Persons

Metric 3.1 - Change in PIT Counts

FY2018 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2017 PIT Count	January 2018 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1691	1807	116
Emergency Shelter Total	1229	1427	198
Safe Haven Total	0	0	0
Transitional Housing Total	122	92	-30
Total Sheltered Count	1351	1519	168
Unsheltered Count	340	288	-52

Metric 3.2 - Change in Annual Counts

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

	Submitted FY 2017	FY 2018	Difference
Universe: Unduplicated Total sheltered homeless persons	9684	9445	-239
Emergency Shelter Total	9519	9346	-173
Safe Haven Total	0	0	0
Transitional Housing Total	323	241	-82

FY2018 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	1079	1077	-2
Number of adults with increased earned income	67	113	46
Percentage of adults who increased earned income	6%	10%	4%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	1079	1077	-2
Number of adults with increased non-employment cash income	253	298	45
Percentage of adults who increased non-employment cash income	23%	28%	5%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	1079	1077	-2
Number of adults with increased total income	292	352	60
Percentage of adults who increased total income	27%	33%	6%

FY2018 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	580	296	-284
Number of adults who exited with increased earned income	56	29	-27
Percentage of adults who increased earned income	10%	10%	0%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	580	296	-284
Number of adults who exited with increased non-employment cash income	99	82	-17
Percentage of adults who increased non-employment cash income	17%	28%	11%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	580	296	-284
Number of adults who exited with increased total income	147	101	-46
Percentage of adults who increased total income	25%	34%	9%

FY2018 - Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

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

	Submitted FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	8951	8654	-297
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	3235	2971	-264
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	5716	5683	-33

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

	Submitted FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	9601	9301	-300
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	3665	3439	-226
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	5936	5862	-74

FY2018 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in FY2018 (Oct 1, 2017 - Sept 30, 2018) reporting period.

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

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2017	FY 2018	Difference
Universe: Persons who exit Street Outreach	676	474	-202
Of persons above, those who exited to temporary & some institutional destinations	165	91	-74
Of the persons above, those who exited to permanent housing destinations	265	215	-50
% Successful exits	64%	65%	1%

Metric 7b.1 – Change in exits to permanent housing destinations

FY2018 - Performance Measurement Module (Sys PM)

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	8688	7976	-712
Of the persons above, those who exited to permanent housing destinations	4082	3835	-247
% Successful exits	47%	48%	1%

Metric 7b.2 - Change in exit to or retention of permanent housing

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in all PH projects except PH-RRH	2912	2697	-215
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	2703	2514	-189
% Successful exits/retention	93%	93%	0%

FY2018 - SysPM Data Quality

OH-503 - Columbus/Franklin County CoC

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

2019 HDX Competition Report

FY2018 - SysPM Data Quality

		All E	S, SH			All	тн			All PSI	н, орн			All F	RRH		All	Street	Outrea	ich
	2014- 2015	2015- 2016	2016- 2017	2017- 2018																
1. Number of non- DV Beds on HIC	899	1034	1070	1047	141	136	102	88	2368	2661	2732	2708	422	378	392	734				
2. Number of HMIS Beds	883	1034	1051	1047	141	136	98	88	2013	2249	2239	2651	422	378	365	734				
3. HMIS Participation Rate from HIC (%)	98.22	100.00	98.22	100.00	100.00	100.00	96.08	100.00	85.01	84.52	81.95	97.90	100.00	100.00	93.11	100.00				
4. Unduplicated Persons Served (HMIS)	10445	10436	9117	9033	723	700	323	241	2904	3021	3129	3046	4784	5278	4892	3682	205	178	470	423
5. Total Leavers (HMIS)	9510	9276	7954	7693	484	599	251	185	581	493	560	500	3609	3965	4212	2744	114	78	342	304
6. Destination of Don't Know, Refused, or Missing (HMIS)	1611	2445	1050	579	22	39	14	2	19	40	41	22	829	1099	997	14	42	36	6	4
7. Destination Error Rate (%)	16.94	26.36	13.20	7.53	4.55	6.51	5.58	1.08	3.27	8.11	7.32	4.40	22.97	27.72	23.67	0.51	36.84	46.15	1.75	1.32

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2019 HDX Competition Report

Submission and Count Dates for OH-503 - Columbus/Franklin County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2019 PIT Count	1/24/2019	

Report Submission Date in HDX

	Submitted On	Met Deadline
2019 PIT Count Submittal Date	4/19/2019	Yes
2019 HIC Count Submittal Date	4/19/2019	Yes
2018 System PM Submittal Date	5/28/2019	Yes

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July 29, 2019

Michelle Heritage Community Shelter Board 355 E. Campus View Blvd. Suite 250 Columbus, OH 43235

Michelle:

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 homeless population is included in CMHA's Housing Choice Voucher Administrative Plan.

CMHA has 2,380 project-based vouchers (PBV) allocated to permanent supportive housing (PSH) 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 another homeless individual or family with access to stable housing.

CMHA is committed to utilizing project-based vouchers for new permanent supportive housing programs based on available HCV capacity. The Housing Opportunity Through Modernization Act of 2016 increased the PBV cap and ensures an increase in the number of PBV vouchers available for use in housing the homeless population.

Sincerely,

Chad A. Meek

Vice President of Housing Choice Vouchers

WA Mel

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

HMIS Data Collection Form for Coordinated Point of Access.

TRIA	AGE	PERF	OR	MED	BY:						_			TRI	AGE	DA	ΓΕ:						
																	1			1			
															Mont	h		Da	у	1 1	ı	Year	
CLIE	ENT I	NAMI	E:																				
Clie	ent ID)#																					
Firs	st nar	me																					
Mid	ldle r	name																					
	t nar	ne																					
Suf																							
Pno	one i	lumb	er																				
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		n-His	nani	c / N	on-l a	atino	.					Clier	nt doe	esn't	knov	N							
_		spanio			011		•					Client doesn't know Client refused											
RAC	E:																						
	Am	rerica	ın Ind	dian (or Ala	ska	Nati	ve				White											
	As	ian										Client doesn't know											
	Bla	ck or	Afri	can A	meri	can						Client refused											
	Na	tive I	Haw	aiian	or Ot	her	Paci	fic Isl	ande	r													
	DE0																						
⊅EN □	IDER Fer	nale										Gan	der N	lon-C	:onfa	ormir	na (i 4	e no	t evo	dueiv	elv		
	Mal												or fe			J111111	·9 (i.'	o. 110	·	,,,,,,,,,,	∪ı y		
		ns Fe	emal	e (M7	ΓF, or	r ma	le to	fema	ale)			Clie	nt do	esn't	knov	W							
		ns Ma		•								Client refused											
∕ET	ERA	N ST	ATU	s																			
	No											Clie	nt do	esn't	knov	W							
	Ye	S										Clie	nt ref	used									
				to Hu		berr	у Но	use	@ 61	4-29	4-555	3											

Are you experiencing any violence against you physically or sexually where you live or are staying right now that is making that place unsafe for you to remain?

☐ Yes [☐ No
---------	------

If Yes, provide client with the phone number to CHOICE @ 614-224-4663

Is client a domestic violence victim/survivor?	Client doesn't know
Yes	Client refused
[IF YES] When did the experience of	ccur?
☐ Within the past three months	☐ One year ago or more
☐ Three to six months ago (exclu	uding six months exactly) Client doesn't know
Six months to one year ago (ex	xcluding one year exactly) Client refused
¥	
	o refer you to choices domestic violence shelter where to help with your housing crisis and address additional okay?
Refer to CHOICES @ 614-224-4663	+ + + +
[IF NO] Is there other safe housing	where Yes No
you can stay when you leave?	
How many nights can you stay ther to CHOICES)	re? (If fewer than 10 days, refer
Are you presently feeling pressured/threatened to (such as sex or labor) you don't want to do?	do things Yes No
Are you presently exchanging sex or labor for som	
value? (such as food, shelter, drugs, clothing, mor	ney)?
If yes to either of the above two questions, offer to possible. Central Ohio Rescue and Restore Coalities	provide the number for the local hotline. Warm transfer if on (614-285-4357)
SUBSTANCE ABUSE PRE-SCREEN	
Are you currently intoxicated or under the influence substance?	ce of another
[IF YES], transfer internally to Netcare staff or call	614-276-2273.
If caller appears to be using alcohol or other subst	tances, continue by asking if he/she is willing to go to nter via ROW Van (614-276-2273) or CPS, as clients cannot
If client's response is "No": say 'Okay. Well, I need using alcohol or other drugs, the individual shelter	to let you know that if anyone shows up to a shelter after can determine not to serve that individual.
Demand for shelter is high and we cannot reserve you or place you on the waiting list unless you	☐ Yes ☐ No
are ready to enter the program immediately. Are yo obtain shelter services for tonight?	ou looking to
Obtain Sheller Services for tollight?	Ž
[IF YES] "I need to a	sk some basic information" [IF NO] Instruct client to call back when shelter is needed

HMIS Data: CPOA OH-503 CE Assessment Tool - 2 February 2019 2

Are you presently on the streets or in a camp or safe place to stay tonight	Yes	□ No	
Are you connected with Maryhaven Outreach?	☐ Yes	□ No	
HOUSEHOLD INFORMATION			
Household Composition:			
Single Adult Household: One adult, no minor(s	,		
Family Household: Two or members, at least of	one minor		
Unaccompanied Youth: One minor, no adults			
Relationship to Head of Household:			
☐ Self (Head of household)		d of household's other rela	
Head of household's child	,	er relation to head of house	ehold)
Head of household's spouse or partner		er: non-relation member	
Trans Male (FTM, or female to male)	∐ Data	not collected	
Number of Adults in Household (incl. HoH):			
Besides the HoH, are there any other adults in the			
Yes		nt Refused	
No	∐ Data	Not Collected	
Client Doesn't Know			
Do you have any minor children?: Yes		No	
Do you have legal custody of the minor children	currently sta	aying	☐ No
with you?:			'
Number of Children in Household:			
0.0		10.47	
0-2 years 3-7 years 8-12 ye	ears	13-17 years	
Pregnant?:			
□ No	☐ CI	lient doesn't know	
☐ Yes	☐ CI	lient refused	
Ψ			
Projected Due Date:			
Month Day Year			
Are year assumently limbed with Free Libr Courty Cl	ilduan Carri	2	
Are you currently linked with Franklin County Ch Yes		ces? nt Refused	
□ No		Not Collected	
Client Doesn't Know		140t Odilooted	

	☐ Yes			Client Refused				
	□ No			☐ Data Not Collected				
	Client Doesn't Know							
На	ve you been assisted through a Stable Fami	lies pr	ograr	n before?:				
	Yes		CI	ient Refused				
	No		Da	ata Not Collected				
	Client Doesn't Know							
Do	you currently have a lease in your name?							
	Yes		CI	ient Refused				
	No		Da	ata Not Collected				
	Client Doesn't Know							
IΔ	ST PERMANENT ADDRESS							
	OTTERMANENT ADDRESS							
Zip	Code of Last Permanent Address?:							
Ge	neral Area Location of Previous Residence:							
	Within Franklin County (Outside City - Columbu	s)		Outside Franklin County (Within City - Columbus)				
Ш	Within Franklin County (Within City - Columbus		_	Outside of Ohio				
_	Outside Franklin County (Outside City - Columb	<u></u>	☐ Client refused					
	•		e nei	ter identify resources that might be useful.				
VV	nere did you stay last night? (Residence Prio		: 4	Frat A				
$\overline{}$		r to Pi	roject	- · ·				
	Place not meant for habitation	or to Pi	roject	Entry) Hotel or motel paid for without emergency shelter voucher				
	Emergency shelter, including hotel or motel	or to Pi	roject	Hotel or motel paid for without emergency shelter voucher				
	Emergency shelter, including hotel or motel paid for with emergency shelter voucher			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy				
	Emergency shelter, including hotel or motel			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy				
	Emergency shelter, including hotel or motel paid for with emergency shelter voucher			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy				
]	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly				
]	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group home			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons Rental by client, with no housing subsidy				
]	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons				
	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group home Hospital or other residential non-psychiatric			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons Rental by client, with no housing subsidy				
]	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group home Hospital or other residential non-psychiatric medical facility Jail, prison, or juvenile detention facility			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons Rental by client, with no housing subsidy Rental by client, with GPD TIP housing subsidy Rental by client, with VASH housing subsidy Rental by client, with other housing subsidy (including subsidy)				
	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group home Hospital or other residential non-psychiatric medical facility Jail, prison, or juvenile detention facility Long-term care facility or nursing home			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons Rental by client, with no housing subsidy Rental by client, with GPD TIP housing subsidy Rental by client, with VASH housing subsidy Rental by client, with other housing subsidy (includin RRH)				
	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group home Hospital or other residential non-psychiatric medical facility Jail, prison, or juvenile detention facility			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons Rental by client, with no housing subsidy Rental by client, with GPD TIP housing subsidy Rental by client, with VASH housing subsidy Rental by client, with other housing subsidy (including subsidy)				
]	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group home Hospital or other residential non-psychiatric medical facility Jail, prison, or juvenile detention facility Long-term care facility or nursing home Psychiatric hospital or other psychiatric facility Substance abuse treatment facility or detox			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons Rental by client, with no housing subsidy Rental by client, with GPD TIP housing subsidy Rental by client, with VASH housing subsidy Rental by client, with other housing subsidy (includin RRH) Residential project or halfway house with no homeless criteria Staying or living in a family member's room,				
]	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group home Hospital or other residential non-psychiatric medical facility Jail, prison, or juvenile detention facility Long-term care facility or nursing home Psychiatric hospital or other psychiatric facility Substance abuse treatment facility or detox center	Transitional and Permanent Housing Situations		Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons Rental by client, with no housing subsidy Rental by client, with GPD TIP housing subsidy Rental by client, with VASH housing subsidy Rental by client, with other housing subsidy (includin RRH) Residential project or halfway house with no homeless criteria Staying or living in a family member's room, apartment, or house				
	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group home Hospital or other residential non-psychiatric medical facility Jail, prison, or juvenile detention facility Long-term care facility or nursing home Psychiatric hospital or other psychiatric facility Substance abuse treatment facility or detox			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons Rental by client, with no housing subsidy Rental by client, with GPD TIP housing subsidy Rental by client, with VASH housing subsidy Rental by client, with other housing subsidy (includin RRH) Residential project or halfway house with no homeless criteria Staying or living in a family member's room, apartment, or house Staying or living in a friend's room, apartment, or house				
	Emergency shelter, including hotel or motel paid for with emergency shelter voucher Safe Haven Interim Housing* Foster care home or foster care group home Hospital or other residential non-psychiatric medical facility Jail, prison, or juvenile detention facility Long-term care facility or nursing home Psychiatric hospital or other psychiatric facility Substance abuse treatment facility or detox center			Hotel or motel paid for without emergency shelter voucher Owned by client, no ongoing housing subsidy Owned by client, with ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons Rental by client, with no housing subsidy Rental by client, with GPD TIP housing subsidy Rental by client, with VASH housing subsidy Rental by client, with other housing subsidy (including RRH) Residential project or halfway house with no homeless criteria Staying or living in a family member's room, apartment, or house Staying or living in a friend's room, apartment, or				

HMIS Data: CPOA OH-503 CE Assessment Tool - 4 February 2019

How long have you been staying there? (Length o	r Stay in Previous Place)
☐ One night or less	☐ 90 days or more, but less than one year
☐ Two to six nights	☐ One year or longer
☐ One week or more, but less than one month	☐ Client doesn't know
☐ One month or more, but less than 90 days	☐ Client refused
If you are staying with friends/family, can you stay	there again tonight? Yes No
[If Not] Why do you have to leave this place?	
Is there any other friends/family in the area you ca	n stay with?
Where else might you be able to stay?:	
How many more night are you able to stay at this location?	
If we are unable to provide you shelter for the night, where will you stay?:	
INCOME AND SOURCES:	
Does the client have any income from any source?	
□ No □	Client doesn't know
Yes	Client refused
NON-CASH BENEFITS :	
Does the client have any non-cash benefits from any .	source?
Does the client have any non-cash benefits from any	source? Client doesn't know
□ No □	
□ No □ □ Yes □ HEALTH INSURANCE:	Client doesn't know
☐ No ☐ Yes ☐ HEALTH INSURANCE: Is the client covered by Health Insurance?	Client doesn't know
☐ No ☐ Yes ☐ ☐ Yes ☐ ☐ Yes ☐ ☐ Is the client covered by Health Insurance?	Client doesn't know Client refused
□ No □ □ Yes □ HEALTH INSURANCE: Is the client covered by Health Insurance? □ No □ No □ No	Client doesn't know Client refused Client doesn't know
No □ Yes □ HEALTH INSURANCE: Is the client covered by Health Insurance? □ No □ No □ Yes How much money do you have access to right now? (to determine if motel or rent is	Client doesn't know Client refused Client doesn't know
No Yes HEALTH INSURANCE: Is the client covered by Health Insurance? No Yes How much money do you have access to right now? (to determine if motel or rent is possible) Who do you usually call when you need help?: No	Client doesn't know Client refused Client doesn't know
No HEALTH INSURANCE: Is the client covered by Health Insurance? No Yes How much money do you have access to right now? (to determine if motel or rent is possible) Who do you usually call when you need help?: No I I I I I I I I I	Client doesn't know Client refused Client doesn't know Client refused
No □ Yes HEALTH INSURANCE: Is the client covered by Health Insurance? □ No □ Yes How much money do you have access to right now? (to determine if motel or rent is possible) Who do you usually call when you need help?: Can you contact him/her? □ Yes	Client doesn't know Client refused Client doesn't know Client refused

[IF YES TO THE ABOVE RESOURCE OPTIONS] I would like to provide you with the number to our information and referral line, where specialists may be able to help you with community resources. The number is 614-221-2255.

HOMELESS INFORMATION

Homelessness Primary Reason:	
Addiction	☐ Jail/Prison
☐ Divorce	Relationship Problems
☐ Domestic Violence	☐ Substandard Housing
☐ Evicted	☐ Unable to Pay Rent/Mortgage
Family/Personal Illness	Unemployment
Fire	Other:
Homelessness Secondary Reason:	
Addiction	☐ Jail/Prison
☐ Divorce	Relationship Problems
☐ Domestic Violence	☐ Substandard Housing
☐ Evicted	☐ Unable to Pay Rent/Mortgage
☐ Family/Personal Illness	Unemployment
Fire	Other:
☐ No Secondary Reason for Crisis	
Number of time the client has been homeless in the One time (this time)	times know
Total number of months the client has been homel	<u> </u>
One month or less (choose if this is the first time	<u> </u>
□ Between 2 and 12 months→ Enter the tot□ More than 12 months	al number of months:
Client doesn't know	
Client refused	
Now I have some questions I need to ask about you	ur ability to remain safe while in shelter tonight.
DISABLING CONDITION: Does the client have a disabling condition that is long-	torm and impairs their ability to live independently?
No	Client doesn't know
☐ Yes	Client refused

suc con	there any chronic medical conditions that you has diabetes, seizures, high blood pressure dition, or mental health condition for which you then to have run out of medication?	e, or a heart-related
[IF	YES] Do you have a mental health case mana	ager?
	[IF YES] Is she/he aware of the situation	??
	[IF No] Let me transfer you or call Netcar They do not provide shelter, but can link health services	
	you presently thinking about hurting yourse neone else?	elf or Yes No
	YES] Prior to assigning you to shelter, I need (614-276-2273) or you may present there you	I for you to be seen at Netcare. I can transfer you or call for urself? Their location is: 199 S. Central Ave.
BAG	CKGROUND CHECK	
	have to do a local check for sex offenses. Arender?	re you, or anyone in your household a registered sex
	Self	
	No	
	Other adult(s)	
ſIF `	YES] Sex Offense Classification:	
	Tier I	(Pre AWA) Habitual Sex Offender with Notification
	Tier II	☐ (Pre AWA) Sexual Predator
	Tier III	(Pre AWA) Aggravated Sexually Oriented Offense
	(Pre AWA) Sexually Oriented Offender	☐ (Pre AWA) Child Victim Offender
	(Pre AWA) Habitual Sex Offender w/o Notification	☐ (Pre AWA) Child Victim Predator
Are	you now or have you ever been subject to co	ommunity notification?
	Yes	Client Doesn't Know
	No	☐ Client Refused
		☐ Data Not Colected
Sex	offense involved a minor:	
	Yes	☐ Client Doesn't Know
	No	☐ Client Refused
		☐ Data Not Colected
Rac	kground check completed:	
Jac	/ / / /	☐ Local (free)
M	onth Day Year	☐ National (Paid)
	, 	Both (Local & National)

Background Check Notes:				
CONTACT RESOLUTION:				
No disposition: call incomplete/client	t did not		Need shelter tonight [single adults only]: waitlisted due to no homeless shelter space	
Need shelter tonight			Need shelter tonight: service restricted; referred to other option(s)	
Need shelter tonight: more appropriate served and/or prefer other shelter or option			Do not need shelter tonight: at-risk of literal homelessness within next 7 days	
Need shelter tonight: currently in she advised to remain there or call back discharged			Do not need shelter tonight: at-risk of literal homelessness in more than 7 days	
				_
Other shelter of residential referrals:				
Other service referrals:				
				_
If diverted, where will applicant stay tonight?:				
[IF IN NEED OF SHELTER & BEDS A and informs them.	VAILABLE] Hotli	ne identifies shelter the client is assigned	d to
Shelter Referred to:				
[IF IN NEED OF SHELTER & BEDS A waitlist and ask him/her to call back	ARE <u>NOT</u> A	VAILA ay if sl	BLE] Inform client he/she is being placed helter is still needed.	on a
Notes:				
NOIGS.				

HMIS Data: CPOA OH-503 CE Assessment Tool - 8 February 2019

8

Gladden Homeless Prevention Screening/Referral Tool

CSP#:						
SCREE	ENING DATE (e.g., 10/0	1/2015)				
	/					
APPLI	CANT HEAD OF HOUS	SEHOLD				
Г	First Name			Last Name		
	Address				Phone	
Are yo	u or any of your hous	ehold members a	veteran? Yes _	No		
HoH D	ate of Birth (e.g., 06/14/	1992)		Age		
	/ / /			7.gc		
OTHEF First I	R HOUSEHOLD MEMB	•	al page as needed) Name	Δ	ge	
111361	tunic .		- Italiic			
	HOUSEHOLD MONTHI					
SSI	SSDI	TANF	UE	Other		
OUDD	ENT HOUGING OFTER	TION & DIOK FOR	LITEDAL LION	IEL ECONECO		
	ENT HOUSING SITUATE u tell me about the pla				stay or is there s	omewhere else
-	rmally stay? If there's s		_		-	omewhere eise
Identif	y the primary place w	nere family is stavi	ng (check only	one):		
	Hotel or motel paid for	-		5,-		
	Staying or living in a fa			ouse		
	Staying or living in a fri					
	v landlord loads2 LL nam			Phono:		

	Rental by client, no ongoing housing subsidy	
	Rental by client, with HUD VASH subsidy	
	Rental by client, with other ongoing housing sub	sidy
Pas	st Due Amount Owed:	
		When does lease end?
		Phone:
	Permanent housing for formerly homeless perso	ons (e.g., CoC Program funded unit)
	Owned by client, no ongoing housing subsidy	
	Owned by client, with ongoing housing subsidy	
	Other (describe):	
	nhave to leave this place (or the place you nor what's causing you to have to leave? How long	mally stay)? YES NO N/A
dentify	y why the family must leave the primary place Court-ordered eviction notice to vacate rental un Formal written notice from landlord to vacate re	nit
	Written or verbal notice from family, friend or he	
	Insufficient resources to continue to pay for hote	
	Other (describe):	
By wha	at date must the applicant leave the primary	place they are staying:/
Risk for	r Literal Homelessness and Reason for Referi	ral:
'Summ	narize relevant information related to imminer	nt housing loss and <u>reason family is at risk of literal</u>
		ppropriate housing alternatives and resources to prevent litera
		nt current and historical housing stability, employment history,
inancio	ai narasnip, and any other contributing or rele	evant factors such as substance abuse, domestic violence, etc.)
Are yo	ou past due with electric? Yes No	. If yes, how much?
Are vo	ou past due with gas? Yes No . If w	yes, how much?
Were y	you on PIP? Yes No When?	
Gladde	en Staff Responsible for Screening/Refer	ral
Name:		
Signatu	ure:	
Date:		



CSP#	
------	--

Columbus/Franklin County Homeless Crisis Response System

Housing Assistance Screening Tool SINGLE ADULTS

PART 1: CLIENT INFORMATION

For Screener Use Only (please utilize information alrea	dy collected for intake/CSP):
CSP#	First Name, Last Name
Pre-Screening	·
Is client a Veteran?Yes* No	Client Doesn't Know/Refused
*If YES - STOP and COMPLETE PART 3.	
Rapid Re-Housing (RRH) Status:Currently lin	nked with a RRH provider?*
	RRH in last 90 days?
	RRH provider in last 12 months?
*If Currently Linked with RRH - STOP and COMPLETE	PART 3.
Has client been invited to submit a Vulnerability Assess *If YES - STOP and COMPLETE PART 3.	sment or to apply for USHS?Yes* No
Is the client currently linked (enrolled) with street outre	ach?Yes*No
*If YES – COMPLETE PART 2 . Contact street outreach p	program with the client.
	Yes No
Is the client currently pregnant?	Client Doesn't Know/Refused
Total household monthly income:	\$
Best way to contact client:	
Client's Email Address	Client Phone
Emergency Contact Name	Emergency Contact Phone/Email Address
Screener Information:	
Screener's Name:	
ociecne s Name.	
Screener Email Address	Agency Making Referral



CSP#_____

Columbus/Franklin County Homeless Crisis Response System

Housing Assistance Screening Tool SINGLE ADULTS

PART 2: CLIENT INTERVIEW

Screener Script:

"The following are a set of questions we ask everyone to better understand your housing needs and support you in obtaining safe and stable housing. Your responses will help us identify which re-housing services you may qualify for. We'll help you access any available assistance, but resources are very limited, and we ask that you continue to seek any other assistance and options available to you. Only shelter and rehousing staff will have access to your responses. Any response you provide is acceptable. You have the right to answer or refuse the questions below."

options available to you. Only shelter and rehe	nt you continue to seek any other assistance and ousing staff will have access to your responses. Any the right to answer or refuse the questions below."
1) Do you want to continue?	Yes No*
If NO, STOP. Remind client: Shelter residents must continue to active	ly seek safe, alternative housing to remain eligible for shelter.
Do you have any of the following serious health conditions? (check all that apply)	Which of these keep you from holding a job or living in stable housing? (i.e., it is "severe and persistent" and "disabling"?)
DiabetesCOPD/EmphysemaTuberculosisCancerPost-Traumatic Stress DisorderTraumatic Brain InjuryHepatitisLiver DiseaseHeart DiseasePhysical DisabilitySerious mental health conditionSerious mental health conditionSerious mental health conditionDrug and/or alcohol useOther:HIV+/AIDSDevelopmental Disability	Diagnosis: Diagnosis: Diagnosis: Diagnosis:
3) Have you experienced violence from an intimator or an adult you lived with in the last 6 months?a) If Yes, did this occur within the last 3 months.	Client doesn't know/refused
4) Do you have any felony arrests and, if so, how times have you been charged with a felony?5) Do you have any prior oxistions and, if so, how	many # of Felony Records
5) Do you have any prior evictions and, if so, how times have you been evicted?	many # of Prior Evictions



Columbus/Franklin County Homeless Crisis Response System

Housing Assistance Screening Tool SINGLE ADULTS

QUESTIONS 6-11 ARE FOR UNACCOMPANIED YOUTH AGE 18-24 ONLY. If client is 25 or older, STOP and COMPLETE PART 3.		
6) As a child or teen did you have any involvement with Child Protective Services (e.g., FCCS) or Juvenile Justice?	Yes No	
7) Do you identify as LGBTQIA+?	Yes No	
8) Have you ever lost stable housing because? (check all that apply) □ Differences in religious or cultural beliefs □ Conflicts around gender identity or sexual orientation □ Violence in the home □ Unhealthy or Abusive Relationship	Total:	_
9) Since becoming homeless, have you been exploited, attacked, beaten up or robbed?	Yes No	
Client may need additional explanation such as: "Exploited means tricked or forced to do things you don't want to do."		
10) Do you have a GED or High School Diploma?	Yes No	1
11) Would you be interested in services that help young people learn the Life Skills needed to transition to adulthood successfully?	Yes No	*
*If YES state to the client: "This will be taken into consideration <u>IF</u> youth-specific programs have openings"		
PART 3: NEXT STEP HOUSING ASSISTANCE Select the next step housing assistance offered to client based on above. Provide client with next step information and assistance. See HAST Guide for additional information and guidance. Client is a Veteran. Contact Veteran Coordinated Entry or Responsible Provider listed in CSP with the Veteran Non-Veterans: Client currently linked with a RRH provider. Contact YMCA RRH case manager/director assigned to your shelter. Client has invitation to submit a Vulnerability Assessment or to apply for USHS. Contact YMCA RRH case		
Client meets one or more of the following targeting criteria for Rapid Re-Housing assistance. Refer client YMCA RRH program. (check all that apply – only one required to be met to refer to YMCA RRH) Youth between ages 18-24 Client is currently pregnant Client has at least one severe and persistent disabling condition Client has two or more felony arrests Client has two or more prior evictions Client has at least two of the following: Victim of intimate partner/domestic violence in last 6 months No current household income (total household income is \$0) Prior felony arrest Prior eviction Client does not meet above and will be assisted with their IHSP by the following staff:	to	
Staff member name:		



CSP#_____

Columbus/Franklin County Homeless Crisis Response System

Housing Assistance Screening Tool: *FAMILIES*

PART 1: CLIENT INFORMATION

For Screener Use Only (please utilize information alread	dy collected for intake/CSP):
CSP#	First Name, Last Name
<u>Pre-Screening</u>	
Is client a Veteran?Yes* No	Client Doesn't Know/Refused
*If YES - STOP and COMPLETE PART 3.	
- · · · · · · · · · · · · · · · · · · ·	nked with a RRH provider?*
	RRH in last 90 days?
	RRH provider in last 12 months?
*If Currently Linked with RRH - STOP and COMPLETE	
Has client been invited to submit a Vulnerability Assess *If YES - STOP and COMPLETE PART 3.	ment or to apply for USHS?Yes* No
Is the client currently linked (enrolled) with street outrea	ach?Yes* No
*If YES - COMPLETE PART 2. Contact street outreach p	program with the client.
	Yes No
Is the client or a household member currently pregnant	?Client Doesn't Know/Refused
Total household monthly income:	\$
Families with minor children ONLY	
Number of minor children in the household:	
How many shelter entries in the past 3 years:	
	_
Best way to contact client:	
•	
Client's Email Address	Client Phone
Emergency Contact Name	Emergency Contact Phone/Email Address
Screener Information:	
Screener information.	
Screener's Name:	
	
0	According to the second
Screener Email Address	Agency Making Referral



CSP#

Columbus/Franklin County Homeless Crisis Response System

Housing Assistance Screening Tool: FAMILIES

PART 2: CLIENT INTERVIEW

Screener Script:

"The following are a set of questions we ask everyone to better understand your housing needs and support you in obtaining safe and stable housing. Your responses will help us identify which re-housing services you may qualify for. We'll help you access any available assistance, but resources are very limited, and we ask that you continue to seek any other assistance and options available to you. Only shelter and rehousing staff will have access to your responses. Any response you provide is acceptable. You have the right to answer or refuse the questions below."

•	options available to you. Only shelter and rehousing staff will have access to your responses. Any response you provide is acceptable. You have the right to answer or refuse the questions below."			
1)	Do you want to continue?		Yes No*	
If N	O, STOP. Remind client: Shelter residents must continue to actively so	ek safe, alternative housing	to remain eligible for shelter.	
2)	Do you have any of the following serious health conditions? (check all that apply)		p you from holding a job or living i.e., it is "severe and persistent"	
	DiabetesCOPD/EmphysemaTuberculosisCancerPost-Traumatic Stress DisorderTraumatic Brain InjuryHepatitisLiver DiseaseHeart DiseasePhysical DisabilitySerious mental health conditionDrug and/or alcohol useOther:HIV+/AIDSDevelopmental Disability			
3)	How many children with you have any of these se conditions?		# of children with a serious alth condition	
4)	Have you experienced violence from an intimate adult you lived with in the last 6 months?	partner or an ———————————————————————————————————	YesNo Client doesn't know/refused	
	a) If Yes, did this occur within the last 3 months		Yes No Client doesn't know/refused	
5)	Do you have any felony arrests and, if so, how managed with a felony?	ny times —	# of Felony Records	
6)	Do you have any prior evictions and, if so, how make you been evicted?	any times	# of Prior Evictions	
7)	Are you interested in job training or employment services?	support —	Yes No	



CSP#

Columbus/Franklin County Homeless Crisis Response System

Housing Assistance Screening Tool: *FAMILIES*

QUESTIONS 8-13 ARE FOR PARENTING YOUTH AGE 18-24 ONLY. If ANY member of the household is 25 or older, STOP and COMPLETE PART 3.	
8) As a child or teen did you have any involvement with Child Protective Services (e.g., FCCS) or Juvenile Justice?	Yes No
9) Do you identify as LGBTQIA+?	Yes No
10) Have you ever lost stable housing because? (check all that apply) Differences in religious or cultural beliefs Conflicts around gender identity or sexual orientation Violence in the home	Total:
□ Unhealthy or Abusive Relationship 11) Since becoming homeless, have you been exploited, attacked, beaten up or robbed?	Yes No
Client may need additional explanation such as: "Exploited means tricked or forced to do things you don't want to do."	
12) Do you have a GED or High School Diploma?	Yes No
13) Would you be interested in services that help young people learn the Life Skills needed to transition to adulthood successfully?	Yes*
*If YES state to the client: "This will be taken into consideration IF youth-specific programs have openings"	
and assistance. See HAST Guide for additional information and guidance. Client is a Veteran. Contact Veteran Coordinated Entry or Responsible Provider listed in CSP with the Vete ION-VETERANS: Client currently linked with a RRH provider. Contact Direct Housing/RRH provider.	eran.
Client has invitation to submit a Vulnerability Assessment or to apply for USHS. Contact provider assisting client with USHS.	5
Client meets one or more of the following targeting criteria for Rapid Re-Housing (Direct Housing) assistant Refer client to Direct Housing. (Check all that apply – only one required to be met to refer to Direct Housing. Youth head of household between ages 18-24 Client or other family member is currently pregnant. Client or other adult family member has at least one severe and persistent disabling condition. Client has two or more felony arrests. Client has two or more prior evictions. Client and/or other family member has at least two of the following: Victim of intimate partner/domestic violence in last 6 months. No current household income (total household income is \$0). Prior felony arrest. Prior eviction	ing)
Client does not meet above and will be assisted with their IHSP by the following staff. Still refer client to E Housing in the event Direct Housing has capacity and is able to assisted a non-targeted client.	Direct
Staff member name:	

CSP#

Unified Supportive Housing System (USHS) SEVERITY OF SERVICE NEEDS SCREENING INTERVIEW TOOL

Consent for Interview

With your permission, you will be asked some questions to determine if your service needs are a priority for Permanent Supportive Housing. Some things you should know before we begin: In this interview we will discuss your housing, health and service needs. All of the information shared today will be confidential and only authorized agencies will be able to access and review your information. □ Completing this screening does not guarantee placement in Permanent Supportive Housing. You may not get an immediate response to this assessment so please continue to work with us around potential housing options. ☐ If at any time, you feel uncomfortable or upset, you may ask me to take a break, stop or to skip a question. At the conclusion of this screening we will discuss next steps. Do you have any questions at this time? PLEASE SIGN BELOW YOUR INFORMED CONSENT TO BE INTERVIEWED AND SCREENED Your signature (or mark) below indicates that you have read (or been read) the information provided above and have gotten answers to your questions. Signature or Mark of Prospective Applicant Date Printed name of Prospective Applicant Interviewer's Printed Name Date

Time

Location

DOMAINS 1-3: Significant Challenges Or Functional Impairments, Including Any Physical, Mental, Developmental Or Behavioral Health Disabilities Regardless Of The Type Of Disability, Which Require A Significant Level Of Support In Order To Obtain or Maintain Permanent Housing (This Factor Focuses On The Level Of Support Needed And Is Not Based On Disability Type) Within the past five years, have you ever had to Refused leave an apartment, shelter program, or other place you were staying because of your health? Please tell me about that? 2. Do you use drugs or alcohol? Tell me, please, about Refused what and how often you use? П 3. Have you ever had an overdose? Refused П **4.** Have you ever spent so much of your income on Refused drugs or alcohol that you could not pay your rent or could not afford food? 5. Do you have significant challenges or health Refused conditions that make it hard to obtain and maintain housing? 6. What kinds of supports do you feel you need to live Refused on your own? What have other people told you that they think you need to be successful living on your own? 7. If there was space available in a program that Refused specifically assists people that live with HIV or AIDS, would that be of interest to you? **8.** Are there any medications that you are supposed to Refused be taking for a health condition that you are not П taking as prescribed? **9.** Were you diagnosed with a developmental disability Refused (physical, learning, language, or behavior) before the age of 18? Examples: ADHD, Autism, Cerebral Palsy, Hearing Loss, Intellectual Disability, Learning Disability, Vision impairment. **DOMAIN 4:** High Utilization of Crisis or Emergency Services to Meet Basic Needs,

Including But Not Limited to Emergency Rooms, Jails and Psychiatric Facilities

10. In the past 12 months how many times has 911
been called to assist you? What was going on with
you those times that led to 911 being called?

Refused

11. In the past six months, how many times have you taken an ambulance to the hospital? What conditions did the hospital treat you for?		Refused
 12. In the past six months, how many times have you used a crisis service, including Emergency rooms Police Jail or Suicide hotlines? 		Refused
13. In the past year, how many times have you hospitalized as an inpatient? What conditions were you treated for? When you were released, did you follow-up with a doctor like you were advised?		Refused
14. Have you been to Netcare 4 times in the past 30 days? Or have you been to Netcare 12 or more times in one year?		Refused
	AIN 5: Dividing the second of	
15. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?		Refused
16. Do you ever do things that may be considered to be risky, like trade sex for money, share needles, or spend time with people who mistreat you?		Refused
17. Has your current period of homelessness been caused by an experience of abuse or by any other trauma you have experienced?		Refused
18. Do you identify as LGBTQI? How has that impacted your experiences? Does it make you feel unsafe?		Refused
19. Have you experienced violence during your time homeless?		Refused
20. Have you been robbed, swindled, or taken advantage of financially? Do you give money to others?		Refused
21. Do you have a support system, such as friends, family, or other people you can count on?		Refused

	DMAIN 6: y to Illness or Death		
22. Do you currently have any serious chronic health conditions, such as cirrhosis of the liver, renal disease, diabetes or heart disease?	☐ YES (1 risk factor) ☐ NO	Refused	
23. Have you had more than three hospitalizations in the past three months?	☐ YES (1 risk factor) ☐ NO	Refused	
24. Do you have a life threatening condition?	☐ YES (1 risk factor) ☐ NO	Refused	
25. Are you over 60 years old?	☐ YES (1 risk factor) ☐ NO	Refused	
26. Have you suffered a very significant loss in the past year?	☐ YES (1 risk factor) ☐ NO	Refused	
DOMAIN 7: Barriers to Housing/Risk of Continued Homelessness			
27. Do you have steady income from work, a disability benefit or other regular source that could be enough to pay for housing?	☐ YES ☐ NO (1 risk factor)	Refused	
28. Have you ever been in jail, arrested, or accused of a crime or criminal activity (even if it wasn't true)?	☐ YES (1 risk factor) ☐ NO	Refused	
29. Have you had any evictions, been asked to leave or abandoned housing within the past seven years? How many times has this happened?	☐ 2 or More Evictions in the past seven years (1 risk factor) ☐ Less than 2 Evictions in the past seven years. ☐ No evictions (Go to Question 31)	Refused	
30. When was your last eviction?	☐ One Eviction within the past 12 months (1 risk factor)☐ No evictions within the past 12 months.		
31. Do you have any legal stuff going on right now that could result in you being locked up, have to pay fines, or make it more difficult to rent a place to live?	☐ YES (1 risk factor) ☐ NO	Refused	
32. Does your credit history include a judgment for debt to a landlord? Have you had a foreclosure or filed bankruptcy in the last 7 years?	☐ YES (1 risk factor) ☐ NO	Refused	
33. Does your criminal history include Arson, Placement on Sex Offender Registry, Production of Crystal Meth, Drug offenses or crimes against persons or property?	☐ YES (1 risk factor) ☐ NO	Refused	

34. Within the last year did you participate in a Rapid Rehousing Program? If you are/were in Rapid Rehousing, are/were you able to maintain housing independently after you exit/ed the program?	☐ YES; YES ☐ YES; NO (1 risk factor) ☐ NO; N/A	Refused
35. Have you ever been in Permanent Supportive Housing (PSH) and exited unsuccessfully?	☐ YES (1 risk factor) ☐ NO	Refused
	OMAIN 8: mmunity that are Based on Severity of Needs	
36. Are you between 18-24 years old?	☐ YES (1 risk factor) ☐ NO	Refused
37. Do you have legal custody of any minor children that will be living with you?	☐ YES (1 risk factor) ☐ NO	Refused
38. Are you currently pregnant?	☐ YES (1 risk factor) ☐ NO	Refused
39. Are there more than 6 people in your household?	☐ YES (1 risk factor) ☐ NO	Refused
40. Is there a person in your household besides you that has a significant disability?	☐ YES (1 risk factor) ☐ NO	Refused
41. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?	☐ YES ☐ NO (1 risk factor)	Refused
42. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting enough food and water on your own?	☐ YES ☐ NO (1 risk factor)	Refused
43. Do you identify as a racial or ethnic minority?	☐ YES (1 risk factor) ☐ NO	Refused
44. Before the age of 18 were you ever kicked out of or run away from a parent or guardian's home? Have you ever had to live on your own because you couldn't live with your caregiver?	☐ YES (1 risk factor) ☐ NO	Refused
45. Before the age of 18 were you placed, in foster or kinship care, or a group home?	☐ YES (1 risk factor) ☐ NO	Refused

CSP#:

Please Check Only One Box In This Section

Unified Supportive Housing System (USHS) SEVERITY OF SERVICE NEEDS SCREENING SUMMARY TOOL

Interviewer's Printed Name Date

DOMAIN 1: Physical Health

□ No Impairment

- No health complaints; appears well
- Would likely access medical care if needed
- Minor Or Temporary Health Problem(s)

Examples:

- Cast or splint but able to take care of daily activities
- Recovering from minor surgery and doing well with self-care
- Acute medical problem(s) such as a respiratory or skin infection but taking medication as prescribed
- □ Stable Significant Medical Or Physical Issue(s), Or Chronic Medical Condition(s) That Is Being Managed Examples:
 - Chronic but stable medical problems such as diabetes, emphysema, high blood pressure, heart disease, seizure disorder, Hepatitis, HIV disease, or cancer in remission AND compliant with medical care.
 - Deaf or Legally Blind
 - Over 60 years old w/o reported conditions but does not access care even for routine checkups
 - Uncomplicated pregnancy receiving regular pre-natal care
 - Sleep Apnea requiring C-PAP (w/access)
 - Cancer (stage 0-3) and receiving treatment

☐ Chronic Medical Condition(s) That Is Not Well-Managed Or Significant Physical Impairment(s)

Examples:

- Poorly managed diabetes or hyper-tension
- Undergoing treatment for Hepatitis C
- Needs home oxygen
- Liver failure
- Kidney failure requiring dialysis
- Sleep apnea requiring C-PAP (w/no access)
- Traumatic Brain Injury or history of Stroke with impairment
- HIV disease not adequately treated
- Severe arthritis affecting several joints
- High risk pregnancy
- Respiratory challenges: frequent asthma episodes; COPD, CHF, emphysema not well managed.
- Chronic and recurrent skin infections
- Advanced cancer
- Cognitive impairment but retains decision making capcity
- Incontinent of urine or stool
- Serious chronic condition AND not taking meds as prescribed or frequently loses them

☐ Totally Neglectful Of Physical Health, Extremely Impaired By Condition, Serious Health Condition(s) Examples:

- Not compliant for treatment for HIV or Cancer
- Terminal illness: expected to lead to death within 6 months
- Missing limb(s) with significant mobility or life activity challenges
- Moderate or advanced dementia, without decision making capacity case conf. required
- Obvious, alarming symptoms present without client's concern, such as signs of significant swelling, open wounds, shortness of breath, recurrent chest pain, unexplained weight loss, or chronic cough

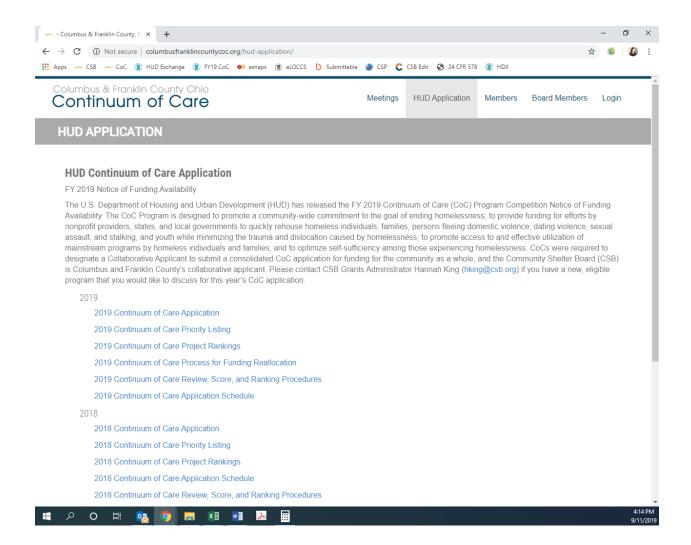
DOMAIN 2: Mental, Behavioral and Developmental Health No Mental, Behavioral and Developmental Health Issues Please Check Only One Box In This Reports no recent MH crises or admissions Not receiving MH treatment but exhibits no obvious signs or symptoms of MH issues No developmental issues. Mild Mental, Behavioral and Developmental Health Reports feeling down or anxious about situation or life circumstances (e.g. situational depression) Mild intellectual disability (functions in daily life, but slower than typical in developmental areas) Moderate Mental, Behavioral and Developmental Health Reported or observed MH issues (even if doesn't wish to talk about them) Reports having MH care connection already in place Taking any psychiatric medications as prescribed Moderate intellectual disability (noticeable developmental delays, can self-care) High Mental, Behavioral and Developmental Health Serious MH with tenuous service engagement May be non-compliant with or resistant to MH medications Denies interest in recommended MH services Severe intellectual disability (needs direct supervision, can learn very simple self-care) Severe Mental, Behavioral and Developmental Health No connection to needed MH services Extreme MH symptoms that impair functioning (e.g. talking to self, severe delusions/paranoia, fearful/phobic, extreme depressed or manic mood) No insight regarding serious Mental Illness Profound intellectual disability (requires close supervision, not capable of independent living) -Case Conf. Required DOMAIN 3: Substance Use No Or Non- Problematic Substance Use No substance use or strictly social use that has no negative impact on level of functioning. Mild Substance Use Sporadic use of substances not obviously affecting level of functioning Acknowledges substance use Still able to meet basic needs most of the time **Moderate Substance Use** Please Check Only One 90 to 180 days into addiction recovery Chemical Dependency program participation w/o any follow-up care Individual expressed concern about relapse risk or current substance use impairs ability to meet Has some support available for substance use issues but may not be actively involved Use impairs progress in goals (e.g., binge use) **High Substance Use** In first 90 days of CD treatment or addiction recovery Still enmeshed in alcohol/drug using social group High relapse potential or use obviously impacts function in many areas, (e.g. keeping appointments, self-care, interactions with others, meeting basic needs) Not interested in support for substance use issues at this time (Pre-contemplative or low insight) Severe Substance Use Active addiction with little or no interest in CD treatment involvement Obvious deterioration in functioning (e.g. physical or mental decline due to substance use) Severe symptoms of both substance use & mental illness Low or no insight into substance use issues Clear cognitive damage due to substances No engagement with available substance use support services despite obvious need. Continued use despite previous overdose

Frequent encounters with police, legal system or crisis services due to substance use

Including But Not Limited to Emergency Rooms, Jails, and Psychiatric Facilities No Utilization No crisis services have been used, or used in normal or appropriate situations, such as injuries in auto accident (not DUI) or dehydration from the flu Please Check Only One Mild Utilization **Box In This Section** Crisis services have been used infrequently but for potentially preventable situations (such as injuries sustained in a DUI) Use of services did not result in arrest, hospital admission or probate Moderate Utilization Crisis services have been used at least 3 times in the past year, resulting in arrest, probate or hospital admission at least once Individual would likely not have been at imminent risk of harming self or others if crisis services had not responded **High Utilization** Crisis services have been utilized 4 or more times in the past year, resulting in arrests, probate and/or hospital admissions. If crisis services had not responded, individual or others may have been at risk of harm Severe Utilization Frequent (at least monthly) use of crisis services If not for crisis response, individual or others likely would not have survived on one or more occasions. DOMAIN 5: Vulnerability to Victimization No Evidence Of Vulnerability Examples: Strong survival skills Capable of networking and self-advocacy Knows where to go and how to get there Needs no prompting regarding safe behavior **Evidence Of Mild Vulnerability** Examples: Has some survival skills Is occasionally taken advantage of (e.g. friends only present on paydays) Needs some assistance in recognizing unsafe behaviors and willing to talk about them **Evidence Of Moderate Vulnerability** Examples: Is frequently in dangerous situations Dependent on detrimental social network Communicates some fears about people or situations Reports being taken advantage of Please Check Only One **Evidence Of High Vulnerability** Examples: Is a loner and lacks "street smarts" **Box In This Section** Possessions often stolen Lacks social protection; presents with fearful, childlike or helpless demeanor Has marked difficulty understanding unsafe behaviors Is or was recently a DV victim May trade sex for money or drugs **Evidence Of Severe Vulnerability** Examples: Easily draws predators; vulnerable to exploitation Has been victimized regularly (e.g. physical assault, robbery, sexual assault) Often opts for the street to shelters No insight regarding dangerous behavior (e.g. solicitation of sex/drugs) Clear disregard for personal safety (e.g. walks into traffic)

DOMAIN 4: High Utilization of Crisis or Emergency Services to Meet Basic Needs,

	DOMAIN 6: Vulnerability to Illness or Death
> = 5	☐ Has none of the identified risk factors
Please Check Only One Box in this Section	☐ Has 1 of the identified risk factors
Please Check (One Bo this Se	☐ Has 2 of the identified risk factors
his his	☐ Has 3 of the identified risk factors
E00#	☐ Has 4 or more of the identified risk factors
	DOMAIN 7: Barriers to Housing/Risk of Continued Homelessness
≥ - 5	☐ Has none of the identified risk factors
E X E	☐ Has 1 of the identified risk factors
8 3 3 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	☐ Has 2 of the identified risk factors
Please Check Only One Box in this Section	☐ Has 3 of the identified risk factors
	☐ Has 4 or more of the identified risk factors
D	OOMAIN 8: Other Factors Determined By the Community That Are Based on Severity
	of Needs
골 = B	☐ Has none of the identified risk factors
Please Check Only One Box in this Section	☐ Has 1 of the identified risk factors
Please Check (One Bo this Se	☐ Has 2 of the identified risk factors ☐ Has 3 of the identified risk factors
불용증물	
	Has 4 or more of the identified risk factors
	CASE CONFERENCING REQUEST
If you would	d like to have a case conference for your client due to barriers not captured in this assessment please explain briefly
	below. Your request will be forwarded to Erin Maus, CSB System Manager.



Hannah King

From: Hannah King

Sent: Wednesday, September 11, 2019 4:13 PM

To: Alex Dull; Alex Murphy; Amanda Frankl; Andrea Ropp; April Steffy; Bart Henning; Brittani Perdue;

Jennifer Sharma; Joan Deever; Judy Peterson; Kelly Browning; Kim Eberst; Krista Edwards; Laura Brenner; Lianna Barbu; 'Louise Gooch'; Lynda Leclerc; Marc Otte; Marsha Zimmerman; Melinda Robbins; Nichole Goodman; Nick Winslow; Nina Santarelli-Griffin; Noel Welsh; Peggy Anderson; Ryan Pickut; Sanleda Morgan; Scott Jackson; Shanda McJunkins; Sherry Inskeep; Sue Darby; Susan Reamsnyder; Taylor Keating;

'Teresa Black'; 'Trey Haddox, MSW, LSW'; Thelma Young; Tiana Purvis MSW, LISW-S; 'Tina Patterson';

'Christina Phalen'; Colleen Bain; De Andree Nekoranec; 'Heather Notter'; Jeff Carter; 'Jennifer Gulley';

'Trudy Elder'; Valerie Henthorn; Wilhelmina Spinner

Cc: Heather Notter; Tom Albanese; Lianna Barbu
Subject: Project Ranking for the FY19 CoC Application

Attachments: FY19 CoC Prioritization Options.pdf; Scoring and Ranking_final_Option 1_ledger.pdf

Good afternoon,

Thank you for submitting Project Applications for the FY19 CoC competition. The CoC Board met on September 10 to review the FY19 CoC Application and rank Project Applications according to the attached 2019 CoC Review, Score, and Ranking Procedures.

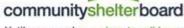
Please see attached for the CoC Board's ranking recommendations. No projects were rejected or reduced.

The ranking is also posted on the CoC website here: http://www.columbusfranklincountycoc.org/hud-application/. Please let us know if you have any questions.

Thanks,

Hannah

Hannah King Grants Administrator



Until everyone has a place to call home

Community Shelter Board 355 E. Campus View Blvd., Suite 250 Columbus, OH 43235 614-715-2552 www.csb.org



Columbus and Franklin County Continuum of Care (OH-503) 2019 CoC Review, Score, and Ranking Procedures

Date CoC Competition Opened: 7/3/19

Date e-snaps Opened: 7/9/19

Date CoC Application due to HUD: 9/30/19

Columbus/Franklin County Annual Renewal Demand (ARD): \$13,179,482

I. 2019 HUD Funding Available

Tier 1	\$12,444,838
Tier 2 (including Bonus Funding)	\$1,393,619
Bonus Funding	\$658,974
DV Bonus Funding	\$659,772
CoC Planning Funding	\$395,384
UFA Funding	\$395,384

II. Priority Guideline

The following **Priority Guideline** will be used, while also applying the scoring process detailed below:

Tier 1:

- 1. New or reallocated projects renewing for the first time
- 2. Renewal PSH, RRH, and TH for youth
- 3. New PSH through reallocation or bonus for 100% CH
- 4. New RRH through reallocation or bonus
- 5. SSO for CPOA
- 6. Renewal HMIS

Tier 2:

- 1. Renewal PSH, RRH, and TH for youth
- 2. New PSH through reallocation or bonus for 100% CH
- 3. New RRH through reallocation or bonus
- 4. SSO for CPOA



III. Columbus and Franklin County CoC Scoring Process

Each of the projects renewing CoC funding will be awarded a score using the scoring process below:

Renewal projects	Points Available	Description
Program Evaluation ranking		HUD emphasizes performance of funded programs.
High (meets 75% or more of	9	The latest program evaluation available (FY2019)
measured outcomes and outputs)		evaluates each project based on its performance for
Medium (meets at least 50% but	5	the period 7/1/2018 - 12/31/2018. Program
less than 75% of measured		Evaluation rankings are determined by measuring
outcomes and outputs)		outputs and outcomes inclusive of Households
Low/Not rated (meets less than	1	Served, Successful Housing Outcomes based on
50% of measured outcomes and		destination at exit, Housing Stability, Occupancy,
outputs)		Recidivism, Change in Income and annual Program
		Review and Certification to confirm compliance with
		HUD and local regulations. Participant Eligibility for
		permanent supportive housing is ensured and
		enforced via the Unified Supportive Housing System
		and, therefore, is not incorporated into the Program
		Evaluation. The Program Performance Measurement
		and Program Performance Standards sections of this
		document detail the performance ranking.
Usage of HUD grant funds		HUD emphasizes effective utilization of funds.
100% funds used	10	Programs are scored based on the total grant
80-99% funds used	8	amount and the amount that was drawn down from
60-79% funds used	5	HUD for the most recent closed grant cycle
40-59% funds used	2	(6/30/2019).
0-39% funds used	0	
Maximum possible points	19	
Minimum possible points	1	

IV. Columbus and Franklin County CoC Program Evaluation Elements

Each of the projects renewing their CoC funding will have their performance evaluated considering the metrics below, distinct based on the project type.

Supportive Housing

PSH - Permanent Supportive Housing; TH = Transitional Housing;

Ends	Measurement	Annual Metrics
Efficient number of households served	Households served (#)	Set based on prior year(s) attainment and program capacity.
Access to resources/services to move to and stabilize housing	Housing Stability	At least standard below or greater if prior year(s) achievement was greater
		At least 12 months for PSH (goal to be set not to exceed 24 months,



Ends	Measurement	Annual Metrics
		actual attainment may be greater than goal)
		Up to 4 months for TH
	Housing Affordability at Exit (%) (PSH only)	At least 50% of successful households have their housing affordability ratio, measured as cost of housing (rent and utilities) divided by the household's income at exit, lower than 50%. (Monitored only.)
Basic needs met in a non-congregate environment	Successful housing outcomes (%)	At least 90% successful housing outcomes for PSH and 77% successful housing outcomes for TH.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
	Successful housing exits (%)	At least 50% of exits are successful
	(PSH only)	housing outcomes.
Not re-enter the emergency shelter system	Exit to Homelessness (%)	<10% of those who obtain housing will return to homelessness within 180 days of exit.
Efficient and effective use of a pool of community resources	Cost per household	Cost per household will be consistent with budget. Evaluated annually and presented to the COC.
	Cost per unit	Cost per unit will be consistent with budget. Evaluated annually and presented to the COC.
	Program Occupancy Rate (%)	Full occupancy (>95%).
		For rental assistance units the occupancy goal is 100%.
	Turnover Rate (%) (PSH only)	Set based on prior year(s) attainment, an annual 20% turnover rate is desirable. (Monitored only.)
	Pass program certification	Provide access to resources and services to end homelessness.
CoC or HUD Standards	Negative Reason for leaving (%)	Less than 20% leave for non- compliance or disagreement with rules
	Increase in cash income, other than employment, from entry to exit or end of reporting period (%)	At least 30% of adults will increase income from other sources than employment from entry to exit or end of reporting period.
	Increase in income from employment, from entry to exit or end of reporting	At least 15% of adults will have increased employment income from



Ends	Measurement	Annual Metrics
	period (%)	entry to exit or end of reporting period.

Rapid Re-housing Program

Households served (#)	Set based on program capacity, prior
	year(s) attainment and funds available.
New households served (#)	Set based on program capacity, prior year(s) attainment and funds available.
Average length of participation	Not to exceed standard below:
	100 days for all family programs except J2H
	90 days for the single adult RRH program
	180 days for J2H
Usage of CSB Direct Client assistance (\$)	Average DCA amount will be consistent with prior performance and/or program design.
Usage of CSB Direct Client Assistance (%)	% of households that receive CSB DCA will be consistent with prior performance and/or program design.
Average length of shelter stay	Average stay in Emergency Shelter not to exceed: • 15 days for families • 23 days for single adults (calculated from the date of program entry to shelter exit).
Housing Affordability at Exit (%) (Family programs only)	At least 50% of successful households have their housing affordability ratio, measured as cost of housing (rent and utilities) divided by the household's income at exit, lower than 50%.
Increase in cash income, other than employment, from entry to exit or end of reporting period (%) (J2H only)	At least 30% of adults will increase income from other sources than employment from entry to exit or end of reporting period.
Increase in income from employment, from entry to exit or end of reporting period (%) (J2H only)	At least 15% of adults will have increased employment income from entry to exit or end of reporting period.
Successful housing outcome (%)	At least 90% successful housing outcomes for families and 70% for single adults exiting the RRH Program.
	Average length of participation Usage of CSB Direct Client assistance (\$) Usage of CSB Direct Client Assistance (%) Average length of shelter stay Housing Affordability at Exit (%) (Family programs only) Increase in cash income, other than employment, from entry to exit or end of reporting period (%) (J2H only) Increase in income from employment, from entry to exit or end of reporting period (%) (J2H only)



Ends	Measurement	Annual Metrics
		At least 33% successful housing outcomes for single adults exiting Tier 2 emergency shelters (RRH single adult program only).
	Successful housing outcome (#)	Calculated based on the Successful housing outcomes % measurement.
Not re-enter the emergency shelter system	Recidivism (%)	<10% of those who obtain housing will return to homelessness within 180 days of program exit.
	Movement (%) (RRH single adult program only)	<15% of clients served who exit the emergency shelter will immediately reenter another shelter. (Monitored only)
	Average Number of Service Instances (RRH single adult program only)	Average number of shelter stays per distinct clients served within 12 months. Not to exceed 2.3.
Efficient and effective use of a pool of community resources	Cost per household	Cost per household will be consistent with budget. Evaluated annually and presented to the COC.
	Pass program certification	Provide resources and services to end homelessness.

V. Columbus and Franklin County CoC Ranking process

The CoC Board and CoC will review a number of ranking options each year, detailed below. The CoC will analyze each option and discuss which option fits better for the CoC with each CoC application cycle. The CoC will review the option proposed by the CoC Board and will give final approval.

Below are listed the general ranking guidelines.

- (Under Tier 1 ranking, 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.
- The Priority Guideline, any HUD prioritization criteria and, all else equal, the funding impact on the entire CoC 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 (including first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, 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 CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.
- All other projects are listed in Tier 2, in the order of the Priority Guidelines and their score.
- ∠ List reallocation projects in Tier 2 (unless gap permits Tier 1).

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

- List all renewal projects (including first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, 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, CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.
- All other projects are listed in Tier II, in the order of the Priority Guidelines and their score.

Option 3 (descending performance based, prioritize any reallocations)

- List all renewal projects in the order of their performance (HIGH, MEDIUM, LOW) and Priority Guidelines, (including 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, CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.
- Projects rated as "LOW" performers based on the FY2019 Program Evaluation are listed in Tier 2 in the order of Priority Guidelines (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, CoC level funding amount (less funding is risked) will be moved last.

Option 4 (descending score based, new project in Tier 1)

- List all renewal projects (including first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, up to Tier 1 amount or closest amount less the amount allocated for the next bullet.
- Capture one new project 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, CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.
- 〈 All other projects are listed in Tier II, in the order of the Priority Guidelines and their score.

Option 5 (spread the cuts across all programs) – WILL NOT BE USED FOR 2019

- List all renewal projects (include first time renewals and HMIS project as detailed above) in the order of their scoring.
- List reallocation project(s) in Tier 1, after all renewal projects.



Apply the HUD published funding decrease (amount at risk in Tier 2) to all renewal and reallocation projects, by decreasing funding across the board, by a calculated percentage.

Option 6 (spread the cuts across all programs that scored low) - WILL NOT BE USED FOR 2019

- List all renewal projects (include first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, up to Tier 1 amount or closest amount.
- ∠ List reallocation project(s) in Tier 1, after all renewal projects.
- 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.

VI. Program Performance Measurement

Program performance outcome goals are compared with actual performance to determine consistency with CSB, CoC, or HUD standards. For outcome definitions and methodologies, please see the Appendix of the Annual Program Evaluation or the Program Methodology document posted on www.csb.org.

Each performance goal is assessed as achieved (Yes), not achieved (No), or not applicable (N/A). *Achieved Goal* is defined as 90% or better of a numerical goal or within 5 percentage points of a percentage goal, except where a lesser or greater value than this variance also indicates an achieved goal (e.g. Average Length of Stay goal was met if actual achievement is 105% or less of goal). HUD performance goals do not allow for this variance, they are fixed goals. *Not Applicable* is assigned when a performance goal was not assigned; the reason for this is explained in the footnote for the respective program.

Each program is assigned a performance rating¹ of High, Medium, or Low as determined by overall program achievement of performance outcomes for the evaluation period. Ratings are based on the following:

Rating Achievement of Program Outcome Measure 2

High achieve at least 75% of the measured outcomes and at least one of the

successful housing outcomes (either number or percentage outcome)

Medium achieve at least 50% but less than 75% of the measured outcomes

Low achieve less than 50% of the measured outcomes

Programs rated as "Low" or experiencing long-standing and/or serious program issues and/or systemic agency concerns will be handled by CSB through a Quality Improvement Intervention (QII) process. This 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. If the agency and/or CSB find that the QII process is not working, either may refer the concerns/issues to the CoC Board for handling (if the program is solely funded by HUD and not CSB). The provider will be given an opportunity to present its case, if the CoC Board decision is being appealed, to the CoC before a final decision is made by the CoC.

¹ In some instances, the program was too new to evaluate; therefore, a performance rating was not assigned.

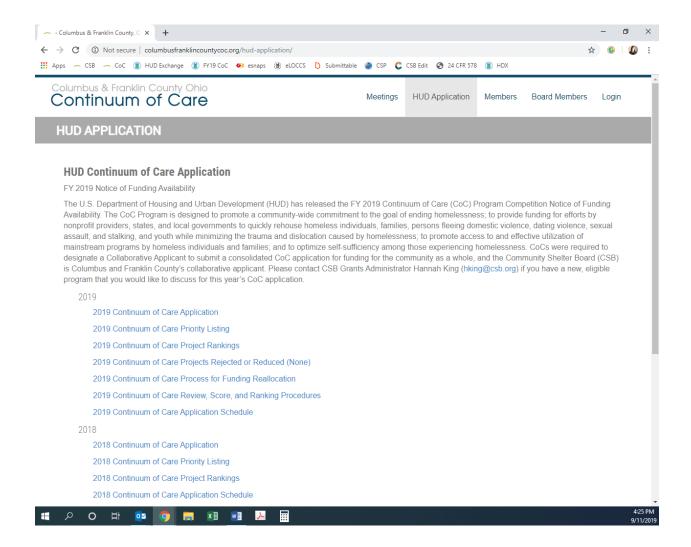
² If serious and persistent program non-performance issues existed prior to evaluation, then the program was assigned a lower rating than what its program achievement of performance outcomes would otherwise warrant.



For interim (quarterly) reports, programs which meet less than one-half of measured outcome goals will be considered a "program of concern".

2019 Coc Application Option 1

•	Project Name	Grant Number	Total ARA	Cumulative	*	Most recent closed HUD Grant Amount	Amount Expended Per CSB Records	Balance	6 of HUD Grant Amount Spent	Usage Points	FY2018 Program Evaluation Rating	Evaluation Points	Total Points Usage Points + Evaluation Points			Town of the state		Andrea (a)	The state of the s	Strong of Particular	Strong (a)	No. of the state o	The state of the s	Total Control of Contr	A Republic Control of the Control of	No. of Street,	A Composition of the Composition		
1	CHN 2018 Marsh Brook Place and TRA II		\$413,734	\$413,734	3%	\$156,436	\$23,125	\$133,311	14.8%	0	N/A	N/A	N/A	1															
2	/MCA 2018 DV RRH	OH0617U5E031800	\$682,054	\$1,095,788	8%	0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2															
3	/MCA 2018 Isaiah Project	OH0075U5E031808	\$1,863,757	\$2,959,545	22%	\$2,046,074	\$1,824,578	\$221,496	89.2%	8	N/A	N/A	N/A	3	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	N/A	Achieved	N/A	Achieved	N/A	N/A
4	CHN 2018 Briggsdale II	OH0537U5E031802	\$393,109	\$3,352,654	25%	\$383,145	\$294,898	\$88,247	77.0%	5	N/A	N/A	N/A	4	N/A	N/A	N/A N	I/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
5	CHN 2018 Briggsdale Apartments	OH0078U5E031811	\$237,393	\$3,590,047	27%	\$184,791	\$184,791	\$0	100.0%	10	High	9	19	5	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved
6	CHN 2018 Inglewood Court	OH0410U5E031806	\$60,247	\$3,650,294	28%	\$106,447	\$106,447	\$0	100.0%	10	High	9	19	6	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Not Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
7	Huckleberry House 2018 Transitional Living Program	OH0099U5E031811	\$232,135	\$3,882,429		\$275,869	\$275,869		100.0%	10	High	9	19	7	Achieved	N/A	Achieved N		N/A	Achieved	Achieved		N/A	Achieved	Not Achieved	Achieved	Achieved	Not Achieved	Achieved
8	Van Buren Village PSH	OH0470U5E031802	\$64,200	\$3,946,629		\$64,200	\$64,200		100.0%	10	High	9	19	8	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved
9		OH0094U5E031811	\$519,150	\$4,465,779	34%	\$508,099	\$508,099		100.0%	10	High	9	19	9	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
10	/WCA 2018 Wings	OH0102U5E031811	\$257,848	\$4,723,627	36%	\$436,812	\$436,812	\$0	100.0%	10	High	9	19	10	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
11	CHN 2018 East Fifth Avenue Apartments	OH0088U5E031811	\$232,914	\$4,956,541		\$267,014		\$0	100.0%	10	High	9	19	11	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
12	CHN 2018 Southpoint Place Apartments	OH0281U5E031810	\$381,136	\$5,337,677	40%	\$388,478	\$388,478	\$0	100.0%	10	High	9	19	12	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Not Achieved	N/A	Achieved	Achieved	Achieved	Not Achieved	Achieved	Achieved
13	CHN 2018 Terrace Place Apartments	OH0092U5E031811	\$135,549	\$5,473,226	42%	\$209,749			99.9%	10	High	9	19	13	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved
14	CHN 2018 Wilson Apartments	OH0101U5E031811	\$66,279	\$5,539,505	42%	\$50,479	\$50,479	\$0	100.0%	10	High	9	19	14	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	Not Achieved	Achieved	Achieved	Not Achieved	Achieved	Achieved	Achieved
15	NCR 2018 Commons at Grant	OH0085U5E031811	\$172,376	\$5,711,881	43%	\$297,024			100.0%	10	High	9	19	15	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Not Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
16	NCR 2018 Commons at Buckingham	OH0394U5E031808	\$172,375	\$5,884,256		\$200,192	\$200,187	\$5	100.0%	10	High	9	19	16	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved
17	NCR 2018 Commons at Third	OH0372U5E031807	\$172,375	\$6,056,631		\$187,490		\$27	100.0%	10	High	9	19	17	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Not Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
18	CHN 2018 Parsons Avenue Apartments	OH0093U5E031811	\$256,811	\$6,313,442	48%	\$214,711	\$212,875	\$1.836	99.1%	8	High	9	17	18	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Not Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved
19	Equitas Health 2018 PSH	OH0080U5E031811	\$805,599	\$7,119,041		\$653,895	\$648,780		99.2%	8	High	9	17	19	Achieved	N/A	Achieved N	Í/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
20	CHN 2018 Community ACT	OH0086U5E031811	\$280,908	\$7,399,949		\$322.826			97.9%	8	High	9	17	20	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	N/A	Achieved	Not Achieved	Achieved	Achieved	Not Achieved
21	CHN 2018 Family Homes	OH0082U5E031811	\$13,310	\$7,413,259	56%	\$1,910	\$1.641	\$269	85.9%	8	High	9	17	21	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Not Achieved	Not Achieved
22	Maryhaven 2018 Commons at Chantry	OH0090U5E031811	\$183,196	\$7,596,455	58%	\$183,196	\$153,743	\$29,453	83.9%	8	High	9	17	22	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved
23	/MCA 2018 SRA	OH0445U5E031806	\$211,178	\$7,807,633	59%	\$190,706	\$187.545	\$3.161	98.3%	8	High	9	17	23	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Achieved	Achieved	Achieved	Not Achieved	Not Achieved
24	CHN 2018 Safe Haven	OH0097U5E031811	\$188,951	\$7,996,584		\$175,251	\$175,251	\$0	100.0%	10	Medium	5	15	24	Not achieved	N/A	Achieved N	I/A	N/A	Not Achieved	Achieved	Not Achieved	N/A	Achieved	Achieved	Not Achieved	Achieved	Achieved	Not Achieved
25	Alvis. Inc. 2018 Amethyst Program (SRA)	OH0076U5E031811	\$570,143	\$8,566,727		\$315,143			98.8%	8	Medium	5	13	25	Not achieved	N/A	Achieved N	I/A	N/A	Not Achieved	Achieved	Achieved	N/A	Achieved	Not Achieved	Achieved	Achieved	Achieved	Achieved
26	THN 2018 Rebuilding Lives PACT Team Initiative		\$746,621	\$9,313,348	71%	\$707.588	\$699.621	\$7.967	98.9%	8	Medium	5	13	26	Not achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Not Achieved	Not Achieved	Achieved	Achieved	Not Achieved
27	CHN 2018 TRA	OH0084U5E031811	\$1,419,351	\$10,732,699	81%	\$1.341.529	\$1,327,397	\$14.132	98.9%	8	Medium	5	13	27	Not achieved	N/A	Achieved N	Í/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved	Not Achieved	Not Achieved	Not Achieved	Achieved	Not Achieved
28	FSA 2018 Job2Housing	OH0074U5E031807	\$299,837	\$11.032.536		\$244,017	\$217,848		89.3%	8	Medium	5	13	28	Achieved	Not Achieved	N/A N	lot Achieved	Achieved	Not Achieved	Achieved	N/A	Not Achieved	Not Achieved	N/A	Achieved	N/A	Not Achieved	Achieved
29	CHN 2018 Leasing SHP Program	OH0312U5E031807	\$238,081	\$11,270,617	86%	\$253,550	\$252,427	\$1.123	99.6%	10	Low	1	11	29	Achieved	N/A	Achieved N	I/A	N/A	Achieved	Achieved	N/A	N/A	Not Achieved	Not Achieved	Not Achieved	N/A	Not Achieved	Not Achieved
30	CSB 2018 HMIS/CSP	OH0087U5E031811	\$164,070	\$11,434,687		\$257,270	\$257,270		N/A	N/A	N/A	N/A	N/A	30		1		•	1				T'				1		1 1 1
31	CHN 2018 SRA	OH0083U5E031811	\$1,744,795			\$1.384,943	\$1,360,783	\$24.160	98.3%	8	Low	1	9	31	82 Not achieved	N/A	Achieved N	I/A	N/A	Not Achieved	Achieved	Not Achieved	N/A	Achieved	Not Achieved	Not Achieved	Achieved	Achieved	Not Achieved
NEW	Homefull Pivot PSH		\$462,000			12,00 1,0 10	***	V= 1,1=00						32	64			,					-						
NEW	Homefull Focus RRH		\$196,974											33	55						1								
NEW	MCA RRH DV Expansion		\$659,772											34		i				1			1		1				
32	CoC Planning		\$395,384			\$329,319	\$329,319	\$0																					
33	CoC HEA		\$395,384			\$219.546	\$219.546	\$0								i				1			1		1				
Optic		ARD	\$13,179,482		FY19	\$12.557.699		\$567,402.2	018 Score		168.75								-		-				!				-
- Cpuc	List all renewal projects in the order of their scoring	Tier 1 (94%)	\$12,444,838			,,	,,0,		core ratio		42																		
,	List projects that don't fit in Tier 1 in Tier 2	Tier 2	\$1,393,619			Straddling Proje	ect amount in 1		lousing Fin	st	10																		
,		Bonus	\$658,974	\$734,644		Straddling Proje																							
		CoC Plan and UFA	\$790,769	1				-																					



Project Rejection-Reduction Notification
OH-503 Columbus/Franklin County Continuum of Care did not reject or reduce any projects.

Hannah King

From: Hannah King

Sent: Wednesday, September 11, 2019 4:13 PM

To: Alex Dull; Alex Murphy; Amanda Frankl; Andrea Ropp; April Steffy; Bart Henning; Brittani Perdue;

Jennifer Sharma; Joan Deever; Judy Peterson; Kelly Browning; Kim Eberst; Krista Edwards; Laura Brenner; Lianna Barbu; 'Louise Gooch'; Lynda Leclerc; Marc Otte; Marsha Zimmerman; Melinda Robbins; Nichole Goodman; Nick Winslow; Nina Santarelli-Griffin; Noel Welsh; Peggy Anderson; Ryan Pickut; Sanleda Morgan; Scott Jackson; Shanda McJunkins; Sherry Inskeep; Sue Darby; Susan Reamsnyder; Taylor Keating;

'Teresa Black'; 'Trey Haddox, MSW, LSW'; Thelma Young; Tiana Purvis MSW, LISW-S; 'Tina Patterson';

'Christina Phalen'; Colleen Bain; De Andree Nekoranec; 'Heather Notter'; Jeff Carter; 'Jennifer Gulley';

'Trudy Elder'; Valerie Henthorn; Wilhelmina Spinner

Cc: Heather Notter; Tom Albanese; Lianna Barbu **Subject:** Project Ranking for the FY19 CoC Application

Attachments: FY19 CoC Prioritization Options.pdf; Scoring and Ranking_final_Option 1_ledger.pdf

Good afternoon,

Thank you for submitting Project Applications for the FY19 CoC competition. The CoC Board met on September 10 to review the FY19 CoC Application and rank Project Applications according to the attached 2019 CoC Review, Score, and Ranking Procedures.

Please see attached for the CoC Board's ranking recommendations. No projects were rejected or reduced.

The ranking is also posted on the CoC website here: http://www.columbusfranklincountycoc.org/hud-application/. Please let us know if you have any questions.

Thanks,

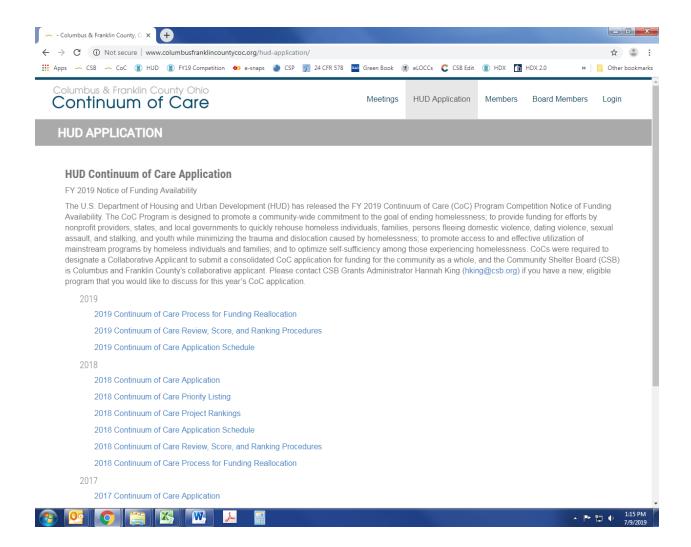
Hannah

Hannah King Grants Administrator



Until everyone has a place to call home

Community Shelter Board 355 E. Campus View Blvd., Suite 250 Columbus, OH 43235 614-715-2552 www.csb.org



Columbus & Franklin County Continuum of Care 2019 HUD Application Schedule

Activity 2019 HUD NOFA Released	Timing 7/3/19	Detail Announced via HUD listsery & posted on HUD
2019 HOD NOTA Neleased	17 37 13	Exchange
HUD Application schedule and guidance released	7/8/19	CSB establishes project review & application schedule; releases to applicants via email
Application available in e-snaps	week of 7/8/19	All applications must be completed in e-snaps using guidance provided by CSB
Draft Project Applications (new and renewal) due to CSB	8/13/19	All applications due to CSB by 5pm via email
CSB review	8/13/19 - 8/27/19	CSB reviews draft applications and works with applicants to finalize
Final Project Applications due	8/27/19	Final corrected applications due to CSB via e- snaps
CoC Board Meeting Packet	9/3/19	Disseminate meeting packet to CoC Board
CoC Board Meeting	9/10/19	Consider CoC Consolidated Application and project prioritization
Notify CoC Applicants	9/11/19	Notify CoC Applicants of project prioritization
Post to CoC Website	9/11/19	Post project prioritization to CoC website
CoC Meeting Packet	9/16/19	Disseminate meeting packet to CoC
CoC Meeting	9/23/19	Consider CoC Consolidated Application and project prioritization
Submit Application	9/27/19	CSB submits consolidated application electronically via e-snaps
Application due	9/30/19	

Hannah King

From: Hannah King

Sent: Thursday, July 11, 2019 9:22 AM

To: Alex Dull; Alex Murphy; Amanda Frankl; Andrea Ropp; April Steffy; Bart Henning;

Brittani Perdue; Christina Phalen; Colleen Bain; De Andree Nekoranec; Heather Notter;

Jeff Carter; Jennifer Gulley; Jennifer Sharma; Joan Deever; Judy Peterson; Kelly

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Patterson; Trudy Elder; Lynda Leclerc; Marc Otte; Marsha Zimmerman; Melinda Robbins; Nichole Goodman; Nick Winslow; Nina Santarelli-Griffin; Noel Welsh; Peggy Anderson; Ryan Pickut; Sanleda Morgan; Scott Jackson; Shanda McJunkins; Sherry Inskeep; Sue Darby; Susan Reamsnyder; Taylor Keating; Teresa Black; Thelma Young;

Valerie Henthorn; Wilhelmina Spinner

Cc: Heather Notter; Lianna Barbu; Tom Albanese

Subject: RE: FY19 CoC Competition is Open

Attachments: FY19 CoC Project Application Guidance_renewal.pdf; FY19 CoC Prioritization

Options.pdf

Hi all,

A few updates:

Project applications are now available in e-snaps.

- The Renewal Project Application Detailed Instructions and Navigational Guide are available here.
- Our Renewal Application Guidance is attached. It provides consistent responses across the CoC and guidance on specific questions. Please carefully read and use this document when we send it it will make the application process easier for you.
- Per the NOFA, we are also attaching our CoC's Review, Score, and Ranking Procedures (Prioritization Options). This document describes the project-level review and ranking process that is used by the CoC to determine how CoC Program project applications submitted to the CoC are reviewed, scored, and ranked for the Consolidated Application that CSB will submit.

Again, please let us know if you have questions as you begin working on your project applications. Thank you,

Hannah

Hannah King

Community Shelter Board

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Sent: Monday, July 08, 2019 4:50 PM

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Cc: Heather Notter; Lianna Barbu; Tom Albanese

Subject: FY19 CoC Competition is Open

Importance: High

Good afternoon,

HUD has opened the annual CoC competition. The NOFA is available here. Please read it. **HUD estimates the project applications will be available in e-snaps this week.** Please let me know if you need to add e-snaps users for your agency. (If you have to complete a project application, you need to do it through e-snaps.)

The full application is due to HUD on September 30. The 2019 Application Schedule is attached. Here are the significant dates that we have to meet to conform with NOFA rules:

- August 13: Draft applications are due to CSB by 5:00 PM. Each applicant must submit one copy of the draft project application(s) electronically <u>via email</u> to me.
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Review this guidance carefully:

- (HUD has not yet released the New and Renewal Project Application Detailed Instructions and Instructional Guides. They will be posted here. These resources include specific instructions on how to create your project(s) in e-snaps. For renewal projects, use the import option as directed in the Guide. These guides also provide insight into exactly what HUD is looking for on each question.
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- The HUD-approved Grant Inventory Worksheet (GIW) is attached. You will need it to complete the application budgets.
- If you are new to e-snaps, there are additional guides and resources available. Let me know what assistance you need.

We will disseminate additional information and guidance as we receive it from HUD. Please let me know what questions you have. We are happy to help.

Thank you,

Hannah

Hannah King Grants Administrator



Until everyone has a place to call home

Community Shelter Board 355 E. Campus View Blvd., Suite 250 Columbus, OH 43235 614-715-2552 www.csb.org

From: Sent:

To:

Heather Notter

Wednesday, February 13, 2019 11:07 AM

Adam Rowan; Adrienne Lee-Garland; Alex Dull; Alex Murphy; Amanda Frankl; Amanda Glauer; Andrea Ropp; Andrew Roberts; Antonio Caffey; April Steffy; Arica Morgan; Becky Westerfelt; Beth Fetzer-Rice; Beth Morrow Lonn; Betsy McGraw; Brad McCain; Brittani Perdue; Carrie Wirick; Charlie Hickman; Chris Frasure; Colleen Bain; Constance Young; De Andree Nekoranec; Deborah Schipper; Debra Ashcraft; Dedra Smith; Diane Kayser; Fikru Nigusse; Harry B. Cool II; Isaac Barton; James Simmons; Jason Hartman; Jennifer Gulley; Jennifer Sharma; Joan Deever; Joe Sylvester; John Bell; John Reed; Joy Chivers; Judy Peterson; Julie Embree; Katherine Kozsey; Kathleen Atkins (kathleen.atkins@voago.org); Kelly Browning; Kevin Ballard; Kim Eberst; Krista Edwards; Kristin Coburn; Laura Brenner; Leah Tuttamore; Lisa Kraft; Lori Varn; Luke Sutherland; Lynda Leclerc; Lynk Current; Marc Otte; Mardi Ciriaco; Marsha Zimmerman; Mathias Kendricks; Melinda Robbins; Michelle Chieffo; Michelle Fraelich; Michelle Ritchey; Mike Miller; Miranda Cox; Nick Winslow; Nina Santarelli-Griffin; Noel Welsh; Pam Ferrell; Peggy Anderson; Phil Helser; Rachel Rubey; Rebecca Benedetto; Regina Burns; Robyn Haycook; Ryan Cassell; Ryan Pickut; Sam Willer; Sanleda Morgan; Scott Jackson; Shameikia Smith; Shanda McJunkins; Sheena Crawford; Sheila Rodriguez; Sherry Inskeep; Sonya Thompkins; Sonya Todd; Steve Bodkin; Steven Ashcraft; Steven Skovensky; Sue Darby; Sue Villilo; Susan Reamsnyder; Tara Neiswonger; Teresa Black; Thelma Young; Tiffany McCoy; Valerie Henthorn; Wendy Williams; Wilhelmina Spinner; Angelic Arana (aarana@csb.org); Ben Sears; 'Christina Bournique'; 'Danielle Otte'; 'Helen Stepien'; Kevin Phillips; 'Lori Corey'; 'Marcus Deloney'; 'Michele Reynolds'; Sheli Mathias - The Open Shelter, Inc. (openshelter@att.net); 'Thomas Adams'; 'Tom Albanese (talbanese@csb.org)'; 'Darin Mack'; Ebony Wheat; Erin Maus; 'Kyra Crockett'; 'Sandra Salinas'; 'Bonnie Crawford'; 'Carl Landry'; Colton Sray; 'John Roszkowski'; 'Kristen Kelly'; 'Marta Jester'; 'Michael Salois'; 'Patricia Ufferman'; 'Rich Agnello'; 'Sue Villilo'; 'Twanna Roper'; Anthony Penn; Art Heldoerfer; 'Colleen Bain'; 'Courtney Elrod'; Denyse Couchot (dcouchot@chninc.org); James Alexander (jalexander5858 @outlook.com); Janae Ayers (jayers@cpoms.org); Jill Fetzer (jill.fetzer@ymcacolumbus.org); Kristina Elkins; 'Mike Preston'; Patrick Moore (patrick.moore@ymcacolumbus.org); 'Sean Penny'; 'Stephanie Chastain'; 'Tahirah carter'; Amber Hetteberg; Andy Keller (Andy.Keller@CardinalHealth.com); Angela Cline; Buck Bramlish; Callie Query; Carl Williams; Carla Wallace; Charles Hillman; Chip Spinning; David Royer - ADAMH Board of Franklin County (droyer@adamhfranklin.org); Debbie Donahey; Dennis Jeffrey; Donna Mayer; Emerald L. Hernandez; Emily Green; Emily Savors; Felisha Lyons; Foster Ugbana; Geoff Stobart; Hannah King; 'Heather Notter'; James Lewis; James Schimmer; Jeff Pattison; Jenae Parker (jparker62 @cscc.edu); Jerome Johnson; John Edgar; Jonathan Welty; Keena Smith; Kim Stands; Kythryn Carr Harris - Vice President of Clinical Services (kcarrharris@adamhfranklin.org); Lianna Barbu; Lisa Defendiefer; Lisa Patt-McDaniel; Lydia Miller; Mark Paxson; Michael Wilkos; Michelle Heritage; Michelle Missler; Nancy Case; outrich.1@osu.edu; Paula Haines; Priscilla Tyson; Reyna Hughes; Robin Harris; Ron Lebsock; Sam Shuler; Shannan K. Anderson (Shannan.anderson@gmail.com); Sheila Prillerman; Sherry Wakely; Sondra Downs (sdowns@chninc.org); Steven Gladman; Susan Carroll-Boser; Susan Sayers (ssayers@chninc.org); Susan Zoldak; Terri Power; Tina Rutherford; Tom Albanese; Val Harmon; Veronica Lofton; Vicky Bowman CommunityShelterBoard

Cc: Subject:

Call for new projects - proposals due April 30, 2019

Good afternoon,

CSB is accepting proposals for new permanent supportive housing or rapid re-housing projects serving people experiencing homelessness, for consideration during the U.S. Department of Housing and Urban Development (HUD) FY19 Continuum of Care (CoC) funding competition. During each annual competition, we have the opportunity to apply for additional new funds. The funding is not guaranteed and is granted via a national competition.

To submit a proposal, please submit a Concept Paper to me by **5pm Tuesday**, **April 30**. The format for Concept Papers and details about the project development process is posted on CSB's website here.

The CoC governing body will review the proposals and determine whether the projects will move forward to the CoC competition. The full process is outlined below.

We welcome proposals from any interested party, regardless of whether you currently receive CSB or CoC funding. Please feel free to forward this opportunity to anyone who may be interested.

April 30, 2019	Concept Papers due to CSB
May 21, 2019	Concept Papers discussed at CoC Board meeting
May 29, 2019	Concept Papers discussed at CoC meeting; determine prioritization for the CoC application
TBD, per HUD schedule	CoC Project Applications due to CSB
August 2019	Projects presented to Citizens Advisory Council (and Youth Action Board, if appropriate)
August 2019	Projects presented to PSH providers
TBD, per HUD schedule	CoC application, including new projects, discussed at CoC Board meeting
TBD, per HUD schedule	CoC application, including new projects discussed and prioritized at CoC meeting
TBD, per HUD schedule	CoC application submitted

Please let us know if you have questions.

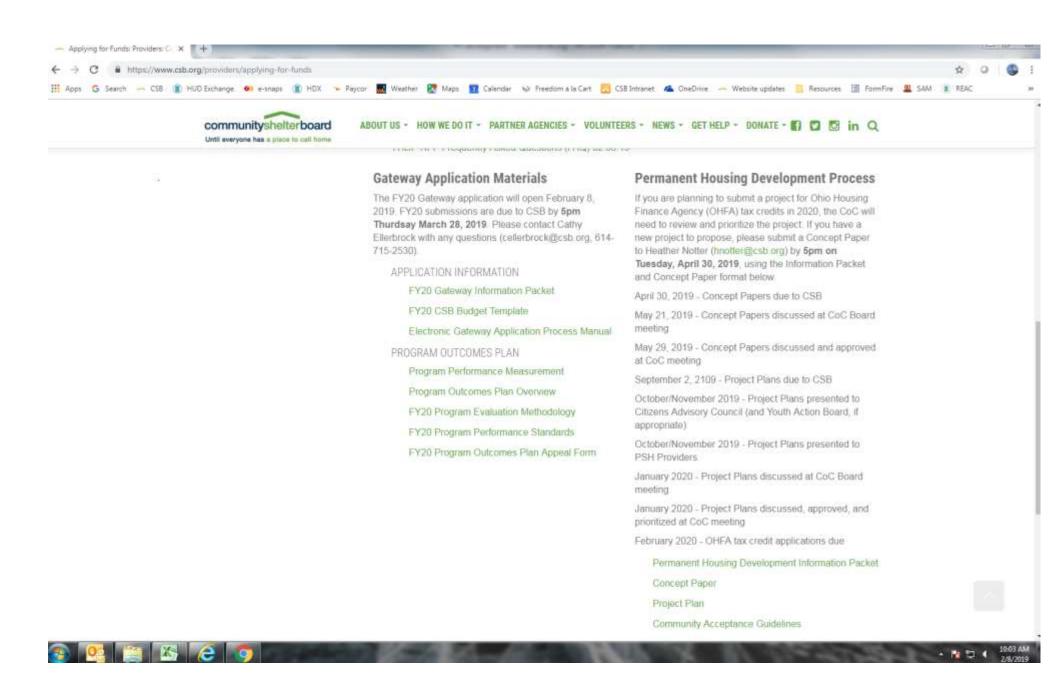
Thank you, Heather

Heather Notter

Grants & Compliance Director



Community Shelter Board 355 E. Campus View Blvd., Suite 250 Columbus, OH 43235 614-715-2542 www.csb.org



From: **Heather Notter**

Sent: Friday, February 08, 2019 8:23 AM

To: Adam Rowan; Adrienne Lee-Garland; Alex Dull; Alex Murphy; Amanda Frankl; Amanda

> Glauer; Amy McFarlan; Andrea Ropp; Andrew Roberts; Antonio Caffey; April Steffy; Arica Morgan; Becky Westerfelt; Beth Fetzer-Rice; Beth Morrow Lonn; Betsy McGraw; Brad McCain; Brittani Perdue; Carrie Wirick; Charlie Hickman; Chris Frasure; Colleen Bain; Constance Young; De Andree Nekoranec; Deborah Schipper; Debra Ashcraft; Debra Byrd; Dedra Smith; Diane Kayser; Fikru Nigusse; Harry B. Cool II; Isaac Barton; James Simmons; Jason Hartman; Jennifer Gulley; Jennifer Sharma; Joan Deever; Joe Sylvester; John Bell; John Reed; Joy Chivers; Judy Peterson; Julie Embree; Katherine Kozsey; Kathleen Atkins (kathleen.atkins@voago.org); Kelly Browning; Kevin Ballard; Kim Eberst; Krista Edwards; Kristin Coburn; Laura Brenner; Leah Tuttamore; Lisa Kraft; Lori Varn; Luke Sutherland; Lynda Leclerc; Lynk Current; Marc Otte; Mardi Ciriaco; Marsha Zimmerman; Mathias Kendricks; Melinda Robbins; Michelle Chieffo; Michelle Fraelich; Michelle Ritchey; Miranda Cox; Nick Winslow; Nina Santarelli-Griffin; Noel Welsh; Pam Ferrell; Peggy Anderson; Phil Helser; Rachel Rubey; Rebecca Benedetto; Regina Burns; Robyn Haycook; Ryan Cassell; Ryan Pickut; Sam Willer; Sanleda Morgan; Scott Jackson; Shameikia Smith; Shanda McJunkins; Sheena Crawford; Sheila

Rodriguez; Sherry Inskeep; Sonya Thompkins; Steve Bodkin; Steven Ashcraft; Steven

Skovensky; Sue Darby; Sue Villilo; Susan Reamsnyder; Tara Neiswonger; Teresa Black; Thelma Young; Tiffany McCoy; Valerie Henthorn; Wendy Williams; Wilhelmina Spinner

Cc: Lianna Barbu; Hannah King

Subject: New Permanent Housing Project Proposals - Concept Papers due Apr 30

Good morning,

If you are planning to submit a project for Ohio Housing Finance Agency (OHFA) tax credits in 2020, the Continuum of Care (CoC) will need to review and prioritize the projects. If you have a new project to propose, please submit a Concept Paper to me by 5pm on Tuesday, April 30, 2019.

The Information Packet and Concept Paper format are located on our website here.

The timeline for the PH development process is below.

April 30, 2019	Concept Papers due to CSB
May 21, 2019	Concept Papers discussed at CoC Board meeting
May 29, 2019	Concept Papers discussed and approved at CoC meeting
September 2, 2019	Project Plans due to CSB
October/November 2019	Project Plans presented to Citizens Advisory Council (and Youth Action Board, if appropriate)
October/November 2019	Project Plans presented to PSH providers
January 2020	Project Plans discussed at CoC Board meeting
January 2020	Project Plans discussed, approved, and prioritized at CoC meeting
February 2020	OHFA tax credit application due

Please let us know if you have any questions.

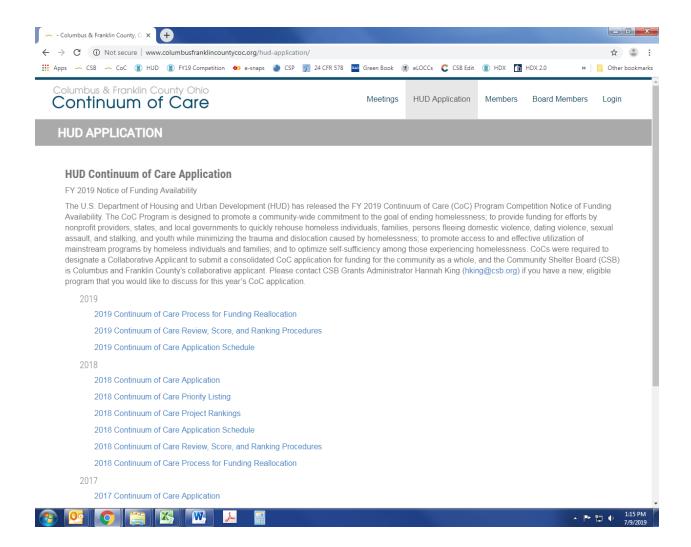
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Grants & Compliance Director



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Hannah King

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Valerie Henthorn; Wilhelmina Spinner

Cc: Heather Notter; Lianna Barbu; Tom Albanese

Subject: RE: FY19 CoC Competition is Open

Attachments: FY19 CoC Project Application Guidance_renewal.pdf; FY19 CoC Prioritization

Options.pdf

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Thank you,

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Hannah King Grants Administrator



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Community Shelter Board 355 E. Campus View Blvd., Suite 250 Columbus, OH 43235 614-715-2552 www.csb.org



Columbus and Franklin County Continuum of Care (OH-503) 2019 CoC Review, Score, and Ranking Procedures

Date CoC Competition Opened: 7/3/19

Date e-snaps Opened: 7/9/19

Date CoC Application due to HUD: 9/30/19

Columbus/Franklin County Annual Renewal Demand (ARD): \$13,179,482

I. 2019 HUD Funding Available

Tier 1	\$12,444,838
Tier 2 (including Bonus Funding)	\$1,393,619
Bonus Funding	\$658,974
DV Bonus Funding	\$659,772
CoC Planning Funding	\$395,384
UFA Funding	\$395,384

II. Priority Guideline

The following **Priority Guideline** will be used, while also applying the scoring process detailed below:

Tier 1:

- 1. New or reallocated projects renewing for the first time
- 2. Renewal PSH, RRH, and TH for youth
- 3. New PSH through reallocation or bonus for 100% CH
- 4. New RRH through reallocation or bonus
- 5. SSO for CPOA
- 6. Renewal HMIS

Tier 2:

- 1. Renewal PSH, RRH, and TH for youth
- 2. New PSH through reallocation or bonus for 100% CH
- 3. New RRH through reallocation or bonus
- 4. SSO for CPOA



III. Columbus and Franklin County CoC Scoring Process

Each of the projects renewing CoC funding will be awarded a score using the scoring process below:

Renewal projects	Points Available	Description
Program Evaluation ranking		HUD emphasizes performance of funded programs.
High (meets 75% or more of	9	The latest program evaluation available (FY2019)
measured outcomes and outputs)		evaluates each project based on its performance for
Medium (meets at least 50% but	5	the period 7/1/2018 - 12/31/2018. Program
less than 75% of measured		Evaluation rankings are determined by measuring
outcomes and outputs)		outputs and outcomes inclusive of Households
Low/Not rated (meets less than	1	Served, Successful Housing Outcomes based on
50% of measured outcomes and		destination at exit, Housing Stability, Occupancy,
outputs)		Recidivism, Change in Income and annual Program
		Review and Certification to confirm compliance with
		HUD and local regulations. Participant Eligibility for
		permanent supportive housing is ensured and
		enforced via the Unified Supportive Housing System
		and, therefore, is not incorporated into the Program
		Evaluation. The Program Performance Measurement
		and Program Performance Standards sections of this
		document detail the performance ranking.
Usage of HUD grant funds		HUD emphasizes effective utilization of funds.
100% funds used	10	Programs are scored based on the total grant
80-99% funds used	8	amount and the amount that was drawn down from
60-79% funds used	5	HUD for the most recent closed grant cycle
40-59% funds used	2	(6/30/2019).
0-39% funds used	0	
Maximum possible points	19	
Minimum possible points	1	

IV. Columbus and Franklin County CoC Program Evaluation Elements

Each of the projects renewing their CoC funding will have their performance evaluated considering the metrics below, distinct based on the project type.

Supportive Housing

PSH - Permanent Supportive Housing; TH = Transitional Housing;

Ends	Measurement	Annual Metrics
Efficient number of households served	Households served (#)	Set based on prior year(s) attainment and program capacity.
Access to resources/services to move to and stabilize housing	Housing Stability	At least standard below or greater if prior year(s) achievement was greater
		At least 12 months for PSH (goal to be set not to exceed 24 months,



Ends	Measurement	Annual Metrics
		actual attainment may be greater than goal)
		Up to 4 months for TH
	Housing Affordability at Exit (%) (PSH only)	At least 50% of successful households have their housing affordability ratio, measured as cost of housing (rent and utilities) divided by the household's income at exit, lower than 50%. (Monitored only.)
Basic needs met in a non-congregate environment	Successful housing outcomes (%)	At least 90% successful housing outcomes for PSH and 77% successful housing outcomes for TH.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
	Successful housing exits (%)	At least 50% of exits are successful
	(PSH only)	housing outcomes.
Not re-enter the emergency shelter system	Exit to Homelessness (%)	<10% of those who obtain housing will return to homelessness within 180 days of exit.
Efficient and effective use of a pool of community resources	Cost per household	Cost per household will be consistent with budget. Evaluated annually and presented to the COC.
	Cost per unit	Cost per unit will be consistent with budget. Evaluated annually and presented to the COC.
	Program Occupancy Rate (%)	Full occupancy (>95%).
		For rental assistance units the occupancy goal is 100%.
	Turnover Rate (%) (PSH only)	Set based on prior year(s) attainment, an annual 20% turnover rate is desirable. (Monitored only.)
	Pass program certification	Provide access to resources and services to end homelessness.
CoC or HUD Standards	Negative Reason for leaving (%)	Less than 20% leave for non- compliance or disagreement with rules
	Increase in cash income, other than employment, from entry to exit or end of reporting period (%)	At least 30% of adults will increase income from other sources than employment from entry to exit or end of reporting period.
	Increase in income from employment, from entry to exit or end of reporting	At least 15% of adults will have increased employment income from



Ends	Measurement	Annual Metrics
	period (%)	entry to exit or end of reporting period.

Rapid Re-housing Program

Ends	Measurement	Annual Metrics
Efficient number of households served	Households served (#)	Set based on program capacity, prior year(s) attainment and funds available.
	New households served (#)	Set based on program capacity, prior year(s) attainment and funds available.
	Average length of participation	Not to exceed standard below:
		100 days for all family programs except J2H
		90 days for the single adult RRH program
		180 days for J2H
Access to resources/services to move to and stabilize housing	Usage of CSB Direct Client assistance (\$)	Average DCA amount will be consistent with prior performance and/or program design.
	Usage of CSB Direct Client Assistance (%)	% of households that receive CSB DCA will be consistent with prior performance and/or program design.
	Average length of shelter stay	Average stay in Emergency Shelter not to exceed: • 15 days for families • 23 days for single adults (calculated from the date of program entry to shelter exit).
	Housing Affordability at Exit (%) (Family programs only)	At least 50% of successful households have their housing affordability ratio, measured as cost of housing (rent and utilities) divided by the household's income at exit, lower than 50%.
	Increase in cash income, other than employment, from entry to exit or end of reporting period (%) (J2H only)	At least 30% of adults will increase income from other sources than employment from entry to exit or end of reporting period.
	Increase in income from employment, from entry to exit or end of reporting period (%) (J2H only)	At least 15% of adults will have increased employment income from entry to exit or end of reporting period.
Basic needs met in a non-congregate environment	Successful housing outcome (%)	At least 90% successful housing outcomes for families and 70% for single adults exiting the RRH Program.



Ends	Measurement	Annual Metrics
		At least 33% successful housing outcomes for single adults exiting Tier 2 emergency shelters (RRH single adult program only).
	Successful housing outcome (#)	Calculated based on the Successful housing outcomes % measurement.
Not re-enter the emergency shelter system	Recidivism (%)	<10% of those who obtain housing will return to homelessness within 180 days of program exit.
	Movement (%) (RRH single adult program only)	<15% of clients served who exit the emergency shelter will immediately reenter another shelter. (Monitored only)
	Average Number of Service Instances (RRH single adult program only)	Average number of shelter stays per distinct clients served within 12 months. Not to exceed 2.3.
Efficient and effective use of a pool of community resources	Cost per household	Cost per household will be consistent with budget. Evaluated annually and presented to the COC.
	Pass program certification	Provide resources and services to end homelessness.

V. Columbus and Franklin County CoC Ranking process

The CoC Board and CoC will review a number of ranking options each year, detailed below. The CoC will analyze each option and discuss which option fits better for the CoC with each CoC application cycle. The CoC will review the option proposed by the CoC Board and will give final approval.

Below are listed the general ranking guidelines.

- (Under Tier 1 ranking, 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.
- The Priority Guideline, any HUD prioritization criteria and, all else equal, the funding impact on the entire CoC 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 (including first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, 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 CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.
- (All other projects are listed in Tier 2, in the order of the Priority Guidelines and their score.
- ∠ List reallocation projects in Tier 2 (unless gap permits Tier 1).

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

- List all renewal projects (including first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, 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, CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.
- All other projects are listed in Tier II, in the order of the Priority Guidelines and their score.

Option 3 (descending performance based, prioritize any reallocations)

- List all renewal projects in the order of their performance (HIGH, MEDIUM, LOW) and Priority Guidelines, (including 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, CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.
- Projects rated as "LOW" performers based on the FY2019 Program Evaluation are listed in Tier 2 in the order of Priority Guidelines (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, CoC level funding amount (less funding is risked) will be moved last.

Option 4 (descending score based, new project in Tier 1)

- List all renewal projects (including first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, up to Tier 1 amount or closest amount less the amount allocated for the next bullet.
- Capture one new project 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, CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.
- (All other projects are listed in Tier II, in the order of the Priority Guidelines and their score.

Option 5 (spread the cuts across all programs) – WILL NOT BE USED FOR 2019

- List all renewal projects (include first time renewals and HMIS project as detailed above) in the order of their scoring.
- List reallocation project(s) in Tier 1, after all renewal projects.



Apply the HUD published funding decrease (amount at risk in Tier 2) to all renewal and reallocation projects, by decreasing funding across the board, by a calculated percentage.

Option 6 (spread the cuts across all programs that scored low) - WILL NOT BE USED FOR 2019

- List all renewal projects (include first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, up to Tier 1 amount or closest amount.
- List reallocation project(s) in Tier 1, after all renewal projects.
- 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.

VI. Program Performance Measurement

Program performance outcome goals are compared with actual performance to determine consistency with CSB, CoC, or HUD standards. For outcome definitions and methodologies, please see the Appendix of the Annual Program Evaluation or the Program Methodology document posted on www.csb.org.

Each performance goal is assessed as achieved (Yes), not achieved (No), or not applicable (N/A). *Achieved Goal* is defined as 90% or better of a numerical goal or within 5 percentage points of a percentage goal, except where a lesser or greater value than this variance also indicates an achieved goal (e.g. Average Length of Stay goal was met if actual achievement is 105% or less of goal). HUD performance goals do not allow for this variance, they are fixed goals. *Not Applicable* is assigned when a performance goal was not assigned; the reason for this is explained in the footnote for the respective program.

Each program is assigned a performance rating¹ of High, Medium, or Low as determined by overall program achievement of performance outcomes for the evaluation period. Ratings are based on the following:

Rating Achievement of Program Outcome Measure 2

High achieve at least 75% of the measured outcomes and at least one of the

successful housing outcomes (either number or percentage outcome)

Medium achieve at least 50% but less than 75% of the measured outcomes

Low achieve less than 50% of the measured outcomes

Programs rated as "Low" or experiencing long-standing and/or serious program issues and/or systemic agency concerns will be handled by CSB through a Quality Improvement Intervention (QII) process. This 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. If the agency and/or CSB find that the QII process is not working, either may refer the concerns/issues to the CoC Board for handling (if the program is solely funded by HUD and not CSB). The provider will be given an opportunity to present its case, if the CoC Board decision is being appealed, to the CoC before a final decision is made by the CoC.

¹ In some instances, the program was too new to evaluate; therefore, a performance rating was not assigned.

² If serious and persistent program non-performance issues existed prior to evaluation, then the program was assigned a lower rating than what its program achievement of performance outcomes would otherwise warrant.



For interim (quarterly) reports, programs which meet less than one-half of measured outcome goals will be considered a "program of concern".

Columbus and Franklin County Continuum of Care (OH-503) Funding Reallocation Process

Policy

HUD Continuum of Care (CoC) funding reallocation can occur following the scenarios below:

- 1. Sub-recipient is 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 (Collaborative Applicant and Unified Funding Agency) 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 CoC and CoC 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 CoC and CoC 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 CoC, 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 CoC, 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 http://csb.org/providers/applying-for-funds 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 CoC 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 permanent supportive housing development is proposed, the project development steps must be followed, as detailed in the Information Packet posted on CSB's website at http://csb.org/providers/applying-for-funds.

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

From: Sent:

To:

Heather Notter

Wednesday, February 13, 2019 11:07 AM

Adam Rowan; Adrienne Lee-Garland; Alex Dull; Alex Murphy; Amanda Frankl; Amanda Glauer; Andrea Ropp; Andrew Roberts; Antonio Caffey; April Steffy; Arica Morgan; Becky Westerfelt; Beth Fetzer-Rice; Beth Morrow Lonn; Betsy McGraw; Brad McCain; Brittani Perdue; Carrie Wirick; Charlie Hickman; Chris Frasure; Colleen Bain; Constance Young; De Andree Nekoranec; Deborah Schipper; Debra Ashcraft; Dedra Smith; Diane Kayser; Fikru Nigusse; Harry B. Cool II; Isaac Barton; James Simmons; Jason Hartman; Jennifer Gulley; Jennifer Sharma; Joan Deever; Joe Sylvester; John Bell; John Reed; Joy Chivers; Judy Peterson; Julie Embree; Katherine Kozsey; Kathleen Atkins (kathleen.atkins@voago.org); Kelly Browning; Kevin Ballard; Kim Eberst; Krista Edwards; Kristin Coburn; Laura Brenner; Leah Tuttamore; Lisa Kraft; Lori Varn; Luke Sutherland; Lynda Leclerc; Lynk Current; Marc Otte; Mardi Ciriaco; Marsha Zimmerman; Mathias Kendricks; Melinda Robbins; Michelle Chieffo; Michelle Fraelich; Michelle Ritchey; Mike Miller; Miranda Cox; Nick Winslow; Nina Santarelli-Griffin; Noel Welsh; Pam Ferrell; Peggy Anderson; Phil Helser; Rachel Rubey; Rebecca Benedetto; Regina Burns; Robyn Haycook; Ryan Cassell; Ryan Pickut; Sam Willer; Sanleda Morgan; Scott Jackson; Shameikia Smith; Shanda McJunkins; Sheena Crawford; Sheila Rodriguez; Sherry Inskeep; Sonya Thompkins; Sonya Todd; Steve Bodkin; Steven Ashcraft; Steven Skovensky; Sue Darby; Sue Villilo; Susan Reamsnyder; Tara Neiswonger; Teresa Black; Thelma Young; Tiffany McCoy; Valerie Henthorn; Wendy Williams; Wilhelmina Spinner; Angelic Arana (aarana@csb.org); Ben Sears; 'Christina Bournique'; 'Danielle Otte'; 'Helen Stepien'; Kevin Phillips; 'Lori Corey'; 'Marcus Deloney'; 'Michele Reynolds'; Sheli Mathias - The Open Shelter, Inc. (openshelter@att.net); 'Thomas Adams'; 'Tom Albanese (talbanese@csb.org)'; 'Darin Mack'; Ebony Wheat; Erin Maus; 'Kyra Crockett'; 'Sandra Salinas'; 'Bonnie Crawford'; 'Carl Landry'; Colton Sray; 'John Roszkowski'; 'Kristen Kelly'; 'Marta Jester'; 'Michael Salois'; 'Patricia Ufferman'; 'Rich Agnello'; 'Sue Villilo'; 'Twanna Roper'; Anthony Penn; Art Heldoerfer; 'Colleen Bain'; 'Courtney Elrod'; Denyse Couchot (dcouchot@chninc.org); James Alexander (jalexander5858 @outlook.com); Janae Ayers (jayers@cpoms.org); Jill Fetzer (jill.fetzer@ymcacolumbus.org); Kristina Elkins; 'Mike Preston'; Patrick Moore (patrick.moore@ymcacolumbus.org); 'Sean Penny'; 'Stephanie Chastain'; 'Tahirah carter'; Amber Hetteberg; Andy Keller (Andy.Keller@CardinalHealth.com); Angela Cline; Buck Bramlish; Callie Query; Carl Williams; Carla Wallace; Charles Hillman; Chip Spinning; David Royer - ADAMH Board of Franklin County (droyer@adamhfranklin.org); Debbie Donahey; Dennis Jeffrey; Donna Mayer; Emerald L. Hernandez; Emily Green; Emily Savors; Felisha Lyons; Foster Ugbana; Geoff Stobart; Hannah King; 'Heather Notter'; James Lewis; James Schimmer; Jeff Pattison; Jenae Parker (jparker62 @cscc.edu); Jerome Johnson; John Edgar; Jonathan Welty; Keena Smith; Kim Stands; Kythryn Carr Harris - Vice President of Clinical Services (kcarrharris@adamhfranklin.org); Lianna Barbu; Lisa Defendiefer; Lisa Patt-McDaniel; Lydia Miller; Mark Paxson; Michael Wilkos; Michelle Heritage; Michelle Missler; Nancy Case; outrich.1@osu.edu; Paula Haines; Priscilla Tyson; Reyna Hughes; Robin Harris; Ron Lebsock; Sam Shuler; Shannan K. Anderson (Shannan.anderson@gmail.com); Sheila Prillerman; Sherry Wakely; Sondra Downs (sdowns@chninc.org); Steven Gladman; Susan Carroll-Boser; Susan Sayers (ssayers@chninc.org); Susan Zoldak; Terri Power; Tina Rutherford; Tom Albanese; Val Harmon; Veronica Lofton; Vicky Bowman CommunityShelterBoard

Cc: Subject:

Call for new projects - proposals due April 30, 2019

Good afternoon,

CSB is accepting proposals for new permanent supportive housing or rapid re-housing projects serving people experiencing homelessness, for consideration during the U.S. Department of Housing and Urban Development (HUD) FY19 Continuum of Care (CoC) funding competition. During each annual competition, we have the opportunity to apply for additional new funds. The funding is not guaranteed and is granted via a national competition.

To submit a proposal, please submit a Concept Paper to me by **5pm Tuesday**, **April 30**. The format for Concept Papers and details about the project development process is posted on CSB's website <u>here</u>.

The CoC governing body will review the proposals and determine whether the projects will move forward to the CoC competition. The full process is outlined below.

We welcome proposals from any interested party, regardless of whether you currently receive CSB or CoC funding. Please feel free to forward this opportunity to anyone who may be interested.

April 30, 2019	Concept Papers due to CSB
May 21, 2019	Concept Papers discussed at CoC Board meeting
May 29, 2019	Concept Papers discussed at CoC meeting; determine prioritization for the CoC application
TBD, per HUD schedule	CoC Project Applications due to CSB
August 2019	Projects presented to Citizens Advisory Council (and Youth Action Board, if appropriate)
August 2019	Projects presented to PSH providers
TBD, per HUD schedule	CoC application, including new projects, discussed at CoC Board meeting
TBD, per HUD schedule	CoC application, including new projects discussed and prioritized at CoC meeting
TBD, per HUD schedule	CoC application submitted

Please let us know if you have questions.

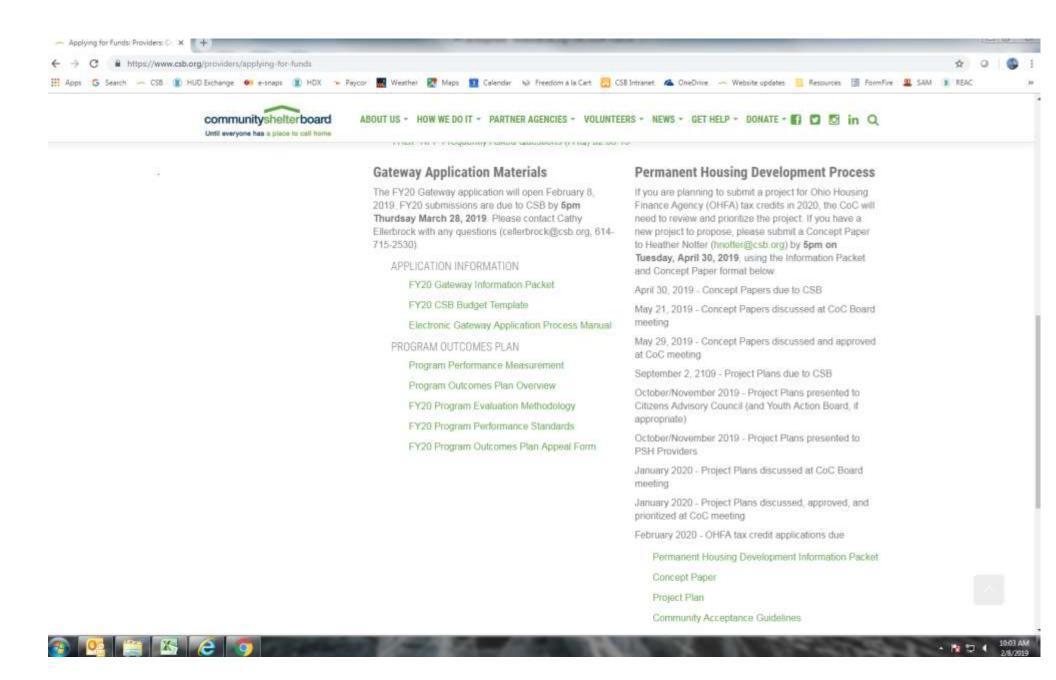
Thank you, Heather

Heather Notter

Grants & Compliance Director



Community Shelter Board 355 E. Campus View Blvd., Suite 250 Columbus, OH 43235 614-715-2542 www.csb.org



From: Heather Notter

Sent: Friday, February 08, 2019 8:23 AM

To: Adam Rowan; Adrienne Lee-Garland; Alex Dull; Alex Murphy; Amanda Frankl; Amanda

Glauer; Amy McFarlan; Andrea Ropp; Andrew Roberts; Antonio Caffey; April Steffy; Arica Morgan; Becky Westerfelt; Beth Fetzer-Rice; Beth Morrow Lonn; Betsy McGraw; Brad McCain; Brittani Perdue; Carrie Wirick; Charlie Hickman; Chris Frasure; Colleen Bain; Constance Young; De Andree Nekoranec; Deborah Schipper; Debra Ashcraft; Debra Byrd; Dedra Smith; Diane Kayser; Fikru Nigusse; Harry B. Cool II; Isaac Barton; James Simmons; Jason Hartman; Jennifer Gulley; Jennifer Sharma; Joan Deever; Joe Sylvester; John Bell; John Reed; Joy Chivers; Judy Peterson; Julie Embree; Katherine Kozsey; Kathleen Atkins (kathleen.atkins@voago.org); Kelly Browning; Kevin Ballard; Kim Eberst; Krista Edwards; Kristin Coburn; Laura Brenner; Leah Tuttamore; Lisa Kraft; Lori Varn; Luke Sutherland; Lynda Leclerc; Lynk Current; Marc Otte; Mardi Ciriaco; Marsha Zimmerman; Mathias Kendricks; Melinda Robbins; Michelle Chieffo; Michelle Fraelich; Michelle Ritchey; Miranda Cox; Nick Winslow; Nina Santarelli-Griffin; Noel Welsh; Pam Ferrell; Peggy Anderson; Phil Helser; Rachel Rubey; Rebecca Benedetto; Regina Burns; Robyn Haycook; Ryan Cassell; Ryan Pickut; Sam Willer; Sanleda Morgan; Scott Jackson; Shameikia Smith; Shanda McJunkins; Sheena Crawford; Sheila

Rodriguez; Sherry Inskeep; Sonya Thompkins; Steve Bodkin; Steven Ashcraft; Steven

Skovensky; Sue Darby; Sue Villilo; Susan Reamsnyder; Tara Neiswonger; Teresa Black; Thelma Young; Tiffany McCoy; Valerie Henthorn; Wendy Williams; Wilhelmina Spinner

Lianna Barbu; Hannah King

Subject: New Permanent Housing Project Proposals - Concept Papers due Apr 30

Good morning,

Cc:

If you are planning to submit a project for Ohio Housing Finance Agency (OHFA) tax credits in 2020, the Continuum of Care (CoC) will need to review and prioritize the projects. If you have a new project to propose, please submit a Concept Paper to me by **5pm on Tuesday**, **April 30**, **2019**.

The Information Packet and Concept Paper format are located on our website here.

The timeline for the PH development process is below.

April 30, 2019	Concept Papers due to CSB
May 21, 2019	Concept Papers discussed at CoC Board meeting
May 29, 2019	Concept Papers discussed and approved at CoC meeting
September 2, 2019	Project Plans due to CSB
October/November 2019	Project Plans presented to Citizens Advisory Council (and Youth Action Board, if appropriate)
October/November 2019	Project Plans presented to PSH providers
January 2020	Project Plans discussed at CoC Board meeting
January 2020	Project Plans discussed, approved, and prioritized at CoC meeting
February 2020	OHFA tax credit application due

Please let us know if you have any questions.

Thank you, Heather

Grants & Compliance Director



Until everyone has a place to call home

Community Shelter Board 355 E. Campus View Blvd., Suite 250 Columbus, OH 43235 614-715-2542 www.csb.org 2019 CoC Application Scoring Tool

#	Project Name	Grant Number	Total ARA	Cumulative	%	Most recent closed HUD Grant Amount	Amount Expended Per CSB Records	Balance	% of HUD Grant Amount Spent	Usage Points	FY2018 Program Evaluation Rating	Evaluation Points	Total Points Usage Points + Evaluation Points	Project Ranking
1	CHN 2018 Marsh Brook Place and TRA II	01100171155021000	\$413,734	\$413,734		\$156,436 0	\$23,125 N/A	\$133,311	14.8% N/A	O N/A	N/A N/A	N/A N/A	N/A N/A	2
3	YMCA 2018 DV RRH YMCA 2018 Isaiah Project	OH0617U5E031800 OH0075U5E031808	\$682,054 \$1,863,757	\$1,095,788 \$2,959,545		\$2,046,074	\$1,824,578	N/A \$221,496	89.2%	8 8	N/A N/A	N/A N/A	N/A	3
4	CHN 2018 Briggsdale II	OH007303E031808 OH0537U5E031802	\$393,109	\$3,352,654		\$383,145	\$294,898	\$88,247	77.0%	5	N/A	N/A	N/A	4
5	Alvis, Inc. 2018 Amethyst Program (SRA)	OH0076U5E031811	\$570,143	\$3,922,797	30%	\$315.143	\$311.213	\$3.930	98.8%	8	Medium	5	13	7
6	CHN 2018 Briggsdale Apartments	OH0078U5E031811	\$237,393	\$4,160,190		\$184,791	\$184,791	\$0	100.0%	10	High	9	19	
7	CHN 2018 Community ACT	OH0086U5E031811	\$280,908	\$4,441,098		\$322,826	\$316,121	\$6,705	97.9%	8	High	9	17	
8	CHN 2018 East Fifth Avenue Apartments	OH0088U5E031811	\$232,914	\$4,674,012		\$267,014	\$267,014	\$0	100.0%	10	High	9	19	
9	CHN 2018 Family Homes	OH0082U5E031811	\$13,310	\$4,687,322	36%	\$1,910	\$1,641	\$269	85.9%	8	High	9	17	
10	CHN 2018 Inglewood Court	OH0410U5E031806	\$60,247	\$4,747,569	36%	\$106,447	\$106,447	\$0	100.0%	10	High	9	19	
11	CHN 2018 Leasing SHP Program	OH0312U5E031807	\$238,081	\$4,985,650	38%	\$253,550	\$252,427	\$1,123	99.6%	10	Low	1	11	
12	CHN 2018 Parsons Avenue Apartments	OH0093U5E031811	\$256,811	\$5,242,461	40%	\$214,711	\$212,875	\$1,836	99.1%	8	High	9	17	
13	CHN 2018 Rebuilding Lives PACT Team Initiative		\$746,621	\$5,989,082	45%	\$707,588	\$699,621	\$7,967	98.9%	8	Medium	5	13	
14	CHN 2018 SRA	OH0083U5E031811	\$1,744,795	\$7,733,877	59%	\$1,384,943	\$1,360,783	\$24,160	98.3%	8	Low	1	9	
15	CHN 2018 TRA	OH0084U5E031811	\$1,419,351	\$9,153,228		\$1,341,529	\$1,327,397	\$14,132	98.9%	8	Medium	5	13	
16	CHN 2018 Safe Haven	OH0097U5E031811	\$188,951	\$9,342,179		\$175,251	\$175,251	\$0	100.0%	10	Medium	5	15	
17	CHN 2018 Southpoint Place Apartments	OH0281U5E031810	\$381,136	\$9,723,315		\$388,478	\$388,478	\$0	100.0%	10	High	9	19	
18 19	CHN 2018 Terrace Place Apartments	OH0092U5E031811	\$135,549	\$9,858,864	75%	\$209,749	\$209,457	\$292	99.9% 100.0%	10	High	9	19 19	
	CHN 2018 Wilson Apartments Equitas Health 2018 PSH	OH0101U5E031811 OH0080U5E031811	\$66,279 \$805,599	\$9,925,143 \$10,730,742		\$50,479 \$653,895	\$50,479 \$648,780	\$0 \$5,115	99.2%	8	High	9	17	
20 21	Huckleberry House 2018 Transitional Living Program	OH008003E031811 OH0099U5E031811	\$232,135	\$10,730,742	83%	\$275,869	\$275,869	\$5,115	100.0%	10	High High	9	19	
22	Maryhaven 2018 Commons at Chantry	OH009903E031811	\$183,196	\$11,146,073		\$183,196	\$153,743	\$29,453	83.9%	8	High	9	17	
23	NCR 2018 Commons at Grant	OH009003E031811	\$172,376	\$11,318,449		\$297,024	\$297,020	\$4	100.0%	10	High	9	19	
24	NCR 2018 Commons at Buckingham	OH0394U5E031808	\$172,375	\$11,490,824	87%	\$200,192	\$200,187	\$5	100.0%	10	High	9	19	
25	NCR 2018 Commons at Third	OH0372U5E031807	\$172,375	\$11,663,199	88%	\$187,490	\$187,463	\$27	100.0%	10	High	9	19	
26	TSA 2018 Job2Housing	OH0074U5E031807	\$299,837	\$11,963,036	91%	\$244,017	\$217,848	\$26,169	89.3%	8	Medium	5	13	
27	Van Buren Village PSH	OH0470U5E031802	\$64,200	\$12,027,236	91%	\$64,200	\$64,200	\$0	100.0%	10	High	9	19	
28	VOAGO 2018 Permanent Supportive Housing for Families	OH0094U5E031811	\$519,150	\$12,546,386	95%	\$508,099	\$508,099	\$0	100.0%	10	High	9	19	
29	YMCA 2018 SRA	OH0445U5E031806	\$211,178	\$12,757,564	97%	\$190,706	\$187,545	\$3,161	98.3%	8	High	9	17	
30	YWCA 2018 Wings	OH0102U5E031811	\$257,848	\$13,015,412	99%	\$436,812	\$436,812	\$0	100.0%	10	High	9	19	
31	CSB 2018 HMIS/CSP	OH0087U5E031811	\$164,070	\$13,179,482	100%	\$257,270	\$257,270	\$0	N/A	N/A	N/A	N/A	N/A	
NEW	Homefull Pivot PSH		\$462,000											32
NEW	Homefull Focus RRH		\$196,974											33
NEW	YMCA RRH DV Expansion		\$659,772			\$000.510	# 000 010	4.0						34
32	CoC Planning		\$395,384			\$329,319	\$329,319	\$0						
33	CoC UFA	APD	\$395,384		EV10	\$219,546	\$219,546 \$11,000,207	\$0 \$567,400						
		ARD	\$13,179,482		L1TA	\$12,557,699	ФТТ,990,297	\$567,402						

ARD \$13,179,482
Tier 1 (94%) \$12,444,838
Tier 2 \$1,393,619
Bonus \$658,974
CoC Plan and UFA \$790,769

2019 CoC Application Scoring Tool

#	Project Name	House,	Paras Salar	Dauge Story	Dillous 8 room	Average (1997)	Storeson H. H.	Succession Ho.	Successful notes & Evis
1	CHN 2018 Marsh Brook Place and TRA II								
2	YMCA 2018 DV RRH								
3	YMCA 2018 Isaiah Project	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
4	CHN 2018 Briggsdale II	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
5	Alvis, Inc. 2018 Amethyst Program (SRA)	Not achieved	N/A	Achieved	N/A	N/A	Not Achieved	Achieved	Achieved
6	CHN 2018 Briggsdale Apartments	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
7	CHN 2018 Community ACT	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
8	CHN 2018 East Fifth Avenue Apartments	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
9	CHN 2018 Family Homes	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	N/A
10	CHN 2018 Inglewood Court	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Not Achieved
11	CHN 2018 Leasing SHP Program	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	N/A
12	CHN 2018 Parsons Avenue Apartments	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Not Achieved
13	CHN 2018 Rebuilding Lives PACT Team Initiative	Not achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
14	CHN 2018 SRA	Not achieved	N/A	Achieved	N/A	N/A	Not Achieved	Achieved	Not Achieved
15	CHN 2018 TRA	Not achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
16	CHN 2018 Safe Haven	Not achieved	N/A	Achieved	N/A	N/A	Not Achieved	Achieved	Not Achieved
17	CHN 2018 Southpoint Place Apartments	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Not Achieved
18	CHN 2018 Terrace Place Apartments	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
19	CHN 2018 Wilson Apartments	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
20	Equitas Health 2018 PSH	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
21	Huckleberry House 2018 Transitional Living Program	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	N/A
22	Maryhaven 2018 Commons at Chantry	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
23	NCR 2018 Commons at Grant	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Not Achieved
24	NCR 2018 Commons at Buckingham	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
_	NCR 2018 Commons at Third	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Not Achieved
26	TSA 2018 Job2Housing	Achieved	Not Achieved	N/A	Not Achieved	Achieved	Not Achieved	Achieved	N/A
	Van Buren Village PSH	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
_		Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
	YMCA 2018 SRA	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
	YWCA 2018 Wings	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved
-	CSB 2018 HMIS/CSP					<u> </u>			
-	Homefull Pivot PSH						İ		
	Homefull Focus RRH						İ		
	YMCA RRH DV Expansion						İ		
	CoC Planning						İ		
33	CoC UFA						1	1	
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2019 CoC Application Scoring Tool

#	Project Name	town gate	Cristo Homes	Powering Processing	Page Page	Negation A	Money In the search of the sea	Pro Company Come Come Come Come Come Come Come Come	100 100 100 100 100 100 100 100 100 100
1	CHN 2018 Marsh Brook Place and TRA II								
2	YMCA 2018 DV RRH								
3	,	N/A	N/A	Achieved	N/A	Achieved	N/A	N/A	
4	CHN 2018 Briggsdale II	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
5	Alvis, Inc. 2018 Amethyst Program (SRA)	N/A	Achieved	Not Achieved	Achieved	Achieved	Achieved	Achieved	
6	CHN 2018 Briggsdale Apartments	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved	
7	,	N/A	N/A	Achieved	Not Achieved	Achieved	Achieved	Not Achieved	
3	CHN 2018 East Fifth Avenue Apartments	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	
9	CHN 2018 Family Homes	N/A	Achieved	Achieved	Achieved	N/A	Not Achieved	Not Achieved	
LO	CHN 2018 Inglewood Court	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	
1	CHN 2018 Leasing SHP Program	N/A	Not Achieved	Not Achieved	Not Achieved	N/A	Not Achieved	Not Achieved	
2	CHN 2018 Parsons Avenue Apartments	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved	
.3	CHN 2018 Rebuilding Lives PACT Team Initiative	N/A	Achieved	Not Achieved	Not Achieved	Achieved	Achieved	Not Achieved	
L4	CHN 2018 SRA	N/A	Achieved	Not Achieved	Not Achieved	Achieved	Achieved	Not Achieved	
L5	CHN 2018 TRA	N/A	Achieved	Not Achieved	Not Achieved	Not Achieved	Achieved	Not Achieved	
L6	CHN 2018 Safe Haven	N/A	Achieved	Achieved	Not Achieved	Achieved	Achieved	Not Achieved	
L7	CHN 2018 Southpoint Place Apartments	N/A	Achieved	Achieved	Achieved	Not Achieved	Achieved	Achieved	
L8	CHN 2018 Terrace Place Apartments	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved	
L9	CHN 2018 Wilson Apartments	Not Achieved	Achieved	Achieved	Not Achieved	Achieved	Achieved	Achieved	
20	Equitas Health 2018 PSH	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	
21	Huckleberry House 2018 Transitional Living Program	N/A	Achieved	Not Achieved	Achieved	Achieved	Not Achieved	Achieved	
22	Maryhaven 2018 Commons at Chantry	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved	
23	NCR 2018 Commons at Grant	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	
24	NCR 2018 Commons at Buckingham	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved	
25	NCR 2018 Commons at Third	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	
26	TSA 2018 Job2Housing	Not Achieved	Not Achieved	N/A	Achieved	N/A	Not Achieved	Achieved	
27	Van Buren Village PSH	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Not Achieved	
28	VOAGO 2018 Permanent Supportive Housing for Families	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	
29	YMCA 2018 SRA	N/A	Achieved	Achieved	Achieved	Achieved	Not Achieved	Not Achieved	
30	YWCA 2018 Wings	N/A	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	
31	CSB 2018 HMIS/CSP								
NEW	Homefull Pivot PSH								
NEW	Homefull Focus RRH								
NEW	YMCA RRH DV Expansion								
32	CoC Planning								
33	CoC UFA								

2 YMCA 2018 Islaiah Project	#	Project Name	Grant Number	Total ARA	Cumulative	%	Most recent closed HUD Grant Amount	Amount Expended Per CSB Records	Balance	% of HUD Grant Amount Spent	Usage Points	FY2018 Program Evaluation Rating	Evaluation Points	Total Points Usage Points + Evaluation Points	Project Ranking	
3	1	CHN 2018 Marsh Brook Place and TRA II		\$413,734	\$413,734		\$156,436	\$23,125	\$133,311	14.8%	0	N/A	N/A	N/A	1	
4 CHN 2018 Briggsdale II OH053TV5E031802 \$395,109 \$3,352,664 25% \$388,145 \$294,598 \$88,247 77.0% 5 N/A N/A N/A 4 4 5 CHN 2018 Briggsdale Apartments OH0678U5E031811 \$233,393 \$3,590,047 27% \$184,791 \$184,791 \$0 100.0% 10 High 9 19 5 6 CHN 2018 Inglewood Court OH0410U5E031806 \$60,247 \$3,650,249 28% \$106,447 \$106,447 \$0 100.0% 10 High 9 19 6 6 N 2018 Proportional Living Program OH0699U5E031811 \$233,135 \$3,882,429 28% \$106,447 \$108,447 \$0 100.0% 10 High 9 19 7 7 19 19 8 8 19 VOAGO 2018 Permanent Supportive Housing for Families OH0694U5E031811 \$233,135 \$3,882,429 28% \$106,447 \$108,447 \$100,00% 10 High 9 19 7 7 19 19 8 8 19 VOAGO 2018 Permanent Supportive Housing for Families OH0694U5E031811 \$519,150 \$4,465,779 34% \$508,099 \$50 100.0% 10 High 9 19 9 19 8 9 10 VVAC 2018 Wings OH0694U5E031811 \$232,313 \$4,966,541 38% \$4,723,627 \$6,858 \$4,	2						ŭ			,						
Section China 2018 Briggsdale Apartments Chin	3											,		,		
6 CHN 2018 Inglewood Court OH0410U5E031806 S60,247 \$3,850,294 28% \$106,447 \$106,447 \$0 100.0% 10 High 9 19 6 1	4	66		, ,			, , -	, , , , , , , ,	,			,	,	,	<u> </u>	
Huckleberry House 2018 Transitional Living Program	5						, .									Ш
8 Van Buren Village PSH OH0470U5E031802	6	<u> </u>													6	Ш
9 VOAGO 2018 Permanent Supportive Housing for Families OH0094U5E031811 \$559,150 \$4,465,779 34% \$508,099 \$508,099 \$0 100.0% 10 High 9 19 10 10 YWCA 2018 Wings OH0102U5E031811 \$257,848 \$4,723,627 36% \$436,812 \$436,812 \$0 100.0% 10 High 9 19 10 10 High 9 19 11 11 CHN 2018 East Fifth Avenue Apartments OH0088U5E031811 \$257,848 \$4,723,627 36% \$436,812 \$436,812 \$0 100.0% 10 High 9 19 10 10 High 9 19 19 11 11 12 CHN 2018 Southpoint Place Apartments OH0028U5E031810 \$381,136 \$5,337,677 40% \$388,478 \$388,478 \$0 100.0% 10 High 9 19 19 11 11 12 CHN 2018 Terrace Place Apartments OH0029U5E031811 \$135,549 \$5,473,226 42% \$209,749 \$209,457 \$292 99,9% 10 High 9 19 19 13 14 CHN 2018 Terrace Place Apartments OH0092U5E031811 \$135,549 \$5,473,226 42% \$209,749 \$50,479 \$50 100.0% 10 High 9 19 19 13 15 NCR 2018 Commons at Grant OH0038U5E031811 \$172,376 \$5,711,881 43% \$297,024 \$297,020 \$4 100.0% 10 High 9 19 15 16 NCR 2018 Commons at Buckingham OH0394U5E031808 \$172,375 \$5,884,256 45% \$200,192 \$200,187 \$5 100.0% 10 High 9 19 16 16 NCR 2018 Commons at Third OH0394U5E031808 \$172,375 \$5,884,256 45% \$200,192 \$200,187 \$5 100.0% 10 High 9 19 16 16 NCR 2018 Commons at Third OH0394U5E031808 \$172,375 \$6,866,631 46% \$187,409 \$187,403 \$27 100.0% 10 High 9 19 16 16 NCR 2018 Commons at Third OH0039U5E031811 \$256,811 \$6,313,442 48% \$214,711 \$212,875 \$1,836 99.1% 8 High 9 17 18 19 Equitas Health 2018 PSH OH0039U5E031811 \$256,811 \$60,313,442 48% \$214,711 \$212,875 \$1,836 99.1% 8 High 9 17 22 10 NCR 2018 Commons at Chantry OH0039U5E031811 \$133,310 \$7,413,259 56% \$13,273 \$5,848,540 \$187,545 \$1,836 99.1% 8 High 9 17 22 10 NCR 2018 Commons at Chantry OH0039U5E031811 \$133,310 \$7,413,259 56% \$13,000 \$1,00	7	,										Ŭ			7	igspace
10 WKCA 2018 Wings OH0102U5E031811 \$257,848 \$4,723,627 36% \$436,812 \$4,36,812 \$0 100.0% 10 High 9 19 10 11 11 11 12 12 13 14 15 15 15 15 15 15 15	8	Ÿ										Ü				Ш
11 CHN 2018 East Fifth Avenue Apartments	9															Ш
12 CHN 2018 Southpoint Place Apartments																1
\$\frac{1}{3}\$ CHN 2018 Terrace Place Apartments\$ OH0092U5E031811 \$\frac{1}{3}\$5,49\$ \$\frac{1}{5}\$5,473,226 \$\frac{1}{4}2\times\$ \$\frac{2}{2}\$09,749 \$\frac{2}{2}09,457\$ \$\frac{2}{2}\$99.9\times\$ 10 High 9 19 13 13 14 CHN 2018 Wilson Apartments\$ OH0101U5E031811 \$\frac{6}{6}.279\$ \$\frac{5}{5},539,505\$ 42\times\$ \$\frac{5}{6}.0,479\$ \$\frac{5}{6}0,479\$ \$\frac{5}{6}0,479\$ \$\frac{5}{6}0\$ 100.0\times\$ 10 High 9 19 14 15 15 NCR 2018 Commons at Grant OH0085U5E031811 \$\frac{5}{2}17,375\$ \$\frac{5}{6}.571,1881 43\times\$ \$\frac{2}{2}97,024\$ \$\frac{2}{2}97,024\$ \$\frac{1}{2}07,004\$ \$\frac{1}{2}07,								, .				,				1
14 CHN 2018 Wilson Apartments			+									Ú				+
15 NCR 2018 Commons at Grant		'					, .	, .				Ü				+
16 NCR 2018 Commons at Buckingham OH0394U5E031808 \$172,375 \$5,884,256 45% \$200,192 \$200,187 \$5 100.0% 10 High 9 19 16 16 17 NCR 2018 Commons at Third OH0372U5E031807 \$172,375 \$6,056,031 46% \$187,490 \$187,463 \$27 100.0% 10 High 9 19 17 18 18 18 18 18 18 18 18 18 18 18 18 18		')				H
17 NCR 2018 Commons at Third OH0372U5E031807 \$172,375 \$6,056,631 46% \$187,490 \$187,463 \$27 100.0% 10 High 9 19 17 18 CHN 2018 Parsons Avenue Apartments OH0093U5E031811 \$256,811 \$6,313,442 \$48% \$214,711 \$212,875 \$1,836 \$99.1% 8 High 9 17 18 19 Equitas Health 2018 PSH OH0080U5E031811 \$805,599 \$7,119,041 \$54% \$653,895 \$648,780 \$5,115 \$99.2% 8 High 9 17 19 20 CHN 2018 Community ACT OH0086U5E031811 \$280,908 \$7,399,949 \$68% \$322,826 \$316,121 \$6,705 \$7.99,88 High 9 17 20 21 CHN 2018 Family Homes OH0082U5E031811 \$183,196 \$7,596,455 \$8% \$183,196 \$153,743 \$29,453 \$3,396 \$8 High 9 17 22 23 YMCA 2018 SRA OH0445U5E031806 \$211,178 \$7,807,633 \$9% \$190,706 \$187,545 \$3,161 \$8,3% \$8 High 9 17 23 24 CHN 2018 Safe Haven OH0097U5E031811 \$188,951 \$7,996,584 \$61% \$17,996,584 \$183,196 \$175,251 \$175,251 \$0 100.0% 10 Medium 5 15 24 25 Alvis, Inc. 2018 Amethyst Program (SRA) OH0074U5E031807 \$7,413,259 \$10,706 \$11,410,413 \$11,414,4687 \$1,910 \$11,434,687 \$1,910 \$1,9																Ш
18 CHN 2018 Parsons Avenue Apartments		Ü														Ш
19 Equitas Health 2018 PSH OH0080U5E031811 \$805,599 \$7,119,041 54% \$653,895 \$648,780 \$5,115 99.2% 8 High 9 17 19 19 19 10 10 10 10 10 10 10 10 10 10 10 10 10												,				Н
20 CHN 2018 Community ACT		•							. ,			Ŭ				Н
21 CHN 2018 Family Homes												,				Н
22 Maryhaven 2018 Commons at Chantry		,		,			,	/				Ŭ				Н
23 YMCA 2018 SRA		,					1 ,	. , .				Ü				Н
24 CHN 2018 Safe Haven OH0097U5E031811 \$188,951 \$7,996,584 61% \$175,251 \$175,251 \$0 100.0% 10 Medium 5 15 24 25 Alvis, Inc. 2018 Amethyst Program (SRA) OH0076U5E031811 \$570,143 \$8,566,727 65% \$315,143 \$311,213 \$3,930 98.8% 8 Medium 5 13 25 26 CHN 2018 Rebuilding Lives PACT Team Initiative \$746,621 \$9,313,348 71% \$707,588 \$699,621 \$7,967 98.9% 8 Medium 5 13 26 27 CHN 2018 TRA OH0084U5E031811 \$1,419,351 \$10,732,699 81% \$1,341,529 \$1,327,397 \$14,132 98.9% 8 Medium 5 13 27 28 TSA 2018 Job2Housing OH0074U5E031807 \$299,837 \$11,032,536 84% \$244,017 \$217,848 \$26,169 89.3% 8 Medium 5 13 28 29 CHN 2018 Leasing SHP Program OH0312U5E031807 \$238,081 \$11,270,617 86% \$253,550 \$252,427 \$1,123 99.6% 10 Low 1 11 29 30 CSB 2018 HMIS/CSP OH0087U5E031811 \$164,070 \$11,434,687 87% \$257,270 \$257,270 \$0 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A							,					Ŭ				\vdash
25 Alvis, Inc. 2018 Amethyst Program (SRA) OH0076U5E031811 \$570,143 \$8,566,727 65% \$315,143 \$315,143 \$3,930 98.8% 8 Medium 5 13 25 26 CHN 2018 Rebuilding Lives PACT Team Initiative \$746,621 \$9,313,348 71% \$707,588 \$699,621 \$7,967 98.9% 8 Medium 5 13 26 27 CHN 2018 TRA OH0084U5E031811 \$1,419,351 \$10,732,699 81% \$1,341,529 \$1,327,397 \$14,132 98.9% 8 Medium 5 13 27 28 TSA 2018 Job2Housing OH0074U5E031807 \$299,837 \$11,032,536 84% \$244,017 \$217,848 \$26,169 89.3% 8 Medium 5 13 28 29 CHN 2018 Leasing SHP Program OH0312U5E031807 \$238,081 \$11,270,617 86% \$253,550 \$252,427 \$1,123 99.6% 10 Low 1 11 29 30 CSB 2018 HMIS/CSP OH0087U5E031811 \$164,070 \$11,434,687 87% \$257,270 \$257,270 \$0 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A									, -			Ŭ				₩
26 CHN 2018 Rebuilding Lives PACT Team Initiative \$\frac{\\$746,621}{\\$9,313,348}\$ \frac{71\}{71\}\$ \$\frac{\\$707,588}{\\$99,621}\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\																Н
27 CHN 2018 TRA OH0084U5E031811 \$1,419,351 \$10,732,699 81% \$1,341,529 \$1,327,397 \$14,132 98.9% 8 Medium 5 13 27 28 TSA 2018 Job2Housing OH0074U5E031807 \$299,837 \$11,032,536 84% \$244,017 \$217,848 \$26,169 89.3% 8 Medium 5 13 28 29 CHN 2018 Leasing SHP Program OH0312U5E031807 \$238,081 \$11,270,617 86% \$253,550 \$252,427 \$1,123 99.6% 10 Low 1 11 29 30 CSB 2018 HMIS/CSP OH0087U5E031811 \$164,070 \$11,434,687 87% \$257,270 \$257,270 \$0 N/A N/A <t< td=""><td></td><td></td><td>OH007603E031611</td><td></td><td></td><td></td><td></td><td></td><td>. ,</td><td></td><td></td><td></td><td></td><td></td><td></td><td>\vdash</td></t<>			OH007603E031611						. ,							\vdash
28 TSA 2018 Job2Housing OH0074U5E031807 \$299,837 \$11,032,536 84% \$244,017 \$217,848 \$26,169 89.3% 8 Medium 5 13 28 29 CHN 2018 Leasing SHP Program OH0312U5E031807 \$238,081 \$11,270,617 86% \$253,550 \$252,427 \$1,123 99.6% 10 Low 1 11 29 30 CSB 2018 HMIS/CSP OH0087U5E031811 \$164,070 \$11,434,687 87% \$257,270 \$257,270 \$0 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A		Ü	OH0084115E031911													\vdash
29 CHN 2018 Leasing SHP Program OH0312U5E031807 \$238,081 \$11,270,617 86% \$253,550 \$252,427 \$1,123 99.6% 10 Low 1 11 29 30 CSB 2018 HMIS/CSP OH0087U5E031811 \$164,070 \$11,434,687 87% \$257,270 \$257,270 \$0 N/A N/A N/A N/A N/A N/A N/A 30							- ' ' - '								28	$oldsymbol{arphi}$
30 CSB 2018 HMIS/CSP OH0087U5E031811 \$164,070 \$11,434,687 87% \$257,270 \$0 N/A N/A N/A N/A N/A N/A N/A 30							. , .	. ,	,						29	\vdash
								,	. , -						30	
31 CHN 2018 SRA OH0083U5E031811 \$1,744,795 \$13,179,482 100% \$1,384,943 \$1,360,783 \$24,160 98.3% 8 Low 1 9 31		·			. , , , , , , , , , , , , , , , , , , ,					,		,	,	,	31	82
01 01 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			31.3003031031811		\$10,110,40Z	20070	\$1,55 - 7,545	\$±,500,105	Ψ2-7,100	33.370			-	j	32	64
															33	55
T-1/															34	
32 CoC Planning \$395,384 \$329,319 \$0							\$329,319	\$329.319	\$0							
33 COC UFA \$395,384 \$219.546 \$0																
Option 1 (descending score based, renewals prioritized) ARD \$13,179,482 FY19 \$12,557,699 \$11,990,297 \$567,402 2018 Score 168.75			ARD			FY19				2018 Scor	e	168.75				
\(\text{List all renewal projects in the order of their scoring}\) \(\text{Tier 1 (94%)}\) \(\text{\$12,444,838}\) \(\text{\$12,444,838}\) \(\text{\$12,444,838}\)	JP41	- · · · · · · · · · · · · · · · · · · ·			'		,_ 5.,,000	,. 30,_01	, ,							
\(\text{List projects that don't fit in Tier 1 in Tier 2} \) \text{Tier 2} \text{\$1,393,619} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	(
Bonus \$658,974 \$734,644 Straddling Project amount in Tier 2	`															
CoC Plan and UFA \$790,769																

#	Project Name	House	Daugs ago.	Paulos salution	Olitoria Simon.	Allering.	Since South,	Singesse (#)	Jungson.	Thousing Etris	Crisco Anno Resolution of Crisco Anno Resolu
1	CHN 2018 Marsh Brook Place and TRA II										
2	YMCA 2018 DV RRH										
-	YMCA 2018 Isaiah Project	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	N/A
\vdash	CHN 2018 Briggsdale II	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
_	CHN 2018 Briggsdale Apartments	Achieved	N/A		N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
	CHN 2018 Inglewood Court	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Not Achieved	N/A	Achieved
	Huckleberry House 2018 Transitional Living Program	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	N/A	N/A	Achieved
	Van Buren Village PSH	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
	VOAGO 2018 Permanent Supportive Housing for Families		N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
_	YWCA 2018 Wings	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
_	CHN 2018 East Fifth Avenue Apartments	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
-	CHN 2018 Southpoint Place Apartments	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Not Achieved	N/A	Achieved
13 14	CHN 2018 Terrace Place Apartments		N/A N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
_	CHN 2018 Wilson Apartments		N/A	Achieved Achieved	N/A N/A	N/A N/A	Achieved Achieved	Achieved Achieved	Achieved Not Achieved	Not Achieved N/A	Achieved Achieved
\vdash	NCR 2018 Commons at Grant	Achieved Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
-	NCR 2018 Commons at Buckingham NCR 2018 Commons at Third	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Not Achieved	N/A	Achieved
F	CHN 2018 Parsons Avenue Apartments	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Not Achieved	N/A	Achieved
-	Equitas Health 2018 PSH		N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
	CHN 2018 Community ACT	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	N/A
21	CHN 2018 Family Homes	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	N/A	N/A	Achieved
	Maryhaven 2018 Commons at Chantry	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
-	YMCA 2018 SRA	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
-	CHN 2018 Safe Haven	Not achieved	N/A	Achieved	N/A	N/A	Not Achieved	Achieved	Not Achieved	N/A	Achieved
-	Alvis, Inc. 2018 Amethyst Program (SRA)	Not achieved	N/A	Achieved	N/A	N/A	Not Achieved	Achieved	Achieved	N/A	Achieved
-	CHN 2018 Rebuilding Lives PACT Team Initiative	Not achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
27	CHN 2018 TRA	Not achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	Achieved	N/A	Achieved
-	TSA 2018 Job2Housing	Achieved	Not Achieved	N/A	Not Achieved	Achieved	Not Achieved	Achieved	N/A	Not Achieved	Not Achieved
H	CHN 2018 Leasing SHP Program	Achieved	N/A	Achieved	N/A	N/A	Achieved	Achieved	N/A	N/A	Not Achieved
30	CSB 2018 HMIS/CSP										
31	CHN 2018 SRA	Not achieved	N/A	Achieved	N/A	N/A	Not Achieved	Achieved	Not Achieved	N/A	Achieved
NEW	Homefull Pivot PSH										
	Homefull Focus RRH										
NEW	YMCA RRH DV Expansion										
32	CoC Planning										
33	CoC UFA										

Option 1 (descending score based, renewals prioritized)

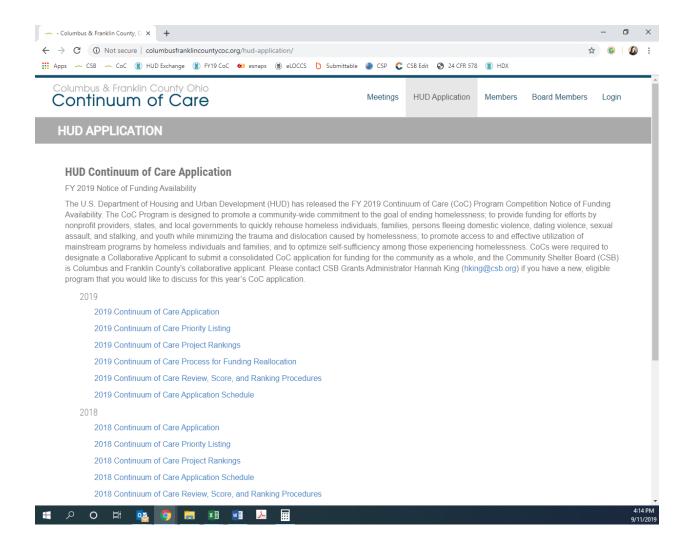
〈 List all renewal projects in the order of their scoring

(List projects that don't fit in Tier 1 in Tier 2

#	Project Name	of the state of th	Pales Proposition of the Proposi	Permission of the second of th	Incress In case Incorporate to the case Incorporate to	TO O' FORM "SO ONSETTING" OF THE PROPERTY OF T
1	CHN 2018 Marsh Brook Place and TRA II					
2	YMCA 2018 DV RRH		N1 / A		N1 / A	21.74
3	YMCA 2018 Isaiah Project	Achieved	N/A	Achieved	N/A	N/A
4	CHN 2018 Briggsdale II	N/A	N/A Ashioved	N/A	N/A Ashioved	N/A
5	CHN 2018 Briggsdale Apartments	Achieved	Achieved	Achieved	Achieved	Not Achieved
3 7	CHN 2018 Inglewood Court	Achieved	Achieved	Achieved	Achieved	Achieved
<u>′ </u>	Huckleberry House 2018 Transitional Living Program Van Buren Village PSH	Not Achieved Achieved	Achieved Achieved	Achieved Achieved	Not Achieved Achieved	Achieved Not Achieved
<u>)</u>	VOAGO 2018 Permanent Supportive Housing for Families		Achieved	Achieved	Achieved	Achieved
.0	YWCA 2018 Wings	Achieved	Achieved	Achieved	Achieved	Achieved
1	CHN 2018 East Fifth Avenue Apartments	Achieved	Achieved	Achieved	Achieved	Achieved
2	CHN 2018 Southpoint Place Apartments	Achieved	Achieved	Not Achieved	Achieved	Achieved
 3	CHN 2018 Terrace Place Apartments	Achieved	Achieved	Achieved	Achieved	Not Achieved
4	CHN 2018 Wilson Apartments	Achieved	Not Achieved	Achieved	Achieved	Achieved
5	NCR 2018 Commons at Grant	Achieved	Achieved	Achieved	Achieved	Achieved
6	NCR 2018 Commons at Buckingham	Achieved	Achieved	Achieved	Achieved	Not Achieved
7	NCR 2018 Commons at Third	Achieved	Achieved	Achieved	Achieved	Achieved
.8	CHN 2018 Parsons Avenue Apartments	Achieved	Achieved	Achieved	Achieved	Not Achieved
.9	Equitas Health 2018 PSH	Achieved	Achieved	Achieved	Achieved	Achieved
20	CHN 2018 Community ACT	Achieved	Not Achieved	Achieved	Achieved	Not Achieved
21	CHN 2018 Family Homes	Achieved	Achieved	N/A	Not Achieved	Not Achieved
22	Maryhaven 2018 Commons at Chantry	Achieved	Achieved	Achieved	Achieved	Not Achieved
23	YMCA 2018 SRA	Achieved	Achieved	Achieved	Not Achieved	Not Achieved
24	CHN 2018 Safe Haven	Achieved	Not Achieved	Achieved	Achieved	Not Achieved
:5	Alvis, Inc. 2018 Amethyst Program (SRA)	Not Achieved	Achieved	Achieved	Achieved	Achieved
26	CHN 2018 Rebuilding Lives PACT Team Initiative	Not Achieved	Not Achieved	Achieved	Achieved	Not Achieved
7	CHN 2018 TRA	Not Achieved	Not Achieved	Not Achieved	Achieved	Not Achieved
8	TSA 2018 Job2Housing	N/A	Achieved	N/A	Not Achieved	Achieved
9	CHN 2018 Leasing SHP Program	Not Achieved	Not Achieved	N/A	Not Achieved	Not Achieved
0	CSB 2018 HMIS/CSP					
1	CHN 2018 SRA	Not Achieved	Not Achieved	Achieved	Achieved	Not Achieved
IEW	Homefull Pivot PSH					
NEW	Homefull Focus RRH					
NEW	YMCA RRH DV Expansion					
32	CoC Planning					
33	CoC UFA					

[〈] List all renewal projects in the order of their scoring

⁽ List projects that don't fit in Tier 1 in Tier 2





1331 Edgehill Road • Columbus, Ohio 43212 • P 614.294.5181 • F 614.294.6895

MEMORANDUM OF UNDERSTANDING BETWEEN

Goodwill Industries of Central Ohio

AND

Community Shelter Board/Columbus and Franklin County, Ohio Continuum of Care

Community Shelter Board (CSB) is the Unified Funding Agency for the Columbus and Franklin County, Ohio Continuum of Care (CoC). CSB leads a coordinated, community effort to make sure everyone has a place to call home and works with 16 agencies across Columbus and Franklin County to provide homelessness prevention, shelter, street outreach, rapid re-housing, and permanent supportive housing for people experiencing homelessness in our community.

To support these efforts, Goodwill Industries of Central Ohio desires to make available workforce development and employment support programs to eligible persons and to embed employment services within the homeless crisis response system in order to better align the homeless and housing crisis response systems with the employment sector. Goodwill Industries of Central Ohio is supportive of efforts being led by CSB and other local partners over the next year to 1) conduct a needs assessment; 2) analyze existing employment-related resources and interventions; 3) review best practices, and 4) identify opportunities for improved screening, assessments, and employment supports; 5) develop system protocols and tools; and 6) test promising new models for embedding employment into the homeless crisis response system. Goodwill Industries of Central Ohio will utilize results of this work to collaborate with CSB and other partners to standardize efforts across the region to connect adults experiencing homelessness to employment supports and opportunities.

AGREED TO AND SIGNED THIS ______ day of August, 2019.

Michelle Heritage, Community Shelter Board

Signature

Marjory Pizzuti, Goodwill Industries







Memorandum of Understanding

Between

Columbus City Schools/Project Connect

and

The Rebuilding Lives Funder Collaborative

This Memorandum of Understanding (MOU) is entered into to be effective on the date found below the signature lines (the "Effective Date"), by and between Columbus City Schools/Project Connect and the Rebuilding Lives Funder Collaborative ("RLFC"). Columbus City Schools/Project Connect and RLFC are collectively referred to as the "Parties" and individually as a "Party."

Background

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 CoC 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.

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.

Purpose

This MOU sets forth the understanding of the Parties in conjunction with the RLFC's application to the Department of Housing and Urban Development for the Youth Homelessness Demonstration Program (YHDP) and the community's goal to prevent and end youth homelessness, as defined by the United States Interagency Council on Homelessness in its Opening Doors strategic plan to end homelessness.

The Parties have agreed to work together to implement the community's plan to prevent and end youth homelessness and wish to set forth their mutual agreement regarding their respective responsibilities for the implementation of this strategy.

Responsibilities

LEA Responsibilities

- Columbus City Schools/Project Connect is the Local Education Agency and is committed to collaborate with the RLFC in the implementation of the YHDP grant and the local plan to prevent and end youth homelessness.
- LEA will continue to participate as an active member of the RLFC.
- LEA will participate as an active member of the Committee to Prevent and End Youth Homelessness.

RLFC Responsibilities

- The RLPC has the primary responsibility of implementing the local plan to prevent and end youth homelessness.
- The RLFC has the primary responsibility of implementing programs under the YHDP grant, if the grant will be awarded.
- The RLFC will operate the Committee to Prevent and End Youth Homelessness as a standing committee under the RLFC.
- The RLFC will operate the Youth Advisory Board as a standing committee under the RLFC.
- The RLFC will ensure appropriate and sufficient funding for the implementation of the local plan to prevent and end youth homelessness.
- The RLFC will monitor progress in the goal of preventing and ending youth homelessness and performance of the programs implemented under this strategy.

Duration

This MOU is at-will and may be modified by mutual consent of the Parties. This MOU shall remain in effect until modified or terminated by any one of the Parties, by mutual consent.

IN WITNESS WHEREOF, the Parties have executed this MOU on the dates set forth beneath their respective signatures below.

Date:

Columbus City Schools/Project Connect Representative name_\frac{1}{2}

Date:

-

Michelle D Heritage

Chair, Rebuilding Lives Funder Collaborative

Approved as to form 3-28-2018

Loren L. Braverman, General Counsel

Columbus City Schools

Memorandum of Understanding

Between

South-Western City School District

and

The Rebuilding Lives Funder Collaborative

This Memorandum of Understanding (MOU) is entered into to be effective on the date found below the signature lines (the "Effective Date"), by and between South-Western City Schools and the Rebuilding Lives Funder Collaborative ("RLFC"). South-Western City Schools and RLFC are collectively referred to as the "Parties" and individually as a "Party."

Background

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 CoC 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.

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.

Purpose

This MOU sets forth the understanding of the Parties in conjunction with the RLFC's application to the Department of Housing and Urban Development for the Youth Homelessness Demonstration Program (YHDP) and the community's goal to prevent and end youth homelessness, as defined by the United States Interagency Council on Homelessness in its Opening Doors strategic plan to end homelessness.

The Parties have agreed to work together to implement the community's plan to prevent and end youth homelessness and wish to set forth their mutual agreement regarding their respective responsibilities for the implementation of this strategy.

Responsibilities

LEA Responsibilities

- South-Western City Schools is a Local Education Agency and is committed to collaborate with the RLFC in the implementation of the YHDP grant and the local plan to prevent and end youth homelessness.
- LEA will participate as an active member of the Committee to Prevent and End Youth Homelessness.

RLFC Responsibilities

- The RLPC has the primary responsibility of implementing the local plan to prevent and end youth homelessness.
- The RLFC has the primary responsibility of implementing programs under the YHDP grant, if the grant will be awarded.
- The RLFC will operate the Committee to Prevent and End Youth Homelessness as a standing committee under the RLFC.
- The RLFC will operate the Youth Advisory Board as a standing committee under the RLFC.
- The RLFC will ensure appropriate and sufficient funding for the implementation of the local plan to prevent and end youth homelessness.
- The RLFC will monitor progress in the goal of preventing and ending youth homelessness and performance of the programs implemented under this strategy.

Duration

This MOU is at-will. This MOU shall remain in effect until modified or terminated by any one of the Parties.

IN WITNESS WHEREOF, the Parties have executed this MOU on the dates set forth beneath their respective signatures below.

William H. Wise, Ph.D., Superintendent

South-Western City School District

Michelle D Heritage

Date

Chair, Rebuilding Lives Funder Collaborative

MEMORANDUM OF UNDERSTANDING

BETWEEN

Workforce Development Board of Central Ohio

AND

Community Shelter Board/Columbus and Franklin County, Ohio Continuum of Care

Community Shelter Board (CSB) is the Unified Funding Agency for the Columbus and Franklin County, Ohio Continuum of Care (CoC). CSB leads a coordinated, community effort to make sure everyone has a place to call home and works with 16 agencies across Columbus and Franklin County to provide homelessness prevention, shelter, street outreach, rapid re-housing, and permanent supportive housing for people experiencing homelessness in our community.

To support these efforts, the Workforce Development Board of Central Ohio desires to work with CSB to embed employment services within the homeless crisis response system and better align the homeless and housing crisis response systems with the employment sector. The Workforce Development Board will work with CSB and other local partners over the next year to 1) conduct a needs assessment; 2) analyze existing employment-related resources and interventions; 3) review best practices, and 4) identify opportunities for improved screening, assessments, and employment supports; 5) develop system protocols and tools; and 6) test promising new models for embedding employment into the homeless crisis response system. The Workforce Development Board will utilize results of this work to collaborate with CSB and other partners to standardize efforts across the region to connect adults experiencing homelessness to employment supports and opportunities.

AGREED TO AND SIGNED THIS **27** day of August, 2019.

Dutage

Michelle Heritage

Community Shelter Board

Signature

Lisa Patt-McDaniel Workforce Development Board

Lisa Patt-McDaniel



Supporting Partnerships for Anti-Racist Communities (SPARC)

Columbus, Ohio

Initial Findings from Quantitative and Qualitative Research

This document was prepared by the Center for Social Innovation in Needham, MA in collaboration with Community Shelter Board of Columbus, OH

May 2018

Authors:
Jeffrey Olivet
Marc Dones
Molly Richard
Catriona Wilkey
Svetlana Yampolskaya
Maya Beit-Arie





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Homelessness in the United States is a national tragedy, perpetuated by decades of bad public policy, inadequate funding, negative stereotypes, and public fatigue. The causes of homelessness have often been misunderstood, with the general public ascribing individual vulnerabilities as the primary determinants of who becomes homeless. While these may play a role, they do not explain the scope or the root of the problem. Homelessness is fundamentally a structural issue— a result of a chronic lack of affordable housing, economic immobility, and systemic racism.

People of color are dramatically more likely than White people to experience homelessness in the United States. This is no accident, but a result of centuries of structural racism that have excluded historically oppressed people—particularly Black Americans and Native Americans—from equal access to housing, community supports, and opportunities for economic mobility.

The Center for Social Innovation (C4) launched Supporting Partnerships for Anti-Racist Communities (SPARC) in 2016 in response to overwhelming evidence that people of color were dramatically overrepresented in the nation's homeless population—across the country and regardless of jurisdiction. Since then, SPARC has launched mixed

methods research and action in six communities to better understand how people are experiencing systemic racism in relation to homelessness, and to leverage that knowledge toward systems transformation.

From November 28th to December 2nd of 2016, SPARC partnered with the Community Shelter Board and other service providers in Columbus, Ohio to collect qualitative and quantitative data to examine the racial dimensions of homelessness in the area. Data collection included:

- Individual interviews with 24 people of color experiencing homelessness
- Three focus groups of consumers of color, providers of color, and stakeholders
- Homeless Management Information System (HMIS) data from fiscal years 2014 - 2016 covering 32,754 client records
- An online survey of 100 homeless service providers

This report presents the major findings from the research in Columbus and recommend tangible steps towards a response system grounded in racial equity.

Findings

Based on quantitative and qualitative analyses conducted by

the SPARC team, the data presented below show demographics of all people served by the homeless service systems in SPARC communities; high level findings from the provider workforce survey; and major themes that emerged from the qualitative interviews and focus groups.

Quantitative Data

Demographics

Table 1 compares the racial/ethnic breakdown of the general population, the population in poverty, the population in

deep poverty, and the homeless population.

Table 1. Race of people in the HMIS system compared to those in poverty, deep poverty, and in the general population in

Race	Total de- duplicated Percent, HMIS 2014-2016 a	Percent of Deep Poverty Level Population 2015 ^b	Percent of Poverty Level Population 2015c	Percent of population 2015 ^d
Black	64.9%	39.3%	39.9%	22.3%
White	33.5%	47.7%	48.2%	71.3%
American Indian or Alaskan Native	.07%	0.3%	0.4%	0.2%
Asian	0.3%	4.5%	3.5%	4.4%
Native Hawaiian or Pacific Islander	0.2%	0.0%	0%	0.04%
Other or Multiple	N/A	5.7%	5.6%	3.8%
Hispanic/Latinx	3.9%	20.5%	8.1%	5.2%

^a Data includes PSH, so some clients did not experience homelessness during the 3-year period, but were homeless upon admission to PSH; ^b ACS 5yr 2015, Less than 50% federal poverty level;





Franklin County Ohio

In Columbus/Franklin, County, Black individuals are disproportionately represented in the homeless population (64.9%) compared to their proportion of the general population (22.3%), the population in poverty (39.9%), and the population in deep poverty (39.3%) (See Table 1).

Analysis of **entry and exit locations** revealed differences by race and ethnicity. Black individuals entered an emergency shelter or street outreach program from a doubled-up situation at a higher rate than White or Hispanic/Latinx[†] individuals.

Forty-one percent of Black clients entered a homeless service project from doubling up, compared to 28.7% of Whites. Just below a third (32.4%) of Hispanic/Latinx individuals entered from doubling up.

White, Black, and Hispanic/Latinx individuals varied little in the rate *exiting* to doubled up situations from an emergency shelter or street outreach program. Individuals

exited into doubling up at rates of 36.0%, 34.8%, and 37.0%, respectively.

White individuals exited back into homelessness from emergency shelter or street outreach at a greater rate than Black and Hispanic/Latinx individuals. A quarter (25.4%) of White clients exited from those programs into homelessness, compared to 15.3% of Black clients and 17.5% of Hispanic/Latinx clients.

White individuals exited emergency shelter or street outreach into permanent housing at a lower rate. Compared to 22.9% of White individuals, 38.0% of Black individuals and 32.4% of Hispanic/Latinx individuals exited into permanent housing without subsidy.

Predictors of exiting into homelessness

Multivariate logistic regressions were conducted to examine predictors associated with **exiting the HMIS system into homelessness.** Project exit indicates the end of a client's participation with an HMIS project (e.g., Emergency

Shelter, Street Outreach, Safe Haven, Transitional Housing, Rapid Re-housing). Use of this data element may vary depending on project type. "Exiting into homelessness" means that someone left the project for a place not meant for human habitation or for emergency shelter (including motel with a youcher).

Results of a logistic regression across the entire HMIS dataset indicated that Asian individuals (n=51) were more than two times more likely to exit into a homeless living situation (OR = 2.21, p < .01) than White individuals. This finding should be interpreted with caution given the small sample size of Asian clients. In contrast, individuals who were Black were 67% less likely to end up in a homeless living situation than White individuals (OR = 0.60, p < .01). Other racial/ethnic groups were not significantly associated with this exiting into homelessness (see **Table 2**).

A second logistic regression examined other variables

Table 2. Race as a Predictor of Homelessness at Exit Among Clients in HMIS system (N=32,639)

	Log	Logistic Regression Model Parameters					
	$\boldsymbol{\mathit{B}}$	Wald $\chi^2(1)$	OR	95% CI			
Race***							
Black	- 0.51	159.23**	0.60	[0.55, 0.65]			
American Indian or Alaskan Native	0.32	2.93	1.38	[0.37, 2.00]			
Asian	0.79	8.69**	2.21	[1.30, 3.73]			
Native Hawaiian	0.17	0.20	1.19	[0.56, 2.51]			
Hispanic	- 0.14	1.80	0.87	[0.71, 1.07]			

Note. OR = odds ratio; CI = confidence interval.

32,754 is the total number of individuals in the system; 32,639 is the number of individuals without missing values listed in the table on racial/ethnic groups.

beyond race. Having a child had the strongest effect on the likelihood of not exiting into homelessness. Clients with children were 14 times less likely to exit into homelessness. Institutional care and correctional facility as a place prior to the project entry were associated with exiting into homelessness (54% and 58% increased odds, respectively). In contrast, being in a permanent housing situation (with or without subsidy) or in transitional housing prior to the project entry decreased the odds of exiting into homelessness. Clients who were in permanent housing with subsidy were five times less likely and clients who were in a permanent housing without subsidy were almost four times less likely to exit into homelessness. Clients who were in transitional housing before entering the project were over two times less likely to exit into homelessness.

Workforce

The provider workforce survey included data from 100



3

[†] Latinx is a gender neutral term used in lieu of Latino or Latina.

^{*}*p* < .05, ***p* < .01.

^{***} White is reference group

individuals working in homeless service agencies. Among 100 provider staff who completed an online survey, 63% identified as White, 33% as Black, 4% as more than one race, and 4% as Hispanic or Latinx. Of 29 administrators, 22 identified as White (75%). Thirty-six percent of Black respondents have experienced homelessness, compared to 14% of White respondents.

Qualitative Data

Interpretation of qualitative data focused on **pathways into** homelessness and barriers to exiting homelessness.

Pathways into homelessness for people of color are best characterized relationally and are often characterized by *network impoverishment*. Barriers to exiting homelessness for people of color are almost entirely systemic and include difficulty finding employment that pays a livable wage and eviction history or felony status limiting both housing and employment options.

Pathways into Homelessness

The most striking feature of respondents' pathways into homelessness was the social dimension in their narratives. People did not come to experience homelessness simply through a lack of capital—they came to experience homelessness through fragile social networks. The fragility of these networks rests on two related deficiencies: lack of capital, and lack of emotional support. The quote below from a respondent typifies this dual collapse:

I've always been able to, "Hey man listen I need a couple hundred dollars, let me stay here for a month or two." I was going through that this whole past year, but now I don't have any more money to give nobody and it's like ... Me and my baby don't take that much space. It's not like I have three or four kids. He sleeps with me. It's just like, "Oh well you don't have no money." Well no I really don't. All my money and all my resources have been exhausted this past year...

This particular quote demonstrates a key pattern in the network fragility our team witnessed: people are not unwilling to double up or take in friends or family, but they do not have the resources to accommodate the additional household costs. Seeing this come up consistently across participating communities, SPARC has begun to refer to this as **network impoverishment**. There is no extra money anywhere in the network which results in a lack of flexibility in community-level safety nets. In other words: it's not just

that our respondents are experiencing poverty—everyone they know is experiencing poverty, too. One participant in our focus group phrased it as follows:

Also, in the African-American community, there is a lot of us that's in poverty and struggling just trying to make it. So, the people we know are struggling as bad as we are, and they can't even help themselves. So, what do you think they are going to help us, if they can't even help themselves? They are struggling day to day, just like how we are struggling day to day.

These preliminary findings suggest upstream intervention sites that are community based and focused on stabilizing fragile networks through infusions of capital—either through targeted subsidies or through flexible emergency funding. Moreover, interventions must take intergenerational trauma and poverty into account in order to effectively strengthen individual and community capacity to respond to the levels of stress to which they are systemically exposed.

Barriers to Exiting Homelessness

The most prominent barriers to exiting homelessness that our respondents identified were systemic. These often included difficulty obtaining stable employment with a living wage and difficulty securing housing due to eviction or criminal justice history. The following quote highlights the barrier of criminal justice involvement:

Now I have this felony and now I have a son so I can't do illegal things that I would normally do because I have to think every day, "If I go to jail my son goes to foster care." So trying to do things the legal way and stay out of trouble with my probation officer all of those things just led me here ultimately is pretty much what happened. I'm just like I've met with my advocate here and she found me a sponsor, and she's like, "Well we'll help you as much as we can, and as long as you're doing what you're supposed to be doing." And I'm like, "Listen ... if I could get in somewhere where I could work, it wouldn't be a problem. I can work the hours that I need to work to take care of myself and my son. The problem is actually finding a job.

These respondents' experiences are typical of many of our Columbus interviewees. Most people reported some system involvement that complicated access to housing and employment. Additionally, there were many histories of chronic underemployment; many respondents were currently employed while making use of homelessness



response services. Indeed, most respondents had significant work history and did not seem to have difficulty securing employment—they had difficulty securing employment *with a living wage*. One respondent stated:

We don't get the same shots at employment, this is my experience. We don't get the same opportunities for employment as white people. Like I have a college degree, I should never even have to worry about employment, never got the good job with the benefits. Always something temporary through a temporary agency.

Another thread that arose in several respondent narratives was the issue of eviction. Quantitative report data indicates that a large number of families (59%) are exiting programs into unsubsidized rent situations. One respondent characterized their situation as follows:

I have an eviction on my record from my last apartment because when I got up and left I stopped paying rent and everything and it turned into an eviction so that made it hard for the shelter to help me get an apartment because that's what was supposed to happen like I was supposed to be in the family shelter and they are supposed to be able to assist me in getting housing but because I had that eviction and my credit's bad it just made it like super difficult for them to be able to do that.

We also heard from a number of respondents that they summarily walked away from housing without terminating their leases, because of violence in the home. This suggests a potential intervention site in the re-structuring of eviction appeals in cases of domestic violence or other complex situations where a person is responding inside the context of extreme stress. Again, when considering potential interventions, it will be important to think about the ways in which we can target resources towards these nested vulnerabilities.

Recommendations

Based on the quantitative and qualitative findings presented in this report, various strategies can guide organizational leaders, researchers, policy makers, and community members as they work to address racial inequity in homelessness. Because the underlying issues that drive high rates of homelessness among people of color, it is important to address them and multiple levels simultaneously. It is not possible to solve these issues at the programmatic level

The recommendations presented here are ambitious and structural in nature to respond to the underlying systemic inequities that have for decades put people of color at greater risk for experiencing homelessness. Some of the recommendations are immediate and others are much longer term. Some are local, some are national. The authors fully recognize that policy makers and the general public may not fully embrace these recommendations at present and that much work will need to be done to move them all forward.

Based on the quantitative and qualitative findings presented in this report, we propose the following strategies to guide organizational leaders, researchers, policy makers, and community members as they work to address racial inequity in homelessness:

Organizational Change

- Ensure that programs are anti-racist. Performing
 internal systems audits and looking at program
 output data by race and ethnicity for
 disproportionality can help target the work. In
 addition, staff will benefit from continuous
 training on the intersection of race and
 homelessness, on bias, and on strategies to
 confront racism within their work.
- Establish professional development opportunities to identify and invest in emerging leaders of color in the homelessness sector.
- Develop or adapt behavioral health interventions, domestic violence programs, and other supportive services for people of color experiencing homelessness.
- Re-framing workforce development curricula to target enhancing people's skills re: industries that are in demand (for example, a code academy) and provide livable wages with benefits.

Research



alone.

- Conduct additional research to understand the scope and needs of Hispanic/Latinx homelessness and of transgender and gender-expansive individuals.
- Conduct expanded qualitative and quantitative data collection to better understand the complicated dynamics that drive inflow, outflow, and return to homelessness for people of color, especially families with children, in the homeless services system.

Policy

- Collaborate to increase affordable housing availability. Develop new affordable housing stock through broader use of inclusionary zoning and mandatory affordable units for new developments. We need to look more deeply at both the rate of production of housing units and subsidy amounts to stabilize people within units now available.
- Introduce regulation or legislation to prevent speculators from conducting mass evictions or choosing not to renew leases of tenants, and implement and enforce existing fair housing protections.
- Increase homelessness prevention efforts, including targeted eviction prevention for people at risk of homelessness and working with connected systems—criminal justice, child welfare, and public health systems—to reduce the number

- of people exiting into homelessness from sites within those systems.
- Investigate flexible subsidies. Many financial crises start as non-rent related. Respondents' initial needs were for food, car repair, or bills. This suggests that for some people, flexible subsidies could be used to avert crises that spiral into homelessness.

Individual Action

- Educate yourself, your organization, and the wider community on interpersonal, institutional, and structural racism and the facts about race and homelessness.
- Use the data emerging from work related to racial inequity to shape advocacy and public awareness strategies at the individual provider, organizational, and community levels.

Summary

These recommendations grew out of insights from the people who participated in this study—people of color experiencing homelessness—and they are grounded by the research findings. SPARC and Community Shelter Board recognize that equity-based work should not be confined to specific initiatives, but rather should be the lens through which all of the work flows. As communities develop equity approaches, they do not happen in isolation, limited to one program or one response. Instead, racial equity models need to be widely spread across systems and sectors.

Conclusion

The homelessness field stands at a crossroads: continue to use color-blind strategies to solve an entrenched social problem that disproportionately impacts people of color, or embrace a racial equity approach to addressing homelessness. At this crossroads, it is critical to understand that racial equity should not simply be another initiative or program that is implemented in the mix with other strategies. Instead, commitment to racial equity must permeate all other tactics and strategies that cities, counties, states, and the nation use to prevent and end homelessness.

Acknowledgments

The SPARC team would like to acknowledge the Oak Foundation, Community Shelter Board, the Columbus Urban League, and the United Way of Central Ohio, whose generous support allowed us to complete this project. We would like to thank our partners in the SPARC communities, whose passion and insight continues to inspire us. Finally, we are most grateful to the courageous individuals who were willing to share their stories with us—stories of suffering and resilience. Their strength in the face of structural racism is inspiring, and their wisdom guides our way to finding better ways to create a good and just society.

Methods



Phase I of SPARC research involved an ambitious mixed-methods (quantitative and qualitative) study of race and homelessness in six American communities. The study examined:

- 1. How rates of homelessness for people of color compare to the general population and the population of people living in deep poverty (<50% of federal poverty rate).
- 2. Pathways into homelessness for people of color.
- 3. Barriers to exiting homelessness for people of color.
- 4. Experiences of people of color within the homelessness response system.

SPARC communities were selected based on various criteria: geographical diversity; willingness to participate in the study and the SPARC initiative more broadly; capacity to identify a point person for HMIS data sharing; and ability to recruit individuals for qualitative interviews and focus groups.

Quantitative Methods

Quantitative data analysis is based on HMIS administrative data from the Franklin County/Columbus, OH Continuum of Care for fiscal years 2014, 2015, and 2016 (July through June). There were 32,754 clients in the analyzed dataset. For some analyses, we looked just at emergency shelter and street outreach. Multivariate logistic regressions represent all individuals in the system from 2014-2016.

To learn more about the race and ethnicity of people working in housing and homeless service programs in SPARC communities, the research team administered an online survey. A link to the survey was sent through e-mail using Continuum of Care (CoC) listservs and through agency leadership sharing it electronically with their staff. The survey was voluntary and was open to respondents through Survey Monkey for approximately one month.

SPSS Statistics 25.0 was used to run frequencies and descriptive statistics. Multivariate logistic regressions were conducted to examine predictors associated with three independent variables related to exiting the HMIS system: exiting into homelessness; exiting into permanent housing *with* a subsidy; and exiting into permanent housing *without* a subsidy. All analyses were conducted using Mplus version 8 software.¹

Qualitative Methods

The SPARC team collected 24 oral histories during one week in Columbus, OH in November-December 2016. These histories were collected entirely from people of color currently experiencing homelessness. All respondents were recruited at sites of service delivery in Columbus, although several respondents were unsheltered at the time of their interview. Participants were recruited using convenience and purposive sampling methods. During the same week, the SPARC team also facilitated three focus groups—one for people of color experiencing homelessness (clients of a family shelter), one for direct service providers of color, and one for community leaders in the housing and homeless services systems as well as adjacent systems. Data collection was guided by interview and focus group protocols the team developed.

The research team used a Grounded Theory approach² to identify themes and concepts in the data and to develop a codebook, which allows for themes and concepts to emerge organically from the transcripts, rather than approach the data with any set hypothesis. NVIVO software was used to code the transcripts and run analyses.³

Limitations

Since the team used convenience and purposive sampling strategies for the interviews and focus groups, the qualitative data may not reflect the experiences of people disconnected from services. Another limitation is the lack of a White comparison group for the interviews, which would, in future research, help shape an understanding of the differences in the experience of homelessness for White people and people of color. The majority of respondents experiencing homelessness were currently receiving services, and all service provider and stakeholder participants were currently employed in the homelessness system or connected systems. Even though participants were informed that their answers would not impact their services or employment and all reports would maintain anonymity, people may have shared less out of concern for confidentiality.

Despite these limitations, the study offers a wide-ranging set of findings that can serve as a foundation for improvements in policy, practice, and future research.

Institutional Review Board Approval

Research was conducted according to ethical standards and this study has been approved by Heartland Institutional Review Board.

References



¹ Muthén, L.K. and Muthén, B.O. (1998-2010). Mplus User's Guide. Sixth Edition. Los Angeles, CA: Muthén & Muthén.

² Charmaz, K., & Belgrave, L. (2012). Qualitative interviewing and grounded theory analysis. *The SAGE handbook of interview research: The complexity of the craft*, *2*, 347-365.

³ QSR International. (n.d.). NVivo product range | QSR International. Retrieved from http://www.qsrinternational.com/nvivo/nvivo-products

MEMORANDUM OF UNDERSTANDING

BETWEEN

YMCA of Central Ohio

AND

Community Shelter Board/Columbus and Franklin County, Ohio Continuum of Care

Community Shelter Board (CSB) is the Unified Funding Agency for the Columbus and Franklin County, Ohio Continuum of Care (CoC). CSB leads a coordinated, community effort to make sure everyone has a place to call home and works with 16 agencies across Columbus and Franklin County to provide homelessness prevention, shelter, street outreach, rapid re-housing, and permanent supportive housing for people experiencing homelessness in our community.

To support these efforts, YMCA Family Shelter – one of the CoC's two family emergency shelters and a Head Start program location – ensures that children staying at the Family Shelter have access to public education, as required by the McKinney-Vento Homeless Assistance Act of 1987. In addition to collaboration with public school systems to ensure continued access to education for school-age children, YMCA Family Shelter agrees to refer early childhood-age children to the YMCA Head Start Program that is co-located with the emergency shelter or other YMCA Head Start programs.

AGREED TO AND SIGNED THIS day of August, 2019.

Michelle Heritage, Community Shelter Board

Tony Collins, YMCA of Central Ohio

Signature

MEMORANDUM OF UNDERSTANDING

BETWEEN

YWCA Columbus

AND

Community Shelter Board/Columbus and Franklin County, Ohio Continuum of Care

Community Shelter Board (CSB) is the Unified Funding Agency for the Columbus and Franklin County, Ohio Continuum of Care (CoC). CSB leads a coordinated, community effort to make sure everyone has a place to call home and works with 16 agencies across Columbus and Franklin County to provide homelessness prevention, shelter, street outreach, rapid re-housing, and permanent supportive housing for people experiencing homelessness in our community.

To support these efforts, YWCA Family Center – one of the CoC's two family emergency shelters and an early childcare provider and Head Start partner – ensures that children staying at the Family Center have access to public education, as required by the McKinney-Vento Homeless Assistance Act of 1987. In addition to collaboration with public school systems to ensure continued access to education for school-age children, YWCA Family Center agrees to refer early childhood-age children to the YWCA Safe and Sound early childcare program that is co-located with the emergency shelter. The YWCA Family Center agrees to serve all children staying at the shelter needing these services.

AGREED TO AND SIGNED THIS 2719 day of August, 2019.

Michelle Heritage, Community Shelter Board

Signature

Christie Angel, YWCA Columbus

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