

AGENDA
Columbus and Franklin County, Ohio
Continuum of Care Meeting
 Friday, September 15, 2023
 1:00pm – 3:00pm
 Virtual Meeting

Time	Item	Presenter	Action
1:00pm	Welcome and Agenda Review	Michael Wilkos	
1:05pm	Administrative Issues <ul style="list-style-type: none"> ⟨ Approve minutes from June 7, 2023 meeting (A) ⟨ Recommend shifting meetings to hybrid/in person ⟨ Workgroup updates <ul style="list-style-type: none"> ○ DEI strategy subgroup 	Michael Wilkos Shannon Isom	✓
1:15pm	FY23 CoC Application and Project Priority Listing <ul style="list-style-type: none"> ⟨ Review and approve new and renewal Project Prioritization, Scoring and Ranking Policy and Procedure (A) ⟨ Review and approve the 2023 CoC Project Priority Listing, review renewal project ranking, review new project ranking (A) ⟨ Review and approve the 2023 CoC Application (A)(R) 	Lianna Barbu	✓ ✓ ✓
2:15pm	Strategic Issues <ul style="list-style-type: none"> ⟨ DEI Strategy progress 	Shannon Isom	
2:30pm	System & Community Framework Updates <ul style="list-style-type: none"> ⟨ Programming Updates ⟨ 4th Quarter SPIR (A) 	Steve Skovensky Lianna Barbu	
3:00pm	Adjourn		

Next Meetings

⟨ TBD

(A) = Attachment (H) = Handout (P) = Previously Distributed (R) = Resolution

SUMMARY

Columbus and Franklin County, Ohio

Continuum of Care Meeting

Friday, September 15, 2023

1:00pm – 3:00pm

Virtual Meeting

Zoom: <https://us02web.zoom.us/j/82217825879?pwd=ZGJSZi90aFdCb3Btd09nZmV6NmZ2Zz09>

Administrative Issues

- ⟨ CoC Board members recommend the CoC consider representation in a DEI Strategy subgroup.

FY23 CoC Application and Project Priority Listing

Decisions required – Review new and renewal project ranking procedures and approve; approve CoC application and project ranking;

- ⟨ Our CoC can apply for \$1,326,682 in bonus funding and \$975,934 in DV bonus funding for new projects. Per the June 7, 2023 CoC resolution on new permanent housing, the CoC prioritized Homefull Leasing Expansion (formerly Hotel PSH), CHN Knoll View Place, and CHN Deer Hill Place.
- ⟨ The prior prioritized YMCA/Beacon project removed itself from the competition as the project is not ready. CSB proposed to replace the project with the new CMHA/YMCA McKinley Manor.
- ⟨ Partner agencies submitted 34 renewal project applications. CSB submitted applications for HMIS, CoC Planning and Unified Funding Agency projects.
- ⟨ CSB prepared the project ranking options for CoC consideration based on the updated 2023 CoC Review, Score, and Ranking Procedures to be approved by the CoC.
- ⟨ A new application was submitted for DV Joint TH-RRH by Lutheran Social Services (LSS) CHOICES for Victims of Domestic Violence.

DEI Strategy progress

Shannon Isom will provide an update on the progress on the CoC's DEI Strategy, per the next steps outlined in the June CoC meeting.

- ⟨ CSB will pinpoint Action Items of the who—how each particular cohort/population moves through our system, which have barriers, what are those barriers, what do they do well and don't; and, identify barriers for each subgroup population and steps to alleviate.

System and Community Framework Updates

Steve Skovensky will update the CoC on the latest programming updates.

Lianna Barbu will provide an overview of the 4th Quarter System and Program Indicator Report.

MINUTES

Columbus and Franklin County, Ohio

Continuum of Care Meeting

Wednesday, June 7, 2023

12:00 – 2:00PM

Virtual Meeting

Continuum of Care (CoC) Members: Beth Fetzer-Rice, Buck Bramlish, Carl Landry, Chanda Wingo, Christopher Maitland, Dr. Maria Houston, Emerald Hernandez-Parra, Felisha Lyons, Genee Cosby, Jeff Pattison, Jim Rose, Jonathan Welty, Kelsey Strausbaugh, Kier Scott, Lark Mallory, Lisa Phillips, Michael Wilkos, Roxann Payne, Shannon Isom, Sheila Prillerman, Steve Smith, Sue Darby, Tina Rutherford

Community Shelter Board (CSB) staff: Lianna Barbu, Steve Skovensky, Kirstin Jones, Gillian Gunawan

Continuum of Care (CoC) Members (not in attendance): Adam Troy (Community of Caring Foundation), Andy Keller (CSB Board), Donna Mayer (Legal Aid Society of Columbus), Emily Savors (The Columbus Foundation), Frank Beel (Twin Valley Behavioral Healthcare), Hannah Estabook (Sanctuary Nights), Jon Cardi (CSB Board), Le-Ann Harris (OhioHealth), Lt. Kyle Kincade (Columbus Police Department), Marcus Johnson (Columbus Mayor's Office), Mason Alexander (Franklin County Department of Jobs and Family Services), Rei Scott (Youth Action Board), Scott Scharlach (Columbus Metropolitan Housing Authority), Sue Villilo (ADAMH Board), Terri Power (Corporation for Supportive Housing), Tiara Ross (Office of Columbus City Attorney)

Guests: Ruchelle Pride, Vunessa Allen-Martin

Administrative Issues

Minutes

Michael Wilkos asked for additions to and approval of the minutes from the February 1, 2023 CoC meeting. Sheila Prillerman motioned, Jon Welty seconded, and the CoC agreed.

CoC Membership Recommendations

Michael asked for approval of the CoC Membership Resolution which proposes no changes in CoC or CoC Board membership for FY24. Emerald Hernandez-Parra motioned, Jeff Pattison seconded, and the CoC agreed.

Governance and Policy Statements and Annual Plan

CSB is proposing no changes to the Governance and Policy Statements and Annual Plan.

Michael asked for a motion to recommend approval of the Governance and Policy Statements, approval of the Annual Plan as presented, reauthorization of the CoC Board to

act on behalf of the CoC, and reauthorization of CSB as the Collaborative Applicant and Unified Funding Agency. Sheila moved, Jim Rose seconded, and the CoC agreed.

Conflict of Interest Forms

Gillian reminded CoC members to complete their annual [Conflict of Interest disclosure form](#) by July 1, 2023.

Strategic Issues

2023 PIT Count Results

- < A PIT Count press release was jointly released by CSB and the CoC on June 6; the release includes the results of the 2023 PIT count and is illustrative of the Ohio housing market. A decade ago, people in Columbus needed only 2.6x their income to afford housing; now, they need 4.1x their income.
- < Michael thanked CSB and CoC Board members for their work on the PIT Count Press Release; he thanked Beth for providing a press quote.
 - o Beth stated that this year's PIT count results are more nuanced than in the past, and that she believes the broader inclusion of other systems was really important and will allow us to reach a wider audience.
 - o Shannon expressed her appreciation for everyone's efforts. She stated that she hopes to create a more kinetic, active, and engaged space.
- < Lianna reviewed the 2023 PIT Count Results.
 - o In 2023, we counted 2,337 people sheltered and unsheltered. 1,839 were sheltered and 498 were unsheltered.
 - o When compared to 2022, there was a 22.2% overall increase, 6.3% increase for families, 28.2% increase for individuals, and 140% increase for youth under 18; but, 12 youth were counted in 2023 and 5 in 2022, so while the percent is large the actual numbers are small but still increasing.
 - o The Emergency Shelter count increased by 18.4%, a difference of 262 people, 80 of which were in families and 179 single adults.
 - o Transitional Housing increased 4.9%.
 - o The unsheltered count increased 45.6% or by 156 individuals.
 - o 2022 was one of the coldest PIT counts and was during the Omicron variant which may speak to the much lower number in 2022, due also to the lack of volunteers and outreach workers.
 - o Chronic homelessness increased by 15%, as well as all subpopulations, with a major increase in the DV population.
 - o Lianna summarized that since CY08 there has been an increasing trend, with 2023 being a record PIT count high.

Program Evaluation Results

- ⟨ Lianna explained that CSB prepares the Program Evaluation report annually. Out of 84 projects, 22 were rated as high, 31 as medium, and 25 as low performers; 6 were not rated due to being open for a limited time during the reporting period or being too new to be evaluated. All RRH projects scored as low performers.
 - ⟨ Christopher Maitland asked what happens with “low” scoring programs, and if there are any system-wide efforts to improve RRH program performance. Lianna explained that those programs receive a conditional contract and must submit and stay on track with a Quality Improvement plan the following contract year.
 - ⟨ Steve stated that low performing programs, particularly RRH, have two commonalities: lack of staffing and lack of housing. CSB is involved in broader work which includes finding new housing opportunities, and aligning our work with the Affordable Housing Alliance and other like organizations. In terms of staffing, we have a new Human Resources position being developed. A goal will be system-wide talent search; deepening partnerships with local universities, colleges, and career academies. Outside of those, we had a meeting last week with RRH leadership across the system to look at what else is within our control. Within the past year, we’ve made some adjustments to the RRH single adult programs to realign who is being engaged, we then created an arm of RRH focused solely on those who are chronically homeless and slated for PSH.
 - Felisha Lyons asked if there was a sense of salaries paid across the system. She commented that, historically, our types of social work positions are not well paid; especially when considering costs of housing. Steve responded yes, CSB is trying to align agencies to be more competitive in the hiring market.
 - Sue Darby added that our system is competing with clinical work. YMCA recently adjusted salaries and has seen an uptick in applications.
 - Lisa Phillips asked about Columbus State Community College’s involvement. Steve answered the CSCC has been attending and participating in the Strengthening Workforce Capacity meetings focused on workforce development.
 - Beth commented that this is a great opportunity for us to look at hiring staff with lived experience, and wrapping robust training around all staff, but especially staff who may not have been through a formal program, increasing staff capacity.
 - ⟨ Shannon returned to Christopher Maitland’s question: what is the system’s response? She stated that it is important to broaden the conversation and consider intersectionality. She asked, where do we need to press in from a system perspective and/or in resources for individual performance components. We should create a response that centers around the system vs around each

individual program or partner. There needs to be a reciprocal understanding so we can walk along side where we lead and where we follow.

- ⟨ Shannon highlighted that, over the last 10 years, our CoCs programs have increased from 50 to 80. We have had tremendous growth, which would be considered heavy in any business structure, and it is time for the CoC to ask ourselves if we still have the right resources and if we are aligning partners for success.

Annual Funding Strategy

- ⟨ Lianna reviewed the sources of funds for the annual proposed budget. Sources are based on budgets submitted by partners to CSB. Overall, there are \$73.6 million in program funding: \$24 million leveraged, \$19 million from the Department of Housing and Urban Development, and \$30 million from local funders. 67% of funding comes through CSB.
- ⟨ Under Expenses, Crisis Services in Shelters and Housing was added as a new category. Altogether, Expenses totaled to \$73.4 million.

Michael asked for a motion to recommend that the CoC approve the Annual Funding Strategy for FY24 resolution as presented. Lark Mallory moved, Kelsey Strausbaugh seconded, and the CoC agreed.

Annual Funding Allocations

Michael asked for a motion to recommend that the CoC approve the FY24 Funding Awards resolution as presented. Emerald moved, Felisha Lyons seconded, and the CoC agreed. Kelsey Strausbaugh, Sue Darby, and Beth Fetzer-Rice abstained.

FY22 CoC Program Competition Debriefing and Awards

- ⟨ The Debrief is for the CoC Application submitted in August 2022. The Columbus and Franklin County CoC scored 165 out of 200 points, above the weighted mean score of 162.25. We received an additional \$1 million for new projects, and all renewal funding was secured.
- ⟨ Michael asked if we can assume all CoCs are having performance issues due to staffing and housing issues; he acknowledged the reality that there is not much agencies can do on an individual level. He questioned the long-term impact of the score being stagnant and whether or not it puts the CoC at risk.
- ⟨ Lianna stated that if our performance doesn't improve, and we fall below the weighted mean score, we risk losing funding. We can focus on improving what we can control, such as the coordination/engagement component.
- ⟨ Felisha asked how long we continue to fund "low" performing programs.
 - ⟨ Shannon explained that there is a compliance structure to consider. She wants to be careful that we don't have a knee-jerk reaction to respond as a CoC to human

frailty by cutting off resources. She would like to see how we can become exceptionally compliant while also looking at a system that responds to the care of the people within our community. This might mean we need to look at the universe of our system – how do we deliver care under the CoC model, and also under a private funding model. We have the acumen to put some level of dimensionality into the system.

- ⟨ Shannon asked, what foundational system components will we be measured on, and are those components excellent already? If they are, then we can talk about those programs and contracts.

System Performance Measures

- ⟨ Lianna explained that this document has been submitted to HUD and will be included in the 2023 CoC Competition for System Performance.
- ⟨ She highlighted that the most concerning metric is returns to homelessness. 22% of individuals who have exited homelessness to permanent housing destinations return to homelessness within 2 years.
- ⟨ Michael asked for some of the reasons individuals return to homelessness in less than 6 months.
 - ⟨ Lianna cited loss of housing.
 - ⟨ Beth cited rising rent costs that clients cannot pay, even with financial assistance. The allowable time frame for financial assistance in RRH is not long enough to help clients increase income and ensure long term stability.
 - ⟨ Sue concurred. The amount of time agencies can subsidize is too short, especially with the vulnerabilities of the individuals served; they need more time and support. On top of that, rent continues to increase.
 - ⟨ Beth stated that our families experience significant barriers after operating in crisis for so long, and household income tends to be below poverty level; the cycle is incredibly hard to break and the amount of time allowed in RRH is not enough. We need better partnerships with job training and employment that matches our population and the barriers they experience. She does not foresee rents going down.
 - ⟨ Steve agreed that the system needs to re-assess length of time allowed in RRH, as well as discussing when PSH might be a more appropriate option for someone.
 - ⟨ Shannon added that we need to consider who is returning to homelessness, not just why, and to consider if we have an equitable system response.

Review of New PSH Concept Papers for FY23 CoC and CY24 OHFA Competitions

- ⟨ Christopher Maitland asked to be alerted if zoning changes will be needed for the projects.

< Lianna reviewed the PSH Projects in Development summary. A number of projects are fully funded with OHFA tax credits and new HUD funding. There are 4 projects to discuss. The projects are not being prioritized for the CoC competition at this time.

1. Beacon Communities submitted a Project Plan for the 80 S. 6th Street project in 2022, but was not prioritized in the FY22 CoC competition because of lack of funding. Beacon Communities is requesting 2023 OHFA 4% tax credit funding, and is requesting FY23 CoC prioritization for CoC services funding.
2. Homefull submitted an additional concept paper for the same hotel at 1289 E. Dublin-Granville Rd. Homefull is requesting FY23 CoC prioritization to receive additional CoC operating funding and they may also apply for 2024 OHFA tax credits and are requesting prioritization.
3. CHN submitted a concept paper for Knoll View Place. CHN is proposing the addition of 60 units, 48 of which are dedicated to chronically homeless individuals. The building will be at 913 Mound St. CHN is requesting FY23 CoC prioritization to receive CoC services funding and 2024 OHFA 9% tax credit prioritization.
4. CHN submitted a concept paper for Deer Hill Place. CHN is proposing the addition of 60 units, 48 of which are dedicated to chronically homeless individuals. The building will be at 3245 Morse Road, adjacent to CHN's existing property Dogwood Glen. CHN is requesting FY23 CoC prioritization to receive CoC services funding and 2024 OHFA 9% tax credit prioritization.

Michael asked for a motion to approve the resolution to recommend the Homefull Hotel Expansion PSH, CHN Knoll View Place, and CHN Deer Hill Place develop Project Plans and CoC Application supplements to aid in the scoring and ranking of projects for the FY23 CoC and/or CY24 OHFA competitions. Jon moved, Jeff seconded, and the CoC agreed. Lark abstained from the vote.

DEI Strategy Report

< Shannon shared the strategy progress report. This report is evidence of our accountability.

- < She stated that, moving into next year, she will work with the CoC Board and CSB to pinpoint action items of the who—how each particular cohort/population moves through our system, which have barriers, what are those barriers, what do they do well and don't.
- < The mentorship program was eliminated, as mentorship programs targeted toward people of color and people with lived experience tend to have implicit biases and be problematic.
- < She requested that all CoC members respond to the survey, as only 62.5% of members responded to the DEI survey.

- ⟨ She would like to see a true DEI subgroup. She requested that the CoC think about who in their organizations could join that subgroup.

System & Community Framework Updates

Quarter 3 SPIR

Topic skipped due to time.

Programming Updates

- ⟨ Crisis Prevention Initiative
 - ⟨ As of 6/7/23, 16 Crisis Specialists are working in NCR, CHN, Huckleberry House, YWCA, YMCA, Maryhaven, Faith Mission, and Homefull programs
 - ⟨ Partners continue to interview & hire; CSB is providing support with Jobs Board, outreach to OSU, Columbus State, and other local partners
 - ⟨ Southeast has hired a Director of Training for the Practice Group; she has completed Crisis Prevention Institute training and has been meeting with Crisis Specialists weekly in a Practice Group and is also offering one-on-one check-ins
 - ⟨ Partnering with ADAMH on evaluation; Measurement Resources Company is on contract for evaluation and recently completed 1st quarter evaluation; still gathering updated police call information
 - ⟨ Crisis Specialists are engaging in both Prevention and Crisis contacts
- ⟨ COVID-19 ramp down
 - ⟨ Shelter for Isolation & Quarantine (SIQ) closed on 3/31
 - ⟨ Systemwide isolation model open from 4/1-5/31 to act as a bridge for partner planning
 - ⟨ Shelter partners have been asked to develop and operationalize plans to shelter COVID positive individuals and families
 - ⟨ Sharing state and national examples, Lutheran Metropolitan Ministries in Cleveland presented to local shelter partners
 - ⟨ COVID sheltering models include congregate and non-congregate
 - ⟨ CSB will provide systemwide response in event of outbreak
- ⟨ E. Mound Street Camp Hotel Pilot
 - ⟨ All 13 members of encampment moved into hotel as non-congregate shelter in mid-September of 2022
 - ⟨ 8 have moved out since then; 6/8 have moved to permanent housing
 - ⟨ Of the 5 community members remaining, 4 are on track for housing; anticipating that the pilot will wrap up with 10/13 positive housing outcomes (PSH, Rapid Rehousing, 2 moved with friends/family)
 - ⟨ Partnership with City of Columbus and CSB System Leadership

- < Incredible partnership with Equitas, Southeast PATH Team, Mount Carmel Outreach & First Collective—their work has been essential
- < Team will debrief on Pilot late June/early July

Meeting adjourned.

Action Items for Next Meeting

Topic	Items	Due
Conflict of Interest Forms	All CoC members must complete the Conflict of Interest disclosure form prior to the beginning of FY24	July 1, 2023
New PSH Concept Papers	Alert Christopher Maitland if zoning changes are needed for new PSH projects.	ASAP
DEI Strategy Report	CoC Board and CSB will pinpoint Action Items of the who—how each particular cohort/population moves through our system, which have barriers, what are those barriers, what do they do well and don't; and, identify barriers for each subgroup population and steps to alleviate.	FY24
DEI Strategy Report	CoC members will consider representation in a DEI Strategy subgroup	FY24



Columbus and Franklin County Continuum of Care (OH-503)
20222023 CoC Review, Score, and Ranking Procedures

Date CoC Competition Opened: 8/1/227/5/23
Date e-snaps Opened: 8/15/227/27/23
Date CoC Application due to HUD: 9/30/2228/23
Columbus/Franklin County Annual Renewal Demand (ARD): \$18,344,447952,599

I. 20222023 HUD Funding Available

Tier 1 (<u>9593</u> % of ARD less YHDP)	\$14, <u>390,207652,836</u>
YHDP projects (not ranked)	\$3,196,861 (not ranked)
Tier 2 (<u>57</u> % of ARD)	<u>\$757,3791,102,902</u>
Bonus Funding	<u>\$917,2221,326,682</u>
DV Bonus Funding	<u>\$779,491975,934</u>
CoC Planning Funding	<u>\$550,333947,630</u> (not ranked)
UFA Funding	<u>\$550,333568,578</u> (not ranked)

II. Columbus and Franklin County CoC Ranking process

The following Priority Guideline will be used, while also applying the scoring process detailed below. The CoC for Columbus and Franklin County decided it will not prioritize new projects over renewing projects for the following reasons:

1. Renewing projects have active clients that benefit from the housing and services provision. By putting at higher risk of defunding renewing projects, it is possible that a non-funded project would be in a position of uprooting, and in a worst-case scenario unhousing, current active participants.
2. As a Unified Funding Agency, Community Shelter Board works with all subrecipients throughout the grant year to improve performance for a non-performing project and ultimately identifies a different subrecipient if performance does not improve. These changes occur in a seamless fashion, in most cases without a need for a project reallocation and with no impact on the participants served. Because of the process described above, no new project would take priority over a well-functioning, active, existing project.

The CoC Board will propose the ranking for all new and renewal projects. The CoC will review the proposal from the CoC Board and will give final approval.

Tier 1 Prioritization/Ranking up to the Tier 1 amount:

1. New or reallocated projects renewing for the first time (held harmless because lack of performance history) and YHDP projects (as long as HUD is not requiring prioritizing these projects) do not receive a score and are prioritized first.
2. Renewal Permanent Supportive Housing (PSH), Rapid Rehousing (RRH), Joint RRH/TH and Transitional Housing (TH) for youth (non-YHDP) using the scoring and rating criteria described

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below, in descending order of their score based on the total accumulated points, up to Tier 1 amount or closest amount.

3. New PSH through reallocation or bonus for 100% chronic homeless (CH) as ranked by the CoC through resolution, up to Tier 1 amount or closest amount.
4. New RRH through reallocation or bonus as ranked by the CoC through resolution, up to Tier 1 amount or closest amount.
5. New Supportive Services Only (SSO) for Coordinated Entry (CE) (non-YHDP), up to Tier 1 amount or closest amount.
6. Under Tier 1, for the 2nd to last project, if all else equal, the funding impact on the entire CoC will trigger the ranking position.
7. Under Tier 1, the HMIS renewal project will be ranked last but it will not trail Tier 1 and Tier 2.

Tier 2 Prioritization, if required:

1. Renewal PSH, RRH, Joint RRH/TH and TH for youth (non-YHDP) using the scoring and rating criteria described below, in descending order of their score based on the total accumulated points.
2. Any renewal project that did not follow the locally established competition guidelines will be ranked as the last renewal project in Tier 2.
3. New PSH through reallocation or bonus for 100% chronic homeless (CH) as ranked by the CoC through resolution and following the new project development process.
4. New RRH or Joint RRH/TH through reallocation or bonus as ranked by the CoC through resolution and following the new project development process.
5. New SSO for CE (non-YHDP) and following the new project development process.

III. Columbus and Franklin County CoC Scoring/Rating Process for Renewal and New Projects

Renewal Projects

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

Renewal projects	Points Available	Description
Program Performance scoring		The CoC emphasizes performance of funded programs. The latest program evaluation available (FY2022 FY2023) evaluates each project based on its performance for the period 7/1/ 2021 2022 – 12/31/ 2021 2022 . Program Evaluation ratings are determined by measuring outputs and outcomes inclusive of Households Served, Successful Housing Outcomes based on destination at exit, Housing Stability, Occupancy, Recidivism, Change in Income, Income from Employment, Cost Effectiveness and annual Program Review and Certification to confirm compliance with HUD and local regulations, by project type, as detailed in section IV. The Program Performance Measurement and Program Performance Standards sections of this document detail the performance rating. For the Joint TH/RRH
High (meets 75% or more of measured outcomes and outputs by project type detailed in section IV)	10	
Medium (meets at least 50% but less than 75% of measured outcomes and outputs by project type detailed in section IV)	6	
Low/Not rated (meets less than 50% of measured outcomes and outputs by project type detailed in section IV)	2	

		projects, the average of the separate project scores will be used for the combined project scoring.
Usage of HUD grant funds scoring		The CoC emphasizes effective utilization of funds. Programs are scored based on the total grant amount and the amount that was drawn down from HUD for the most recent closed grant cycle (6/30/ 2022 2023).
100% funds used	10	
80-99% funds used	8	
60-79% funds used	5	
40-59% funds used	2	
0-39% funds used	0	
Special barriers program scoring	0	The CoC is not assigning any additional points for a special barriers criteria. All projects in the CoC are serving the most vulnerable population. The vulnerability is determined based on standardized criteria system-wide and projects do serve the highest priority clients system-wide for each of the respective project types.
Maximum possible points	20	
Minimum possible points	2	

New Projects

Each of the **new projects** requesting CoC bonus or reallocated funding will be awarded a score using the scoring process below:

- ⟨ New project Concept Papers can be submitted throughout the year to CSB; CSB will conduct a threshold review and work with the applicant to get the project to where the project meets the general/threshold criteria and can be presented to the CoC Board for their review.
- ⟨ The Citizens Advisory Council will independently review, score and rank the new projects requesting CoC bonus or reallocated funding that are competitively awarded, and their score will be incorporated in the overall scoring of the projects.
- ⟨ During the May or September CoC Board meeting the new Concept Papers will be presented to the CoC Board and, alongside the proposed scoring sheets; the CoC Board will score and rank new projects for approval by the CoC and in preparation of the CoC competition, using the scoring criteria below.
- ⟨ Prioritization will be done in descending order of the project scores, based on the total accumulated points.
- ⟨ If all else equal, the project that will be ready the earliest will receive priority.

New projects	Points Available	General Points	Project type specific Points	Performance Points	CAC Points
PSH projects	45 52	11	20	14	7
RRH projects	45 52	11	20	14	7
Joint RRH/TH projects	39 46	11	14	14	7
SSO non-CE projects	39 46	11	14	14	7
SSO CE projects	35 42	11	10	14	7

Inserted Cells

III.IV. Columbus and Franklin County CoC Program Performance Elements

Each of the projects renewing their CoC funding will have their performance evaluated considering the metrics below, distinct based on the project type. Some youth-specific measures are still being benchmarked.

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 24 months for PSH. Not to exceed 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 75% successful housing outcomes for TH.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
	Successful housing exits (%) (PSH only)	At least 50% of exits are successful housing outcomes.
Not re-enter the emergency shelter system	Exit to Homelessness (%)	Less than 10% of those who exit 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, at least 95%.
	Turnover Rate (%) (PSH only)	An annual 20% turnover rate is desirable. (Monitored only.)

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Ends	Measurement	Annual Metrics
	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 period (%)	At least 15% of adults will have increased employment income from 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.
	Program Occupancy rate (%)	At least 80% to ensure efficient use of available capacity. (Monitored only.)
	Average length of participation	Not to exceed: <ul style="list-style-type: none"> • 125 days for short-term family programs • 110 days for the single adult RRH programs • 180 days for medium-term programs
Access to resources/services to move to and stabilize housing	Usage of CSB Direct Client Assistance (%)	At least 60% for families and 50% for single adults exiting RRH programs.
	Average Engagement Time	Not to exceed 7 days, calculated from the date of program referral to program entry.
	Average length of shelter stay	Not to exceed: <ul style="list-style-type: none"> • 34 days for families • 35 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

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Ends	Measurement	Annual Metrics
		utilities) divided by the household's income at exit, lower than 50%. (Monitored only).
	Increase in cash income, other than employment, from entry to exit or end of reporting period (%) (J2H and DV 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 and DV 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 75% for families and 50% for single adults exiting the RRH programs.
	Successful housing outcome (#)	Calculated based on the Successful housing outcomes % measurement.
Not re-enter the emergency shelter system	Recidivism (%)	Less than 10% of those who obtain housing will return to homelessness within 180 days of program 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.
	Pass program certification	Provide resources and services to end homelessness.

YOUTH: Emergency Shelter – Coordinated Access and Rapid Resolution

Ends	Measurement	Annual Metrics
Efficient number of households served	Households served (#)	Set based on prior year attainment and funds available.
	New households served (#)	Set based on prior year attainment and funds available.
	Average length of participation	Not to exceed 90 days.
Access to resources to address immediate housing need	Successful outcome (%)	At least 50% successful housing/shelter outcomes.
	Successful outcome (#)	Calculated based on the Successful outcomes % measurement.
	Average time to TAY program referrals	The average time to a successful referral not to exceed 20 days

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		(calculated from CARR program entry to next step program referral).
Not re-enter the emergency shelter system	Recidivism (%)	Less than 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	Pass program certification	Provide access to and coordination with community resources and services to prevent homelessness.
	Cost per household	Cost per youth will be consistent with budget. Evaluated annually and presented to the CoC.

YOUTH: 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 24 months for PSH. Not to exceed 10 months for TH.
	Housing Affordability at Exit (%) (PSH only)	At least 50% of successful youth 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.)
	Usage of CSB Direct Client Assistance (%) (TH only)	% of youth that receive CSB DCA will be consistent with prior performance and/or program design.
Basic needs met in a non-congregate environment	Successful housing outcomes (%)	At least 90% successful housing outcomes for PSH and 75% successful housing outcomes for TH.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
	Successful housing exits (%) (PSH only)	At least 50% of exits are successful housing outcomes.
Not re-enter the emergency shelter system	Exit to Homelessness (%)	Less than 10% of those who exit housing will return to homelessness within 180 days of exit.

Ends	Measurement	Annual Metrics
Efficient and effective use of a pool of community resources	Cost per household	Cost per youth 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.
	Average Engagement Time (TH only)	For TH, the engagement time from shelter or CARR Team referral to program entry not to exceed 20 days.
	Program Occupancy Rate (%)	Full occupancy, at least 95%.
	Turnover Rate (%) (PSH only)	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 youth 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 (%)	At least 15% of youth adults will have increased employment income from entry to exit or end of reporting period.
	Income growth	At least 30% of youth adults increase their income from entry to exit or end of reporting period. (Monitored only)
	Improved physical health status	At least 30% of youth self-report improved physical health from entry to exit or end of reporting period.
	Improved substance use status	At least 30% of youth self-report decreased substance use from entry to exit or end of reporting period.
	Improved mental health status	At least 30% of youth self-report improved mental health from entry to exit or end of reporting period.
	Education goal met	At least 30% of youth self-report meeting their education goal from entry to exit or end of reporting period.
	Employment goal met	At least 30% of youth self-report meeting their employment goal from entry to exit or end of reporting period.

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YOUTH: 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.
	Program Occupancy rate (%)	At least 80% to ensure efficient use of available capacity. (Monitored only.)
	Average length of participation	Not to exceed 180 days .
Access to resources/services to move to and stabilize housing	Usage of CSB Direct Client Assistance (%)	% of youth that receive CSB DCA will be consistent with prior performance and/or program design.
	Average length of shelter stay	Not to exceed 35 days (calculated from the date of program entry to shelter exit).
	Average Engagement Time	The engagement time from shelter, transitional housing or CARR Team referral to program entry not to exceed 20 days.
	Increase in cash income, other than employment, from entry to exit or end of reporting period (%) (J2H only)	At least 30% of youth 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 youth adults will have increased employment income from entry to exit or end of reporting period.
	Income growth	At least 30% of youth increase their income from entry to exit or end of reporting period. (Monitored only)
Basic needs met in a non-congregate environment	Successful housing outcome (%)	At least 60% successful housing outcomes for youth exiting the RRH program.
	Successful housing outcome (#)	Calculated based on the Successful housing outcomes % measurement.
Not re-enter the emergency shelter system	Recidivism (%)	Less than 10% of those who obtain housing will return to homelessness within 180 days of program exit.
Efficient and effective use of a pool of community resources	Cost per household	Cost per youth will be consistent with budget. Evaluated annually and presented to the CoC.

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Ends	Measurement	Annual Metrics
	Pass program certification	Provide resources and services to end homelessness.
CoC or HUD Standards	Improved physical health status	At least 25% of youth self-report improved physical health from entry to exit or end of reporting period.
	Improved substance use status	At least 25% of youth self-report decreased substance use from entry to exit or end of reporting period.
	Improved mental health status	At least 25% of youth self-report improved mental health from entry to exit or end of reporting period.
	Education goal met	At least 25% of youth self-report meeting their education goal from entry to exit or end of reporting period.
	Employment goal met	At least 25% of youth self-report meeting their employment goal from entry to exit or end of reporting period.

IV.V. 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:

<i>Rating</i>	<i>Achievement of Program Outcome Measure ²</i>
<i>High</i>	<i>achieve at least 75% of the measured outcomes and at least one of the successful housing outcomes (either number or percentage outcome)</i>
<i>Medium</i>	<i>achieve at least 50% but less than 75% of the measured outcomes</i>

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.



Low *achieve less than 50% of the measured outcomes*

All programs rated as “Low” performers are considered enhanced-risk. Programs of concern may be considered enhanced-risk. Enhanced-risk programs and/or those experiencing long-standing and serious program issues and/or systemic agency concerns enter into a Quality Improvement (QI) Plan with CSB. The QI Plan is tailored to the partner agency and focused on the steps required to become compliant and/or improve performance. The QI Plan process is based on one-on-one dialogues between CSB and the partner agency and considers agency plans and progress on addressing program issues. Partner agencies with enhanced-risk programs will enter into a conditional contract with CSB for the remainder of the current fiscal year. Specific conditions will be determined by the areas of concern leading to the non-compliant status.

If the partner agency and/or CSB find that the QI Plan process is not working, either may refer the concerns or issues to the CoC Board. The partner agency will be given an opportunity to present its case to the CoC Board, at the CoC Board’s request.

If the partner agency is not in agreement with the CoC Board’s decision, the partner agency can appeal to the CoC. The CoC will review the CoC Board’s decision and make the final determination on partner agency appeals. The CoC will be the final decision maker regarding any programs that should be removed from HUD funding based on the CoC Board recommendation.

Columbus and Franklin County Continuum of Care (OH-503) 2023 CoC Review, Score, and Ranking Procedures

Date CoC Competition Opened:	7/5/23
Date e-snaps Opened:	7/27/23
Date CoC Application due to HUD:	9/28/23
Columbus/Franklin County Annual Renewal Demand (ARD):	\$18,952,599

I. 2023 HUD Funding Available

Tier 1 (93% of ARD less YHDP)	\$14,652,836
YHDP projects (not ranked)	\$3,196,861 (not ranked)
Tier 2 (7% of ARD)	\$1,102,902
Bonus Funding	\$1,326,682
DV Bonus Funding	\$975,934
CoC Planning Funding	\$947,630 (not ranked)
UFA Funding	\$568,578 (not ranked)

II. Columbus and Franklin County CoC Ranking process

The following Priority Guideline will be used, while also applying the scoring process detailed below. The CoC for Columbus and Franklin County decided it will not prioritize new projects over renewing projects for the following reasons:

1. Renewing projects have active clients that benefit from the housing and services provision. By putting at higher risk of defunding renewing projects, it is possible that a non-funded project would be in a position of uprooting, and in a worst-case scenario unhousing, current active participants.
2. As a Unified Funding Agency, Community Shelter Board works with all subrecipients throughout the grant year to improve performance for a non-performing project and ultimately identifies a different subrecipient if performance does not improve. These changes occur in a seamless fashion, in most cases without a need for a project reallocation and with no impact on the participants served. Because of the process described above, no new project would take priority over a well-functioning, active, existing project.

The CoC Board will propose the ranking for all new and renewal projects. The CoC will review the proposal from the CoC Board and will give final approval.

Tier 1 Prioritization/Ranking up to the Tier 1 amount:

1. New or reallocated projects renewing for the first time (held harmless because lack of performance history) and YHDP projects (as long as HUD is not requiring prioritizing these projects) do not receive a score and are prioritized first.
2. Renewal Permanent Supportive Housing (PSH), Rapid Rehousing (RRH), Joint RRH/TH and Transitional Housing (TH) for youth (non-YHDP) using the scoring and rating criteria described

below, in descending order of their score based on the total accumulated points, up to Tier 1 amount or closest amount.

3. New PSH through reallocation or bonus for 100% chronic homeless (CH) as ranked by the CoC through resolution, up to Tier 1 amount or closest amount.
4. New RRH through reallocation or bonus as ranked by the CoC through resolution, up to Tier 1 amount or closest amount.
5. New Supportive Services Only (SSO) for Coordinated Entry (CE) (non-YHDP), up to Tier 1 amount or closest amount.
6. Under Tier 1, for the 2nd to last project, if all else equal, the funding impact on the entire CoC will trigger the ranking position.
7. Under Tier 1, the HMIS renewal project will be ranked last but it will not trail Tier 1 and Tier 2.

Tier 2 Prioritization, if required:

1. Renewal PSH, RRH, Joint RRH/TH and TH for youth (non-YHDP) using the scoring and rating criteria described below, in descending order of their score based on the total accumulated points.
2. Any renewal project that did not follow the locally established competition guidelines will be ranked as the last renewal project in Tier 2.
3. New PSH through reallocation or bonus for 100% chronic homeless (CH) as ranked by the CoC through resolution and following the new project development process.
4. New RRH or Joint RRH/TH through reallocation or bonus as ranked by the CoC through resolution and following the new project development process.
5. New SSO for CE (non-YHDP) and following the new project development process.

III. Columbus and Franklin County CoC Scoring/Rating Process for Renewal and New Projects

Renewal Projects

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

Renewal projects	Points Available	Description
Program Performance scoring		The CoC emphasizes performance of funded programs. The latest program evaluation available (FY2023) evaluates each project based on its performance for the period 7/1/2022 – 12/31/2022. Program Evaluation ratings are determined by measuring outputs and outcomes inclusive of Households Served, Successful Housing Outcomes based on destination at exit, Housing Stability, Occupancy, Recidivism, Change in Income, Income from Employment, Cost Effectiveness and annual Program Review and Certification to confirm compliance with HUD and local regulations, by project type, as detailed in section IV. The Program Performance Measurement and Program Performance Standards sections of this document detail the performance rating. For the Joint TH/RRH projects, the average of the separate project scores
High (meets 75% or more of measured outcomes and outputs by project type detailed in section IV)	10	
Medium (meets at least 50% but less than 75% of measured outcomes and outputs by project type detailed in section IV)	6	
Low/Not rated (meets less than 50% of measured outcomes and outputs by project type detailed in section IV)	2	

		will be used for the combined project scoring.
Usage of HUD grant funds scoring		The CoC emphasizes effective utilization of funds. Programs are scored based on the total grant amount and the amount that was drawn down from HUD for the most recent closed grant cycle (6/30/2023).
100% funds used	10	
80-99% funds used	8	
60-79% funds used	5	
40-59% funds used	2	
0-39% funds used	0	
Special barriers program scoring	0	The CoC is not assigning any additional points for a special barriers criteria. All projects in the CoC are serving the most vulnerable population. The vulnerability is determined based on standardized criteria system-wide and projects do serve the highest priority clients system-wide for each of the respective project types.
Maximum possible points	20	
Minimum possible points	2	

New Projects

Each of the **new projects** requesting CoC bonus or reallocated funding will be awarded a score using the scoring process below:

- ⟨ New project Concept Papers can be submitted throughout the year to CSB; CSB will conduct a threshold review and work with the applicant to get the project to where the project meets the general/threshold criteria and can be presented to the CoC Board for their review.
- ⟨ The Citizens Advisory Council will independently review, score and rank the new projects requesting CoC bonus or reallocated funding that are competitively awarded, and their score will be incorporated in the overall scoring of the projects.
- ⟨ During the May or September CoC Board meeting the new Concept Papers will be presented to the CoC Board, alongside the proposed scoring sheets; the CoC Board will score and rank new projects for approval by the CoC, using the scoring criteria below.
- ⟨ Prioritization will be done in descending order of the project scores, based on the total accumulated points.
- ⟨ If all else equal, the project that will be ready the earliest will receive priority.

New projects	Points Available	General Points	Project type specific Points	Performance Points	CAC Points
PSH projects	52	11	20	14	7
RRH projects	52	11	20	14	7
Joint RRH/TH projects	46	11	14	14	7
SSO non-CE projects	46	11	14	14	7
SSO CE projects	42	11	10	14	7

IV. Columbus and Franklin County CoC Program Performance Elements

Each of the projects renewing their CoC funding will have their performance evaluated considering the metrics below, distinct based on the project type. Some youth-specific measures are still being benchmarked.

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 24 months for PSH. Not to exceed 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 75% successful housing outcomes for TH.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
	Successful housing exits (%) (PSH only)	At least 50% of exits are successful housing outcomes.
Not re-enter the emergency shelter system	Exit to Homelessness (%)	Less than 10% of those who exit 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, at least 95%.
	Turnover Rate (%) (PSH only)	An annual 20% turnover rate is desirable. (Monitored only.)
	Pass program certification	Provide access to resources and

Ends	Measurement	Annual Metrics
		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 period (%)	At least 15% of adults will have increased employment income from 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.
	Program Occupancy rate (%)	At least 80% to ensure efficient use of available capacity. (Monitored only.)
	Average length of participation	Not to exceed: <ul style="list-style-type: none"> 125 days for short-term family programs 110 days for the single adult RRH programs 180 days for medium-term programs
Access to resources/services to move to and stabilize housing	Usage of CSB Direct Client Assistance (%)	At least 60% for families and 50% for single adults exiting RRH programs.
	Average Engagement Time	Not to exceed 7 days, calculated from the date of program referral to program entry.
	Average length of shelter stay	Not to exceed: <ul style="list-style-type: none"> 34 days for families 35 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%.

Ends	Measurement	Annual Metrics
		(Monitored only).
	Increase in cash income, other than employment, from entry to exit or end of reporting period (%) (J2H and DV 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 and DV 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 75% for families and 50% for single adults exiting the RRH programs.
	Successful housing outcome (#)	Calculated based on the Successful housing outcomes % measurement.
Not re-enter the emergency shelter system	Recidivism (%)	Less than 10% of those who obtain housing will return to homelessness within 180 days of program 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.
	Pass program certification	Provide resources and services to end homelessness.

YOUTH: Emergency Shelter – Coordinated Access and Rapid Resolution

Ends	Measurement	Annual Metrics
Efficient number of households served	Households served (#)	Set based on prior year attainment and funds available.
	New households served (#)	Set based on prior year attainment and funds available.
	Average length of participation	Not to exceed 90 days.
Access to resources to address immediate housing need	Successful outcome (%)	At least 50% successful housing/shelter outcomes.
	Successful outcome (#)	Calculated based on the Successful outcomes % measurement.
	Average time to TAY program referrals	The average time to a successful referral not to exceed 20 days (calculated from CARR program entry to next step program referral).

Not re-enter the emergency shelter system	Recidivism (%)	Less than 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	Pass program certification	Provide access to and coordination with community resources and services to prevent homelessness.
	Cost per household	Cost per youth will be consistent with budget. Evaluated annually and presented to the CoC.

YOUTH: 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 24 months for PSH. Not to exceed 10 months for TH.
	Housing Affordability at Exit (%) (PSH only)	At least 50% of successful youth 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.)
	Usage of CSB Direct Client Assistance (%) (TH only)	% of youth that receive CSB DCA will be consistent with prior performance and/or program design.
Basic needs met in a non-congregate environment	Successful housing outcomes (%)	At least 90% successful housing outcomes for PSH and 75% successful housing outcomes for TH.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
	Successful housing exits (%) (PSH only)	At least 50% of exits are successful housing outcomes.
Not re-enter the emergency shelter system	Exit to Homelessness (%)	Less than 10% of those who exit 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 youth will be consistent with budget. Evaluated annually and presented to the CoC.

Ends	Measurement	Annual Metrics
	Cost per unit	Cost per unit will be consistent with budget. Evaluated annually and presented to the CoC.
	Average Engagement Time (TH only)	For TH, the engagement time from shelter or CARR Team referral to program entry not to exceed 20 days.
	Program Occupancy Rate (%)	Full occupancy, at least 95%.
	Turnover Rate (%) (PSH only)	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 youth 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 (%)	At least 15% of youth adults will have increased employment income from entry to exit or end of reporting period.
	Income growth	At least 30% of youth adults increase their income from entry to exit or end of reporting period. (Monitored only)
	Improved physical health status	At least 30% of youth self-report improved physical health from entry to exit or end of reporting period.
	Improved substance use status	At least 30% of youth self-report decreased substance use from entry to exit or end of reporting period.
	Improved mental health status	At least 30% of youth self-report improved mental health from entry to exit or end of reporting period.
	Education goal met	At least 30% of youth self-report meeting their education goal from entry to exit or end of reporting period.
	Employment goal met	At least 30% of youth self-report meeting their employment goal from entry to exit or end of reporting period.

YOUTH: 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.
	Program Occupancy rate (%)	At least 80% to ensure efficient use of available capacity. (Monitored only.)
	Average length of participation	Not to exceed 180 days .
Access to resources/services to move to and stabilize housing	Usage of CSB Direct Client Assistance (%)	% of youth that receive CSB DCA will be consistent with prior performance and/or program design.
	Average length of shelter stay	Not to exceed 35 days (calculated from the date of program entry to shelter exit).
	Average Engagement Time	The engagement time from shelter, transitional housing or CARR Team referral to program entry not to exceed 20 days.
	Increase in cash income, other than employment, from entry to exit or end of reporting period (%) (J2H only)	At least 30% of youth 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 youth adults will have increased employment income from entry to exit or end of reporting period.
	Income growth	At least 30% of youth increase their income from entry to exit or end of reporting period. (Monitored only)
Basic needs met in a non-congregate environment	Successful housing outcome (%)	At least 60% successful housing outcomes for youth exiting the RRH program.
	Successful housing outcome (#)	Calculated based on the Successful housing outcomes % measurement.
Not re-enter the emergency shelter system	Recidivism (%)	Less than 10% of those who obtain housing will return to homelessness within 180 days of program exit.
Efficient and effective use of a pool of community resources	Cost per household	Cost per youth will be consistent with budget. Evaluated annually and presented to the CoC.

Ends	Measurement	Annual Metrics
	Pass program certification	Provide resources and services to end homelessness.
CoC or HUD Standards	Improved physical health status	At least 25% of youth self-report improved physical health from entry to exit or end of reporting period.
	Improved substance use status	At least 25% of youth self-report decreased substance use from entry to exit or end of reporting period.
	Improved mental health status	At least 25% of youth self-report improved mental health from entry to exit or end of reporting period.
	Education goal met	At least 25% of youth self-report meeting their education goal from entry to exit or end of reporting period.
	Employment goal met	At least 25% of youth self-report meeting their employment goal from entry to exit or end of reporting period.

V. 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:

<i>Rating</i>	<i>Achievement of Program Outcome Measure ²</i>
<i>High</i>	<i>achieve at least 75% of the measured outcomes and at least one of the successful housing outcomes (either number or percentage outcome)</i>
<i>Medium</i>	<i>achieve at least 50% but less than 75% of the measured outcomes</i>
<i>Low</i>	<i>achieve less than 50% of the measured outcomes</i>

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.

All programs rated as “Low” performers are considered enhanced-risk. Programs of concern may be considered enhanced-risk. Enhanced-risk programs and/or those experiencing long-standing and serious program issues and/or systemic agency concerns enter into a Quality Improvement (QI) Plan with CSB. The QI Plan is tailored to the partner agency and focused on the steps required to become compliant and/or improve performance. The QI Plan process is based on one-on-one dialogues between CSB and the partner agency and considers agency plans and progress on addressing program issues. Partner agencies with enhanced-risk programs will enter into a conditional contract with CSB for the remainder of the current fiscal year. Specific conditions will be determined by the areas of concern leading to the non-compliant status.

If the partner agency and/or CSB find that the QI Plan process is not working, either may refer the concerns or issues to the CoC Board. The partner agency will be given an opportunity to present its case to the CoC Board, at the CoC Board’s request.

If the partner agency is not in agreement with the CoC Board’s decision, the partner agency can appeal to the CoC. The CoC will review the CoC Board’s decision and make the final determination on partner agency appeals. The CoC will be the final decision maker regarding any programs that should be removed from HUD funding based on the CoC Board recommendation.

#	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 Available	HUD Funding Usage Points Awarded	FY2023 Program Evaluation Rating	Max points available for system performance	Performance Points Awarded	Max points available and Max points available for objective criteria	Total Points Usage Points + Performance Points Awarded	Project Ranking	Project accepted/rejected	
1	YHDP CHN Youth PSH	OH0693U5E032201	\$134,058	\$134,058		\$134,058	\$134,058	\$0	100.0%	10	10	Medium	10	6	20	16	N/A	Accepted	
2	YHDP NCR Youth PSH	OH0693U5E032201	\$212,283	\$346,341		\$212,283	\$143,277	\$69,006	67.5%	10	5	N/A	N/A	N/A	20	N/A	N/A	Accepted	
3	YHDP HFF RRH	OH0695U5E032201	\$932,587	\$1,278,921		\$982,587	\$838,657	\$143,930	85.4%	10	8	Low	10	2	20	10	N/A	Accepted	
4	YHDP HFF Transition to Home	OH0694U5E032201	\$1,693,933	\$2,972,861		\$1,643,933	\$1,380,573	\$263,360	84.0%	10	8	Low	10	2	20	10	N/A	Accepted	
5	YHDP Huckleberry House TAY CARR	OH0692U5E032201	\$224,000	\$3,196,861		\$224,000	\$196,055	\$27,945	87.5%	10	8	High	10	10	20	18	N/A	Accepted	
6	NCR Berwyn East	OH0727U5E032200	\$338,633	\$338,633	2%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Accepted	
7	CFSH DV SSO-CE	OH0729U5E032200	\$195,057	\$533,690	4%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Accepted	
8	CHN Briggsdale	OH0078U5E032215	\$185,605	\$719,295	5%	\$251,991	\$251,991	\$0	100.0%	10	10	Medium	10	6	20	16		Accepted	
9	CHN East Fifth	OH0088U5E032215	\$232,914	\$952,209	6%	\$235,448	\$235,448	\$0	100.0%	10	10	Medium	10	6	20	16		Accepted	
10	CHN Family Homes	OH0082U5E032215	\$13,310	\$965,519	7%	\$15,694	\$15,694	\$0	100.0%	10	10	High	10	10	20	20		Accepted	
11	CHN Inglewood	OH0410U5E032210	\$60,247	\$1,025,766	7%	\$138,230	\$138,230	\$0	100.0%	10	10	High	10	10	20	20		Accepted	
12	CHN Marsh Brook	OH0630U5E032204	\$254,000	\$1,279,766	9%	\$254,000	\$254,000	\$0	100.0%	10	10	Medium	10	6	20	16		Accepted	
13	CHN Parsons	OH0093U5E032215	\$331,658	\$1,611,424	11%	\$273,819	\$273,819	\$0	100.0%	10	10	Medium	10	6	20	16		Accepted	
14	CHN Safe Haven	OH0097U5E032215	\$188,951	\$1,800,375	12%	\$141,578	\$141,578	\$0	100.0%	10	10	High	10	10	20	20		Accepted	
15	CHN Southpoint	OH0281U5E032214	\$213,546	\$2,013,921	14%	\$294,030	\$221,416	\$72,614	75.3%	10	5	Medium	10	6	20	11		Accepted	
16	CHN Terrace	OH0092U5E032215	\$135,549	\$2,149,470	15%	\$220,755	\$220,755	\$0	100.0%	10	10	Medium	10	6	20	16		Accepted	
17	CHN Wilson	OH0101U5E032215	\$66,279	\$2,215,749	15%	\$23,707	\$23,707	\$0	100.0%	10	10	High	10	10	20	20		Accepted	
18	Equitas TRA	OH0080U5E032215	\$910,455	\$3,126,204	21%	\$711,146	\$709,320	\$1,826	99.7%	10	10	High	10	10	20	20		Accepted	
19	Homefull Isaiah	OH0075U5E032111	\$2,170,275	\$5,296,479	36%	\$2,146,438	\$2,139,569	\$6,869	99.7%	10	10	High	10	10	20	20		Accepted	
20	Homefull Leasing	OH0312U5E032211	\$1,495,758	\$6,792,237	46%	\$1,762,376	\$1,751,446	\$10,930	99.4%	10	8	Medium	10	6	20	14		Accepted	
21	Homefull SRA	OH0083U5E032215	\$2,128,589	\$8,920,826	61%	\$1,240,949	\$1,231,899	\$9,050	99.3%	10	8	High	10	10	20	18		Accepted	
22	Homefull TRA	OH0084U5E032215	\$1,943,372	\$10,864,198	74%	\$2,526,722	\$2,513,294	\$13,428	99.5%	10	10	Medium	10	6	20	16		Accepted	
23	Homefull TRA Mainstream/EHV	OH0076U5E032215	\$871,351	\$11,735,549	80%	\$618,297	\$607,615	\$10,682	98.3%	10	8	N/A	10	N/A	N/A	N/A	N/A	Accepted	
24	Huckleberry House TLP	OH0099U5E032215	\$232,135	\$11,967,684	82%	\$274,792	\$274,034	\$758	99.7%	10	10	Medium	10	6	20	16		Accepted	
25	Maryhaven Chantry	OH0090U5E032215	\$183,196	\$12,150,880	83%	\$197,975	\$197,975	\$0	100.0%	10	10	Medium	10	6	20	16		Accepted	
26	NCR Buckingham	OH0394U5E032212	\$172,375	\$12,323,255	84%	\$234,215	\$234,215	\$0	100.0%	10	10	High	10	10	20	20		Accepted	
27	NCR Grant	OH0085U5E032215	\$172,376	\$12,495,631	85%	\$235,951	\$235,951	\$0	100.0%	10	10	High	10	10	20	20		Accepted	
28	NCR Third	OH0372U5E032211	\$172,375	\$12,668,006	86%	\$180,969	\$180,969	\$0	100.0%	10	10	High	10	10	20	20		Accepted	
29	NCR Van Buren Village	OH0470U5E032206	\$64,200	\$12,732,206	87%	\$66,363	\$66,123	\$240	99.6%	10	10	Medium	10	6	20	16		Accepted	
30	TSA/HFF RRH J2H	OH0074U5E032211	\$326,585	\$13,058,791	89%	\$60,914	\$58,685	\$2,230	96.3%	10	8	Low	10	2	20	10		Accepted	
31	VOA Family PSH	OH0094U5E032215	\$570,633	\$13,629,424	93%	\$600,633	\$600,633	\$0	100.0%	10	10	High	10	10	20	20		Accepted	
32	YMCA DV RRH	OH0617U5E032204	\$1,467,226	\$15,096,650	103%	\$680,102	\$592,225	\$87,877	87.1%	10	8	Low	10	2	20	10		Accepted	
33	YMCA Touchstone	OH0445U5E032210	\$237,170	\$15,333,820	105%	\$218,196	\$169,179	\$49,017	77.5%	10	5	Medium	10	6	20	11		Accepted	
34	YWCA WINGS	OH0102U5E032215	\$257,848	\$15,591,668	106%	\$747,313	\$747,313	\$0	100.0%	10	10	High	10	10	20	20		Accepted	
35	CSB HMIS	OH0087U5E032215	\$164,070	\$15,755,738	108%	\$312,830	\$312,830	\$0	100.0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Accepted	
NEW	CHN Deer Hill Place	new	\$494,366												52	48.5		Accepted	
NEW	CHN Knoll View Place	new	\$262,551												52	48.5		Accepted	
NEW	Homefull Leasing Expansion	new	\$307,315												52	49.9		Accepted	
NEW	YMCA McKinley Manor	new	\$262,450												52	50.5		Accepted	
NEW	LSS CHOICES DV Joint TH-RRH	new	\$960,388												39	36		Accepted	
41	CoC Planning	OH0673U5E032000	\$947,630			\$548,088	\$548,088	\$0	100%									Accepted	
42	CoC UFA	OH0674U5E032000	\$568,578			\$548,088	\$548,088	\$0	100%									Accepted	
		ARD	\$18,952,599		FY23	\$18,958,470	\$18,188,708	\$769,762											
		Tier 1	\$14,652,836	*CSB costs for processing Rental Assistance (\$482,154) have been removed from the Scoring Table.*															
		Tier 2	\$1,102,902																
		YHDP	\$3,196,861	Total 2023 application		\$22,755,877													
		Bonus	\$1,326,682																
		DV Bonus	\$960,388																
		CoC Plan and UFA	\$1,516,208																

#	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 Available	HUD Funding Usage Points Awarded	FY2023 Program Evaluation Rating	Max points available for system performance	Performance Points Awarded	Max points available and Max points available for objective criteria	Total Points Usage Points + Performance Points Awarded	Project Ranking	Project accepted/ rejected
1	YHDP CHN Youth PSH	OH0693U5E032201	\$134,058	\$134,058		\$134,058	\$134,058	\$0	100.0%	10	10	Medium	10	6	20	16	N/A	Accepted
2	YHDP NCR Youth PSH	OH0693U5E032201	\$212,283	\$346,341		\$212,283	\$143,277	\$69,006	67.5%	10	5	N/A	N/A	N/A	20	N/A	N/A	Accepted
3	YHDP HFF RRH	OH0695U5E032201	\$932,587	\$1,278,928		\$982,587	\$838,657	\$143,930	85.4%	10	8	Low	10	2	20	10	N/A	Accepted
4	YHDP HFF Transition to Home	OH0694U5E032201	\$1,693,933	\$2,972,861		\$1,643,933	\$1,380,573	\$263,360	84.0%	10	8	Low	10	2	20	10	N/A	Accepted
5	YHDP Huckleberry House TAY CARR	OH0692U5E032201	\$224,000	\$3,196,861		\$224,000	\$196,055	\$27,945	87.5%	10	8	High	10	10	20	18	N/A	Accepted
6	NCR Berwyn East	OH0727U5E032200	\$338,633	\$338,633	2%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1	Accepted
7	CFSH DV SSO-CE	OH0729U5E032200	\$195,057	\$533,690	4%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2	Accepted
8	Homefull TRA Mainstream/EHV	OH0076U5E032215	\$871,351	\$1,405,041	10%	\$618,297	\$607,615	\$10,682	98.3%	10	8	N/A	10	N/A	N/A	N/A	3	Accepted
9	CHN Family Homes	OH0082U5E032215	\$13,310	\$1,418,351	10%	\$15,694	\$15,694	\$0	100.0%	10	10	High	10	10	20	20	4	Accepted
10	CHN Inglewood	OH0410U5E032210	\$60,247	\$1,478,598	10%	\$138,230	\$138,230	\$0	100.0%	10	10	High	10	10	20	20	5	Accepted
11	CHN Safe Haven	OH0097U5E032215	\$188,951	\$1,667,549	11%	\$141,578	\$141,578	\$0	100.0%	10	10	High	10	10	20	20	6	Accepted
12	CHN Wilson	OH0101U5E032215	\$66,279	\$1,733,828	12%	\$23,707	\$23,707	\$0	100.0%	10	10	High	10	10	20	20	7	Accepted
13	Equitas TRA	OH0080U5E032215	\$910,455	\$2,644,283	18%	\$711,146	\$709,320	\$1,826	99.7%	10	10	High	10	10	20	20	8	Accepted
14	Homefull Isaiah	OH0075U5E032111	\$2,170,275	\$4,814,558	33%	\$2,146,438	\$2,139,569	\$6,869	99.7%	10	10	High	10	10	20	20	9	Accepted
15	NCR Buckingham	OH0394U5E032212	\$172,375	\$4,986,933	34%	\$234,215	\$234,215	\$0	100.0%	10	10	High	10	10	20	20	10	Accepted
16	NCR Grant	OH0085U5E032215	\$172,376	\$5,159,309	35%	\$235,951	\$235,951	\$0	100.0%	10	10	High	10	10	20	20	11	Accepted
17	NCR Third	OH0372U5E032211	\$172,375	\$5,331,684	36%	\$180,969	\$180,969	\$0	100.0%	10	10	High	10	10	20	20	12	Accepted
18	YWCA WINGS	OH0102U5E032215	\$257,848	\$5,589,532	38%	\$747,313	\$747,313	\$0	100.0%	10	10	High	10	10	20	20	13	Accepted
19	Homefull SRA	OH0083U5E032215	\$2,128,589	\$7,718,121	53%	\$1,240,949	\$1,231,899	\$9,050	99.3%	10	8	High	10	10	20	18	14	Accepted
20	CHN Briggsdale	OH0078U5E032215	\$185,605	\$7,903,726	54%	\$251,991	\$251,991	\$0	100.0%	10	10	Medium	10	6	20	16	15	Accepted
21	CHN East Fifth	OH0088U5E032215	\$232,914	\$8,136,640	56%	\$235,448	\$235,448	\$0	100.0%	10	10	Medium	10	6	20	16	16	Accepted
22	CHN Marsh Brook	OH0630U5E032204	\$254,000	\$8,390,640	57%	\$254,000	\$254,000	\$0	100.0%	10	10	Medium	10	6	20	16	17	Accepted
23	CHN Parsons	OH0093U5E032215	\$331,658	\$8,722,298	60%	\$273,819	\$273,819	\$0	100.0%	10	10	Medium	10	6	20	16	18	Accepted
24	CHN Terrace	OH0092U5E032215	\$135,549	\$8,857,847	60%	\$220,755	\$220,755	\$0	100.0%	10	10	Medium	10	6	20	16	19	Accepted
25	Homefull TRA	OH0084U5E032215	\$1,943,372	\$10,801,219	74%	\$2,526,722	\$2,513,294	\$13,428	99.5%	10	10	Medium	10	6	20	16	20	Accepted
26	Huckleberry House TLP	OH0099U5E032215	\$232,135	\$11,033,354	75%	\$274,792	\$274,034	\$758	99.7%	10	10	Medium	10	6	20	16	21	Accepted
27	Maryhaven Chantry	OH0090U5E032215	\$183,196	\$11,216,550	77%	\$197,975	\$197,975	\$0	100.0%	10	10	Medium	10	6	20	16	22	Accepted
28	NCR Van Buren Village	OH0470U5E032206	\$64,200	\$11,280,750	77%	\$66,363	\$66,123	\$240	99.6%	10	10	Medium	10	6	20	16	23	Accepted
29	Homefull Leasing	OH0312U5E032211	\$1,495,758	\$12,776,508	87%	\$1,762,376	\$1,751,446	\$10,930	99.4%	10	8	Medium	10	6	20	14	24	Accepted
30	CHN Southpoint	OH0281U5E032214	\$213,546	\$12,990,054	89%	\$294,030	\$221,416	\$72,614	75.3%	10	5	Medium	10	6	20	11	25	Accepted
31	YMCA Touchstone	OH0445U5E032210	\$237,170	\$13,227,224	90%	\$218,196	\$169,179	\$49,017	77.5%	10	5	Medium	10	6	20	11	26	Accepted
32	TSA/HFF RRH J2H	OH0074U5E032211	\$326,585	\$13,553,809	92%	\$60,914	\$58,685	\$2,230	96.3%	10	8	Low	10	2	20	10	27	Accepted
33	CSB HMIS	OH0087U5E032215	\$164,070	\$13,717,879	94%	\$312,830	\$312,830	\$0	100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	28	Accepted
34	YMCA DV RRH	OH0617U5E032204	\$1,467,226	\$15,185,105	104%	\$680,102	\$592,225	\$87,877	87.1%	10	8	Low	10	2	20	10	29	Accepted
35	VOA Family PSH*	OH0094U5E032215	\$570,633	\$15,755,738	108%	\$600,633	\$600,633	\$0	100.0%	10	10	High	10	10	20	20	30	Accepted
NEW	YMCA McKinley Manor	new	\$262,450												52	50.5	31	Accepted
NEW	Homefull Leasing Expansion	new	\$307,315												52	49.9	32	Accepted
NEW	CHN Deer Hill Place	new	\$494,366												52	48.5	33	Accepted
NEW	CHN Knoll View Place	new	\$262,551												52	48.5	34	Accepted
NEW	LSS CHOICES DV Joint TH-RRH	new	\$960,388												39	36	35	Accepted
41	CoC Planning	OH0673U5E032000	\$947,630			\$548,088	\$548,088	\$0	100%								N/A	Accepted
42	CoC UFA	OH0674U5E032000	\$568,578			\$548,088	\$548,088	\$0	100%								N/A	Accepted
Ranking		ARD	\$18,952,599		FY23	\$18,958,470	\$18,188,708	\$769,762										
(descending score based, renewals prioritized)		Tier 1	\$14,652,836	* De-ranked as last renewal project because delay in submitting project application, past local due date.														
List all renewal projects in the order of their scoring		Tier 2	\$1,102,902															
List projects that don't fit in Tier 1 in Tier 2		YHDP	\$3,196,861															
		Bonus	\$1,326,682															
		DV Bonus	\$960,388															
		CoC Plan and UFA	\$1,516,208															

Columbus and Franklin County Continuum of Care (OH-503)
2023 CoC Review, Score, and Ranking Tool

9/9/2023

Project Name:	Joint TH/RRH			
Organization Name:	CHOICES			
Project Type:	Joint TH/RRH			
CoC Funding requested	960,388			
Amount of other public funding (federal, state, city, county)				
Amount of private funding	199,146			
Total Project Cost	1,159,534			
Scoring		Available	Awarded	Performance Points Ratio
	General Points	11	11	
	PH points	#REF!	#REF!	
	Joint Points	14	11	
	SSO CE Points	#REF!	#REF!	
	SSO non-CE Points	#REF!	#REF!	
	Performance Points	14	14	36%
	CAC Points (if competitive application)	0	0	
	Total Points Awarded	39	36	
At least 20% percent of total points based on system performance criteria for the project application				
At least 33% of total points based on objective criteria for the project application				
Please add any comments you have in the section below:				
Project did not identify match from healthcare providers, only access to the Faith Mission health center.				

Project Outline	Points Available	Points Awarded
Coordinated Entry Participation	1	1
Housing First and/or Low Barrier Implementation	1	1
All proposed program participants will be eligible for the program component type selected.	1	1
Documented, secured minimum match	1	1
Project has reasonable costs, as defined locally and proposed activities are eligible and consistent with program requirements	1	1
Project is financially feasible	1	1
Applicant is active CoC participant	1	1
Application is complete and data are consistent; project narrative is fully responsive to the question being asked and meets all criteria for that question as required by the NOFO	1	1
Data provided in the application are consistent	1	1
Required attachments correspond to the list of attachments in e-snaps that must contain accurate and complete information and are correctly dated.	1	1
Acceptable organizational audit/financial review	1	1
Total Points Available/Awarded	11	11

Performance Specific - Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks.	Points Available	Points Awarded
Efficient Number of Households Served (households served in-line with staffing and project need)	2	2
Cost per household served in-line with historical information of like-projects	2	2
Successful Housing Outcomes Rate meets the CSB/CoC established performance benchmark for project type (Replace with Successful Diversion Rate for SSO - CE)	2	2
Recidivism Rate meets the CSB/CoC established performance benchmark for project type	2	2
Project Occupancy Rate meets the CSB/CoC established performance benchmark for project type	2	2
Average Length of Participation/Housing Stability meets the CSB/CoC established performance benchmark for project type	2	2
Increase in Income Rate meets the CSB/CoC established performance benchmark for project type or project proposes and describes an achievable income-related measure	2	2
Total Points Available/Awarded	14	14

Joint TH-RRH Specific	Points Available	Points Awarded
The type of housing proposed, including the number and configuration of units, will fit the needs of the program participants (e.g., ensuring a range of bedroom sizes to assist various family sizes.)	1	1
The proposed project will provide enough rapid rehousing assistance to ensure that at any given time a program participant may move from transitional housing to permanent housing. This may be demonstrated by identifying a budget that has twice as many resources for the rapid rehousing portion of the project than the TH portion, by having twice as many PH-RRH units at a point in time as TH units, or by demonstrating that the budget and units are appropriate for the population being served by the project	2	2
The proposed project demonstrates that participants will be quickly housed in transitional or RRH housing of their choice	2	2
The type of supportive services that will be offered to program participants will ensure successful retention or help to obtain permanent housing, including all supportive services regardless of funding source	1	1
The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social services, and employment programs for which they are eligible to apply and which meet the needs of the program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).	2	2
Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, housing that meets accessibility related needs, additional assistance to ensure retention of permanent housing).	2	2
Project leverages housing resources with housing units not funded through the CoC or ESG programs.	2	0
Applicant identified sources of services funding that complement any CoC request for supportive services, in an amount not less than 25% of the needed funding, inclusive of match from healthcare providers	2	1
Total Points Available/Awarded	14	11

Columbus and Franklin County Continuum of Care (OH-503)
2023 CoC Review, Score, and Ranking Tool

8/29/2023

Project Name:	Deer Hill PI			
Organization Name:	CHN			
Project Type:	PSH			
CoC Funding requested	494,366	over 2 years		
Amount of other public funding (federal, state, city, county)	8,433,979			
Amount of private funding	52,254	11%	Concord	
Total Project Cost	8,980,599	MH/AOD match		
Scoring		Available	Awarded	Performance Points Ratio
	General Points	11	11	
	PH points	20	17	
	Joint Points	#REF!	#REF!	
	SSO CE Points	#REF!	#REF!	
	SSO non-CE Points	#REF!	#REF!	
	Performance Points	14	14	27%
	CAC Points (if competitive application)	7	6.5	
	Total Points Awarded	52	48.5	
At least 20% percent of total points based on system performance criteria for the project application				
At least 33% of total points based on objective criteria for the project application				
Please add any comments you have in the section below:				
CHN would like Deer Hill prioritized ahead of Knoll View PI. OHFA application will occur in 2024, capital stack is in process of being put together. Earliest the project will open is 2026.				

Project Outline	Points Available	Points Awarded
Coordinated Entry Participation	1	1
Housing First and/or Low Barrier Implementation	1	1
All proposed program participants will be eligible for the program component type selected.	1	1
Documented, secured minimum match	1	1
Project has reasonable costs, as defined locally and proposed activities are eligible and consistent with program requirements	1	1
Project is financially feasible	1	1
Applicant is active CoC participant	1	1
Application is complete and data are consistent; project narrative is fully responsive to the question being asked and meets all criteria for that question as required by the NOFO	1	1
Data provided in the application are consistent	1	1
Required attachments correspond to the list of attachments in e-snaps that must contain accurate and complete information and are correctly dated.	1	1
Acceptable organizational audit/financial review	1	1
Total Points Available/Awarded	11	11

Performance Specific - Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks.	Points Available	Points Awarded
Efficient Number of Households Served (households served in-line with staffing and project need)	2	2
Cost per household served in-line with historical information of like-projects	2	2
Successful Housing Outcomes Rate meets the CSB/CoC established performance benchmark for project type (Replace with Successful Diversion Rate for SSO - CE)	2	2
Recidivism Rate meets the CSB/CoC established performance benchmark for project type	2	2
Project Occupancy Rate meets the CSB/CoC established performance benchmark for project type	2	2
Average Length of Participation/Housing Stability meets the CSB/CoC established performance benchmark for project type	2	2
Increase in Income Rate meets the CSB/CoC established performance benchmark for project type or project proposes and describes an achievable income-related measure	2	2
Total Points Available/Awarded	14	14

PH Specific	Points Available	Points Awarded
The type of housing proposed, including the number and configuration of units, will fit the needs of the program participants.	2	2
The type of supportive services that will be offered to program participants will ensure successful retention in or help to obtain permanent housing, including all supportive services regardless of funding source	2	2
The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply and which meet the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).	2	2
Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, housing that meets accessibility related needs, additional assistance to ensure retention of permanent housing)	2	2
Applicant has prior experience developing and/or managing the type of housing proposed	2	2
The majority of the units proposed in the project are dedicated to the population experiencing homelessness	2	2
Applicant identified sources of capital funding that will cover the development cost, if applicable	2	1
Applicant applied and received or is in the process of applying for OHFA tax credits, if applicable	2	1
Applicant secured rental subsidies from other sources than CoC funding	2	2
Applicant identified sources of services funding that complement any CoC request for supportive services, in an amount not less than 25% of the needed funding, inclusive of match from healthcare providers	2	1
Total Points Available/Awarded	20	17

Columbus and Franklin County Continuum of Care (OH-503)
2023 CoC Review, Score, and Ranking Tool

8/29/2023

Project Name:	Knoll View PI			
Organization Name:	CHN			
Project Type:	PSH			
CoC Funding requested		262,551		
Amount of other public funding (federal, state, city, county)		8,105,510		
Amount of private funding		26,127	10%	Concord
Total Project Cost		8,394,188	MH/AOD match	
Scoring		Available	Awarded	Performance Points Ratio
	General Points	11	11	
	PH points	20	17	
	Joint Points	#REF!	#REF!	
	SSO CE Points	#REF!	#REF!	
	SSO non-CE Points	#REF!	#REF!	
	Performance Points	14	14	27%
	CAC Points (if competitive application)	7	6.5	
	Total Points Awarded	52	48.5	
At least 20% percent of total points based on system performance criteria for the project application				
At least 33% of total points based on objective criteria for the project application				
Please add any comments you have in the section below:				
<p>Project does not yet have site control, CHN would like Deer Hill prioritized ahead of Knoll View PI. OHFA application will occur in 2024, capital stack is in process of being put together. Earliest the project will open is 2026.</p>				

Project Outline	Points Available	Points Awarded
Coordinated Entry Participation	1	1
Housing First and/or Low Barrier Implementation	1	1
All proposed program participants will be eligible for the program component type selected.	1	1
Documented, secured minimum match	1	1
Project has reasonable costs, as defined locally and proposed activities are eligible and consistent with program requirements	1	1
Project is financially feasible	1	1
Applicant is active CoC participant	1	1
Application is complete and data are consistent; project narrative is fully responsive to the question being asked and meets all criteria for that question as required by the NOFO	1	1
Data provided in the application are consistent	1	1
Required attachments correspond to the list of attachments in e-snaps that must contain accurate and complete information and are correctly dated.	1	1
Acceptable organizational audit/financial review	1	1
Total Points Available/Awarded	11	11

Performance Specific - Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks.	Points Available	Points Awarded
Efficient Number of Households Served (households served in-line with staffing and project need)	2	2
Cost per household served in-line with historical information of like-projects	2	2
Successful Housing Outcomes Rate meets the CSB/CoC established performance benchmark for project type (Replace with Successful Diversion Rate for SSO - CE)	2	2
Recidivism Rate meets the CSB/CoC established performance benchmark for project type	2	2
Project Occupancy Rate meets the CSB/CoC established performance benchmark for project type	2	2
Average Length of Participation/Housing Stability meets the CSB/CoC established performance benchmark for project type	2	2
Increase in Income Rate meets the CSB/CoC established performance benchmark for project type or project proposes and describes an achievable income-related measure	2	2
Total Points Available/Awarded	14	14

PH Specific	Points Available	Points Awarded
The type of housing proposed, including the number and configuration of units, will fit the needs of the program participants.	2	2
The type of supportive services that will be offered to program participants will ensure successful retention in or help to obtain permanent housing, including all supportive services regardless of funding source	2	2
The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply and which meet the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).	2	2
Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, housing that meets accessibility related needs, additional assistance to ensure retention of permanent housing)	2	2
Applicant has prior experience developing and/or managing the type of housing proposed	2	2
The majority of the units proposed in the project are dedicated to the population experiencing homelessness	2	2
Applicant identified sources of capital funding that will cover the development cost, if applicable	2	1
Applicant applied and received or is in the process of applying for OHFA tax credits, if applicable	2	1
Applicant secured rental subsidies from other sources than CoC funding	2	2
Applicant identified sources of services funding that complement any CoC request for supportive services, in an amount not less than 25% of the needed funding, inclusive of match from healthcare providers	2	1
Total Points Available/Awarded	20	17

Columbus and Franklin County Continuum of Care (OH-503)
2023 CoC Review, Score, and Ranking Tool

8/29/2023

Project Name:	Leasing Expansion			
Organization Name:	Homefull			
Project Type:	PSH			
CoC Funding requested		307,315		
Amount of other public funding (federal, state, city, county)		629,000		
Amount of private funding				
Total Project Cost		936,315		
Scoring		Available	Awarded	Performance Points Ratio
	General Points	11	11	
	PH points	20	19	
	Joint Points	#REF!	#REF!	
	SSO CE Points	#REF!	#REF!	
	SSO non-CE Points	#REF!	#REF!	
	Performance Points	14	13	25%
	CAC Points (if competitive application)	7	6.9	
	Total Points Awarded	52	49.9	
At least 20% percent of total points based on system performance criteria for the project application				
At least 33% of total points based on objective criteria for the project application				
Please add any comments you have in the section below:				
Project did not provide a healthcare match				

Project Outline	Points Available	Points Awarded
Coordinated Entry Participation	1	1
Housing First and/or Low Barrier Implementation	1	1
All proposed program participants will be eligible for the program component type selected.	1	1
Documented, secured minimum match	1	1
Project has reasonable costs, as defined locally and proposed activities are eligible and consistent with program requirements	1	1
Project is financially feasible	1	1
Applicant is active CoC participant	1	1
Application is complete and data are consistent; project narrative is fully responsive to the question being asked and meets all criteria for that question as required by the NOFO	1	1
Data provided in the application are consistent	1	1
Required attachments correspond to the list of attachments in e-snaps that must contain accurate and complete information and are correctly dated.	1	1
Acceptable organizational audit/financial review	1	1
Total Points Available/Awarded	11	11

Performance Specific - Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks.	Points Available	Points Awarded	
Efficient Number of Households Served (households served in-line with staffing and project need)	2	2	
Cost per household served in-line with historical information of like-projects	2	2	
Successful Housing Outcomes Rate meets the CSB/CoC established performance benchmark for project type (Replace with Successful Diversion Rate for SSO - CE)	2	2	
Recidivism Rate meets the CSB/CoC established performance benchmark for project type	2	2	
Project Occupancy Rate meets the CSB/CoC established performance benchmark for project type	2	1	
Average Length of Participation/Housing Stability meets the CSB/CoC established performance benchmark for project type	2	2	
Increase in Income Rate meets the CSB/CoC established performance benchmark for project type or project proposes and describes an achievable income-related measure	2	2	
Total Points Available/Awarded	14	13	
			0

PH Specific	Points Available	Points Awarded
The type of housing proposed, including the number and configuration of units, will fit the needs of the program participants.	2	2
The type of supportive services that will be offered to program participants will ensure successful retention in or help to obtain permanent housing, including all supportive services regardless of funding source	2	2
The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply and which meet the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).	2	2
Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, housing that meets accessibility related needs, additional assistance to ensure retention of permanent housing)	2	2
Applicant has prior experience developing and/or managing the type of housing proposed	2	2
The majority of the units proposed in the project are dedicated to the population experiencing homelessness	2	2
Applicant identified sources of capital funding that will cover the development cost, if applicable	2	2
Applicant applied and received or is in the process of applying for OHFA tax credits, if applicable	2	2
Applicant secured rental subsidies from other sources than CoC funding	2	2
Applicant identified sources of services funding that complement any CoC request for supportive services, in an amount not less than 25% of the needed funding, inclusive of match from healthcare providers	2	1
Total Points Available/Awarded	20	19

Columbus and Franklin County Continuum of Care (OH-503)
2023 CoC Review, Score, and Ranking Tool

8/29/2023

Project Name:	McKinley Manor			
Organization Name:	YMCA			
Project Type:	PSH			
CoC Funding requested	262,450			
Amount of other public funding (federal, state, city, county)	578,859			
Amount of private funding	32,369			
Total Project Cost	873,678			
Scoring		Available	Awarded	Performance Points Ratio
	General Points	11	11	
	PH points	20	19	
	Joint Points	#REF!	#REF!	
	SSO CE Points	#REF!	#REF!	
	SSO non-CE Points	#REF!	#REF!	
	Performance Points	14	14	27%
	CAC Points (if competitive application)	7	6.5	
	Total Points Awarded	52	50.5	
At least 20% percent of total points based on system performance criteria for the project application				
At least 33% of total points based on objective criteria for the project application				
Please add any comments you have in the section below:				
Project did not provide a healthcare match				

Project Outline	Points Available	Points Awarded
Coordinated Entry Participation	1	1
Housing First and/or Low Barrier Implementation	1	1
All proposed program participants will be eligible for the program component type selected.	1	1
Documented, secured minimum match	1	1
Project has reasonable costs, as defined locally and proposed activities are eligible and consistent with program requirements	1	1
Project is financially feasible	1	1
Applicant is active CoC participant	1	1
Application is complete and data are consistent; project narrative is fully responsive to the question being asked and meets all criteria for that question as required by the NOFO	1	1
Data provided in the application are consistent	1	1
Required attachments correspond to the list of attachments in e-snaps that must contain accurate and complete information and are correctly dated.	1	1
Acceptable organizational audit/financial review	1	1
Total Points Available/Awarded	11	11

Performance Specific - Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks.	Points Available	Points Awarded
Efficient Number of Households Served (households served in-line with staffing and project need)	2	2
Cost per household served in-line with historical information of like-projects	2	2
Successful Housing Outcomes Rate meets the CSB/CoC established performance benchmark for project type (Replace with Successful Diversion Rate for SSO - CE)	2	2
Recidivism Rate meets the CSB/CoC established performance benchmark for project type	2	2
Project Occupancy Rate meets the CSB/CoC established performance benchmark for project type	2	2
Average Length of Participation/Housing Stability meets the CSB/CoC established performance benchmark for project type	2	2
Increase in Income Rate meets the CSB/CoC established performance benchmark for project type or project proposes and describes an achievable income-related measure	2	2
Total Points Available/Awarded	14	14

PH Specific	Points Available	Points Awarded
The type of housing proposed, including the number and configuration of units, will fit the needs of the program participants.	2	2
The type of supportive services that will be offered to program participants will ensure successful retention in or help to obtain permanent housing, including all supportive services regardless of funding source	2	2
The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply and which meet the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).	2	2
Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, housing that meets accessibility related needs, additional assistance to ensure retention of permanent housing)	2	2
Applicant has prior experience developing and/or managing the type of housing proposed	2	2
The majority of the units proposed in the project are dedicated to the population experiencing homelessness	2	2
Applicant identified sources of capital funding that will cover the development cost, if applicable	2	2
Applicant applied and received or is in the process of applying for OHFA tax credits, if applicable	2	2
Applicant secured rental subsidies from other sources than CoC funding	2	2
Applicant identified sources of services funding that complement any CoC request for supportive services, in an amount not less than 25% of the needed funding, inclusive of match from healthcare providers	2	1
Total Points Available/Awarded	20	19

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.

- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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. Coordination and Engagement–Inclusive Structure and Participation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2022 to April 30, 2023:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC's coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC's geographic area:	

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC's Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	Yes	Yes
4.	Disability Service Organizations	Yes	Yes	Yes
5.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
6.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
7.	Hospital(s)	Yes	Yes	Yes
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
9.	Law Enforcement	Yes	Yes	Yes
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
11.	LGBTQ+ Service Organizations	Yes	Yes	Yes
12.	Local Government Staff/Officials	Yes	Yes	Yes
13.	Local Jail(s)	No	No	Yes
14.	Mental Health Service Organizations	Yes	Yes	Yes
15.	Mental Illness Advocates	Yes	Yes	Yes

16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	No	No	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	Yes
29.	State Domestic Violence Coalition	No	No	No
30.	State Sexual Assault Coalition	No	No	No
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	Faith-based Organizations	Yes	Yes	Yes
35.	Veterans Organizations	Yes	Yes	Yes

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	

	Describe in the field below how your CoC:
1.	communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;
2.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
3.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).

(limit 2,500 characters)

1) Each spring, the CoC governing body issues a call for membership nominations 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 self-nominations. The CoC Board reviews nominations and considers whether additional or different representation would improve the CoC's community perspective and expertise. The CoC considers the CoC Board's membership recommendations during their May/June 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.

2) 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 shared visually and explained verbally during meetings.

3) The CoC adopted in 2022 a Diversity Equity Inclusion (DEI) Plan that sets the long-term goal for the composition of the CoC to be consistent with the composition of the people served by the homelessness system across a range of characteristics, including race, ethnicity, gender, age, LGBTQ+ identity, socio-economic status, disability, and lived experience in the homelessness system and other systems of care. The CoC will pursue this goal with diligence and meet incremental markers of success. In 2023, the 1st report on the DEI Plan showed that the new members recruited are 67% Black/African American; 78% female; and 11% transgender. The CoC composition progressed towards being reflective of the Franklin County population, the 1st goal of the DEI Plan. Franklin County population is made up of 51% women, 23% Black/African Americans and the CoC membership identifies as 60% women, and 24% Black/African Americans, respectively. CoC members of other ethnicities and as well as people with disabilities are the current focused objectives. Ensuring cultural humility in recruitment, learning agility while aligning with organizations that work and represent underserved populations are the benchmarks.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section V.B.1.a.(3)	

	Describe in the field below how your CoC:
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1) Our CoC's strategic and youth plans are updated via public convenings and workgroups that incorporate ideas from partners involved in preventing and ending homelessness. The 2022 update of A Place to Call Home, our strategic framework that articulates our community's vision for making sure everyone has a place to call home, includes goals tailored to all populations. Goals are aligned with broader community work. Community Shelter Board, the UFA, facilitated system discussions and partner and community listening sessions where almost 150 individuals provided input. Since then, the CoC has expanded community outreach, further engaging with hospitals, government, grassroots entities, people with lived experience, and volunteers serving unsheltered adults. The Citizens Advisory Council, individuals with lived experience, meet monthly to advise the CoC, participate in feedback sessions, attend system trainings and evaluate new partner projects. Goals for the youth plan are updated with participation from the Youth Action Board (YAB).

2) During sessions to gather community input, CSB presented the current state of homelessness and programming and strategies in place, to create a baseline understanding and to facilitate development of new ideas. The presentations allowed for targeted discussions of goals and attendees were able to provide input and come up with new ideas and strategies to improve the system of care.

3) The CoC used neighborhood meetings as a forum for presenting new information. Buildings were accessible to people with disabilities. Listening sessions used Zoom as a virtual platform, accessible to people with disabilities. Materials are posted on CSB's website in PDF format.

4) Feedback from sessions was summarized in overarching goals and strategies. Participants rated the strategies and the highest rated were included in the plan. The plan includes outcomes and outputs to measure the progress of our work. The final plan was presented to the CoC for approval and will be revisited annually with the intent of updating the strategies to align with the current socio-economic environment. The current youth update highlights the voice of the YAB. In presenting to local neighborhood groups on new PSH, feedback was incorporated into planning. Meetings with volunteers led to a strong outcome in a non-congregated pilot for unsheltered people. Meetings with hospitals have resulted in algorithms for client discharge planning.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section V.B.1.a.(4)	
	Describe in the field below how your CoC notified the public:	
	1. that your CoC will consider project applications from organizations that have not previously received CoC Program funding;	
	2. about how project applicants must submit their project applications—the process;	
	3. about how your CoC would determine which project applications it would submit to HUD for funding; and	
	4. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.	

(limit 2,500 characters)

1) Community Shelter Board (CSB), the UFA, solicits proposals for new projects for consideration by the CoC annually. CSB sends the opportunity via email to a wide array of organizations, encouraging further distribution, including organizations that have not previously received CoC funding, and posts the call for proposals on the CoC website. The notification includes instructions for the applications and a deadline. The CoC advertises all NOFOs, along with schedules and instructions, through emails to a wide variety of constituents and asks them for a broad further distribution of the funding opportunities, and on the CoC website. The CoC welcomes participation from entities that have not received CoC funds and proactively seeks opportunities to involve new partners. This is stated explicitly in the call for proposals. In 2022 we were awarded a CE project for an organization that has not previously received CoC funding. In 2023, we are including an application from an organization new to the CoC.

2) The CoC emails and posts on the website instructions for submitting Concept Papers. Staff provide technical assistance to any applicant that requests additional support. Applications must be emailed to CSB.

3) The CoC determines which new projects to include in the application based on the CoC review process. New projects are required to submit Concept Papers that detail the type of project, target population, percent of units dedicated to the homeless population, provision of supportive services, expected funding sources including housing subsidies and supportive services match funds, commitment to housing first, approach to equity, involvement of persons with lived experience and projected results. The CoC Board, Citizens Advisory Council (people with lived experience), and CoC review and evaluate the Concept Papers based on community need using the system gaps analysis and applicants' capacity to operate the project and meet compliance standards, responses included in the application and capacity to administer federal funds. The CoC scores and prioritizes Concept Papers. The final determination regarding the projects to be included in the competition occurs during the application process, based on available CoC Bonus funding.

4) The CoC accommodates the communication needs of people 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.

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC's geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	

	Describe in the field below how your CoC:
1.	consulted with ESG Program recipients in planning and allocating ESG Program funds;
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and
4.	provided information to Consolidated Plan Jurisdictions to address homelessness within your CoC's geographic area so it could be addressed in the Consolidated Plan update.

(limit 2,500 characters)

1) City of Columbus and Franklin County (ESG recipients) representatives are members of the CoC Board and the CoC and actively participate in funding allocation conversations in CoC meetings. The City and County grant all ESG allocations to Community Shelter Board (CSB), the 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 and Emergency Shelter funding in the county, which is 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 based on these standards, using HMIS data. The performance reports are reviewed during the CoC Board and CoC meetings. These evaluations include program-level reporting of all ESG-funded projects. CSB also provides the City, County and State with the required annual performance reporting using HMIS data and monthly, quarterly and annual financial reporting on use of funds. The CoC also reviews HIC and PIT data including system capacity by program type, a system gaps analysis, and the System Performance Measures. Funding allocations and performance outcomes determined collaboratively between ESG recipients and the CoC are codified in contracts between the City, County, and State as the ESG recipients and CSB as the ESG sub-recipient.

3) CSB shares HIC and PIT data with the City, County, and State to update the Consolidated Plan and provides descriptive information for the plan on current state, gap in inventory and service provision and projected need. CSB conducts a PIT debrief as an ongoing quality and improvement practice.

4) On behalf of the CoC, CSB regularly shares system updates and reports with the City, County, and State through email, 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. Information is provided on current state of homelessness, gap in inventory and service provision and projected need. For the City and the County, CSB updates the respective sections of the Consolidated Plan

1C-3.	Ensuring Families are not Separated.	
	NOFO Section V.B.1.c.	

Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported sexual orientation and gender identity:

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	Yes

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

Select yes or no in the chart below to indicate the entities your CoC collaborates with:

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	No
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

Describe in the field below the formal partnerships your CoC has with at least one of the entities where you responded yes in question 1C-4.

(limit 2,500 characters)

The CoC collaborates with Columbus State Community College (CSCC) to assist youth experiencing or at risk of homelessness in continuing educational opportunities. Success-Bridge helps students at risk of dropping out of school due to housing instability with homelessness prevention resources. CSCC Success Bridge has a formal agreement with CSB and data and outcomes are tracked in HMIS. CSCC has a voting representative on the CoC. The CoC collaborates with local high schools and GED providers on educational opportunities for youth.

Columbus City Schools Project Connect (the community's largest LEA) is connected to the CoC's family system operations workgroup to link with emergency shelter partners regarding services and resources. Columbus City Schools actively participates on the CoC Youth Committee and youth case conferences when there are youth to refer to the programs. The CoC's Youth System Manager participates in LEA workgroups and forums. The CoC facilitated a streamlined referral process from agencies that provide shelter and housing services for families to Columbus City Schools Project Connect. This process ensures children remain in their school of origin or are immediately enrolled in the school serving the family's temporary address. Project Connect provides daily school transportation for children staying in emergency shelters. Project Connect is also part of the CoC's Homelessness Prevention Network (HPN) and is trained in housing problem-solving and refers at-risk families to the CoC for additional supports. Columbus City Schools Project Connect has a formal MOU for the HPN. Part of the onboarding to the HPN, Project Connect and CSB created a smooth process so that referrals would meet the needs of the clients and families experiencing housing instability. Expansion of service providers in the HPN this year will provide new referral pathways for families experiencing housing instability while their children are attending Columbus City Schools. Project Connect has a voting representative on the CoC.

In addition to Project Connect, through CSB, the CoC has representation on the strategic advisory council of Future Ready Five (FR5) and participates in these meetings. FR5 is an initiative to prepare kindergartners to pass the kindergarten readiness exam. Coordination with FR5 includes collaboration with shelters for book access for children. FR5 partners will also be connected to HPN efforts this year part of the HPN expansion.

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
	NOFO Section V.B.1.d.	

Describe in the field below written policies and procedures your CoC uses to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 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, the UFA, on behalf of the CoC, monitors all programs annually for evidence that program staff proactively ensure that program participants' rights are not violated regarding public education, including contact with the local Homeless Education Liaison. The relevant excerpt from the P&P manual is: "Education: Programs serving children must ensure that children and youth have access to public education and that their rights are protected in accordance with federal and state requirements. Collaboration opportunities with Columbus City Schools' Project Connect staff are available." The relevant monitoring standard language is: "Children and youth have access to public education and receive assistance exercising their rights as protected by the McKinney-Vento Homeless Assistance Act of 1987, as amended, Title VII, Subtitle B; 42 U.S.C. 11431. Heads of households are advised of their rights as they relate to the public education system." Each program must demonstrate consistent implementation of processes for advising heads of households of their rights upon entry into any homelessness program through policies and procedures and actual client files. 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. It is our system's policy that when 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 busses that pick children up from emergency shelters and transport them to their schools every morning. Decisions on shelter placement consider the school of origin and the services that Project Connect will provide. 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.

1C-4c.	Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section V.B.1.d.	

Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	Yes	No
2.	Child Care and Development Fund	No	No
3.	Early Childhood Providers	Yes	No
4.	Early Head Start	Yes	No
5.	Federal Home Visiting Program--(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	Yes	No
7.	Healthy Start	No	No

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8.	Public Pre-K	No	No
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.	Local Home Visiting Program – maternal and infant	Yes	No

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Collaboration with Federally Funded Programs and Victim Service Providers.
	NOFO Section V.B.1.e.

In the chart below select yes or no for the organizations your CoC collaborates with:

	Organizations	
1.	state domestic violence coalitions	Yes
2.	state sexual assault coalitions	No
3.	other organizations that help this population	Yes

1C-5a.	Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

1) Each year the CoC system-wide policies are reviewed and updated to ensure changes throughout the year regarding collaboration with VSPs or services to survivors of domestic violence, dating violence, sexual assault and stalking are reflected in policies. This year we are implementing a new DV Coordinated Entry (CE) with our HUD award. Community Shelter Board, the UFA, is working with the Center for Family Safety and Healing, the DV CE provider (DV CE) and a VSP, on having policies and procedures reflecting the most trauma-informed language and approach to be used by Netcare, the Homeless Hotline operator, in the non-DV CE process when an individual is calling the hotline and identifies as currently fleeing or at risk for any of the traumas noted above. The DV CE is a member of ODVN (Ohio Domestic Violence Network-the state DV coalition), with a seat on their board, and consistently participates in their trainings and meetings. They are aligned with their standards for trauma informed care and DV practice standards and consult with ODVN on local needs. Netcare utilizes this language when they conduct a safety conversation and provide a warm hand-off to CHOICES domestic violence shelter. Netcare is provided referral criteria for CHOICES for appropriate pathways for the client.

2) The DV CE routinely provides trauma informed care training in the community. They have the role of training system partner staff to ensure the most comprehensive and trauma-informed implementation of safety conversations with survivors. A DV training suite has been put together for system staff by the DV CE that addresses all aspects of family violence, including child abuse and neglect, teen dating abuse, domestic violence and elder abuse, available on-demand on CSB's website. The DV Coordination Workgroup launched last year by CSB, bringing together VSPs, the CE providers and the RRH DV provider is working on: 1. coordination of care and updates for all partners regarding shelter access, transitional housing/rapid rehousing/PSH referrals and intake processes; 2. System process mapping and housing pathways; 3. Training expansion on trauma informed care and DV best practices in sync with the ODVN standard. There is also an emphasis on teamwork and meeting the needs of victims and survivors. In addition, the DV CE is meeting weekly with CHOICES to align safety services with DV sheltering.

1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

(limit 2,500 characters)

1) The Center for Family Safety and Healing, the DV Coordinated Entry (CE) provider and a victim service provider (VSP), developed and made available in June 2023 a domestic violence training suite for system staff that addresses best practices in recognizing and responding to family violence, including child abuse and neglect, teen dating abuse, domestic violence and elder abuse, available on-demand on CSB's website. This is a CE specific and comprehensive system-wide training on trauma-informed engagement with victims and survivors of DV. 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 and emergency transfer plans. Staff receive 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 enter the information into HMIS anonymously to protect the survivor's privacy. CSB monitors projects annually to ensure training plans are up-to-date and look for evidence of use and prioritization of emergency transfer plans. DV program outcomes indicate program participants receive effective and informed services.

2) CE 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, using the training suite developed by the DV CE provider. CE staff receive 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. CSB staff monitors success and effectiveness of CE via mock calls quarterly to test application of training materials and best actions for survivors to ensure support provided is trauma-informed. CSB, VSP and CE providers meet regularly to discuss coordination of referrals, planning, roles and responsibilities and best approaches to provide appropriate interventions to DV survivors. DV CE Provider and CHOICES meet weekly. Training is emphasized for DV RRH with DV CE Provider.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC's coordinated entry includes:	
	1. safety planning protocols; and	
	2. confidentiality protocols.	

(limit 2,500 characters)

1) Individuals are screened for experiences of DV, dating violence, sexual assault, and stalking when they access the Coordinated Point of Access (CPOA) and/or engage with street outreach. Community Shelter Board (CSB), the UFA, partnered with the new Coordinated Entry (CE) DV provider, the Center for Family Safety and Healing to develop new trauma-informed safety language and staff training. Households fleeing DV situations are referred to CHOICES, our local DV shelter, immediately through a warm transfer. The DV System Coordination Group focuses on planning and processes to ensure client safety and to streamline the process to connect clients to the DV RRH program through the most efficient pathway possible, recognizing that timeliness is connected to safety. The CE DV provider works with the CPOA to ensure clients referred to emergency shelter are linked to CE DV provider to develop safety plans. People who have experienced DV are prioritized for the specialized CoC-funded DV RRH operated by YMCA. The Unified Supportive Housing System (USHS), which manages PSH eligibility and referrals in our CoC, works with PSH providers on emergency transfers when necessary. Programs notify USHS when a priority transfer is required because of violence or a threat of violence and USHS quickly identifies alternative, safe housing. Every housing program in our system, including PSH, TH and RRH, is required to have an emergency transfer plan and the CoC monitors all programs annually to ensure that this plan is implemented consistently and there is evidence that participants are informed of availability of emergency transfers.

2) The CE DV, CHOICES and TH programs do not utilize HMIS as the data system due to confidentiality measures; likewise, all locations are undisclosed. If a DV survivor is entering a non-VSP program, they can request that their information be anonymized to protect privacy. The wide array of DV resources in our CoC ensures that the system maximizes client choice and assistance best meets the needs of each 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, based on need and preference. The DV Coordination Workgroup identifies additional processes to best connect clients to appropriate services and is mindful of areas where client consent is essential and when releases of information must be in place for provider-to-provider data sharing.

1C-5d.	Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below:	
1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and	
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.	

(limit 2,500 characters)

1) CHOICES and Huckleberry House, the only shelter and transitional housing providers, respectively, for victims of domestic violence collect data outside HMIS to preserve survivors' security and safety. CHOICES and Huckleberry House provide 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.

2) The CoC also collects via HMIS data on persons experiencing homelessness who report having experienced domestic violence, dating violence, sexual assault, and stalking. The aggregated data received from CHOICES and Huckleberry House and the Community Shelter Board, the UFA and HMIS Lead, collected data via HMIS are used in reports presented to the CoC. The CoC also conducted a youth needs assessment that included information on domestic violence, dating violence, sexual assault, and stalking among youth experiencing homelessness. The CoC uses the data from CHOICES, Huckleberry House and HMIS, and the youth needs assessment to assess the community needs and gaps related to domestic violence, dating violence, sexual assault, and stalking. Data is used to analyze the efficacy of existing services and continuously improve programs serving this population. With the implementation this year of our new Coordinated Entry (CE) for domestic violence, the Center for Family Safety and Healing (CFSH), the new provider, will be able to provide additional, richer aggregated data on the specialized needs of domestic violence, dating violence, sexual assault, and stalking victims, through the in-depth assessments they are conducting as a CE provider. Using their experience as a VSP, the CE DV provider CFSH, the other DV providers and system housing providers will be able to learn about the current unmet needs of this population and tailor current housing and service needs. For example, we know that it is imperative to decrease the time to housing for this population and support timely, rapid re-housing that aligns with safety, security and disrupting the power-control cycle. For this reason, we are applying for an additional Joint Th/RRH project to increase the system's capacity to address the rehousing needs of this population.

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1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:

1.	whether your CoC has policies and procedures that include an emergency transfer plan;
2.	the process for individuals and families to request an emergency transfer; and
3.	the process your CoC uses to respond to individuals' and families' emergency transfer requests.

(limit 2,500 characters)

1) Every housing program in our system – including Permanent Supportive Housing, Transitional Housing, Rapid Rehousing, and Prevention programs – is required to have an emergency transfer plan and the CoC, through CSB's annual Program Review and Certification process monitors all programs annually to ensure that this plan is implemented consistently and that each participant is informed about the availability of and their right to request an emergency transfer at entry into each housing program. All programs are required to provide a VAWA notice and information about the emergency transfer process to program participants at their entry in each program. The VAWA notice is included as a lease addendum for all the assisted units in the community – including units supported with CoC, ESG, HOPWA and HOME funding. Evidence that the notice and information was provided to each participant is required to be included in the file. If, during the annual monitoring, CSB determines that the project did not follow the required process, the provider is asked to implement a quality improvement plan to remedy the non-compliance. 2) Participants in need of an emergency transfer must reach out to their case manager as soon as they determine the need to move because of a domestic violence, dating violence, sexual assault or stalking situation, threat of violence or a perceived threat to their safety. The case manager, along with their program supervisor, implements the emergency transfer procedure. This process is guided through a trauma-informed, client-centered approach, requesting the minimum information necessary from the participant involved. 3) For PSH, 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. Programs notify USHS when a priority transfer is required because of violence or the threat of violence or perceived threat and USHS quickly identifies alternative, safe housing. Transfers can be internal within a PSH project if a vacancy is available and participant is amenable to an internal move or external, to a different PSH project. For an external transfer the participant becomes the 1st priority for housing and will be referred to the first vacancy system-wide. For Prevention, RRH and TH, the program staff, working with the participant, identify alternative safe housing and expeditiously work to move the participant.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC:	
1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and	
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.	

(limit 2,500 characters)

1) Domestic Violence (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, and HHS-funded programs. With the implementation this year of our new DV Coordinated Entry (CE), coordination will further improve, as well as the safety component while accessing these programs. Community Shelter Board (CSB), the UFA, promotes homelessness prevention resources to victim service providers (VSPs) through a direct referral process so clients can most easily be connected to these resources. CSB has worked to incorporate VSPs into the resources and supports provided by the Homelessness Prevention Network (HPN) and CHOICES, the local DV shelter, has presented to HPN partners. The DV CE Provider will have a full-time prevention specialist in the HPN. CHOICES has full access to the homeless system's housing options. Street outreach providers refer unsheltered adults to the RRH DV program. A streamlined DV RRH referral process is in place for clients residing at CHOICES or clients temporarily living in hotels that are linked with VSPs, CHOICES or the Center for Family Safety and Healing (CE DV). During this past year, CSB worked with the YMCA DV RRH program to improve RRH access for eligible clients residing in the system's non-DV emergency shelters. The DV RRH Provider has housing locators to increase the housing options available for survivors. VSP staff attended Severity of Service Needs (SSN) Assessor trainings this year, this assessment used to determine eligibility and prioritization for permanent supportive housing (PSH). VSP staff refer clients to the Unified Supportive Housing System (USHS), the CoCs coordinated system for managing prioritization and referrals to PSH. They also complete and submit requests for Direct Client Assistance (DCA) to CSB, the program providing financial assistance for security deposit and rent, to house participants experiencing homelessness in market rate housing.

2) The monthly DV System Coordination Group provides opportunities for all partners to proactively assess and identify systemic barriers that prohibit provision of safe housing and appropriate services for victims and survivors and improve collaboration, share resources, updates and information and identify the best services pathway for this population. The CE DV addition will further enhance this work as housing is streamlined.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC:	
1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and	
2.	accounted for the unique and complex needs of survivors.	

(limit 2,500 characters)

1) So far, we have not involved DV survivors with a range of lived expertise in the development of our CoC policies and programs. With the implementation in this new grant year of our new coordinated entry program for DV survivors it is the right time to do so. We will ask our partner in the implementation of the coordinated entry project, the Center for Family Safety and Healing (CFSH) to take the lead in identifying the right avenues to receive continuous input and feedback on the current CoC programs. Through CFSH we will invite DV survivors to join the Citizens Advisory Council, a group of homeless and formerly homeless individuals that meet monthly and are an integral part of the Continuum of Care governing body. An established and potent community change agent, the Citizens Advisory Council provides direct input into the development of the CoC's policies and programs. Some current members of the Citizens Advisory Council are DV survivors, but their input has not been requested specifically as it relates to CoC's policies and programs in relation to the survivors' experience with the current system.

2) DV survivors have access to all the CoC-wide programs in the system and the dedicated RRH DV program is tailored to the unique needs of the DV population, with longer lengths of participation and protocols to ensure safety of the household from the onset of their participation. In case any housed DV survivor in the system requests and emergency transfer, the household will become the first priority for rehousing.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+—Anti-Discrimination Policy and Training.	
	NOFO Section V.B.1.f.	

1.	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
2.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

1C-6a.	Anti-Discrimination Policy—Updating Policies—Assisting Providers—Evaluating Compliance—Addressing Noncompliance.	
	NOFO Section V.B.1.f.	

Describe in the field below:

1.	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;
2.	how your CoC assisted housing and services providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy;
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

1) Community Shelter Board (CSB), the UFA, updates the system-wide anti-discrimination policy on behalf of the CoC, using stakeholder feedback from the Citizens Advisory Council (CAC) and Youth Action Board (YAB), the two groups comprised of persons with lived experience of homelessness, surveys conducted by direct service providers and through partner dialogue in ongoing system operation workgroups that include LGBTQ+ and youth serving organizations to ensure the policy is comprehensive in meeting the needs of LGBTQ+ individuals and trauma-informed.

2) CSB provides support to partners in developing anti-discrimination policies through technical assistance during start-up of new projects as well as ongoing monitoring of programs during the annual Program Review & Certification (PR&C) process. There is a specific focus on the Youth Homelessness Demonstration Pilot projects to ensure that transition age youth are free from discrimination in all programs. Because it is vital that all individuals and families access and receive services free from discrimination, CSB takes seriously any caller concern received and all caller concerns alleging any type of discrimination are followed up on and investigated. CSB problem-solves with the client as well as the provider to ensure that no discrimination was involved in the concern.

3) Annual monitoring of anti-discrimination policies at the project level are conducted through the PR&C process as well as through investigations and resolutions of any type of caller concerns received by CSB that allege discrimination. Data reports regarding service restrictions by race and gender are compiled to review potential discriminatory practices within programs. Mock calls with the homeless hotline provider are conducted quarterly to ensure equal access to the system. Evaluation of CoC-wide anti-discrimination policies occurs through discussion at system workgroups.

4) Non-compliance noted during the PR&C process at the project-level results in the provider being required to implement a quality improvement process and an immediate plan for correction of the concern. Disparities or concerns of discrimination noted in data reports regarding service restrictions are addressed immediately with the provider. Concerns noted in the mock calls are addressed with the provider and additional trainings are implemented. System workgroups are utilized as a mechanism to address system-wide concerns with anti-discrimination practices.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area--New Admissions--General/Limited Preference--Moving On Strategy.	
	NOFO Section V.B.1.g.	

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with--if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
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Columbus Metropolitan Housing Authority	9%	Yes-HCV	Yes
Fairfield Metropolitan Housing Authority	0%	No	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	

Describe in the field below:

1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,500 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 General admission preference for the homeless population is included in CMHA's Housing Choice Voucher Administrative Plan. Currently CMHA has over 3,000 project-based vouchers allocated to PSH projects across the CoC. CMHA dedicated all the EHV's to the CoC, creating a new PSH program dedicated to the chronic homeless population. CMHA and the CoC worked together to apply for mainstream vouchers and the latest round of FUP vouchers. 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 all new site-based PSH projects have access to HCV subsidies to successfully operate.

2) The CoC has not worked with the Fairfield Metropolitan Housing Authority – the CoC covers Columbus and Franklin County, Fairfield County is outside the geographic area of coverage of the CoC and covered by the Ohio Balance of State CoC.

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored—For Information Only	

Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

1.	Multifamily assisted housing owners	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section V.B.1.g.	

In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	Yes
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	
	elderly 55+	Yes

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section V.B.1.g.	

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	Mainstream, FUP

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	
	NOFO Section V.B.1.g.	

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored—For Information Only	

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
	If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	
PHA		
Columbus Metropol...		

1C-7e.1. List of PHAs with MOUs

Name of PHA: Columbus Metropolitan Housing Authority

1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1.	Discharge Planning Coordination.	
	NOFO Section V.B.1.h.	

Select yes or no in the chart below to indicate whether your 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.

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section V.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	34
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	34
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.

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	Describe in the field below:
1.	how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
3.	how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

1) CSB, the UFA, monitors programs annually using a Program Review and Certification (PR&C) process that includes review of policies, procedures, client files, discussion with program staff and site visits to ensure they adhere to a Housing First model, work to prevent literal homelessness and place people experiencing homelessness in housing without preconditions on housing assistance. Quick resolution of housing crises is the central priority. CSB reviews policies and program participant files at least annually for evidence of these efforts. 2) The CoC prioritizes safe, stable housing as the primary solution to homelessness. Programs must quickly connect people experiencing a housing crisis with permanent housing and the supports needed to stabilize housing without preconditions (e.g., income, sobriety, or engagement in treatment) and evidence of these interventions must be in the client files. During the annual monitoring visit, programs must present evidence of the use of a standardized assessment tool to identify housing options and service needs without preconditions. Other factors and indicators reviewed for which evidence is required are: disability-related services are voluntary; RRH programs provide immediate access to individualized re-housing assistance and connection to a wide range of private market, subsisted, and PSH options; PSH programs have expedited admission processes including assistance with obtaining necessary documentation; applicants may not be required to participate in more than two interviews and can be admitted within a few days; once housed, programs stabilize participants by connecting them with community-based services that address immediate needs and support long-term housing stability, however, participation in supportive services is not required; exits to homelessness are avoided whenever possible; programs provide written plans for at-risk clients that include strategies for intervention, prevention, or housing retention; in the event a program participant is involuntarily terminated, a pre-termination hearing is made available to them and the opportunity to appeal the decision. 3) All renewal projects are evaluated for compliance with Housing First outside of the CoC competition – results of the annual monitoring under our PR&C process, including Housing First compliance, are embedded in the scoring for each project. New projects are required to commit to using Housing First principles part of the application process.

1D-3.	Street Outreach—Scope.	
	NOFO Section V.B.1.j.	

	Describe in the field below:
1.	your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
2.	whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;
3.	how often your CoC conducts street outreach; and
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

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(limit 2,500 characters)

1) The CoC's outreach team engages unsheltered people in the locations they reside and frequent, like soup kitchens. The cross-agency, multi-disciplinary team collaborates with PATH, VA Outreach, Street Medicine, the YHDP funded CE, and other entities providing street outreach for coverage, engagement, assessment, housing search and placement. The outreach team is 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. The City's 311 center relays information provided by citizens about unsheltered individuals to the outreach team. Procedures are in place system-wide to standardize outreach activities and improve coverage and engagement of unsheltered individuals across the region.

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

3) Outreach Specialists conduct outreach daily. Specialists repeat engagement attempts with individuals at least monthly with the goal of placement in housing or emergency shelter. The Outreach team works with the coordinated point of access to link people to resources and shelter.

4) The outreach team seeks new locations where people experiencing homelessness congregate and identify new encampments and people who do not otherwise request assistance. Street outreach links with community volunteers and activists to engage clients who may be resistant initially to services. A recent pilot was successful in housing 10 out of 13 residents of one encampment. The outreach team works with Street Medicine to identify the most vulnerable, engage and link them with services. Communication with other systems (health care, faith-based, social service providers, community programs and law enforcement) identify people who need help but are unlikely to seek assistance. Interventions are provided regardless of race, color, national origin, religion, sex/sexual orientation and gender identity, age, familial status or disability. Specialists can access translators for people who speak languages other than English or sign language interpreters and have training on how to communicate with those with cognitive and physical disabilities. Community Shelter Board, the UFA, monitors for compliance with accessibility requirements and if non-compliance is determined, the provider is asked to for immediate correction, inclusive of additional staff training.

1D-4. Strategies to Prevent Criminalization of Homelessness.

NOFO Section V.B.1.k.

Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC's geographic area:

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	No
3.	Engaged/educated local business leaders	Yes	No
4.	Implemented community wide plans	Yes	No

5. Other:(limit 500 characters)		
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1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.	
	NOFO Section V.B.1.i.	

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	370	545

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section V.B.1.m.	

Indicate in the chart below whether your CoC trains program staff annually on the following mainstream benefits available for program participants within your CoC's geographic area:

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF–Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section V.B.1.m	

Describe in the field below how your CoC:

1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, SSDI, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 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 are trained and capable of helping program participants enroll in and utilize mainstream benefits. CSB reviews resources, best practices, and other assistance information during weekly system operations workgroup meetings with partner agencies and through email communications as updates become available. CSB works with organizations that provide mainstream benefits to present information on their programs during system meetings and educate project staff about how to best collaborate with healthcare organizations. A newsletter is also emailed out to a large distribution list. CSB works with the Social Security Administration to provide at least annually a training on their Vulnerable Populations Initiative.

2) The Homeless Hotline, part of our CPOA, screens callers for health insurance to assess coverage gaps and MCO utilization by those referred to emergency shelter programs. We are working with MCOs on partnerships to increase collaboration between our systems. CSB is collaborating with the local Alcohol, Drug, and Mental Health Board (ADAMH) and MCOs to best leverage Medicaid benefits on behalf of homeless program participants for substance abuse and mental health treatment. Majority of PSH providers sub-grant for the provision of supportive services with agencies that are part of the ADAMH system. These agencies are Medicaid billing agencies and Medicaid use is maximized. Up to 30% of supportive service funds used in PSH matriculate from Medicaid. CSB works closely with Veterans Administration to ensure that Veterans have access to health care resources. CSB convenes a monthly meeting with hospitals to best coordinate ER discharges and linkage to care.

3) In the most recent strategic plan update, multiple partners identified as a significant goal the further use of SOAR throughout the system to assist clients in accessing benefits. CSB is promoting expanded opportunities for use of SOAR in the youth, single adults, veterans, and family systems. Since last year, a couple more projects have added SOAR certified staff.

1D-7.	Increasing Capacity for Non-Congregate Sheltering.	
	NOFO Section V.B.1.n.	

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.

(limit 2,500 characters)

Usage of non-congregate shelter is prioritized for families. When the two family shelters are full, we use hotels to accommodate families. Throughout this past year, an average of 25 hotel units were used nightly to accommodate families. Strategically transitioning all family sheltering into non-congregate, hotel-based sheltering within the next 12 months aligns with our commitment that no family is left unsheltered at any point in time and it is our first step in achieving our bold goal of ending family homelessness in our CoC. In the colder months, additional overflow capacity is added to existing shelters by using hotels as non-congregated facilities, ensuring everyone who wants and needs shelter receives it. Reporting sex offenders cannot be sheltered in regular shelters because of proximity issues and in the colder months sex offenders are also sheltered in hotels, in a non-congregate environment. The new USICH guidance on working with those experiencing unsheltered homelessness, and an increase in encampments around our community prompted considerations for a new approach for offering immediate options for the unsheltered population. Some unsheltered individuals do not access emergency shelters because of their congregate nature. The CoC conducted a series of meetings utilizing the USICH 7 Principles in Addressing Community Encampments and linked this with a non-congregate shelter approach. In the pilot, we secured hotel rooms as non-congregate, temporary accommodations for 13 inhabitants of an encampment as we worked through permanent housing placement for these individuals. Street outreach engaged all 13 residents and supported them through the CE. This pilot allowed us to assess implementation on a small scale of provision of immediate non-congregate, low-barrier, trauma-informed shelter. This hotel pilot is a collaboration between CSB, the City of Columbus, and other key community stakeholders. The pilot is complete and 10 out of 13 participants moved into permanent housing. There will be an after-action analysis to determine key elements of the pilot that will be critical in the next 12 months as we shift to a non-congregated focus for this population. Seasonal warming center efforts will be ramped up again this winter and may provide additional piloting of smaller to non-congregate options for specific community members experiencing homelessness. The CoC recognizes that these options are trauma-informed and help with better focus on housing.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

1) CSB, on behalf of the CoC, has strengthened relationships with public health, FQHCs, hospitals, clinics and medical experts which will improve our response to future public health emergencies. CSB and subrecipients updated and expanded infectious disease policies and procedures as learned from COVID-19. These policies, adapted for use in congregate facilities, were reviewed by Columbus Public Health. CSB and subrecipients adopted new approaches and technologies for communication that will work in future crises, including quick setup of a planning and response team that includes public health agencies, learning collaboratives, tele-health options, and web resources. CSB is the HMIS Lead and developed procedures for tracking health screening and vaccination status that can be replicated. CSB also developed centralized methods for distributing food and personal protective equipment (PPE) and other essentials, replicable in other situations. An infectious disease testing and response flow was established during COVID but is adaptable for the future. This response was praised by EMS, Fire and the Health Department.

2) CSB is engaged with Columbus Public Health and Franklin County Public Health around discussions these agencies have on preventing infectious disease outbreaks. CSB developed CDC- and HUD-aligned protocols for emergency shelters and housing programs to limit close contact between participants and staff in case of an outbreak. These protocols were reviewed by the local public health agencies who participated in the CoC's planning processes and are replicable for future outbreaks. These protocols include masking, symptom and temperature screening, and pathways for testing, tracing, and treatment. To decrease the spread of infectious disease in congregate settings, CSB developed the expertise to quickly secure and open additional non-congregate facilities, some of which serve as spaces for isolation and quarantine (SIQ) for those who are or may be ill. Individuals who need a SIQ referral would be routed through the CPOA to decrease the spread in the system. CSB developed relationships with local FQHCs that can provide medical care in these facilities, as advised by public health. The local public health agencies are part of our planning team and provide essential guidance on preventing and limiting the spread of an outbreak and updating our infectious disease toolkit for communications for providers and community in case of an outbreak.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC:	
1.	shared information related to public health measures and homelessness, and	
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

1) At the onset of COVID19, the CoC, in collaboration with Columbus Public Health (CPH) and Franklin County Public Health (FCPH), started a COVID-19 Prevention and Response Group, a learning collaborative for providers, identifying public health best practices, areas of strength and areas needing guidance. Guidance on safety measures was shared during meetings, on Community Shelter Board's (CSB, the UFA) website, and via email. In the height of the pandemic, a bi-weekly Homeless Response Network webinar series offered providers topics like COVID Prevention and Response, Safe Engagement, Screening at the Front Door, Overdose in the Time of COVID, Delta Variant, and Return to School. Shelter partners met to discuss trends, best practices, resources and planning for the COVID response. Information from CPH and FCPH continues to be disseminated to system providers during system operation workgroups. As the centralized isolation strategy ended, CPH was used for planning, guidance and approval. Planning is in place for any future needs.

2) Based on experience gained from operating three years under COVID19 protocols, CSB developed the know-how to facilitate communication between public health and system providers, including street outreach, emergency shelters and housing providers to prevent and limit infectious disease outbreaks. Setting up a planning and response team to include CPH and FCPH is the first step whenever there is information about a potential outbreak to put in place protocols for prevention. Using guidance from CPH and FCPH, homeless service providers would receive updated communication toolkits to prevent an outbreak that would include hand-washing stations for unsheltered individuals, masking, symptom and temperature screening, and pathways for testing, tracing, and treatment. CPH and FCPH approved HMIS infectious disease screening questions for the Homeless Hotline and street outreach would be used immediately for the system's front door. CPH and FCPH would participate in system-wide virtual calls with system providers to answer questions and provide prevention information. These protocols would prevent an outbreak. To limit an outbreak, CSB would open non-congregate facilities for social distancing, isolation and quarantine, with support from CPH, FCPH and FQHCs. Street Outreach would link with public health and Street Medicine to engage unsheltered individuals on safety, screening, and treatment.

1D-9.	Centralized or Coordinated Entry System—Assessment Process.	
	NOFO Section V.B.1.p.	

Describe in the field below how your CoC's coordinated entry system:

1.	covers 100 percent of your CoC's geographic area;
2.	uses a standardized assessment process; and
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.

(limit 2,500 characters)

1) The coordinated entry system covers 100% of CoC geographic area using a widely-advertised local phone number (homeless hotline) with access to a live person 24/7/365 and a systemwide assessment system tailored to each program type and used as a person progresses through the various programs within the CoC. 2) For shelter access, the homeless hotline conducts an assessment with all callers that determines the shelter needs for an individual or family. This assessment is conducted while the person is on the call and responses are tracked in HMIS. If the household has no other safe accommodations for the night, a shelter bed is assigned based on available capacity. In shelter, the CoC uses a Housing Assistance Screening Tool (HAST) to assess the housing needs and eligibility for each household. The HAST is embedded in the HMIS for all programs. The Street Outreach team engages people at known camp locations and seeks new locations where people experiencing homelessness congregate and complete a HAST for all those that are willing to engage, when the HAST is the most appropriate next step. For others that are unsheltered but do not wish to access shelter and identify housing as a goal, the outreach worker completes the severity of service needs assessment (SSNA), if PSH is the goal that the outreach worker and participant identify. Dependent on the needs of each household, referrals are made to rapid rehousing (RRH), permanent supportive housing (PSH) or specialized interventions for transition age youth, veterans and pregnant women. The referrals are made through the HMIS system. For PSH a severity of service needs assessment (SSNA) is completed to assess the vulnerability of each person in the PSH pool for prioritization purposes. This assessment is also embedded in the HMIS. 3) After the homeless hotline assessment is completed, each person is offered the opportunity to respond to a confidential survey that is automated through the phone system. The survey responses are routinely analyzed by the hotline staff to assess needed improvements. The HAST and SSNA were developed in collaboration with the providers operating RRH and PSH projects and the assessments are reviewed regularly in the system level operation workgroups for single adults, families and housing programs. The DV CE provider is reviewing the HAST language to ensure it is trauma-informed. The Citizens Advisory Council and YAB participate in feedback sessions on the CE assessment process.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
2.	prioritizes people most in need of assistance;	
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and	
4.	takes steps to reduce burdens on people using coordinated entry.	

(limit 2,500 characters)

1) Street Outreach collaborates with the City, County, businesses and other systems of care (health care, faith-based, social service, law enforcement) to locate unsheltered people who need support but are unlikely to seek assistance. We affirmatively market programs to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability who are unlikely to engage without special outreach. We use word of mouth and places where unsheltered people congregate to identify those less likely to engage.

2) Standardized screening tools prioritize people in a housing crisis. CPOA and Outreach prioritize for shelter only those with no safe alternative housing. The HAST assessment is used to identify the highest priority households for 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 clients for PSH using HMIS data and case conferencing. USHS prioritizes chronically homeless households, then long-term homeless households with severe service needs using the SSNA assessment tool.

3) Assessments are completed within the first 5 days of the person's homeless episode. Providers are required to make immediate referrals to RRH or specialized programs. For RRH, clients look for their own apartment with assistance from the case manager. For PSH, a monthly "hotlist" is used to find clients likely eligible for PSH based on length of homelessness and disability and requests are sent to the project that actively serves a person on the hotlist for PSH eligibility assessment. The goal is to reduce the time it takes for the person to be referred to or enrolled in the right housing program for their needs. The housing case manager works with the household to determine the appropriate housing environment, consistent with their preferences. Multiple housing options are presented to a PSH client.

4) To reduce the burden on people using the coordinated entry, HMIS includes all the assessments used. Responses to the same questions autoflow system-wide and if the person returns to the system after an exit, the most recent responses show in HMIS. The case manager confirms the validity of the previous responses vs asking the same question again. CoC providers use the HMIS as a document repository to eliminate burdensome documentation collection processes.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry—Reporting Violations.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;	
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and	
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.	

(limit 2,500 characters)

1) The Homeless Hotline, the local phone number people need to call to access emergency shelter is a widely advertised phone number in the community. The "Street Card", a resource directory put together by the Columbus Coalition for the Homeless, the local homeless advocacy organization, has the Homeless Hotline phone number as the main resource advertised on the card. CSB's website as the COC lead, includes a wealth of information about all the housing and services available in the CoC's geographic area with links to all the partners' websites that further detail the availability of housing and services. At each program site computer stations are available for the use of program participants and case managers are working with program participants to explore the available next step housing and services opportunities system-wide that best fits their needs. The street outreach provider visits unsheltered individuals and discusses with them opportunities for engagement system-wide, providing options for either shelter or housing. Each housing and service provider has on-site printed marketing materials. CSB, representing the CoC, speaks at neighborhood meetings to promote all services.

2) Each homeless system partner must have a written document outlining clients' rights posted in a visible and accessible location, read and otherwise made known to clients upon admission, with accommodation for literacy and language barriers. All clients receive a copy of the clients' rights document upon intake including instructions for grievances and appeals and identifies the agency clients' rights officer. CSB monitors annually each provider and verifies that the clients' rights posting is available in a visible location and looks for evidence in the clients' file that the client received the client rights document.

3) CSB acts as the ombudsman for the homelessness system and receives complaints from individuals throughout the homelessness system. The assigned CSB staff records the complaint, gathers the backup documentation as needed, investigates and ensures proper steps are taken to guarantee client rights were not violated or remedies are in place, and establishes if there are conditions or actions that impede fair housing choice. CSB has access to legal counsel to provide support as needed. CSB would report any violations to the City of Columbus and Franklin County, the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

1D-10.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	08/11/2023

1D-10a.	Process for Analyzing Racial Disparities—Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section V.B.1.q.	

Describe in the field below:

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1.	your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
2.	what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

1) CSB, the UFA, issues quarterly performance reports using HMIS data on all systems and programs within the CoC. Specialized dashboards are created to look at the breadth of programming across the system for various subpopulations served – single adults, families, veterans, pregnant women and transition age youth. These dashboards, besides performance metrics, report on the demographic characteristics of the population served, including race, ethnicity and gender at entry into various program types across the system. These dashboards also look at demographic characteristics at exit from the system, to assess any disparities in outcomes. We specifically look at race and gender to analyze these disparities and contrast the race and gender of households that entered a program type vs. the race and gender of those that successfully exit the respective program type. Shelter restrictions collected in HMIS are analyzed quarterly to make sure restrictions are limited and unbiased. We analyze the shelter restrictions based on gender, race and ethnicity and we contrast restrictions with the demographics of the sheltered population to make sure there are no disparities in access.

Monthly we issue a “hotlist” report using HMIS data of those individuals that have over 100 days of homelessness. This list is used to proactively invite potentially eligible households for PSH eligibility assessment. We analyze the hotlist based on the gender, race and ethnicity of those on the list and contrast demographics with the demographics of the sheltered population to make sure there are no disparities in access.

2) Similar to nationwide numbers, the rate of Black/African Americans served system-wide is substantially disproportionate compared to the CoC's population. For several assessments of the hotlist we noticed an overrepresentation of men compared to the homeless population. No other notable disparities in access or outcomes were noticed within the system. We are excited that CSB was accepted to be part of the HMIS Advanced Users Group with the “Measuring Equity in Outcomes” project. While we are analyzing racial disparities in outcomes quarterly, we are looking for a more defined approach. On the surface, our numbers do not show racial disparities in outcomes, however, we are concerned there is a bigger picture. And we know that it would be useful to establish a framework for measuring equity in outcomes.

1D-10b.	Implemented Strategies that Address Racial Disparities.	
	NOFO Section V.B.1.q.	

Select yes or no in the chart below to indicate the strategies your CoC is using to address any racial disparities.

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	No
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes

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4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.	The CoC looks at HMIS data quarterly to analyze outcomes based on participant demographics with a focus on equitable outcomes. For example, when the COVID vaccine became available, a weekly report was developed to track vaccine uptake by race to maintain focus on equitable vaccine access for participants.	Yes

1D-10c.	Implemented Strategies that Address Known Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below the steps your CoC is taking to address the disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

For several monthly hotlist reports, Community Shelter Board (CSB), the UFA, noticed an overrepresentation of men compared to the general homeless population. The Hotlist identifies individuals and families with the longest histories of homelessness (over 100 days) with a self-declared disability, as this is the cohort most likely to qualify for permanent supportive housing (PSH). Our goal is to proactively reach out to assess their chronicity and eligibility for PSH with the intent to reduce time to housing. In acknowledgment of this disparity, CSB worked with a partner to create a team specifically to focus on housing chronic homeless individuals. This team housed 18 chronically homeless adults since December 2022 and there are 16 more in the housing process. The Homeless Prevention Network focused on new opportunities for homelessness prevention in communities disproportionately experiencing housing instability and worked to overlap prevention and support in zip codes that have higher incidents of and racial disparities in infant mortality. CSB and the City of Columbus created homelessness prevention programs for expectant mothers and prioritized housing resources for them.

Our Guiding Principles include ensuring equity in outcomes. The CoC's strategic plan to address homelessness specifically includes the following crosscutting goal focused on promoting equity throughout our system of care: "Ensure that families and individuals disproportionately represented among people who experience homelessness have access to responsive, equitable assistance to offset structural barriers and biases". We believe that our collective efforts to prevent and end homelessness should reflect the disproportionate rate at which different groups experience housing instability and homelessness, especially people of color; people with disabilities; and lesbian, gay, bisexual, transgender, and questioning youth. Program and housing assistance account for structural biases that cause or perpetuate homelessness, as well as individual needs, abilities, or resources, and adjust accordingly to ensure equitable resolution to housing crises. CSB, on behalf of the CoC, and its providers examine homeless crisis response system policies, procedures, and data to identify areas to improve equitable access and use of system's assistance. CSB, representing the CoC, was selected to participate in a NAEH mini-lab on CE and equity and will use learnings to further advance equity in the system.

1D-10d.	Tracked Progress on Preventing or Eliminating Disparities.	
	NOFO Section V.B.1.q.	
	Describe in the field below:	
	1. the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and	
	2. the tools your CoC uses.	

(limit 2,500 characters)

1) System-wide we look at demographics of those that access homelessness prevention, emergency shelter, street outreach, transitional housing, rapid rehousing and permanent supportive housing programs. We look at the same demographics for those that achieve a successful housing outcome. Reports are issued and disparities are analyzed quarterly. We consider a disparate impact on outcomes if we have more than a 5-percentage point variance on a specific demographic. For example, a recent report shows that 94% of head of households of families accessing rapid rehousing are women. At exit from rapid rehousing programs, the rate of women headed family households compared to all the family households achieving a successful housing outcome was 96%. In this example a disparate impact on outcomes was not identified. If the outcome would have been an 80% rate of women headed families and a 20% rate of men headed families achieving a successful housing outcome, we would say we have a disparate impact, as women headed families achieve less successful outcomes compared to the men headed family households. In this analysis we consider implications of a small data sample. We have outcomes in some program types that are less than 10. For example, we have very limited transitional housing with low capacity and turnover. We are careful about making assumptions and decisions based on a very small sample size. If a disparate impact on outcomes is determined, CSB's program team would present and address the findings at a system operations workgroup meeting with all involved providers. Next steps would be system level trainings for all staff, more in depth analysis of data to determine if a specific program or intervention is causing the disparity and going outside our system, if necessary, for example, addressing housing disparities with landlords. In the case of shelter restrictions analyzed quarterly and the monthly "hotlist" report, disparities in restrictions are determined contrasting the demographics of the population restricted or on the hotlist, respectively, vs the general sheltered population, using the 5-percentage point variance model as acceptable.

2) We exclusively use HMIS data for this work through our quarterly and monthly reports. We download the raw data from our HMIS and manipulate the data in the reporting formats for each of the above-mentioned reports.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC's Outreach Efforts.	
	NOFO Section V.B.1.r.	

Describe in the field below your CoC's outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.

(limit 2,500 characters)

The CoC highly values the talents and wisdom of people with lived experience of homelessness (PWLE) and works to provide opportunities to utilize this experience and grow the opportunities for PWLE to have voice within the homeless crisis response system. Community Shelter Board (CSB), the UFA, convenes the Citizen's Advisory Council (CAC) and Youth Action Board (YAB), groups comprised of PWLE. CSB has been active in recruiting and growing the YAB at both PSH and TH sites and further embedding youth voice into programming. YAB members are involved in peer-to-peer recruiting through activities such as speaking at statewide conferences and local events. This past year, the CAC developed a logo, updated their recruitment flyer and members are active in ongoing outreach and expansion. The CAC looks for community activities to be involved in and members participate in new provider and program selections, in the CoC Supplemental NOFO workgroup, new application scoring and ranking, review of the CoC Plan, and housing problem solving training. There are partners within the CoC who are actively looking for PWLE for their board memberships, and CSB staff is working with members on updating their resumes and writing bios. CSB is also engaging street outreach and community volunteers to get input and involvement from adults experiencing unsheltered homelessness. As CSB utilizes the USICH 7 Principles of Addressing Community Encampments, there is focus on the principle of engaging with encampment residents on solutions. A recently completed pilot to house unsheltered individuals and winter warming center planning are two new opportunities to engage people with lived experience of homelessness. Additionally, a major relocation effort this year with a large apartment building provides the opportunity to engage the voices of those who experience housing instability and displacement.

CSB is securing a large-scale board and leadership training that will be advertised system-wide through targeted outreach at program sites as a recruitment tool for PWLE to engage in leadership roles and decision-making processes and also as an expansion tool for the CAC. The board training will be tailored to PWLE and led by expert trainers from the Ohio Association of Nonprofit Organizations. CAC and YAB members are all compensated for their time in meetings, planning, event participation and decision making as part of the CoC.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	19	5
2.	Participate on CoC committees, subcommittees, or workgroups.	19	5
3.	Included in the development or revision of your CoC's local competition rating factors.	3	1

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4.	Included in the development or revision of your CoC's coordinated entry process.	3	1
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1D-11b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

Some partners have employment programs that provide workforce development initiatives for PWLE who are currently active in emergency shelter or PSH programs. A PSH provider offers referral and employment opportunities in an intra-agency cleaning program that provides workforce development training and next-step placement. Another provider offers workforce development training and daily employment opportunities for clients in shelter or PSH and has a full-time position for which a PWLE has been hired. Another provider that also has behavioral healthcare services has a prominent peer support program that is successful in employing PWLE as well as engaging clients in treatment and ongoing housing stabilization. The largest shelter program in the CoC provides daily and ongoing options for clients in the program to volunteer, get engaged in professional development opportunities, build out their resume and focus on employment opportunities. The shelter hired PWLE into their program after moving into stable housing. During COVID-19, there were PWLE employed as Trusted Messengers regarding COVID-19 vaccine engagement. Mount Carmel, the street outreach provider employs PWLE of homelessness and recovery from addiction in their outreach and Street Medicine programs and they serve as peer-to-peer mentors for clients that are experiencing homelessness. They provide housing stabilization services and are an ongoing source of support for clients transitioning into housing. A street outreach worker who is a PWLE of homelessness and former PSH resident works in a full-time capacity and is stationed at a downtown drop-in center throughout the week. Multiple partners in the CoC work with Community Health Workers (CHWs) in their programs and often the CHWs have lived experience of housing instability or homelessness. Their experience provides peer-to-peer engagements while also providing CHWs with professional development opportunities. A new Community Information Exchange is forming a Resident Experience Council and will employ PWLE to design a community platform to make it easier for social services organizations to help people in need of assistance. Youth Action Board members spoke on a panel at a statewide conference and CAC members attended housing problem solving training and are working on HPS certification. The goal is for them to provide peer-to-peer support and to be paid for this work. A large-scale board participation training is being planned for PWLE.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

Describe in the field below:

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1.	how your CoC routinely gathers feedback from people experiencing homelessness;
2.	how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and
3.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness.

(limit 2,500 characters)

1) The CoC gathers feedback from people experiencing homelessness and people who have received assistance through CoC or ESG programs in a variety of methods. Each provider is required to conduct a survey of program participants and to provide the survey results to Community Shelter Board (CSB), the UFA. Focus groups and one-on-one interviews are conducted with participants to hear feedback programs. Focus groups were conducted on street outreach services, youth and pregnancy-specific programs, and individuals and families that have received prevention resources and services. CoC providers regularly host town-hall style meetings in shelter and PSH locations to obtain client feedback and perspectives.

2) There are no differences in how the CoC gathers feedback from people who received assistance through a CoC or ESG program.

3) Providers are expected to analyze and address the suggestions and concerns that clients raise in the surveys. CSB's Programs and Planning Department (PPD) reviews surveys and follows up with providers as needed or appropriate. Based on focus group feedback, the PPD staff will follow-up with providers to inquire into concerns or challenges that are noted in the focus group. This has often led to determining a barrier or challenge that a program participant faced that can be addressed or eliminated for future participants. All programs have processes in place to empower clients to explore their concerns and Client Rights Officers are present to provide clients with an alternative beyond a traditional grievance process. When providers receive feedback or concerns at a town hall meeting, these are often addressed in the moment or shelter leadership will follow-up on the challenge and determine the appropriate step forward. Often, it is determined that there are accommodations that can be made to support a client in accessing or receiving the services that are needed or most appropriate. CSB serves as the system's ombudsmen and receives calls or emails with concerns from clients and takes very seriously the role of investigation and follow-up on these concerns. CSB partners with the provider in addressing the challenges of people with lived experience of homelessness (PWLE). A recently completed pilot for people experiencing unsheltered homelessness and winter warming center efforts are two initiatives based on client feedback. The goal is to have accessible CE, services and housing options based on suggestions and feedback from PWLE.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.t.	
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
1.	reforming zoning and land use policies to permit more housing development; and	
2.	reducing regulatory barriers to housing development.	

(limit 2,500 characters)

1) The City of Columbus issued in June 2022 a new Housing Strategy which will tackle Columbus' housing shortage to ensure housing affordability for current and future residents, with the goals to double the number of units built over the next 15 years, make residential construction easier, diversity housing types and developers, support renters, prevent evictions and current affordable housing stock, fund new affordable housing, have inclusive housing policies and a regional approach. The strategy is supported with a \$200 M affordable housing bond package. Community Shelter Board (CSB), the UFA, is the founder and board member of the Affordable Housing Alliance of Central Ohio. The members of the Alliance are organizations and companies that have as a principal mission or function to develop, improve, provide, or fund affordable housing for low-income households in central Ohio. The Alliance provided feedback in the development of this strategy on how to increase the supply of affordable housing and zoning reform. Comments have been submitted to the City of Columbus with specific suggestions on changes to zoning and land use to reduce barriers to development. We also met with the City of Columbus consultant leading the zoning reform work to provide specific information on barriers to affordable housing development that are in in the current zoning policies. The Housing Strategy includes work to update the zoning code, overhaul the review and permitting processes, enable small scale developments, implement inclusive housing policies, acquire and preserve naturally occurring affordable housing and expand housing stability and displacement prevention programs.

2) We met with City of Columbus Department of Development staff to discuss practices and policies called a Green Tape Approach to approval of affordable housing development which would remove regulatory barriers and speed up approval processes. We worked with the City of Columbus on the conversion of hotels to permanent supportive housing and reducing regulatory barriers on licensing and permitting. We have submitted comments to the Ohio Housing Finance Agency to assure language was present in the Qualified Allocation Plan to safeguard the ability to prioritize permanent supportive housing for tax credit purposes. With our partner the Coalition on Housing and Homelessness in Ohio, we have discussed regulatory barriers to housing developments with the Ohio Department of Development.

1E. Project Capacity, Review, and Ranking–Local Competition

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Your CoC's Local Competition Deadline–Advance Public Notice.	
	NOFO Section V.B.2.a. and 2.g.	
	You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	

1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	07/10/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC's local competition—meaning the date your CoC published the deadline.	07/10/2023

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.	
	You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.	
	Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	No

5.	Used data from comparable databases to score projects submitted by victim service providers.	No
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	No

1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.

Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	20
2.	How many renewal projects did your CoC submit?	30
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	

Describe in the field below:

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,500 characters)

1) Data on clients served is collected using the HMIS and performance measurements are calculated by Community Shelter Board (CSB), the UFA and HMIS Lead, using this data. The collection of standardized performance measurements and expected achievements differ by program type and population served. Annual compliance with CoC standards is determined by CSB for each project during the Program Review and Certification process. Over 100 standards are assessed for compliance and a rating is determined at the conclusion of the monitoring. The performance measures and the compliance status are combined into one performance rating for each project. Utilization of CoC funds is collected through the invoices each subgrantee submits to CSB, summarized in a worksheet showing the allocated funds, invoiced funds and any leftover funds.

2) For PSH, the Unified Supportive Housing System (USHS) that manages access to PSH system-wide, tracks all individuals from the point of referral to PSH to the point of housing. All tracking is done through HMIS, with the ability to drill down and calculate step by step average times to housing. For RRH, an HMIS based custom report calculates the "average shelter stay" after engagement that tracks the time to housing for those enrolled.

3) 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. Since all programs in the system adhere to these prioritization and assessment guidelines, there is no possibility to differentiate the projects' scoring based on vulnerability criteria. All projects are required to serve only those with the most severe service needs. 4) The CoC prioritizes projects based on objective, performance-based criteria because all projects provide housing and services to the hardest to serve populations. Projects that most effectively serve vulnerable and severe service need populations receive higher performance ratings, which improves the programs scoring and ranking. All projects included in the CoC application adhere to the same project-type based, system-wide standardized prioritization and assessment requirements

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	
	Describe in the field below:	
1.	how your CoC used the input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;	
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and	
3.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	

(limit 2,500 characters)

1) All the rating factors used to review project applications are objective criteria based on program performance, complying with standards and utilization of CoC funds. No changes were made to the rating factors based on input received from persons of different races because of the objectivity of the factors used in scoring. The performance measures for each project type and the associated outcomes, which make up most of the projects' performance scoring, are assessed annually and feedback is being sought from each provider.

2) Local review and ranking processes are approved by the CoC, whose members include people of color and representatives with lived experience from the Citizens Advisory Council (CAC) and Youth Action Board. The CoC Board and the CoC review and approve the projects ranking, both renewal and new projects. The CAC individually reviewed and ranked all new projects submitted for consideration to the CoC. The CAC membership has majority representation from the Black/African American racial group.

3) All CoC projects prioritize the most vulnerable populations and the race and ethnicity of participants in CoC funded projects mirrors the race and ethnicity of people experiencing homelessness. All CoC funded projects are PH-PSH type projects except projects that serve special populations. All the PSH projects serve hard to serve, vulnerable, severe service needs population and all the referrals to PSH are managed in a consolidated manner by the Unified Supportive Housing System that always prioritizes for referral the most highly vulnerable person from the USHS pool. There is no distinction in the vulnerability of the population served by PSH projects. The CoC assesses and reports on any racial disparities across all programs quarterly. Data shows that a disproportionately high percentage of African Americans utilize the homeless crisis response system. This analysis also shows that by prioritizing the most vulnerable with the longest time homeless, we are serving a commensurate number of those disproportionately affected by racism and although there are disparities in who becomes homeless, our data does not reflect disparities in outcomes in our homelessness programs. All projects promote racial equity where individuals and families of different races are over-represented. The non-PSH projects are DV and YHDP projects that have their own CE project with the role to eliminate barriers to access.

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	NOFO Section V.B.2.f.	

Describe in the field below:

1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

1) Per the CoC's written process, reallocation can occur when a subrecipient is no longer interested in continuing a project, no longer needs CoC funding, or underperforms on performance outcomes, project capacity, drawdowns, and/or compliance. The CoC identifies low performing projects through review of quarterly and annual performance reports produced by Community Shelter Board (CSB), the UFA. Projects rated as Low performers 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. This process often corrects performance and compliance issues. The CoC identifies projects for which there is less need through an annual needs assessment and ongoing coordination with system and community partners. As a UFA, CSB conducts CoC-approved reallocations as needed throughout the year instead of waiting for the annual competition. The CoC helps partners improve capacity and correct deficiencies before reallocating funds.

2) The CoC did identify a low performing project through the above process. The Job2Housing rapid rehousing project was identified as a low performing project. The Salvation Army approached CSB with the request to find another provider to take over the project. Because of CSB's status as a UFA, we did not have to wait for the reallocation process and the local competition, a provider stepped up willing to immediately take over the project with no disruption to the families served. The new provider will apply for the project during this process without a formal reallocation needed.

3) The CoC did not reallocate any projects through the local competition this year.

4) There was no need to use the formal reallocation process, the change in providers occurred outside the competition.

1E-4a.	Reallocation Between FY 2018 and FY 2023.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	

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1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	
	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/11/2023
1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	
	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank—if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes
1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	
	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or partner's website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/15/2023
1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	
	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/15/2023

2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Enter the name of the HMIS Vendor your CoC is currently using.	BitFocus
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Single CoC
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/13/2023
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2A-4.	Comparable Database for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

In the field below:

1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases;
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database—compliant with the FY 2022 HMIS Data Standards; and

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3. state whether your CoC's HMIS is compliant with the FY 2022 HMIS Data Standards.

(limit 2,500 characters)

1) Though 6/30/2023 there were no CoC funded DV victim service providers (VSP) in our community, thus the HUD-published HMIS Data Standards did not apply to them. CSB, the HMIS Lead, consulted with the local VSPs about a comparable database use. Providers operating emergency shelter and transitional housing projects confirmed electronic data collection for their programs but acknowledged that the HMIS Data Standards are not followed since they are not required to do so. While data collection closely follows HMIS standards, not 100% of data requirements are implemented. As of 7/1/2023, we do have a CoC funded VSP that is implementing a DV Coordinated Entry (CE) project. CSB is closely working with the DV CE provider to implement the HMIS comparable database. Since the award announcement CSB and the DV CE provider met every other week to discuss HMIS data collection, data quality and reporting requirements. DV CE staff started to attend the HMIS Administrator meetings, they received training, received the necessary documentation that applies for data collection and reporting for a CE project and HMIS policies and procedures they need to follow. At the current time the HMIS comparable database is setup and ready for testing by CSB staff. Prior to the "go live" date, CSB staff will make sure that the comparable database is an HMIS compliant database.

2) The CoC funded DV housing and Service providers in the CoC are using a HUD-compliant comparable database compliant with the 2022 HMIS Data Standards; the non-HUD funded VSPs in the CoC are using a non-HUD-compliant database.

3) our CoC's HMIS is compliant with the 2022 HMIS Data Standards.

2A-5. Bed Coverage Rate—Using HIC, HMIS Data—CoC Merger Bonus Points.

NOFO Section V.B.3.c. and V.B.7.

Enter 2023 HIC and HMIS data in the chart below by project type:
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Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	1,148	120	1,028	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	173	47	126	100.00%
4. Rapid Re-Housing (RRH) beds	545	0	545	100.00%
5. Permanent Supportive Housing (PSH) beds	3,486	0	3,442	98.74%
6. Other Permanent Housing (OPH) beds	0	0	0	

2A-5a. Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.

NOFO Section V.B.3.c.

	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

n/a

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.	
Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?		Yes

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2023 PIT count.	01/24/2023
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2B-2.	PIT Count Data—HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/13/2023
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2B-3.	PIT Count—Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

	Describe in the field below how your CoC:
1.	engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process;
2.	worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and
3.	included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count.

(limit 2,500 characters)

1) Our local youth outreach organization (Huckleberry House) and local youth drop-in center (Huckleberry House YOP Shop) participated in planning meetings for the 2023 PIT Count. They helped recruit youth volunteers, identify and map locations where youth stay as counting sites, strategies to engage youth who are least likely to want to be counted and creative ways to outreach like use of food trucks and counting during non-traditional hours. Youth were engaged in planning a major event on the PIT Count day with Huck House and Youth Action Board (YAB) members providing insight and feedback on youth activities.

2) It has become vital to our work to implement different outreach efforts as the landscape has changed since the pandemic. We had intentional strategies to choose counting locations where youth experiencing homelessness might gather on the day of the PIT Count and they were informed by youth experience. Youth helped identify and map locations where youth stay and work to create "come be counted" locations for youth who would likely not be engaged during the early morning or school counts. Star House, a drop-in center for youth experiencing homelessness, was identified as a location critical to have representation during the PIT count. A specific youth count was conducted at a local library in the evening, and youth and youth couples were engaged at local drop-in centers such as The Open Shelter, the Columbus Coalition for the Homeless Daytime Warming Center and at two other temporary warming centers. Columbus City Schools 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. The event at Huck House during PIT Count day was designed around youth interest and feedback: in addition to the PIT survey, there was music, food, haircuts, harm reduction info and other resources.

Because transportation is another youth-identified barrier, a bus was used by Huck House to transport youth to the event from a nearby drop-in center. This event, driven by youth interest and implemented for PIT, made the local news.

3) We had an intentional focus to engage youth volunteers through Huckleberry House and Star House youth providers to administer PIT surveys during the count. YAB members were also extended offers to volunteer in the annual PIT Count.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	

	In the field below:
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and
3.	describe how the changes affected your CoC's PIT count results; or
4.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2023.

(limit 2,500 characters)

- 1) There were no changes made to the sheltered PIT count methodology or data quality between 2022 and 2023.
- 2) In 2022, we worked to standardize quality assurance protocols for all street outreach providers and volunteers to improve identification of those who are unsheltered, including those who meet chronic homeless criteria. Street outreach programs included in the HMIS were asked to do a quality assurance process on their active clients prior to the PIT count to make sure only active, engaged clients were on their rosters. As a change in methodology, street outreach providers were asked that within 3 days of the PIT count to confirm through phone calls and visits the unsheltered status of each person opened in each HMIS street outreach program and only those that were confirmed as unsheltered on the night of the count were included in the count. In 2023 there were no other changes made in methodology or data quality compared to the 2022 unsheltered count.
- 3) Since no changes were made in methodology for either type of count between 2022 and 2023, there was no impact on the count.
- 4) Not applicable.

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reduction in the Number of First Time Homeless--Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	
	In the field below:	
1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;	
2.	describe your CoC's strategies 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 your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time	

(limit 2,500 characters)

1) The CoC conducts an annual evaluation of self-reported factors contributing to homelessness to inform and target prevention efforts for persons at risk of becoming homeless for the first time. Reasons for households' homeless crises are captured in HMIS and reported annually, allowing us to identify and analyze risk factors. Weekly system meetings and case conferences add qualitative data on barriers clients face and risk factors most common and pervasive. The workgroup is now tracking trends. The CoC determined higher rents and lack of deeply affordable housing are the primary risk factors for homelessness, which is consistent with a 2015 collaboration with Abt Associates that identified causes of homelessness and housing instability in our community.

2) Reducing the number of first-time homeless is a prioritized goal in the CoC's strategic plan. Prevention resources are prioritized for the most vulnerable populations in our community. Families at risk of becoming homeless that contact the CPOA's homeless hotline are connected to prevention resources to help avoid entering shelter. At-risk pregnant women can access specialized prevention services. 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. Community Shelter Board (CSB, the UFA) has developed the Homelessness Prevention Network (HPN) that formalizes collaborations with social service agencies that serve as access points and/or homelessness prevention service providers. CSB trains and certifies HPN partners in housing stabilization and housing problem solving. HPN partners provide prioritized access to services for households at highest risk for homelessness as determined by a standardized risk typology and screening protocol. Access points are dispersed in the community and intervene to prevent a household from becoming homeless. These community-based access points identify and assist households before they need to call the homeless hotline. If households require additional help, access points refer them to homeless prevention service providers for case management and financial assistance for housing stabilization. With support from the City of Columbus and ERA \$s, the HPN is being expanded significantly for the next 2 years to provide added homelessness prevention supports in the community which will expand access points.

3) CSB is responsible for this strategy.

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:

1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	No

2C-2.	Length of Time Homeless—CoC's Strategy to Reduce.	
	NOFO Section V.B.5.c.	

In the field below:

1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
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2.	describe how your 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 your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

1) Reducing length of time homeless is a key goal in the CoC's strategic plan. Shelters screen for referral to RRH programs. We work to decrease referral time to RRH by reducing the times between shelter entry and screening and screening and RRH referral and expedite engagement after RRH referral with a Housing First focus. We prioritize for RRH families with children, pregnant women, Veterans, youth, people with disabilities, those fleeing domestic violence and long homeless time. We determine whether it is most appropriate to provide support through RRH or PSH. A new team was created to focus on housing chronic homeless individuals. We increased 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. We work to expedite processes to acquire a state ID, birth certificate and social security card using an FTE dedicated to this scope. RRH case managers help households develop housing plans, engage landlords, remove barriers and link to assistance and employment, and promote stability. We implemented a landlord recruitment and retention initiative, including marketing, outreach, financial incentives, and risk mitigation funds, 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 expand re-housing assistance. We partnered with the PHA and secured 94 Mainstreams, 32 FUP vouchers and all the 304 EHV's allocated for the homeless population. Despite these efforts the average length of time homeless is increasing due to rapid population growth causing an affordable housing crisis.

2) We use HMIS for weekly "by name lists" and monthly "hotlist" reports to review households with the longest homeless time for RRH and PSH referrals. The by name list is embedded in the HMIS and RRH referrals are made through HMIS using scored pools. We use a standardized system-wide needs assessment and case conferencing to engage those with the longest homeless time. The "hotlist" is used by the Unified Supportive Housing System, who fills all PSH units according to HUD Notice CPD-16-11 and uses a standardized invitation and application process for those prioritized for PSH based on the "hotlist".

3) Community Shelter Board is responsible for this strategy

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing--CoC's Strategy	
	NOFO Section V.B.5.d.	

In the field below:

1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

(limit 2,500 characters)

1) Increasing the rate of positive housing exits is a key goal in the CoC's strategic plan. Shelters and RRH programs collaborate to quickly house people, link them to resources, and provide aftercare to ensure stability. We work to increase capacity of RRH programs to maximize the number of people they can serve and improve the referral process. 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 long homeless time as these populations are less likely to successfully exit without tailored support. Care is taken to ensure appropriate referral to RRH or PSH as primary need. A new team was created to work with chronically homeless adults. Case managers help households develop housing plans, find landlords, remove barriers, secure housing, and promote stability through linkage to income supports and services. TH programs stabilize veteran and youth households prior to permanent placement to increase success at exit. RRH, TH, and shelter providers use financial assistance to pay security deposits and additional rent. The assistance is flexible and offered based on needs and landlord requirements. A system-wide landlord recruitment and retention initiative provides outreach, financial incentives, and risk mitigation funds, to improve access to units, expand shared living options, and identify strategic landlord partners. We actively support community efforts to increase affordable housing to enhance participants' ability to obtain and retain stable housing. Despite all these efforts the success rate is decreasing due to the rapid growth in population causing an affordable housing crisis, coupled with a staffing shortage systemwide that decreases our ability to provide housing services based on demand.

2) Housing stability for persons in permanent housing is already very high at 96%. PSH providers engage with residents frequently to identify anyone who may become precariously housed and take action to re-stabilize them. PSH residents access a variety of services, including linkage to employment, benefits, 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.

3) CSB is responsible for this strategy.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	
	In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;	
2.	describe your 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 your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

1) Community Shelter Board (CSB, the UFA) tracks returns in HMIS and issues reports at program and system levels, including recidivism rates. CSB examines programs with rates outside the norm to identify factors contributing to higher or lower rates. Collaboration between emergency shelter and RRH programs via regular case conferencing and system workgroup meetings help inform the CoC of factors that impact returns to homelessness. A Housing Assistance Screening Tool identifies a household's prior use of shelter and re-housing assistance to adjust next-step assistance. CSB is using data on frequent callers to CPOA to identify those that need a new approach to support.

2) Reducing the rate of return to homeless is a prioritized goal in the CoC's updated strategic plan. RRH case managers help households develop housing plans and remove barriers. They provide aftercare and resources and create plans for responding to future crises, through partnerships in the community that support housing stability, with Job and Family Services, Office on Aging and peer support organizations. CSB is working on a partnership with RRH and MCOs for client connection to services. Households contact a case manager if they encounter a housing crisis, after services end, to problem-solve. For PSH, 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 childcare and parenting resources. We value client expertise and partner guidance and collaboratively develop trainings or resources to address client needs in areas such as budgeting to pay rent, navigating conflict, housekeeping and cleaning, understanding the lease, how to complete work orders or notify landlord of concerns. All RRH and PSH programs have robust eviction prevention procedures. The rate of recidivism in our community is high because we are prioritizing RRH and PSH assistance for those with the highest barriers as this is the most vulnerable population being served and most likely to lose housing. In addition, increasing rents and scarcity of affordable units are key factors contributing to the high recidivism rate. The planned expansion of our Homelessness Prevention Network for the next two years will help reduce recidivism of previously homeless households.

3) CSB oversees the strategy.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section V.B.5.f.	

	In the field below:
1.	describe your CoC's strategy to access employment cash sources;
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.

(limit 2,500 characters)

1) Participants in CoC programs receive help with job searches, applications, resume writing, transportation, uniforms and professional attire. An increasing number of programs have employment specialists on site to provide more individualized support, make connections with employers and provide appropriate job coaching. Gift cards are utilized by providers to help address barriers such as childcare and transportation among other needs. Several CoC programs have successful employment and work equity programs that include training, workshops, and collaboration with employers. Partners have worked with local employers to host job fairs and the CoC has identified private employers who are willing to hire people with histories of criminal behavior, addiction and homelessness. One example is the Right Track Program that consists of classroom experience followed by a paid training position within a PSH provider's housing facilities. Another provider has a workforce development program and has hired a PSH resident. The CoC improved integration with the Workforce Development Board of Central Ohio (WDB) through a previous employment pilot program that expedited the Ohio Means Jobs referral and acceptance process for families in shelter.

2) Increased access to employment is a prioritized goal in the CoC's strategic plan. We are improving integration with mainstream workforce development and access to employment and skill development resources through a previous pilot in family emergency shelters. The pilot created incentivized pathways to engage in workforce development. Our approach is working with the Workforce Development Board of Central Ohio and other community-based employment services such as Columbus Works and Goodwill to integrate workforce specialists, including job coaching, within our CoC programs, where not already present. We support community efforts to increase employment income for low-wage earners and reduce pay disparities. CoC 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-paying and more regular work. Linkage to GED, education, skill development, and career development programs is available to help participants access higher-paying jobs.

3) CSB oversees this strategy.

2C-5a.	Increasing Non-employment Cash Income—CoC's Strategy	
	NOFO Section V.B.5.f.	
	In the field below:	
1.	describe your CoC's strategy to access non-employment cash income; and	
2.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.	

(limit 2,500 characters)

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. Community Shelter Board (CSB), the UFA, convened a training for providers on SNAP, TANF and Medicaid in March 2023 to encourage greater applications for benefits for individuals in the crisis response system. CSB regularly provides trainings and disseminates to partners resources and best practices for linking participants to benefits. Case managers help participants complete applications. The Homeless Hotline (CPoA) screens callers for health insurance to help assess coverage gaps. CSB is working with the Alcohol, Drug, and Mental Health Board, MCOs and others to more effectively leverage Medicaid and other health care resources. As part of our strategic plan, we will continue to utilize the new Social Security Administration Vulnerable Populations (VP) program for clients to apply for benefits and will incorporate partner training for this program. The Social Security Administration provided an educational presentation on Social Security resources and training on the VP Program for partners. This training will be annual at a minimum. We will further expand the use of SOAR system-wide for clients to access benefits, including increasing the number of SOAR certified staff. 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. CSB will work with JFS to have an onsite presence in all shelters. 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 non-employment cash income and individualized 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.

2) CSB oversees this strategy.

3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3A-1.	New PH-PSH/PH-RRH Project–Leveraging Housing Resources.	
	NOFO Section V.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.

Project Name	Project Type	Rank Number	Leverage Type
CHN Deer Hill Place	PH-PSH	33	Both
CHN Knoll View Place	PH-PSH	34	Both
Homefull Leasing ...	PH-RRH	32	Both
YMCA McKinley Manor	PH-PSH	31	Housing
LSS CHOICES Joint...	Joint TH-RRH	35	Healthcare

3A-3. List of Projects.

1. What is the name of the new project? CHN Deer Hill Place

2. Enter the Unique Entity Identifier (UEI): VG6JK25MNM7

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 33

5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? CHN Knoll View Place

2. Enter the Unique Entity Identifier (UEI): VG6JK25MNM7

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 34

5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? Homefull Leasing Expansion

2. Enter the Unique Entity Identifier (UEI): FF7ZQNH2S9P1

3. Select the new project type: PH-RRH

4. Enter the rank number of the project on your CoC's Priority Listing: 32

5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? YMCA McKinley Manor

2. Enter the Unique Entity Identifier (UEI): YLWVMBX7MNB8

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 31

5. Select the type of leverage: Housing

3A-3. List of Projects.

1. What is the name of the new project? LSS CHOICES Joint TH/RRH

2. Enter the Unique Entity Identifier (UEI): C4M1CLE2SZ96

3. Select the new project type: Joint TH-RRH

4. Enter the rank number of the project on your CoC's Priority Listing: 35

5. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.s.	

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
--	----

3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.s.	

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

n/a

3C. Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
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3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

If you answered yes to question 3C-1, describe in the field below:

1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.

(limit 2,500 characters)

n/a

4A. DV Bonus Project Applicants for New DV Bonus Funding

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1.	New DV Bonus Project Applications.	
	NOFO Section I.B.3.I.	

	Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
--	--	-----

4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.I.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2023 Priority Listing.

	Project Type	
1.	SSO Coordinated Entry	No
2.	PH-RRH or Joint TH and PH-RRH Component	Yes

You must click "Save" after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-2, 4A-2a. and 4A-2b.

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.I.(1)(c)	

1.	Enter the number of survivors that need housing or services:	1,774
2.	Enter the number of survivors your CoC is currently serving:	126
3.	Unmet Need:	1,648

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(c)	

Describe in the field below:

1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and
2.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

(limit 2,500 characters)

1) LSS CHOICES serves DV survivors in the local DV emergency shelter. It provided shelter and case management services to 944 DV survivors in 2022, and each of these survivors was determined to be in need of housing services. During the annual CoC Point in Time Count in the non-DV system, 13% of sheltered and unsheltered adults reported histories of DV. Applying the 13% rate to the total number of adults served in the non-DV system in 2022 (6,388 total adults), we are assessing that an additional 830 DV survivors are served in the non-DV system and need specialized DV housing services. This number was confirmed by using the 2022 APR that shows 979 people reporting a DV history and 365 people fleeing DV. We are opting to use the more conservative 830 number as to not inflate the numbers. Thus, the total need for DV housing is for 1,774 survivors. In 2022, LSS CHOICES provided Transitional Housing (TH) services to 9 DV survivors. The CoC's RRH program for DV survivors operated by YMCA served 117 households, for a total number served with housing services of 126 DV survivors. Therefore, the CoC's Unmet Need is for 1,648 survivors who need housing services.

2) The data sources used to determine the need and the number of survivors served are the LSS CHOICES Social Solutions Apricot database (an HMIS-comparable database) and the CoC's HMIS data.

3) The primary barrier is funding. The CoC is unable to meet the need because it lacks sufficient funding targeting DV survivors to expeditiously and seamlessly move survivors into housing. In addition, the number of affordable housing units in the CoC is inadequate to meet the need.

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)	

Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.

Applicant Name
LSS CHOICES for V...

Project Applicants Applying for New PH-RRH and Joint TH and PH-RRH DV Bonus Projects

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2023 Priority Listing for New Projects:

1.	Applicant Name	LSS CHOICES for Victims of Domestic Violence
2.	Project Name	LSS CHOICES 2023 DV Joint TH-RRH
3.	Project Rank on the Priority Listing	35
4.	Unique Entity Identifier (UEI)	C4M1CLE2SZ96
5.	Amount Requested	\$960,388
6.	Rate of Housing Placement of DV Survivors—Percentage	100%
7.	Rate of Housing Retention of DV Survivors—Percentage	89%

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1) The LSS CHOICES Transitional Housing (TH) program targets immigrant families and families with four or more children, a very small sub-population of the total number of DV survivors who need housing services. In 2022, LSS CHOICES placed 9 households in its TH program and all 9 households experienced a successful exit from the TH program, a 100% success rate. Only 1 household (or 11%) returned to emergency shelter within a 90-day timeframe, for a housing retention rate of 89%.

2) These rates account for exits to safe housing destinations with friends, family members or other safe housing options.

3) The data source is the LSS CHOICES Social Solutions Apricot database, an HMIS-comparable database.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
2.	prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;	
3.	determined which supportive services survivors needed;	
4.	connected survivors to supportive services; and	
5.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

1) LSS CHOICES (LSS) ensures DV survivors experiencing homelessness are immediately offered emergency shelter and safety planning. Whether clients choose on-site or off-site placement, LSS provides assistance to quickly move the client into housing. LSS operates a Transitional Housing (TH) program using scattered site housing. Using the Critical Time Intervention (CTI) model, Case Managers (CM) focus on assisting clients to access community-based services, skill building and developing a formal and informal social support system.

2) Within the first 10 days of their stay, CMs go through the Housing Assistance Screening Tool (HAST) assessment with each DV survivor. If eligible for Rapid Re-Housing (RRH), the client is referred to the CoC's DV RRH. Because the RRH prioritizes clients by the severity of service needs, the DV survivor may not immediately receive an intake. The LSS CM coordinates provision of temporary housing for those clients and clients that need more assistance, in a TH environment, based on capacity.

3) LSS' CMs collaborate with each client, having been trained in trauma-informed approaches, to determine which supportive services are needed and identify their wants, needs, and goals. Goals are prioritized. CM will assist clients with creating (or updating) a resume, apply for a housing voucher, if needed and search for employment. Referrals to counseling services, legal aid or other services occur as needed.

4) Established partnerships ensure that clients are connected to the services they need. With assistance from LSS 211 Central Ohio, the CM will provide referrals through I&R. LSS Food Pantries and LSS Health Center address clients basic needs including nutrition, physical health, and mental health. Legal Aid provides legal advocacy. The CM links clients to The Furniture Bank to obtain furnishings and to Goodwill for disability assistance. LSS Faith Mission offers employment assistance.

5) During their time in the TH program, LSS ensures that clients are prepared to successfully move to and maintain permanent housing through intensive case management and provision of accompanying supportive services. These services include financial management and work readiness training so that clients gain skills and confidence to establish their financial independence. Clients must achieve outcome indicators in living skills, work readiness and career-specific skills, and financial literacy as part of their exit from the program.

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	
3.	keeping information and locations confidential;	
4.	training staff on safety and confidentiality policies and practices; and	
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.	

(limit 2,500 characters)

- 1) LSS CHOICES takes steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors. This process includes client-focused safety planning and appropriate privacy protocols from the initial contact and throughout provision of services, including days spent in emergency shelter and transitions to permanent housing programs. All client data is secured, and only approved personnel can access the secure database.
- 2) In making determinations and placements into safe housing, all information is kept confidential using Social Solutions-Apricot, a secure HMIS-comparable database designed to produce real-time data using an SSL Certificate to protect the integrity and confidentiality of all data. In addition, no information is released regarding a client's use of services without informed written consent or as required by law. Clients' participation in DV survivor programs is voluntary, not mandatory.
- 3) LSS CHOICES keeps client information and locations confidential. The address of the DV shelter and Transitional Housing locations is not disclosed or published. LSS CHOICES hires attorneys at Bailey Cavalieri, a local firm, to respond to subpoenas to prevent record disclosure.
- 4) LSS CHOICES provides mandatory quarterly staff development and annual training on safety and confidentiality policies and practices. Staff are trained to never engage in or promote activities that compromise victim safety to include practices that exclude victims from receiving safe shelter, advocacy services, counseling, and other assistance based on their actual or perceived age, immigration status, race, religion, sexual orientation, sex, gender identity, mental health condition, physical health condition, criminal record, work in the sex industry, or age and/or gender of their children.
- 5) LSS CHOICES provides security systems and cameras that notify households and emergency responders of pending or potential harm, alarms and door stops that prevented home intrusions in a few cases. Participants are especially grateful for the training and electronic resources provided by LSS CHOICES to check for tracking devices on their vehicles and cell phones. When there are custody orders/visitations, CHOICES works with the courts to advocate on behalf of clients for safe exchanges at a police or fire station, with the schools and doctors to not release addresses or Safe at Home to get a PO Box so their address isn't public.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.

(limit 2,500 characters)

LSS CHOICES ensures survivor safety begins with their physical safety. Safety planning commences with the first contact. A safety plan is maintained at all times and revisited and revised as client's circumstances change. LSS CHOICES works with clients to obtain and/or install security systems/cameras, alarms, door stops to address the household's threat level and need to feel secure. Case managers work with clients and legal advocates to secure Criminal Protective Orders and no-contact orders. When there are custody orders or visitation orders, Case Managers work with the courts to ensure safe exchanges take place at a police or fire station. Case Managers advocate with the schools and doctors' offices to not release clients' physical addresses and registers each survivor with Safe at Home, a system that assigns DV survivors a PO Box so their address isn't public.

LSS CHOICES uses industry-accepted standards to adhere to the strictest ethical standards to safeguard all personal information and data collected. These include password protected computers, locked file cabinets and timely destruction of hard copy identifying information as well as respecting confidentiality in written reports. LSS sought accreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF). The organization has made a commitment to maintaining a quality program structure including the ongoing evaluation of programming, verified by an independent third party. LLS went through the accreditation process with CARF in 2021 and achieved the highest commendations with a 3-year accreditation.

LSS CHOICES identifies improvements in each program component through its Total Quality Management plan (TQM). It follows established policy and procedures to document the day-to-day monitoring of program activities. Regular monitoring of established policies and procedures ensures that we are exceeding the standards set forth by CARF and other agencies in terms of data security, client confidentiality, safety, ethics and mission.

LSS CHOICES adopted the Apricot system to increase security of confidential files. Case files are maintained in two ways. Original hard copy case files, and electronic case files maintained in Social Solutions – Apricot. Case files are maintained primarily by case management staff. The Apricot system allows LSS CHOICES to ensure that files are up to date at all times with complete and accurate information.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:

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1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	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;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1) Case Managers utilize a trauma-informed, victim-centered intake assessment that focuses on the client's wants, needs, and barriers. The client identifies what goals they want to work on, and the case management staff assist them in achieving those goals. As needed, staff go with residents to complete goal tasks, sit in meetings with them, view available housing together, and attend court hearings with them, doctor's appointments, and meetings with other providers in the community. Trauma-informed interventions assume that people, especially women, have experienced past trauma with an understanding that the trauma is impacting people psychologically and physiologically, that clients' behaviors may be related to trauma. Staff avoid retraumatizing the clients by not asking them to re-tell their story.

2) The program prohibits mandated use of mediation or counseling for couples as a systemic response to domestic violence; any requirement that victims report sexual assault, stalking or domestic violence or forcing victims to participate in criminal proceedings; practices that impose restrictive and/or mandatory conditions to receive services; or procedures that would penalize or impose sanctions for failure to testify against the abuser and/or the perpetrator. The program uses a transition in place model which allows the client to determine if they want to remain in the housing unit at the conclusion of the program. This provides additional choices for clients, decreases the need for a potentially traumatic move and gives control of housing options to the survivor.

3) All staff are trained in the Community Advocacy Program model, a best practice for working with DV survivors with full implementation by Case Management staff and annual evaluations to determine program fidelity. No services are contingent on the survivor's decision for police or legal intervention. Confidential client information is not released without client consent or as required by law.

4) LSS CHOICES housing program operates using Trauma Informed Care (TIC) and is consistent with Ohio Domestic Violence Network's Promising Practices. With the understanding of the impact of trauma on survivors and the variability of individual responses, the program is designed using a client centered, strengths based approach. Minimal rules in the TH program promote safety; they do not attempt to control participant behavior. Our commitment to evidence-based practices led to our Clinical Supervisor becoming certified as a TIC instructor by the Ohio Department of Mental Health and Addiction Services. As such, she not only provides training throughout the State, but she also regularly trains and retrains CHOICES staff on the model.

5) Culturally and linguistically appropriate advocacy for each survivor complements the program's trauma-informed approach. LSS CHOICES incorporates cultural competency and equal access in its annual training, augmented by advocacy provided by community partners: Asian American Community Services, Ohio Hispanic Coalition, Asha Ray of Hope (South Asian community), Deaf World Against Violence Everywhere (DWAVE), Ethiopian Tewahedo Social Services, and Buckeye Regional Anti-Violence Organization (BRAVO, GLBTQ+ community).

6) LSS CHOICES offers all clients peer support groups, individual and group counseling, and Community Advocacy. In addition, Case Managers are trained to provide ongoing emotional support and crisis intervention to all clients during their frequent interactions.

7) Crisis Counselors trained in Trauma Informed Care offer support for survivor parenting, including de-escalation and short-term interventions for parents experiencing mental health crises resulting from recent traumatic experiences. Working through the lens of both trauma informed care and a strengths-based perspective, the Crisis Counselor helps parents recognize their strengths to

develop coping techniques while Case Managers connect parents with parenting classes, childcare, and legal advocacy.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

Describe in the field below examples of supportive services the project provided to domestic violence survivors while quickly moving them into permanent housing and addressing their safety needs.

(limit 5,000 characters)

LSS CHOICES' program and established partnerships provide supportive services to DV survivors during the transition to permanent housing. It uses the Community Advocacy Program (CAP) model of case management services, an evidence-based model as trauma informed, strengths-based and client centered. At age 46, Client A was left abandoned in the woods by her abusive partner, severely beaten and with nothing. With no forms of identification and nowhere else to go, she found refuge at our facility. Program staff promptly conducted a client intake and needs assessment and assigned her to a Case Manager (CM). LSS CHOICES immediately co-developed with her a safety plan and met her emergency housing and basic needs. Over a short interval (less than 90 days), it helped her secure a new driver's license and other identification and provided rapid rehousing services to secure a new apartment. Fidelity to the CAP model continues in all five components:

1. Assessment. The Case Manager gathers important information regarding the needs and goals of each participant and her/his child. The participant, not the CM, guides the direction and activities of the intervention by identifying issues that are important to her/him.
2. Implementation. The CM and the participant actively work together to generate, mobilize, and access community resources. For clients, resources often involve legal assistance, housing, employment, education, transportation, childcare, social support, and/or material goods as well as court accompaniment. For children, advocacy often focuses on participation in recreational activities, help with school and/or material goods.
3. Monitoring. The CM checks in with the participant regularly to determine whether her unmet needs have been fulfilled.
4. Secondary implementation. If the community resources were ineffective in satisfying the participant's original needs, the CM suggest alternative strategies to generate, mobilize, or access other resources.
5. Termination. This phase occurs before the end of the intervention, when the CM focuses even more intensively on the transfer of skills and knowledge to the participant, ensuring that she/he no longer needs the advocate at the end of the intervention. It diligently records and assesses the discharge status of its clients and conducts post-discharge check-ins when possible, to evaluate program performance.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(e)	

Describe in the field below examples of how the new project(s) will:

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1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish 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;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

- 1) The new project will prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs. Based on a Housing First approach, the Joint Transitional and Rapid Re-Housing project is designed to provide DV survivors swift access to crisis housing (TH) with no pre-conditions and a pathway from that crisis housing to rapid rehousing (RRH). LSS CHOICES will manage the TH and will subgrant with YMCA of Central Ohio to provide RRH units for survivors choosing the RRH housing option. In collaboration with their LSS CHOICES Case Manager, DV survivors will consent to the program aligned with the Housing Assessment Screening Tool (HAST) assessment to best meet their identified needs. The TH portion of the project acts as temporary or crisis housing. Survivors may choose to reside in TH or Rapid Re-Housing when units are available. There is not a requirement for them to enter the TH portion before being able to utilize RRH; however, DV survivors residing in TH will be prioritized first for RRH units. YMCA will establish a consistent and proactive coordination with LSS CHOICES Case Managers to ensure effective collaboration.
- 2) Through a combination of evidence-based strategies and practices, we are committed to empowering individuals and families while nurturing a culture of dignity and collaboration. Our approach will involve working closely with each individual or family to co-create personalized rehousing plans with regular feedback and communication. And instead of focusing solely on deficits or challenges, our case management and housing specialist will highlight the strengths and skills that clients bring to the table.
- 3) The new project will provide program participants access to information on trauma. All staff will be trained in the Community Advocacy Program model, a best practice for working with DV survivors with full implementation by Case Management staff and annual evaluations to determine program fidelity. Service provision will not be contingent on the survivor's decision for police or legal intervention. Confidential client information will not be released without client consent or as required by law.
- 4) The new project will emphasize program participants' strengths. Case Managers will collaborate with participants to develop individualized plans. With the understanding of the impact of trauma on survivors and the variability of individual responses, the program is designed using a client centered, strengths-based approach. Policies and protocols are designed to promote safety; they do not attempt to control participant behavior.
- 5) The new project will center on cultural responsiveness and inclusivity. Key elements of the project design include a diverse and multilingual project staff; continual access to translation and interpretation services, whenever needed; regular training on equal access and nondiscrimination; and established partnerships with culturally and ethnically-based community advocacy groups.
- 6) The new project will provide a variety of opportunities for connection for program participants to promote independent living and sustainability. These include peer support groups, individual and group counseling, and ongoing emotional support and crisis intervention to all participants.
- 7) The new project will offer support for survivor parenting. Crisis Counselors trained in Trauma Informed Care will offer de-escalation and short-term interventions for parents experiencing mental health crises resulting from recent traumatic experiences. Working through the lens of both trauma informed care and a strengths-based perspective, the Crisis Counselor will help parents recognize their strengths to develop coping techniques while Case Managers will connect parents with parenting classes, childcare, and legal advocacy.

4A-3h.	Involving Survivors in Policy and Program Development, Operations, and Evaluation of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(f)	
	Describe in the field below how the new project will involve survivors:	
1.	with a range of lived expertise; and	
2.	in policy and program development throughout the project's operation.	

(limit 2,500 characters)

1) As the sole provider for crisis hotline, emergency shelter, and diversion services for DV survivors in Franklin County, LSS CHOICES will involve DV survivors with a range of lived expertise in its planning for the new project. We embrace the diversity of the population served to help them achieve optimal outcomes in personal safety and financial independence. In Franklin County, residents are 61% White, 24% Black, 6% Hispanic, 6% Asian, and 4% two or more races. Minority populations are over-represented within LSS CHOICES programs, according to 2022 program data. 57% of survivors are African Americans, 20% Caucasian, 4% Hispanic, 12% Multi-racial (including Bi-racial), 2% Asian and 5% African. Five percent (5%) of those served are challenged by chronic substance abuse, 1% live with HIV/AIDS, and 2% live with physical disabilities.

2) LSS CHOICES will involve DV survivors with a range of lived experience in policy and program development throughout the project's operation, by regularly soliciting their feedback through surveys, focus groups and inviting them to join the Citizens Advisory Council, a group of homeless and formerly homeless individuals that meet monthly and are an integral part of the Continuum of Care governing body. An established and potent community change agent, the Citizens Advisory Council provides direct input into the CoC's policies and programs through an equitable representation of the county's diverse homeless population.

4B. Attachments Screen For All Application Questions

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

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.		
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.		
3.	We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.		
4.	Attachments must match the questions they are associated with.		
5.	Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.		
6.	If you cannot read the attachment, it is likely we cannot read it either.		
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).		
	. We must be able to read everything you want us to consider in any attachment.		
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.		
8.	Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.		
Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/01/2023
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	09/01/2023
1D-11a. Letter Signed by Working Group	Yes	Letter Signed by ...	09/01/2023
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	09/01/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Web Posting of Lo...	09/01/2023
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/09/2023
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	09/05/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/01/2023
1E-5a. Notification of Projects Accepted	Yes	1E-5a. Notificati...	09/11/2023
1E-5b. Local Competition Selection Results	Yes	Local Competition...	09/09/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		

1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HDX Competition R...	09/01/2023
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	09/01/2023
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/09/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web Posting of Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: 1E-5a. Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description:

Attachment Details

Document Description: 1E-5d. Notification of CoC-Approved Consolidated Application

Attachment Details

Document Description: HDX Competition Report

Attachment Details

Document Description: Housing Leveraging Commitments

Attachment Details

Document Description: Healthcare Formal Agreements

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. CoC Identification	07/27/2023
1B. Inclusive Structure	09/06/2023
1C. Coordination and Engagement	09/06/2023
1D. Coordination and Engagement Cont'd	09/04/2023
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/04/2023
2B. Point-in-Time (PIT) Count	09/04/2023
2C. System Performance	09/04/2023
3A. Coordination with Housing and Healthcare	09/04/2023
3B. Rehabilitation/New Construction Costs	09/04/2023
3C. Serving Homeless Under Other Federal Statutes	09/09/2023

4A. DV Bonus Project Applicants	09/10/2023
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

PHA Homeless Preference

In response to question 1C-7, please see the portions highlighted below. Columbus Metropolitan Housing Authority utilizes a General Preference.

August 25, 2023

Shannon Isom
President & CEO
Community Shelter Board
355 E Campus View Blvd Suite 250
Columbus, OH 43235

Dear Shannon Isom:

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 3,411 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 (HOTMA) of 2016 increased the PBV cap and ensures an increase in the number of PBV vouchers available for use in housing the homeless population.

Thank you,

A handwritten signature in black ink, appearing to read "Justin C. Davis".

Justin C. Davis
Vice President
Housing Choice Voucher Program

COLUMBUS METROPOLITAN HOUSING AUTHORITY

CHAPTER 5: ADMISSION PREFERENCES

To fulfill its mission of providing rental housing subsidies to persons and families in need of assistance, CMHA has established several Admission Preferences for the issuance of Housing Choice Vouchers. These Preferences represent CMHA's policy determinations as to which HCV and PH program applicants should receive priority in the receipt of rental housing assistance.

This chapter describes the HUD and CMHA Admission Preferences that will be used to determine local priorities in the issuance of Housing Choice Vouchers.

Applicants will also be required to meet the HUD and CMHA eligibility requirements that are described in Chapter 3. HCV Application and Wait List Policies and Procedures are described in Chapter 4.

1. HUD MANDATED TARGETING (24 CFR § 982.201(b)(2))

A. HUD requires that no less than 75% of the families admitted to CMHA's HCV programs during any calendar year be Extremely Low-Income families earning or receiving income less than 30% of the Columbus area median income as adjusted for family size. (Once admitted to the HCV program, incomes are permitted – and encouraged – to rise.) Furthermore, no family may be admitted to the HCV program if its earnings and/or total income exceed 80% of the area median income as adjusted for family size. (These limits may be found on the CMHA Website (www.cmhanet.com)). Applicants added to a Wait List whose total family income exceed the 30% limit may face a delay in receipt of a Voucher if CMHA is unable to meet the 75% test at a particular point in time; however, they will remain on the Wait List.

B. HUD, from time to time, provides Vouchers to CMHA for targeted populations (e.g., residents displaced by demolition of public housing units or for the non-elderly disabled). Issuance of these vouchers must be to the targeted population and are not subject to the wait list criteria of the HCV program. Accordingly, CMHA's local Admission Preferences are not applicable.

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 two 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, 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.

H. CMHA public housing families who elect to permanently relocate because of a Rental Assistance Demonstration (RAD) conversion at their development that requires relocation.

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 are submitted, all information will be reviewed and verified and a final assignment of Admission Preference Points that govern Wait List priorities will be made.

Applicants will receive points for each Preference for which they qualify, and the points will be added to determine a ranking number. Points will be assigned as follows (indexing corresponds to the information immediately above):

A. HUD Mandated Preference - Under 30% of AMI adjusted for family size 3 Points

B. Family Composition Preference - Applicants are only entitled to points from one of these subcategories for a maximum of 11 points:

1. Families with two or more persons. 11 Points
2. Families that include a person with disabilities. 11 Points

3. Household headed by a disabled or elderly person (62 or older). 11 Points
4. Single persons who are age 62 or older, displaced, **homeless** or a person with disabilities. 11 Points

C. Metropolitan Area Resident 1 Point

D. Veteran Preference per Ohio Revised Code 1 Point

E. Families not receiving any permanent rental assistance 5 Points

F. Project-Based Voucher Program referrals 30 Points

G. Supportive Service Provider referrals 30 Points

H. RAD relocation of CMHA public housing families 30 Points

I. Non-Elderly Disabled (NED) Eligible 30 Points

J. Mainstream Eligible 30 Points

K. Family Unification Program 30 Points

L. Emergency Housing Vouchers 30 Points

M. CMHA Acquisitions and Dispositions 30 Points

N. CMHA Partnerships 30 Points

Footnotes to F through N

- Applicants receiving 30 points under admission preferences F, G, H, I, J, K, L, M and N above will not be placed in the lottery pool (see chapter 4) but will be added to the existing wait list as priority preference placements.
- Category F, project-based voucher program referrals, are CMHA contractual obligations and are limited to the number of project-based vouchers under HAP contract.
- Category G, supportive service provider referrals, are CMHA obligations based upon agreements with sponsor organizations and any limitations are subject to the discretion of the President and CEO.
- Category M, an executed Purchase and Sale agreement between CMHA and another entity is a qualifying event to determine if a property is being acquired or disposed of.
- Category N, CMHA will allocate no more than 50 vouchers for CMHA partnerships that are connected to housing homeless households or other agreed upon special populations. CMHA in conjunction with partners may develop housing initiatives

that receive a local preference. These housing initiatives are targeted for specifically named households and may be based on CMHA and partner priorities or HUD targeted funding. In addition, these housing initiatives may include a defined number of Housing Choice Vouchers that will be allocated to households meeting specific described criteria.

4. SPECIAL PROGRAM CONVERSION TO TENANT-BASED VOUCHERS

From time to time, CMHA participates in special voucher programs sponsored by HUD and various other entities. Examples include but are not limited to the Family Unification Program; the Mainstream Voucher Program; the Veterans Assistance Housing Program; and the Foster Youth Initiative program. Based on the nature of the program, the possibility exists that funding sources may end, the term of the program may expire, or a person may age out of one of the programs. To prevent participants in such HUD and other programs from becoming homeless because of the termination of such a program as described above, any such participant at risk of becoming homeless as described shall be entitled to the issuance of a tenant-based voucher, should such participant meet the income and other qualifications for the tenant-based Housing Choice Voucher program.

PHA Moving On Preference

In response to question 1C-7, please see the portions highlighted below.

August 25, 2023

Shannon Isom
President & CEO
Community Shelter Board
355 E Campus View Blvd Suite 250
Columbus, OH 43235

Dear Shannon Isom:

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.

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Thank you,

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Justin C. Davis
Vice President
Housing Choice Voucher Program

COLUMBUS METROPOLITAN HOUSING AUTHORITY

CHAPTER 5: ADMISSION PREFERENCES

To fulfill its mission of providing rental housing subsidies to persons and families in need of assistance, CMHA has established several Admission Preferences for the issuance of Housing Choice Vouchers. These Preferences represent CMHA's policy determinations as to which HCV and PH program applicants should receive priority in the receipt of rental housing assistance.

This chapter describes the HUD and CMHA Admission Preferences that will be used to determine local priorities in the issuance of Housing Choice Vouchers.

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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, 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.

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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.

H. CMHA public housing families who elect to permanently relocate because of a Rental Assistance Demonstration (RAD) conversion at their development that requires relocation.

3. ASSIGNMENT OF ADMISSION PREFERENCE POINTS

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J. Mainstream Eligible 30 Points

K. Family Unification Program 30 Points

L. Emergency Housing Vouchers 30 Points

M. CMHA Acquisitions and Dispositions 30 Points

N. CMHA Partnerships 30 Points

Footnotes to F through N

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that receive a local preference. These housing initiatives are targeted for specifically named households and may be based on CMHA and partner priorities or HUD targeted funding. In addition, these housing initiatives may include a defined number of Housing Choice Vouchers that will be allocated to households meeting specific described criteria.

4. SPECIAL PROGRAM CONVERSION TO TENANT-BASED VOUCHERS

From time to time, CMHA participates in special voucher programs sponsored by HUD and various other entities. Examples include but are not limited to the Family Unification Program; the Mainstream Voucher Program; the Veterans Assistance Housing Program; and the Foster Youth Initiative program. Based on the nature of the program, the possibility exists that funding sources may end, the term of the program may expire, or a person may age out of one of the programs. To prevent participants in such HUD and other programs from becoming homeless because of the termination of such a program as described above, any such participant at risk of becoming homeless as described shall be entitled to the issuance of a tenant-based voucher, should such participant meet the income and other qualifications for the tenant-based Housing Choice Voucher program.

Letter Signed by Working Group

In response to question 1D-11a., please see the following document.

Columbus and Franklin County, Ohio
Citizens Advisory Council

Resolution for Approval of the CoC Plan
for Serving Individuals and Families Experiencing Homelessness
with Severe Service Needs

August 28th, 2023

WHEREAS, the Citizens Advisory Council is a Community Shelter Board sponsored group with membership comprised of homeless and formerly homeless individuals; this group meets monthly and has two seats on the Continuum of Care and one seat on the Continuum of Care Board;

WHEREAS, the Citizens Advisory Council members met on August 28th, 2023, received presentations on the new permanent supportive housing (PSH) projects to be developed and provided feedback and suggestions for improvement;

WHEREAS, the Citizens Advisory Council members acknowledge that the new projects included in the Continuum of Care competition prioritize serving individuals and families experiencing homelessness with severe service needs and recommends inclusion of all projects in the Continuum of Care competition;

WHEREAS, the Citizens Advisory Council members scored the projects included in the Continuum of Care competition in the following manner:

Project	Score
CHN Dear Hill	6.5
CHN Knoll View	6.5
Homefull Hotel Expansion	6.9
YMCA McKinley Manor	6.5

WHEREAS, the Citizens Advisory Council members support the priorities of the Columbus and Franklin County Continuum of Care in serving individuals and families experiencing homelessness with severe service needs as demonstrated by having all PSH units dedicated to individuals and families meeting the chronic homeless definition and having individuals and families with a disability, with the longest history of homelessness and the most severe service needs, given first priority in all PSH projects within the system.

THEREFORE, be it resolved that the Citizens Advisory Council recommends inclusion of all the projects above in the Continuum of Care competition;

THEREFORE, be it resolved that the Citizens Advisory Council support the priorities of the Columbus and Franklin County Continuum of Care in serving individuals and families experiencing homelessness with severe service needs as shown above.

Date: August 28th, 2023 Witnessed by:

Shirley K. Pullermon Sharon Hill Simpson

Leslie Reeves

Kira Potanski

JB
[Signature]

[Signature]

A MJ

Housing First Evaluation

In response to question 1D-2a., please see the following document.

Housing First Screening Tool

OH-503 Columbus and Franklin County Continuum of Care

Organization

NCR Permanent Supportive Housing

Project Name

Commons at Buckingham

1. Please indicate Yes, No, or Not Applicable for the following questions *

	Yes	No	Not Applicable
Will the project quickly move participants into permanent housing?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Will the project screen participants out for having too little or too much income?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Will the project screen participants out for having an active or history of substance use?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Will the project screen participants out for having a criminal record with exceptions for state-mandated restrictions?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Will the project screen participants out for having history of victimizations (e.g. domestic violence, sexual assault, childhood abuse)?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

2. Please indicate Yes, No, or Not Applicable for the following questions *

	Yes	No	Not Applicable
Will the project terminate participants for failure to participate in supportive services?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Will the project terminate participants for failure to make progress on a service plan?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Will the project terminate participants for loss of income or failure to improve income?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Will the project terminate for participants for any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

3. Please describe the extent to which this project will adopt a Housing First approach, defined as housing assistance that is offered without preconditions (such as sobriety or a minimum income threshold) or service participation requirements, and rapid placement and stabilization in permanent housing are primary goals. *

(Max 1500 characters)

This project fully embraces the evidence based practice of Housing First which includes assistance with housing without any precondition requirements such as sobriety, income thresholds. All services are voluntary and participation in service is not a condition of tenancy.

This content is neither created nor endorsed by Google.

Web Posting of Local Competition Deadline

In response to question 1E-1, please see the following document(s).

HUD APPLICATION

HUD Continuum of Care Application

FY 2023 Notice of Funding Opportunity

The U.S. Department of Housing and Urban Development (HUD) has released the FY 2023 Continuum of Care (CoC) Program Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants Notice of Funding Availability. The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, states, Indian Tribes or tribally designated housing entities, and local governments to quickly rehouse homeless individuals, families, persons fleeing domestic violence, dating violence, sexual assault, and stalking, and youth while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by homeless individuals and families; and to optimize self-sufficiency among those experiencing homelessness. The goal of the Youth Homelessness Demonstration Program is to support the development and implementation of a coordinated community approach to preventing and ending youth homelessness and sharing that experience with and mobilizing communities around the country toward the same end. The population to be served by the demonstration program is youth experiencing homelessness, including unaccompanied and pregnant or parenting youth.

CoCs are required to designate a Collaborative Applicant to submit a consolidated CoC application for funding for the community as a whole, and the Community Shelter Board (CSB) is Columbus and Franklin County's collaborative applicant. Please contact CSB Grants Administrator Gillian Gunawan (ggunawan@csb.org) if you have a new, eligible program that you would like to discuss for this year's CoC application.

Renewal project application guidance is posted below; new project application guidance forthcoming.

Funding Opportunity for Programs Serving Survivors of Domestic Violence

In this year's CoC competition, HUD has set aside \$975,934 for our CoC for rapid re-housing projects and supportive service projects providing coordinated entry to assist survivors of domestic violence, dating violence, and stalking. **The Columbus and Franklin County CoC is accepting proposals for these funds to be included in our community's annual CoC application.**

Application Schedule

Dates	Activities
7/10/2023	CSB establishes project review & application schedule; releases to applicants via email
8/17/2023	All applications due to CSB by 5pm via e-snaps
8/17/2023 - 8/28/2023	CSB reviews applications and works with applicants to correct technical issues
8/31/2023	Final applications due to CSB via e-snaps
9/7/2023	CoC Board meeting to consider CoC Consolidated Application and project prioritization
9/11 or 9/12/2023	Notify CoC Applicants of project prioritization
9/15/2023	CoC Meeting to consider CoC Consolidated Application
9/28/2023	Application due to HUD via e-snaps

Local Competition Scoring Tool

In response to question 1E-2, please see the scoring tool OH-503 used in its local competition. The portions highlighted below demonstrate HUD's required items.

1. maximum points available and actual points awarded for each project, columns titled *Max points available = Max points available for objective criteria* and *Total Points Usage Points + Performance Points Awarded = Project Score*, highlighted below.
2. maximum points available and actual points awarded for objective criteria for project applications, columns titled *Max points available = Max points available for objective criteria* and *Total Points Usage Points + Performance Points Awarded = Project Score*, highlighted below **(all points available and actual points awarded are based on objective criteria)**.
3. maximum points available and actual points awarded for system performance criteria for the project application, columns titled *Max points available for system performance and Performance Points Awarded*, highlighted below.
4. maximum points available and actual points awarded for projects that address specific severe barriers to housing and services; and data from comparable databases used to score projects submitted by victim service providers. Not included because all CoC projects provide housing and services to the hardest to serve, most vulnerable populations. All projects in the CoC adhere to system-wide standardized prioritization and assessment requirements that prioritize the most vulnerable. All projects serve people with severe barriers to housing and services. No project uses comparable databases.

#	Project Name	Grant Number	Most recent closed HUD Grant Amount	Amount Expended Per CSB Records	Balance	% of HUD Grant Amount Spent	Usage Points Available	HUD Funding Usage Points Awarded	FY2023 Program Evaluation Rating	Max points available for system performance	Performance Points Awarded	Max points available = Max points available for objective criteria	Total Points Usage Points + Performance Points Awarded = Project Score
1	NCR Berwyn East	OH0727U5E032200	\$338,633.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
2	CFSH DV SSO-CE	OH0729U5E032200	\$195,057	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
3	Homefull TRA Mainstream/EHV	OH0076U5E032215	\$618,297	\$607,615	\$10,682	98.3%	10	8	N/A	10	N/A	N/A	N/A
4	CHN Family Homes	OH0082U5E032215	\$15,694	\$15,694	\$0	100.0%	10	10	High	10	10	20	20
5	CHN Inglewood	OH0410U5E032210	\$138,230	\$138,230	\$0	100.0%	10	10	High	10	10	20	20
6	CHN Safe Haven	OH0097U5E032215	\$141,578	\$141,578	\$0	100.0%	10	10	High	10	10	20	20
7	CHN Wilson	OH0101U5E032215	\$23,707	\$23,707	\$0	100.0%	10	10	High	10	10	20	20
8	Equitas TRA	OH0080U5E032215	\$711,146	\$709,320	\$1,826	99.7%	10	10	High	10	10	20	20
9	Homefull Isaiah	OH0075U5E032111	\$2,146,438	\$2,139,569	\$6,869	99.7%	10	10	High	10	10	20	20
10	NCR Buckingham	OH0394U5E032212	\$234,215	\$234,215	\$0	100.0%	10	10	High	10	10	20	20
11	NCR Grant	OH0085U5E032215	\$235,951	\$235,951	\$0	100.0%	10	10	High	10	10	20	20
12	NCR Third	OH0372U5E032211	\$180,969	\$180,969	\$0	100.0%	10	10	High	10	10	20	20
13	YWCA WINGS	OH0102U5E032215	\$747,313	\$747,313	\$0	100.0%	10	10	High	10	10	20	20
14	Homefull SRA	OH0083U5E032215	\$1,240,949	\$1,231,899	\$9,050	99.3%	10	8	High	10	10	20	18
15	CHN Briggsdale	OH0078U5E032215	\$251,991	\$251,991	\$0	100.0%	10	10	Medium	10	6	20	16
16	CHN East Fifth	OH0088U5E032215	\$235,448	\$235,448	\$0	100.0%	10	10	Medium	10	6	20	16
17	CHN Marsh Brook	OH0630U5E032204	\$254,000	\$254,000	\$0	100.0%	10	10	Medium	10	6	20	16
18	CHN Parsons	OH0093U5E032215	\$273,819	\$273,819	\$0	100.0%	10	10	Medium	10	6	20	16
19	CHN Terrace	OH0092U5E032215	\$220,755	\$220,755	\$0	100.0%	10	10	Medium	10	6	20	16
20	Homefull TRA	OH0084U5E032215	\$2,526,722	\$2,513,294	\$13,428	99.5%	10	10	Medium	10	6	20	16
21	Huckleberry House TLP	OH0099U5E032215	\$274,792	\$274,034	\$758	99.7%	10	10	Medium	10	6	20	16
22	Maryhaven Chantry	OH0090U5E032215	\$197,975	\$197,975	\$0	100.0%	10	10	Medium	10	6	20	16
23	NCR Van Buren Village	OH0470U5E032206	\$66,363	\$66,123	\$240	99.6%	10	10	Medium	10	6	20	16
24	Homefull Leasing	OH0312U5E032211	\$1,762,376	\$1,751,446	\$10,930	99.4%	10	8	Medium	10	6	20	14
25	CHN Southpoint	OH0281U5E032214	\$294,030	\$221,416	\$72,614	75.3%	10	5	Medium	10	6	20	11
26	YMCA Touchstone	OH0445U5E032210	\$218,196	\$169,179	\$49,017	77.5%	10	5	Medium	10	6	20	11
27	TSA/HFF RRH J2H	OH0074U5E032211	\$60,914	\$58,685	\$2,230	96.3%	10	8	Low	10	2	20	10
28	CSB HMIS	OH0087U5E032215	\$312,830	\$312,830	\$0	100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
29	YMCA DV RRH	OH0617U5E032204	\$680,102	\$592,225	\$87,877	87.1%	10	8	Low	10	2	20	10
30	VOA Family PSH*	OH0094U5E032215	\$600,633	\$600,633	\$0	100.0%	10	10	High	10	10	20	20
NEW	YMCA McKinley Manor	new										52	50.5
NEW	Homefull Leasing Expansion	new										52	49.9
NEW	CHN Deer Hill Place	new										52	48.5
NEW	CHN Knoll View Place	new										52	48.5
NEW	LSS CHOICES DV Joint TH-RRH	new										39	36

* De-ranked as last renewal project because delay in submitting project application, past local due date.

Scored Forms for One Project

In response to question 1E-2a, please see the following for OH-503's scored forms and portions highlighted below demonstrating the required items for one renewal project submitted in OH-503's local competition.

2023 RENEWAL/EXPANSION SCORING SHEET - PSH/TH (non-YHDP)

Organization Name: Community Housing Network

Project Name: Briggsdale

Grant Number: OH0078U5E032215

THRESHOLD REQUIREMENTS		
Compliant with A (Organizational) and D (Financial) Standards	Yes	
Participates in Coordinated Entry	Yes	
Operates a Housing First Program	Yes	
Submitted a complete and accurate project application	Yes	
Project has reasonable costs per SHO	Yes	
Project is financially feasible	Yes	
Active CoC participant	Yes	
Acceptable Organizational Financial Indicators	Yes	
ELIGIBLE FOR RATING		Yes

PERFORMANCE EVALUATION OUTCOMES					
Ends	Measurement	Annual Metrics	Semi-annual Goal	Semi-annual Actual	Achieved?
Efficient number of households served	Households served (#)	Set based on prior year(s) attainment and program capacity.	71	67	Yes
Access to resources/services to move to and stabilize housing Basic needs met in a non-congregate environment	Housing Stability	At least standard below or greater if prior year(s) achievement was <ul style="list-style-type: none">At least 12 months for PSH (goal to be set not to exceed 24 months, actual attainment may be greater than goal)Up to 4 months for TH	24	48	Yes
	Successful housing outcomes (%)	At least 90% successful housing outcomes for PSH and 77% successful housing outcomes for	90	97	Yes
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement	64	64	Yes
	Successful housing exits (%) (PSH only)	At least 50% of exits are successful housing outcomes.	50	0	No
Not re-enter the emergency shelter system	Exit to Homelessness (%)	<10% of those who exit housing will return to homelessness within 180 days of exit.	<10	3	Yes
Efficient and effective use of a pool of community resources CoC or HUD Standards	Cost per household	Cost per household will be consistent with budget. Evaluated annually and presented to the CoC.	consistent	consistent	Yes
	Cost per unit	Cost per unit will be consistent with budget. Evaluated annually and presented to the CoC.	consistent	consistent	
	Pass program certification	Provide access to resources and services to end homelessness.	Pass certification	Non-Compliant	
	Program Occupancy Rate (%)	Full occupancy (>95%).	95	97	Yes
	Negative Reason for leaving (%)	Less than 20% leave for non-compliance or disagreement with rules	20	50	No
	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.	30	54	Yes
	Increase in income from employment, from entry to exit or end of reporting period (%)	At least 15% of adults will have increased employment income from entry to exit or end of reporting period.	15	3	No

Count # of rated performance items in the table above that were achieved
If >75% achieved, High rating, if 50-75% achieved, Median rating, less than 50% achieved, Low rating
Assign rating level based on above
Assign 10 points for High rating, 6 points for Medium rating and 2 point for Low rating

Number of goals achieved: 8
% of goals achieved: 73%
Rating: Medium
Score: 6

out of 10

USAGE OF HUD GRANT FUNDS			
Most recent closed HUD Grant Amount	\$	251,991	amount of granted funding
Amount Expended	\$	251,991	amount of draws
Calculate rate of expenditure			% of HUD Grant Amount Spent 100%
If more than 99.4%, 10 points; 80 - 99.4%, 8 points; 60-80%, 5 points; 40-60%, 2 points; <40%, 0 points			Score: 10
TOTAL SCORE			16 out of 20

Notification of Projects Rejected-Reduced

In response to question 1E-5, there were no projects rejected or reduced.

Notification of Projects Accepted

In response to question 1E-5a, please see the following document(s).

From: [Lianna Barbu](#)
To: [Amanda Frankl](#); [Amber Jacott](#); [Andrew Snouffer](#); [Beth Fetzter-Rice](#); [De Andree Nekoranec](#); [Jennifer Gulley](#); [Kelsey Strausbaugh](#); [Lynda Leclerc](#); [mzimmerman@nationalchurchresidences.org](#); [Mary Price](#); [Michael Gildea](#); [nancy.cunningham@nationwidechildrens.org](#); [Katherine.weathers@familysafetyandhealing.org](#); [sdarby@ymcacolumbus.org](#); [Nolan, Theresa](#); [Tina Patterson](#); [Tyler Benack](#); [Dawnya Underwood](#); [Maria Houston](#); [Paige Zilincik](#); [Meghann Cicola, MSW, LSW, She/Her/Hers](#); [LaRaun Clayton](#); [Melissa Humbert-Washington](#); [Bianca Barton](#); [David Alexander](#); [High, Candy](#); [Gillian Gunawan](#); [Amber Jacott](#); [Andrew Snouffer](#); [Beth Fetzter-Rice](#); [De Andree Nekoranec](#); [Jennifer Gulley](#); [Kelsey Strausbaugh](#); [Lynda Leclerc](#); [mzimmerman@nationalchurchresidences.org](#); [Mary Price](#); [Michael Gildea](#); [Nancy Cunningham](#) ([nancy.cunningham@nationwidechildrens.org](#)); [Katherine.weathers@familysafetyandhealing.org](#); [sdarby@ymcacolumbus.org](#); [Nolan, Theresa](#); [Tina Patterson](#); [Tyler Benack](#); [Dawnya Underwood](#); [Maria Houston](#); [Paige Zilincik](#); [Ryan Cassell](#); [Meghann Cicola, MSW, LSW, She/Her/Hers](#); [bfetzterrice@homelessfamiliesfoundation.org](#); ["tony.collins@ymcacolumbus.org"](#); [Samantha Shuler](#) ([sshuler@chninc.org](#)); [Sonya Thesing](#); [jvonarx@voain.org](#); ["Tinap@Homefull.org"](#); [ogarrison@maryhaven.com](#); [ebrown@ywcacolumbus.org](#); [Lustig, Rachel](#); ["Lynda LeClerc \(leclerc@huck-house.org\)"](#); ["Colleen Bain Gold](#) ([cbain@ncr.org](#))"; [Tiffany McCoy](#); [sdarby@ymcacolumbus.org](#); [beth.lonn@ymcacolumbus.org](#); [jsharma@chninc.org](#); [Adam Rowan](#); [kathleen.atkins@voago.org](#); [Jennifer Gulley](#); [rpickut@maryhaven.com](#); [Rachel Rubey](#); [Nolan, Theresa](#); [cwirick@netcareaccess.org](#); [Judy Peterson](#); [Hawes, Emily](#); [Melissa Humbert-Washington](#); [Betty Rickabaugh](#); [valerie@ywcacolumbus.org](#); [ajacott@ywcacolumbus.org](#); [Katie Elsass](#) ([kelsass@chninc.org](#)); [Crystal Gary](#); [Andrew Snouffer](#); [Tiana Purvis](#); [Cara Cox](#); [troper@lssnetworkofhope.org](#); [Regina Clemons](#); [jennifer.martinez@voaohin.org](#); [michael.salois@voaohin.org](#); [Cheri Baldwin](#); [LaRaun Clayton](#); [Cheyenne Lenhart](#); [cynthia.johnson@voaohin.org](#); [Annette Harris](#); [jkrauss@maryhaven.com](#); [Dawnya Underwood](#); [SDiMickle@nationalchurchresidences.org](#)
Cc: [Kirstin Jones](#); [Gillian Gunawan](#)
Subject: Project Scoring and Rankings for the FY23 CoC Application
Date: Monday, September 11, 2023 3:49:26 PM
Attachments: [FY23 CoC Scoring Ranking and Prioritization.pdf](#)
[Scoring and Ranking 2023 for web.pdf](#)

Good aftrenoon,

Thank you for submitting Project Applications for the FY23 CoC competition. The CoC Board met on September 7, 2023 to review the FY23 CoC Application and rank renewal and new Project Applications according to the attached 2023 CoC Scoring Ranking and Prioritization Procedures.

Please see attached the CoC Board's recommendations for the ranked position of the project applications, including project scores and funding amounts. The CoC Board accepted all projects submitted, renewal and new. No project was rejected. YHDP, CoC planning, and UFA projects were accepted and not ranked, per HUD's guidance.

The full CoC will meet on September 15 to review and approve the full CoC application.

The ranking is posted on the CoC website here:

<http://www.columbusfranklincountycoc.org/hud-application/>. Please let us know if you have any questions.

Thank you

Lianna Barbu (she/her)

Chief Operating Officer



Community Shelter Board
355 E. Campus View Blvd., Suite 250
Columbus, OH 43235
Desk: 614-715-2535

Cell: 614-787-7062
www.csb.org

Final Project Scores for All Projects

In response to question 1E-5b, please see the portions below demonstrating the final project scores for all new and renewal projects OH-503 considered during its local competition. Community Shelter Board is OH-503's designated UFA and as such is the only applicant to HUD.

Final Project Scores for All Projects

Subgrantee and Project Name	Grant Number	Project Score	Project Rank	Award Amount	Project accepted/rejected
YHDP CHN Youth PSH	OH0693U5E032201	16	N/A	\$134,058	Accepted
YHDP NCR Youth PSH	OH0693U5E032201	N/A	N/A	\$212,283	Accepted
YHDP HFF RRH	OH0695U5E032201	10	N/A	\$932,587	Accepted
YHDP HFF Transition to Home	OH0694U5E032201	10	N/A	\$1,693,933	Accepted
YHDP Huckleberry House TAY CARR	OH0692U5E032201	18	N/A	\$224,000	Accepted
NCR Berwyn East	OH0727U5E032200	N/A	1	\$338,633	Accepted
CFSH DV SSO-CE	OH0729U5E032200	N/A	2	\$195,057	Accepted
Homefull TRA Mainstream/EHV	OH0076U5E032215	N/A	3	\$871,351	Accepted
CHN Family Homes	OH0082U5E032215	20	4	\$13,310	Accepted
CHN Inglewood	OH0410U5E032210	20	5	\$60,247	Accepted
CHN Safe Haven	OH0097U5E032215	20	6	\$188,951	Accepted
CHN Wilson	OH0101U5E032215	20	7	\$66,279	Accepted
Equitas TRA	OH0080U5E032215	20	8	\$910,455	Accepted
Homefull Isaiah	OH0075U5E032111	20	9	\$2,170,275	Accepted
NCR Buckingham	OH0394U5E032212	20	10	\$172,375	Accepted
NCR Grant	OH0085U5E032215	20	11	\$172,376	Accepted
NCR Third	OH0372U5E032211	20	12	\$172,375	Accepted
YWCA WINGS	OH0102U5E032215	20	13	\$257,848	Accepted
Homefull SRA	OH0083U5E032215	18	14	\$2,128,589	Accepted
CHN Briggsdale	OH0078U5E032215	16	15	\$185,605	Accepted
CHN East Fifth	OH0088U5E032215	16	16	\$232,914	Accepted
CHN Marsh Brook	OH0630U5E032204	16	17	\$254,000	Accepted
CHN Parsons	OH0093U5E032215	16	18	\$331,658	Accepted
CHN Terrace	OH0092U5E032215	16	19	\$135,549	Accepted
Homefull TRA	OH0084U5E032215	16	20	\$1,943,372	Accepted
Huckleberry House TLP	OH0099U5E032215	16	21	\$232,135	Accepted
Maryhaven Chantry	OH0090U5E032215	16	22	\$183,196	Accepted
NCR Van Buren Village	OH0470U5E032206	16	23	\$64,200	Accepted
Homefull Leasing	OH0312U5E032211	14	24	\$1,495,758	Accepted
CHN Southpoint	OH0281U5E032214	11	25	\$213,546	Accepted
YMCA Touchstone	OH0445U5E032210	11	26	\$237,170	Accepted
TSA/HFF RRH J2H	OH0074U5E032211	10	27	\$326,585	Accepted
CSB HMIS	OH0087U5E032215	N/A	28	\$164,070	Accepted
YMCA DV RRH	OH0617U5E032204	10	29	\$1,467,226	Accepted
VOA Family PSH*	OH0094U5E032215	20	30	\$570,633	Accepted
YMCA McKinley Manor	new	50.5	31	\$262,450	Accepted
Homefull Leasing Expansion	new	49.9	32	\$307,315	Accepted
CHN Deer Hill Place	new	48.5	33	\$494,366	Accepted
CHN Knoll View Place	new	48.5	34	\$262,551	Accepted
LSS CHOICES DV Joint TH-RRH	new	36	35	\$960,388	Accepted
CoC Planning	OH0673U5E032000		N/A	\$947,630	Accepted
CoC UFA	OH0674U5E032000		N/A	\$568,578	Accepted
				\$22,755,877	

* De-ranked as last renewal project because delay in submitting project application, past local due date.

HDX Competition Report

In response to question 2A-6, please see the following document(s).

2023 HDX Competition Report

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

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	2036	1798	1912	2337
Emergency Shelter Total	1,466	1,210	1,426	1688
Safe Haven Total	0	0	0	0
Transitional Housing Total	137	155	144	151
Total Sheltered Count	1603	1365	1570	1839
Total Unsheltered Count	433	433	342	498

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	177	187	132	155
Sheltered Count of Chronically Homeless Persons	29	39	37	66
Unsheltered Count of Chronically Homeless Persons	148	148	95	89

2023 HDX Competition Report

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

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	173	154	206	219
Sheltered Count of Homeless Households with Children	173	154	202	219
Unsheltered Count of Homeless Households with Children	0	0	4	0

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	145	97	66	91	101
Sheltered Count of Homeless Veterans	116	89	58	72	66
Unsheltered Count of Homeless Veterans	29	8	8	19	35

*For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

2023 HDX Competition Report

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

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year-Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year-Round Beds	Total Year-Round, Current VSP Beds in an HMIS Comparable Database	Total Year-Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	1,148	1,028	1,028	100.00%	0	120	0.00%	1,028	89.55%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	173	126	126	100.00%	0	47	0.00%	126	72.83%
RRH Beds	545	545	545	100.00%	0	0	NA	545	100.00%
PSH Beds	3,486	3,442	3,486	98.74%	0	0	NA	3,442	98.74%
OPH Beds	0	0	0	NA	0	0	NA	0	NA
Total Beds	5,352	5,141	5,185	99.15%	0	167	0.00%	5,141	96.06%

2023 HDX Competition Report

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

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2023 HDX Competition Report

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

Notes

*For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

**For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

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

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

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	2257	2344	2859	2985

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

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	133	169	73	105

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	637	748	370	545

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2023 HDX Competition Report

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

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2023 HDX Competition Report

FY2022 - 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 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	7280	7639	66	75	9	35	42	7
1.2 Persons in ES, SH, and TH	7491	7851	71	80	9	37	44	7

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer 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.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	7884	7978	435	369	-66	171	135	-36
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	8082	8170	443	378	-65	183	141	-42

2023 HDX Competition Report

FY2022 - 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.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	104	4	4%	3	3%	5	5%	12	12%
Exit was from ES	2599	320	12%	137	5%	213	8%	670	26%
Exit was from TH	113	8	7%	5	4%	19	17%	32	28%
Exit was from SH	0	0		0		0		0	
Exit was from PH	1454	67	5%	56	4%	110	8%	233	16%
TOTAL Returns to Homelessness	4270	399	9%	201	5%	347	8%	947	22%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

8/4/2023 3:37:09 PM

9

2023 HDX Competition Report

FY2022 - 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 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons		1912	
Emergency Shelter Total	1210	1426	216
Safe Haven Total	0	0	0
Transitional Housing Total	155	144	-11
Total Sheltered Count	1365	1570	205
Unsheltered Count		342	

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	7640	8000	360
Emergency Shelter Total	7426	7782	356
Safe Haven Total	0	0	0
Transitional Housing Total	296	280	-16

2023 HDX Competition Report

FY2022 - 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 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1396	1297	-99
Number of adults with increased earned income	59	79	20
Percentage of adults who increased earned income	4%	6%	2%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1396	1297	-99
Number of adults with increased non-employment cash income	459	559	100
Percentage of adults who increased non-employment cash income	33%	43%	10%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1396	1297	-99
Number of adults with increased total income	495	618	123
Percentage of adults who increased total income	35%	48%	13%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	424	415	-9
Number of adults who exited with increased earned income	69	45	-24
Percentage of adults who increased earned income	16%	11%	-5%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	424	415	-9
Number of adults who exited with increased non-employment cash income	87	97	10
Percentage of adults who increased non-employment cash income	21%	23%	2%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	424	415	-9
Number of adults who exited with increased total income	149	135	-14
Percentage of adults who increased total income	35%	33%	-2%

2023 HDX Competition Report

FY2022 - 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 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	7064	7294	230
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.	2360	2446	86
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)	4704	4848	144

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	7806	8165	359
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.	2821	3005	184
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.)	4985	5160	175

2023 HDX Competition Report

FY2022 - 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 FY2022 (Oct 1, 2021 - Sept 30, 2022) 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 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	375	340	-35
Of persons above, those who exited to temporary & some institutional destinations	47	46	-1
Of the persons above, those who exited to permanent housing destinations	100	85	-15
% Successful exits	39%	39%	0%

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

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	6083	5935	-148
Of the persons above, those who exited to permanent housing destinations	1876	1411	-465
% Successful exits	31%	24%	-7%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	3002	3381	379
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	2903	3255	352
% Successful exits/retention	97%	96%	-1%

2023 HDX Competition Report

FY2022 - SysPM Data Quality

OH-503 - Columbus/Franklin County CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	1021	1127	1165	71	127	129	2737	2837	3355	611	736	356			
2. Number of HMIS Beds	1021	1127	1165	71	127	129	2716	2816	3334	611	736	356			
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	100.00	99.23	99.26	99.37	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	8318	7426	7782	277	296	280	3131	3175	3500	3888	3920	3516	519	470	428
5. Total Leavers (HMIS)	7278	6274	6477	188	184	183	566	386	406	2466	2581	2190	409	380	350
6. Destination of Don't Know, Refused, or Missing (HMIS)	411	333	302	0	0	1	7	13	16	89	103	103	3	2	0
7. Destination Error Rate (%)	5.65	5.31	4.66	0.00	0.00	0.55	1.24	3.37	3.94	3.61	3.99	4.70	0.73	0.53	0.00

2023 HDX Competition Report **FY2022 - SysPM Data Quality**

2023 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 2023 PIT Count	1/24/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/13/2023	Yes
2023 HIC Count Submittal Date	4/13/2023	Yes
2022 System PM Submittal Date	2/24/2023	Yes

Housing Leveraging

Commitments

In response to question 3A-1a, please see the following document.

August 25, 2023

Shannon Isom
President & CEO
Community Shelter Board
355 E Campus View Blvd Suite 250
Columbus, OH 43235

RE: CoC Application

Dear Shannon Isom:

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 (PSH) project every year and so far, with the support of the Housing Choice Voucher (HCV) program and the Emergency Housing Voucher (EHV) program, this goal has been met. For the 2023 Continuum of Care Application Bonus funding, the following new permanent supportive housing projects are prioritized and have an HCV commitment from CMHA.

Project Name	# of HCV subsidies for the PSH units	Anticipated date of availability
CHN – Deer Hill Place	48	Spring 2026
CHN – Knoll View Place	48	Spring 2026
Homefull Leasing Expansion	35	Fall 2023
CMHA/YMCA – McKinley Manor	44	Fall 2023

These projects are a mix of new single site developments and renovated developments, and the units will be available for program participants as soon as the buildings complete construction activities.

Thank you,



Justin C. Davis
Vice President
Housing Choice Voucher Program

Healthcare Formal Agreements

In response to question 3A-2a, please see the following document(s).

August 29, 2023

Lianna Barbu
Community Shelter Board
355 E Campus View Blvd Suite 250
Columbus OH 43235

Re: Healthcare commitment for Homefull's Leasing Expansion proposal

As an authorized representative of Homefull, I am pleased to provide this letter of documentation to the Continuum of Care (CoC) for the Leasing Expansion project. Homefull directly bills Medicaid for provision of behavioral health supportive case management services, known as Community Psychiatric Support Treatment (CPST). As such, there is no formal agreement with Ohio Department of Medicaid beyond our status as a provider and biller of services. However, in Homefull's experience, a project of this size should be able to bill approximately \$18,000 in services in an average year. These funds will be used as match for this project to ensure the continued success of Leasing Expansion. The funds will be available July 1, 2024 - June 30, 2025.

Like all Homefull projects, this project will adhere to Housing First principles. This will include accepting local CoC coordinated entry eligible clients and not adding additional eligibility requirements. Homefull will not add restrictions based on this healthcare commitment.

Homefull is committed to making every effort to ensure funds are available for this project. Private funding will cover any shortfall.

Sincerely,



Tina M. Patterson
Chief Executive Officer



July 31, 2023

RE: CHN 2023 Deer Hill Place

Please accept this letter as certification that CONCORD COUNSELING SERVICES commits to providing the following otherwise non-obligated, eligible match and leverage support for the entire duration of the grant term for the attached COC project. Project eligibility for program participants in the new project will be based on CoC Program fair housing requirements and will not be restricted by CONCORD COUNSELING SERVICES.

The delivery of services to project participants will be documented and agreed to upon in the terms of a Memorandum of Understanding covering **July 2024-June 2026**.

The AOD Program Manager will refer 80 clients and the SUD Therapist will provide SUD therapy to 58 clients over the course of the 2-year grant term.

Title	Service	Annual Amount	Two Year Amount
AOD Program Manager	Referral/Supervision	\$1,383.70	\$2,767.40
SUD Therapist	SUD Therapy	\$ 6,529.83	\$13,059.66
	TOTAL	\$7,913.53	\$15,827.06

Sincerely,

Chuck Vranekovic
Chief Financial Officer



July 31, 2023

RE: CHN 2023 Deer Hill Place

Please accept this letter as certification that CONCORD COUNSELING SERVICES commits to providing the following otherwise non-obligated, eligible match and leverage support for the entire duration of the grant term for the attached COC project.

The delivery of services to project participants will be documented and agreed to upon in the terms of a Memorandum of Understanding covering **July 2024 – June 2026**.

Source	Service	Annual Amount	Two Year Amt
Medicaid	Medicaid eligible services to qualified project participants	\$ 18,212.96	\$36,425.92
	TOTAL	\$ 18,212.96	\$36,425.92

Sincerely,

Chuck Vranekovic
Chief Financial Officer



July 31, 2023

RE: CHN 2023 Knoll View Place

Please accept this letter as certification that CONCORD COUNSELING SERVICES commits to providing the following otherwise non-obligated, eligible match and leverage support for the entire duration of the grant term for the attached COC project. Project eligibility for program participants in the new project will be based on CoC Program fair housing requirements and will not be restricted by CONCORD COUNSELING SERVICES.

The delivery of services to project participants will be documented and agreed to upon in the terms of a Memorandum of Understanding covering **July 2024-June 2025**.

The AOD Program Manager will refer 40 of clients and the SUD Therapist will provide SUD therapy to 29 clients over the course of the 1-year grant term.

Title	Service	Annual Amount
AOD Program Manager	Referral/Supervision	\$1,383.70
SUD Therapist	SUD Therapy	\$6,529.83
	TOTAL	\$7,913.53

Sincerely,

Chuck Vranekovic
Chief Financial Officer



July 31, 2023

RE: CHN 2023 Knoll View

Please accept this letter as certification that CONCORD COUNSELING SERVICES commits to providing the following otherwise non-obligated, eligible match and leverage support for the entire duration of the grant term for the attached COC project.

The delivery of services to project participants will be documented and agreed to upon in the terms of a Memorandum of Understanding covering **July 2024 – June 2025**.

Source	Service	Annual Amount
Medicaid	Medicaid eligible services to qualified project participants	\$ 18,212.96
	TOTAL	\$ 18,212.96

Sincerely,

Chuck Vranekovic
Chief Financial Officer

The Health Center at FAITH MISSION

Because your health is important



August 15, 2023

Maria N. Houston, Psy.D.
Executive Director
CHOICES for Victims of Domestic Violence
1105 Schrock Rd, Ste 100
Columbus, OH 43229

Re: Commitment from Health Care Organization for LSS CHOICES 2023 DV Joint
TH-RRH project

Dr. Houston:

As the chief executive of The Health Center at Faith Mission, I am pleased to provide this letter of commitment to provide health care services for the Joint Transitional Housing/Rapid Rehousing project serving victims of domestic violence.

The Health Center at Faith Mission is a substance abuse treatment or recovery provider. It will provide access to treatment or recovery services for all program participants who qualify and choose those services. The services will be available July 1, 2024 - June 30, 2025.

The Health Center at Faith Mission's services are supported by local, state and federal funding at no charge to individual recipients. It is committed to making every effort to sustain qualified services for this project.

Sincerely,

Alyssa Huddleston, MSN, FNP-BC
Health Center Executive Director

Before Starting the Project Listings for the CoC Priority Listing

The CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be completed and submitted prior to the CoC Program Competition submission deadline stated in the NOFO.

The CoC Priority Listing includes:

- Reallocation forms – must be completed if the CoC is reallocating eligible renewal projects to create new projects or if a project applicant will transition from an existing component to an eligible new component.
- Project Listings:

- New;
- Renewal;
- UFA Costs;
- CoC Planning;
- YHPD Renewal; and
- YHDP Replacement.
- Attachment Requirement

- HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

Things to Remember:

- New and Renewal Project Listings – all project applications must be reviewed, approved and ranked, or rejected based on the local CoC competition process.
- Project applications on the following Project Listings must be approved, they are not ranked per the FY 2023 CoC Program Competition NOFO:

- UFA Costs Project Listing;
- CoC planning Project Listing;
- YHPD Renewal Project Listing; and
- YHDP Replacement Project Listing.
- Collaborative Applicants are responsible for ensuring all project applications accurately appear on the Project Listings and there are no project applications missing from one or more Project Listings.
- For each project application rejected by the CoC the Collaborative Applicant must select the reason for the rejection from the dropdown provided.
- If the Collaborative Applicant needs to amend a project application for any reason, the Collaborative Applicant MUST ensure the amended project is returned to the applicable Project Listing AND ranked BEFORE submitting the CoC Priority Listing to HUD in e-snaps.

Additional training resources are available online on HUD's website.
https://www.hud.gov/program_offices/comm_planning/coc/competition

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2023 CoC Priority Listing Detailed Instructions and FY 2023 CoC Priority Listing Navigational Guide on HUD's website.
https://www.hud.gov/program_offices/comm_planning/coc/competition.

Collaborative Applicant Name: Community Shelter Board

2. Reallocation

Instructions:

For guidance on completing this form, please reference the FY 2023 CoC Priority Listing Detailed Instructions and FY 2023 CoC Priority Listing Navigational Guide on HUD's website. https://www.hud.gov/program_offices/comm_planning/coc/competition.

2-1 Is the CoC reallocating funds from one or more eligible renewal grant(s) that will expire in Calendar Year 2024 into one or more new projects? No

Continuum of Care (CoC) New Project Listing

Instructions:

Prior to starting the New Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all new project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of new projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the New Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make the necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps. https://www.hud.gov/program_offices/comm_planning/coc/competition.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which tell us which projects your CoC is prioritizing.

Project Name	Date Submitted	Comp Type	Applicant Name	Budget Amount	Grant Term	Rank	PH/Reallocation	PSH/RRH	Expansion
CHN 2023 Knoll Vi...	2023-08-31 17:22:...	PH	Community Shelter...	\$262,551	1 Year	34	PH Bonus	PSH	
YMCA 2023 McKinle...	2023-09-08 14:48:...	PH	Community Shelter...	\$262,450	1 Year	31	PH Bonus	PSH	
Homefull 2023 Lea...	2023-09-08 16:32:...	PH	Community Shelter...	\$307,315	1 Year	E32	PH Bonus	PSH	Yes
CHN 2023 Deer Hil...	2023-09-08 17:01:...	PH	Community Shelter...	\$494,366	2 Years	33	PH Bonus	PSH	

Applicant: Columbus/Franklin County Continuum of Care

OH-503

Project: OH-503 CoC Registration FY 2023

COC_REG_2023_204339

LSS CHOICE S 2023 ...	2023-09- 11 16:31:...	Joint TH & PH- RRH	Communi ty Shelter...	\$960,388	1 Year	D35	DV Bonus		
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Continuum of Care (CoC) Renewal Project Listing

Instructions:

Prior to starting the Renewal Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all renewal project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of renewal projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid re-housing projects listed on the Renewal Project Listing.	X
The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.	X
The Collaborative Applicant does not have any renewal permanent supportive housing or rapid re-housing renewal projects.	

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which tell us which projects your CoC is prioritizing.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Rank	PSH/RRH	Comp Type	Consolidation Type	Expansion Type
CHN 2023 Wilson A...	2023-08-22 08:48:...	1 Year	Communit y Shelter...	\$66,279	7	PSH	PH		
CHN 2023 Safe Haven	2023-08-22 09:08:...	1 Year	Communit y Shelter...	\$188,951	6	PSH	PH		
CHN 2023 Family H...	2023-08-22 10:47:...	1 Year	Communit y Shelter...	\$13,310	4	PSH	PH		
CHN 2023 Inglewoo ...	2023-08-22 09:38:...	1 Year	Communit y Shelter...	\$60,247	5	PSH	PH		
CHN 2023 Briggsda ...	2023-08-22 07:57:...	1 Year	Communit y Shelter...	\$185,605	15	PSH	PH		
CHN 2023 East Fif...	2023-08-22 08:06:...	1 Year	Communit y Shelter...	\$232,914	16	PSH	PH		
YWCA 2023 WINGS I	2023-08-24 12:27:...	1 Year	Communit y Shelter...	\$257,848	13	PSH	PH		
CHN 2023 Terrace ...	2023-08-25 06:33:...	1 Year	Communit y Shelter...	\$135,549	19	PSH	PH		
CHN 2023 Parsons ...	2023-08-25 06:34:...	1 Year	Communit y Shelter...	\$331,658	18	PSH	PH		
CSB 2023 HMIS	2023-08-25 09:27:...	1 Year	Communit y Shelter...	\$164,070	28		HMIS		
Equitas Health 20...	2023-08-28 12:46:...	1 Year	Communit y Shelter...	\$910,455	8	PSH	PH		
Maryhav en 2023 Su...	2023-08-28 13:34:...	1 Year	Communit y Shelter...	\$183,196	22	PSH	PH		

NCR 2023 Common S ...	2023-08-30 07:05:...	1 Year	Communi ty Shelter...	\$172,375	12	PSH	PH		
NCR 2023 Common S ...	2023-08-30 07:02:...	1 Year	Communi ty Shelter...	\$172,376	11	PSH	PH		
CHN 2023 Southpoi ...	2023-08-29 20:38:...	1 Year	Communi ty Shelter...	\$213,546	25	PSH	PH		
CHN 2023 Marsh Br...	2023-08-29 20:36:...	1 Year	Communi ty Shelter...	\$254,000	17	PSH	PH		
Huckleb erry House...	2023-08-30 15:30:...	1 Year	Communi ty Shelter...	\$232,135	21		TH		
YMCA 2023 DV RRH ...	2023-08-30 15:12:...	1 Year	Communi ty Shelter...	\$1,467,2 26	29	RRH	PH		
NCR 2023 Berwyn East	2023-08-30 16:06:...	1 Year	Communi ty Shelter...	\$338,633	1	PSH	PH		
YMCA 2023 Touchst.. .	2023-08-31 13:47:...	1 Year	Communi ty Shelter...	\$237,170	26	PSH	PH		
NCR 2023 Common S ...	2023-09-05 14:45:...	1 Year	Communi ty Shelter...	\$172,375	10	PSH	PH		
VOA 2023 Permane n...	2023-09-05 14:31:...	1 Year	Communi ty Shelter...	\$570,633	30	PSH	PH		
NCR 2023 Van Bure...	2023-09-05 14:48:...	1 Year	Communi ty Shelter...	\$64,200	23	PSH	PH		
HFF 2023 Job2Hou sing	2023-09-06 15:06:...	1 Year	Communi ty Shelter...	\$326,585	27	RRH	PH		
RI-NCH 2023 DV SS...	2023-09-06 15:10:...	1 Year	Communi ty Shelter...	\$195,057	2		SSO		
Homefull 2023 Lea...	2023-09-08 16:20:...	1 Year	Communi ty Shelter...	\$1,495,7 58	E24	PSH	PH		Expansion
Homefull 2023 TRA...	2023-09-08 16:37:...	1 Year	Communi ty Shelter...	\$871,351	3	PSH	PH		

Homefull 2023 SRA	2023-09-08 16:35:...	1 Year	Communi ty Shelter...	\$2,128,589	14	PSH	PH		
Homefull 2023 Isa...	2023-09-08 16:18:...	1 Year	Communi ty Shelter...	\$2,170,275	9	PSH	PH		
Homefull 2023 TRA	2023-09-08 16:40:...	1 Year	Communi ty Shelter...	\$1,943,372	20	PSH	PH		

Continuum of Care (CoC) UFA Costs Project Listing

Instructions:

Prior to starting the CoC UFA Costs Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide, available on HUD's website.

To upload the UFA Costs project application submitted to this Project Listing, click the "Update List" button. This process may take a few minutes while the project is located in the e-snaps system. You may update each of the Project Listings simultaneously. To review the UFA Costs Project Listing, click on the magnifying glass next to view the project details. To view the actual project application, click on the orange folder. If you identify errors in the project application, you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps..

Only one UFA Costs project application can be submitted and only by the Collaborative Applicant designated by HUD as UFA (UFA designation was determined during the FY 2023 CoC Registration process) and must match the Collaborative Applicant information on the CoC Applicant Profile.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which tell us which projects your CoC is prioritizing.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Accepted?
CSB 2023 UFA	2023-08-25 09:29:...	1 Year	Community Shelter...	\$568,578	Yes

Continuum of Care (CoC) Planning Project Listing

Instructions:

Prior to starting the CoC Planning Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload the CoC planning project application submitted to this Project Listing, click the "Update List" button. This process may take a few minutes while the project is located in the e-snaps system. You may update each of the Project Listings simultaneously. To review the CoC Planning Project Listing, click on the magnifying glass next to view the project details. To view the actual project application, click on the orange folder. If you identify errors in the project application, you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

Only one CoC planning project application can be submitted and only by the Collaborative Applicant designated by the CoC which must match the Collaborative Applicant information on the CoC Applicant Profile.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which tell us which projects your CoC is prioritizing.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Accepted?
CSB 2023 CoC Plan...	2023-08-25 09:24:...	1 Year	Community Shelter...	\$947,630	Yes

Continuum of Care (CoC) YHDP Renewal Project Listing

Instructions:

Prior to starting the YHDP Renewal Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all YHDP Renewal project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of YHDP Renewal projects submitted by project applicant(s) to your CoC in the e-snaps system.

You may update each of the Project Listings simultaneously. To review a project on the YHDP Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked (if applicable) or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps. .

As stated in the FY 2023 NOFO, CoCs must rank all YHDP Renewal projects that HUD initially funded in the FY 2016 (Round 1) YHDP Competition.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid rehousing projects listed on the YHDP Renewal Project Listing.

☒

The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the YHDP Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.

☒

The Collaborative Applicant does not have any renewal permanent supportive housing or rapid rehousing YHDP renewal projects.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which tell us which projects your CoC is prioritizing.

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Accepted ?	Rank	PSH/RRH	Consolidation Type
YHDP 2023 CARR Team	2023-09-05 14:23:...	Community Shelter...	\$224,000	SSO	1 Year	Yes	---		
YHDP NCR 2023 You...	2023-09-08 15:08:...	Community Shelter...	\$212,283	PH	1 Year	Yes	---	PSH	
YHDP CHN 2023 You...	2023-09-08 14:57:...	Community Shelter...	\$134,058	PH	1 Year	Yes	---	PSH	
YHDP HFF 2023 TAY...	2023-09-11 17:00:...	Community Shelter...	\$932,587	PH	1 Year	Yes	---	RRH	
YHDP HFF 2023 TAY...	2023-09-11 16:56:...	Community Shelter...	\$1,693,933	Joint TH & PH-RRH	1 Year	Yes	---		

Project Applicant Project Details

Project Name: YHDP 2023 CARR Team
Project Number: 205245
Date Submitted: 2023-09-05 14:23:42.754
Applicant Name Community Shelter Board
Budget Amount \$224,000
Project Type SSO
Program Type SSO
Component Type SSO
Grant Term 1 Year
Priority Type SSO

Instructions

This form provides the basic information for the YHDP Renewal project applications that were selected for review.

If "Yes" is selected, click "Save & Back to List." If "No" is selected, click "Save." A new drop-down menu will appear asking for the reason the CoC rejected the project application. Select the appropriate response from the list and then click "Save & Back to List."

If the YHDP Renewal project was initially funded by HUD in the FY 2016 (Round 1) YHDP competition, you must first answer "Yes" or "No" to the question "Do you want to rank this project?" Round 1 YHDP Renewal project applications must be ranked based on the CoC local competition process that includes the rating and ranking or rejection process.

If "Yes" is selected, click "Save" and a new field labeled "Rank" will appear where you must enter a unique rank number for the project application, then click "Save & Back to List." If "No" is selected, click "Save." A new drop-down menu will appear asking for the reason the CoC rejected the project application. Select the appropriate response from the list and then click "Save & Back to List."

Do you want to submit this project? Yes
 (Make selection and click the 'save' button below)

Project Applicant Project Details

Project Name: YHDP NCR 2023 Youth PSH
Project Number: 205567

Date Submitted: 2023-09-08 15:08:19.253
Applicant Name Community Shelter Board
Budget Amount \$212,283
Project Type PH
Program Type PH
Component Type PH
Grant Term 1 Year
Priority Type PH

Instructions

This form provides the basic information for the YHDP Renewal project applications that were selected for review.

If "Yes" is selected, click "Save & Back to List." If "No" is selected, click "Save." A new drop-down menu will appear asking for the reason the CoC rejected the project application. Select the appropriate response from the list and then click "Save & Back to List."

If the YHDP Renewal project was initially funded by HUD in the FY 2016 (Round 1) YHDP competition, you must first answer "Yes" or "No" to the question "Do you want to rank this project?" Round 1 YHDP Renewal project applications must be ranked based on the CoC local competition process that includes the rating and ranking or rejection process.

If "Yes" is selected, click "Save" and a new field labeled "Rank" will appear where you must enter a unique rank number for the project application, then click "Save & Back to List." If "No" is selected, click "Save." A new drop-down menu will appear asking for the reason the CoC rejected the project application. Select the appropriate response from the list and then click "Save & Back to List."

Do you want to submit this project? Yes
(Make selection and click the 'save' button below)

Project Applicant Project Details

Project Name: YHDP CHN 2023 Youth PSH
Project Number: 205566
Date Submitted: 2023-09-08 14:57:12.274
Applicant Name Community Shelter Board
Budget Amount \$134,058
Project Type PH
Program Type PH

Component Type PH**Grant Term** 1 Year**Priority Type** PH**Instructions**

This form provides the basic information for the YHDP Renewal project applications that were selected for review.

If "Yes" is selected, click "Save & Back to List." If "No" is selected, click "Save." A new drop-down menu will appear asking for the reason the CoC rejected the project application. Select the appropriate response from the list and then click "Save & Back to List."

If the YHDP Renewal project was initially funded by HUD in the FY 2016 (Round 1) YHDP competition, you must first answer "Yes" or "No" to the question "Do you want to rank this project?" Round 1 YHDP Renewal project applications must be ranked based on the CoC local competition process that includes the rating and ranking or rejection process.

If "Yes" is selected, click "Save" and a new field labeled "Rank" will appear where you must enter a unique rank number for the project application, then click "Save & Back to List." If "No" is selected, click "Save." A new drop-down menu will appear asking for the reason the CoC rejected the project application. Select the appropriate response from the list and then click "Save & Back to List."

Do you want to submit this project? Yes
(Make selection and click the 'save' button below)

Project Applicant Project Details**Project Name:** YHDP HFF 2023 TAY RRH**Project Number:** 205246**Date Submitted:** 2023-09-11 17:00:10.661**Applicant Name** Community Shelter Board**Budget Amount** \$932,587**Project Type** PH**Program Type** PH**Component Type** PH**Grant Term** 1 Year**Priority Type** PH**Instructions**

This form provides the basic information for the YHDP Renewal project applications that were selected for review.

If "Yes" is selected, click "Save & Back to List." If "No" is selected, click "Save." A new drop-down menu will appear asking for the reason the CoC rejected the project application. Select the appropriate response from the list and then click "Save & Back to List."

If the YHDP Renewal project was initially funded by HUD in the FY 2016 (Round 1) YHDP competition, you must first answer "Yes" or "No" to the question "Do you want to rank this project?" Round 1 YHDP Renewal project applications must be ranked based on the CoC local competition process that includes the rating and ranking or rejection process.

If "Yes" is selected, click "Save" and a new field labeled "Rank" will appear where you must enter a unique rank number for the project application, then click "Save & Back to List." If "No" is selected, click "Save." A new drop-down menu will appear asking for the reason the CoC rejected the project application. Select the appropriate response from the list and then click "Save & Back to List."

Do you want to submit this project? Yes
(Make selection and click the 'save' button below)

Project Applicant Project Details

Project Name: YHDP HFF 2023 TAY Transition to Home
Project Number: 205247
Date Submitted: 2023-09-11 16:56:28.032
Applicant Name Community Shelter Board
Budget Amount \$1,693,933
Project Type Joint TH & PH-RRH
Program Type Joint TH & PH-RRH
Component Type Joint TH & PH-RRH
Grant Term 1 Year
Priority Type Joint TH & PH-RRH

Instructions

This form provides the basic information for the YHDP Renewal project applications that were selected for review.

If "Yes" is selected, click "Save & Back to List." If "No" is selected, click "Save." A new drop-down menu will appear asking for the reason the CoC rejected the project application. Select the appropriate response from the list and then click "Save & Back to List."

If the YHDP Renewal project was initially funded by HUD in the FY 2016 (Round 1) YHDP competition, you must first answer "Yes" or "No" to the question "Do you want to rank this project?" Round 1 YHDP Renewal project applications must be ranked based on the CoC local competition process that includes the rating and ranking or rejection process.

If "Yes" is selected, click "Save" and a new field labeled "Rank" will appear where you must enter a unique rank number for the project application, then click "Save & Back to List." If "No" is selected, click "Save." A new drop-down menu will appear asking for the reason the CoC rejected the project application. Select the appropriate response from the list and then click "Save & Back to List."

Do you want to submit this project? Yes
(Make selection and click the 'save' button below)

Continuum of Care (CoC) YHDP Replacement Project Listing

Instructions:

Prior to starting the YHDP Replacement Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all YHDP Replacement project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of YHDP renewal projects submitted by project applicant(s) to your CoC in the e-snaps system.

You may update each of the Project Listings simultaneously. To review a project on the YHDP Replacement Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked (if applicable) or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

As stated in the FY 2023 NOFO, CoCs must rank all YHDP Replacement applications for projects replacing YHDP Renewal projects that HUD initially funded in the FY 2016 (Round 1) YHDP Competition.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which tell us which projects your CoC is prioritizing.

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Accepted?	Rank
This list contains no items							

Funding Summary

Instructions

This page provides the total budget summaries for each of the project listings after you approved and ranked the New, Renewal, Round 1 YHDP Renewal and Round 1 YHDP Replacement projects, or rejected project applications. You must review this page to ensure the totals for each of the categories is accurate.

The "Total CoC Request" indicates the total funding request amount your CoC's Collaborative Applicant will submit to HUD for funding consideration. As stated previously, only 1 UFA Cost project application (for UFA designated Collaborative Applicants only) and only 1 CoC Planning project application can be submitted and only the Collaborative Applicant designated by the CoC is eligible to request these funds.

Title	Total Amount
Renewal Amount	\$15,755,738
New Amount	\$2,287,070
CoC Planning Amount	\$947,630
UFA Costs Amount	\$568,578
YHDP Amount - Competitive	\$0
YHDP Amount - Non-Competitive	\$3,196,861
Rejected Amount	\$0
TOTAL CoC REQUEST	\$22,755,877

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan (HUD-2991)	Yes	FY23 HUD 2991	08/31/2023
Other	No		
Other	No		
Project Rating and Ranking Tool (optional)	No		

Attachment Details

Document Description: FY23 HUD 2991

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

**WARNING: The FY2021 CoC Consolidated Application requires 2 submissions.
Both this Project Priority Listing AND the CoC Consolidated Application MUST
be submitted.**

**WARNING: The FY2021 CoC Consolidated Application requires 2 submissions.
Both this Project Priority Listing AND the CoC Consolidated Application MUST
be submitted.**

Page	Last Updated
Before Starting	No Input Required
1A. Identification	07/27/2023
2. Reallocation	09/01/2023
5A. CoC New Project Listing	09/11/2023
5B. CoC Renewal Project Listing	09/11/2023
5C. UFA Costs Project Listing	09/01/2023
5D. CoC Planning Project Listing	09/01/2023
5E. YHDP Renewal Project Listing	09/11/2023
5F. YHDP Replacement Project Listing	No Input Required
Funding Summary	No Input Required

Attachments	08/31/2023
Submission Summary	No Input Required

OH-503 Columbus and Franklin County Continuum of Care

Form HUD-2991 Certification of Consistency with Consolidated Plan

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Community Shelter Board

Project Name: Multiple Projects (see attached documentation)

Location of the Project: Multiple locations throughout Columbus and Franklin County, Ohio (see attached documentation)

Name of
Certifying Jurisdiction: Franklin County, Ohio

Certifying Official
of the Jurisdiction Name: Kenneth N. Wilson

Title: County Administrator

Signature: 

Date: 8/30/2023

Approved to form 8/30/23

Res. No. 0683-23

Jeanine Hummer

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

Privacy Act Statement. This form does not collect SSN information. The Department of Housing and Urban Development (HUD) is authorized to collect all the information required by this form under 24 CFR part 91, 24 CFR Part 578, and is authorized by the McKinney-Vento Act, as amended by S. 896 The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 (42 U.S.C. 11371 et seq.). HUD considers the completion of this form, including the local jurisdiction(s) authorizing official's signature, as confirmation the project application(s) proposed activities submitted to HUD in the CoC Program Competition are consistent with the jurisdiction's Consolidated Plan and, if the project applicant is a state or unit of local government, that the jurisdiction is following its Consolidated Plan per the requirement of 24 CFR part 91. Failure to either submit one form per project or one form with a listing of project information for each field (i.e., name of applicant, name of project, location of project) will result in a technical deficiency notification that must be corrected within the number of days designated by HUD, and further failure to provide missing or incomplete information will result in project application removal from the review process and rejection in the competitive process.

OMB Approval No. 2506-0112 (Expires 12/31/2024)

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

Agency Name	Project Name	Address	City	Zip Code
Community Housing Network	Briggsdale Apartments	1670 Harrisburg Pike	Columbus	43223
Community Housing Network	East Fifth Avenue Apartments	3005 - 3025 East Fifth Avenue	Columbus	43219
Community Housing Network	Family Homes	Scattered site units throughout Columbus and Franklin County		
Community Housing Network	Inglewood Court	3720 Sullivant Avenue	Columbus	43228
Community Housing Network	Marsh Brook Place	5955 Chatterton Road	Columbus	43232
Community Housing Network	Parsons Avenue	354 E. Barthman Avenue	Columbus	43207
Community Housing Network	Safe Haven	749 East Broad Street	Columbus	43205
Community Housing Network	Southpoint Place Apartments	4111 Southpoint Blvd	Columbus	43207
Community Housing Network	Terrace Place Apartments	81 East 9th Avenue	Columbus	43201
Community Housing Network	Wilson Apartments	33 Wilson Avenue	Columbus	43205
Community Housing Network	Poplar Fen Place	5921 Chatterton Rd	Columbus	43232
Community Housing Network	Knoll View Place	913 E. Mound Street, Columbus	Columbus	43205
Community Housing Network	Deer Hill Place	3245 Morse Road, Columbus, Ohio 43224	Columbus	43224
Community Housing Network	Youth PSH	5955 Chatterton Road	Columbus	43232
Community Shelter Board	HMIS/CSP	n/a - continuum-wide project		
Community Shelter Board	CoC Planning	355 E. Campus View Blvd, Suite 250	Columbus	43235
Community Shelter Board	UFA	355 E. Campus View Blvd, Suite 250	Columbus	43235
Equitas Health	TRA	Scattered site units throughout Columbus and Franklin County		
Home for Families	TAY RRH	Scattered site units throughout Columbus and Franklin County		
Home for Families	TAY Transition to Home	1748 Kenmore Road and scattered site units	Columbus	43219
Home for Families	Job2Housing	Scattered site units throughout Columbus and Franklin County		
Homefull	TRA Mainstream/EHV	Scattered site units throughout Columbus and Franklin County		
Homefull	Leasing	Scattered site units throughout Columbus and Franklin County		
Homefull	Leasing Expansion	1289 Dublin Granville Rd	Columbus	43229
Homefull	SRA	Scattered site units throughout Columbus and Franklin County		
Homefull	TRA	Scattered site units throughout Columbus and Franklin County		
Homefull	Isaiah Project	Scattered site units throughout Columbus and Franklin County		
Huckleberry House	Transitional Living Program	1421 Hamlet Street	Columbus	43201
Huckleberry House	TAY Coordinated Access and Rapid Resolution Team	1748 Kenmore Road	Columbus	43219
Lutheran Social Services	CHOICES Joint TH-RRH Program	Scattered site units throughout Columbus and Franklin County		
Maryhaven	Supportive Housing Project	5500 Millerfield Drive	Columbus	43232
National Church Residences	Commons at Buckingham	328 Buckingham Street	Columbus	43215
National Church Residences	Commons at Grant	398 S. Grant Avenue	Columbus	43215
National Church Residences	Commons at Third	1280 Norton Avenue	Columbus	43212
National Church Residences	Berwyn Place East	3341 East Livingston Avenue	Columbus	43229
National Church Residences	Van Buren Village PSH	590 Van Buren Drive	Columbus	43223
National Church Residences	Youth PSH	5500 Millerfield Drive	Columbus	43232
Nationwide Childrens Hospital Foundation	DV Coordinated Entry	700 Childrens Dr	Columbus	43205
Volunteers of America	Permanent Supportive Housing for Families	Scattered site units throughout Columbus and Franklin County		
YMCA	Touchstone Field	2565 Lockbourne Road	Columbus	43207
YMCA	DV RRH	Scattered site units throughout Columbus and Franklin County		
YMCA	Beacon Communities 80 S 6th St	80 S 6th St	Columbus	43215
YWCA	WINGS	65 South 4th Street	Columbus	43215

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Community Shelter Board

Project Name: Multiple Projects (see attached documentation)

Location of the Project: Multiple locations throughout Columbus and Franklin County, Ohio (see attached documentation)

Name of
Certifying Jurisdiction: City of Columbus, Ohio

Certifying Official
of the Jurisdiction Name: Kathy A. Owens

Title: Director of Finance and Management

Signature: Kathy A. Owens

Date: 8/28/23

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

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HUD considers the completion of this form, including the local jurisdiction(s) authorizing official's signature, as confirmation the project application(s) proposed activities submitted to HUD in the CoC Program Competition are consistent with the jurisdiction's Consolidated Plan and, if the project applicant is a state or unit of local government, that the jurisdiction is following its Consolidated Plan per the requirement of 24 CFR part 91. Failure to either submit one form per project or one form with a listing of project information for each field (i.e., name of applicant, name of project, location of project) will result in a technical deficiency notification that must be corrected within the number of days designated by HUD, and further failure to provide missing or incomplete information will result in project application removal from the review process and rejection in the competitive process.

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

Agency Name	Project Name	Address	City	Zip Code
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Community Shelter Board	HMS/CSP	n/a - continuum-wide project		
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Equitas Health	TRA	Scattered site units throughout Columbus and Franklin County		
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YWCA	WINGS	65 South 4th Street	Columbus	43215

**Columbus and Franklin County, Ohio
Continuum of Care**

**Resolution to Approve the 2023 Project Prioritization Policy and Procedure and
2023 Continuum of Care Application and Project Ranking**

WHEREAS, Community Shelter Board (CSB), on behalf of the Columbus and Franklin County Continuum of Care (CoC), has prepared the CoC Consolidated Application for the 2023 U.S. Department of Housing and Urban Development (HUD) CoC competition, per HUD guidelines and instructions;

WHEREAS, CSB has coordinated the preparation and submission of 42 Project Applications from non-profit provider agencies (29 renewal applications, 5 YHDP renewal applications, 5 new applications, 1 HMIS application, 1 CoC Planning application, and 1 Unified Funding Agency application);

WHEREAS, CSB developed the ranking of the Project Applications in accordance with the local 2023 CoC Scoring, Ranking, and Prioritization Procedures document recommended for approval by the CoC Board to the CoC;

WHEREAS, HUD provided the opportunity for the CoC to apply for new permanent supportive housing (PSH) projects, rapid re-housing (RRH) projects, and projects that serve survivors of domestic violence (DV), in addition to the renewal funding availability;

WHEREAS, the CoC Board received and ranked four applications for new PSH projects, and accepted all four of the new PSH projects for the CoC Application, and approval by the CoC;

WHEREAS, the CoC Board received one application for a joint TH-RRH project for the DV population, and ranked and accepted the project for the CoC Application, and approval by the CoC;

WHEREAS, the CoC Board recommends to the CoC the approval of the CoC Scoring, Ranking, and Prioritization Procedure, the Consolidated Application and proposed project ranking for renewal and new projects and recommends inclusion of 42 projects in the Consolidated Application;

THEREFORE, be it resolved that the CoC approves the CoC Scoring, Ranking, and Prioritization Procedure, the Consolidated Application and proposed project ranking for renewal and new projects and inclusion of 42 projects in the Consolidated Application.

Approved by voice vote.

Witnessed by:

Michael Wilkos, Chair

September 15, 2023
Date

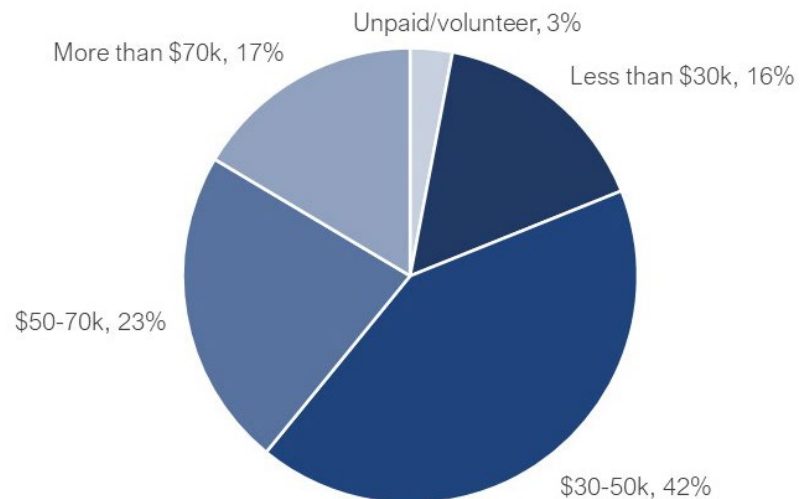
A Brief Description of Workers in the U.S. Homeless Services Sector

The National Homeless Services Workforce Study is a multi-phase initiative to understand the characteristics, experiences, and needs of the U.S. homeless services sector. Phase 1 was a survey that recruited participants through Continuums of Care across all states and territories. Recruitment targeted adults working in agencies or programs that primarily provide services to people experiencing homelessness or people recently housed after a period of homelessness. This included paid, volunteer, and full and part-time positions, as well as workers across all agency types (e.g., non-profit, public, faith based). Data was collected from November 1st, 2022, to March 31st, 2023. A total of 1,060 people responded to the survey. This report provides a brief overview of worker characteristics. We hope this and future dissemination activities inspire organizations, policy makers, and government officials to improve workforce supports, benefits, and compensation.

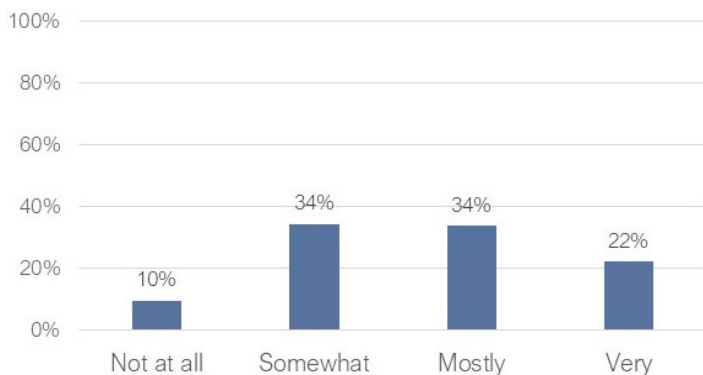
Details about the 1,060 participants:

- Average age of 42 years
- Gender identity
 - 69% female
 - 28% male
 - 3% trans, non-binary, gender-nonconforming
- Race and ethnicity
 - 62% Non-Hispanic White
 - 17% Black/African American
 - 10% Hispanic
 - 3% Asian, American Indian/Alaska Native, or Native Hawaiian/Pacific Islander
 - 8% Multiracial
- Primarily frontline staff (49%) and program-level management (19%)
- Most (80%) had at least a college degree
- Most (74%) were working in a non-profit
- Most (94%) were employed full time
- Over half (57%) were working in an urban setting

Annual Income from Homeless Services Job

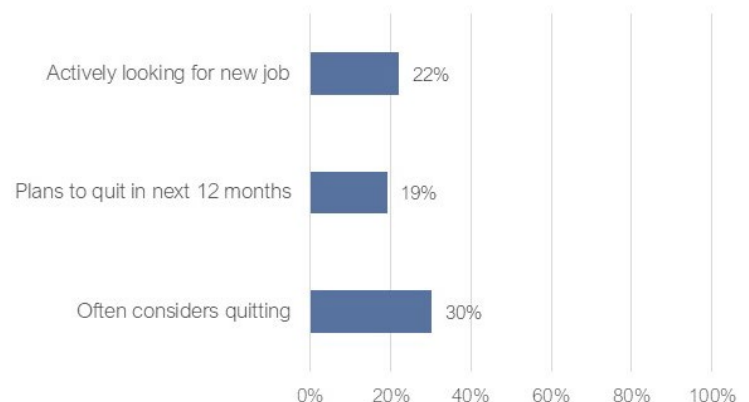


Satisfaction with Work-based Benefits



Turnover Risk Indicators

Almost 40% said They are Doing at Least One of These



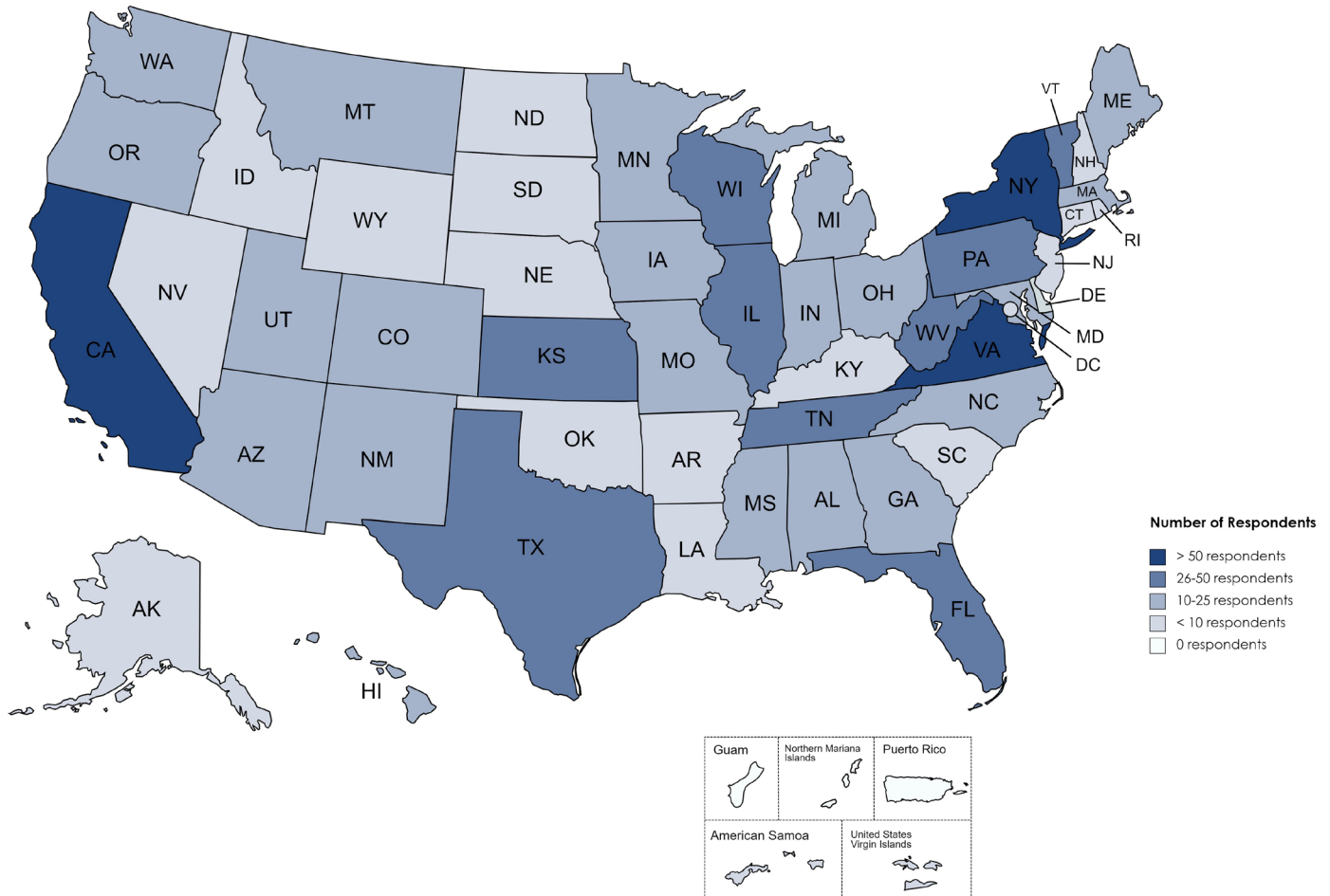
Roughly 40% said these were major sources of stress:

- Staff shortages and staff turnover
- Fighting against the system
- Lack of resources to do their job
- Low pay or unfair compensation
- Feeling unable to help or do enough
- Burnout or compassion fatigue

For more information about the National Homeless Services Workforce Study, visit our website:

www.NHSWS.com

Where Respondents Were Located



Meet the Research Team

Amanda Aykanian, PhD, is an assistant professor at the University at Buffalo School of Social Work. Dr. Aykanian has more than 15 years of program evaluation and research experience. As a program evaluator, she worked with non-profit and government agencies in Massachusetts and New York to assess the impact of street outreach, permanent supportive housing, and homelessness prevention programs. She is currently the national co-lead for social work's Grand Challenge to End Homelessness. Her current research primarily centers on homeless services implementation, homeless service system and workforce issues, and how social work programs teach students about homelessness.

Karin Eyrich-Garg, PhD, is an associate professor in the School of Social Work at Temple University. She has led and participated in grant- and contract-funded data collection projects, presented research and evaluation findings at national scientific meetings, published peer-reviewed manuscripts and book chapters, and served on National Institute of Health (NIH) and Veterans Administration (VA) committees that review the scientific merit of grant proposals. Her work primarily focuses on people who are experiencing homelessness by using a mixture of quantitative and qualitative methods to investigate issues of technology use; service need, engagement, and use; substance use; mental health problems; outcomes; workforce development; and policy.

Jennifer Frank, PhD, is an associate professor in the Millersville University School of Social Work. Her extensive practice experience has been primarily in homelessness and poverty related services, including direct service, program development, and program supervision. Her research and teaching interests center around poverty, homelessness, human connection, policy, and advocacy. She is also a research fellow with the Millersville University Center for Public Scholarship and Social Change.

SYSTEM & PROGRAM INDICATOR REPORT

FY2023
4/1/23 – 6/30/23



Until everyone has a place to call home

Our Mission

To lead a coordinated, community effort to make sure everyone has a place to call home.

We thank our Partner Agencies for their assistance in collecting data and ensuring data accuracy for our community reports.

Way to go!

These programs met all outcomes for numbers served, length of service, and successful outcomes.



family diversion



homelessness prevention for transition age youth



emergency shelter



homeless hotline for families

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Overview

System and Program Indicator Reports are published quarterly and furnished to CSB trustees and the Continuum of Care. All reports are posted to www.csb.org. Results are also shared with CSB funders consistent with funding contracts and agreements.

The System and Program Indicator Report monitors the current CSB funded programs and some non-CSB funded programs that participate in our data system. The report evaluates each system and program based on a system or program goal, actual performance data, variances, and outcome achievements. Outcome achievement is defined as 90% or better of 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. Systems or programs which meet less than one-half of outcome goals are considered to be a “program of concern”. The following key is used to express outcome achievement status for each indicator:

Outcome Achievement:	Key
Outcome achieved	√
Outcome not achieved	≠
Outcome goal not applicable	N/A

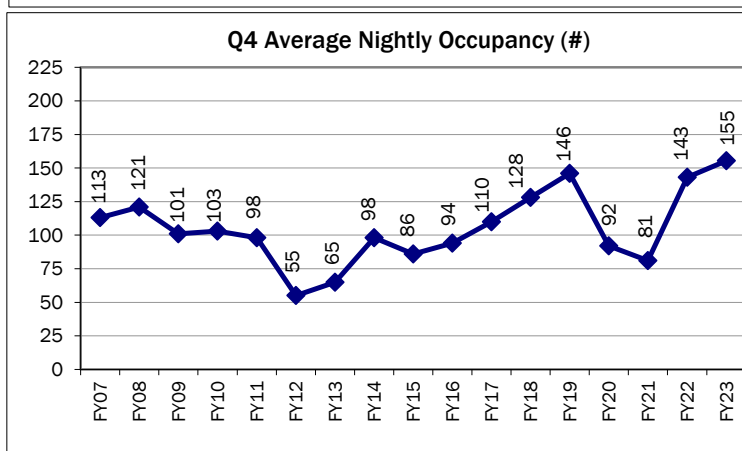
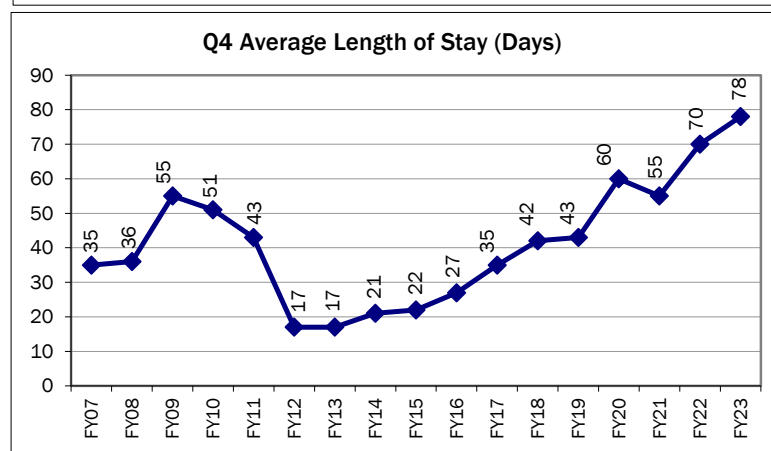
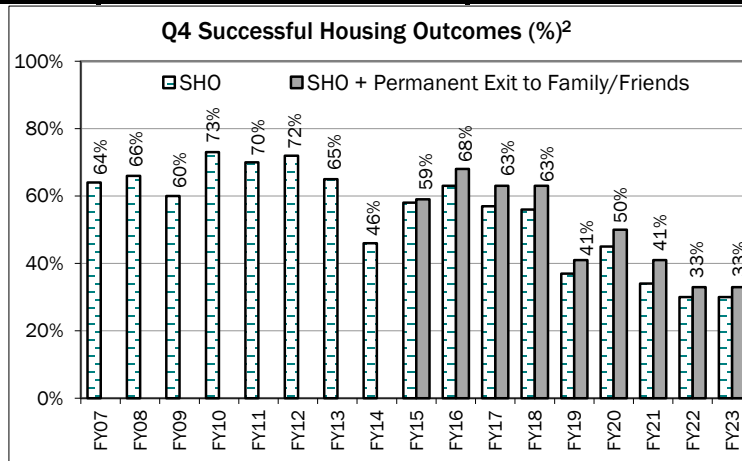
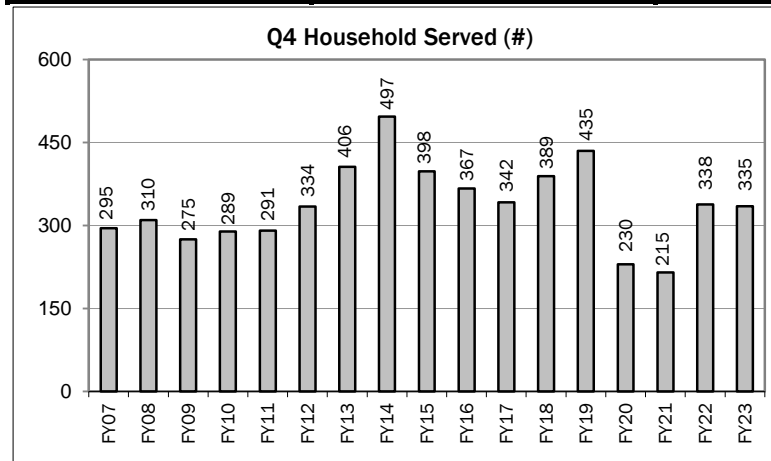
System-level race and gender-based outcome disparities are included in the report. A disparity is defined as a demographic achieving a successful exit that is at least five percentage points less than the respective percentage of the demographic population served in each system.

All data generated from the Homeless Management Information System (HMIS) and used in the report met CSB quality assurance standards, which require current and accurate data and a 95% completion rate for all required HMIS data variables.

Data included in the report is analyzed per the Evaluation Definitions and Methodology document that can be found at www.csb.org under the Publications section.

System and Program Indicator Report

FY23 EMERGENCY SHELTER	Households Served			Nightly Occupancy		Average Length of Stay (Days)			Successful Housing Outcomes ²					
4/1/2023 - 6/30/2023	Goal	Actual	Outcome Achievement	Capacity ¹	Actual	Goal	Actual	Outcome Achievement	Goal (#)	Actual	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Family System	300	335	√	114	155	54	78	≠	93	55	≠	50%	33%	≠



DEMOGRAPHICS	Family
Households Served	335
Percent Newly homeless	76%
Clients Served	1,214
Average Age (HoH)	34
Gender - Female (HoH)	93%
Gender - Male (HoH)	7%
Veterans (U.S. Military) served	5
Veterans % of all adults	1%
Average Monthly Household Income	\$699
Percent Working at Entry	29%
Race - Black (HoH) ³	68%
Race - White (HoH) ³	23%
Race - Multi-Racial (HoH) ³	7%
Race - Other (HoH) ³	1%
Non-Hispanic (HoH)	94%
Hispanic (HoH)	6%
Adults Served	456
Children Served	758
Mean Family Size	3.6
Average Number of Children	2.3
Adults 18-24 years (HoH)	12%
Children 0 - 2 years	20%
Children 3 - 5 years	21%
Children 6 - 12 years	41%
Children 13 - 17 years	18%
Pregnant Women Served	26
Self-Reported Disability (HoH)	42%
Franklin County Residents	83%

The system served the same number of families when compared to the same reporting period of FY22 but the average nightly occupancy was at the highest level recorded historically. The success rate at exit from shelters remained flat at 33%, the lowest rate recorded historically. The average length of shelter stay increased by 8 days, to another record high. Lack of available safe, decent, affordable housing is making it very difficult to successfully move families out of shelter quickly. The employment rate at entry decreased from the FY22 annual rate of 31% to 29% currently and the average income decreased to \$699 (FY22 \$764), further affecting the ability to find housing. 7% of families had more than one shelter stay during the timeframe. An additional 65 families stayed in the Overnight shelter program only, an unusually high number, waiting for a face-to-face shelter eligibility assessment. These families were subsequently either helped to find an alternative to shelter or self-resolved.

¹ Overflow capacity is not included. The family emergency shelter system will expand capacity as necessary to meet the shelter needs of homeless families.

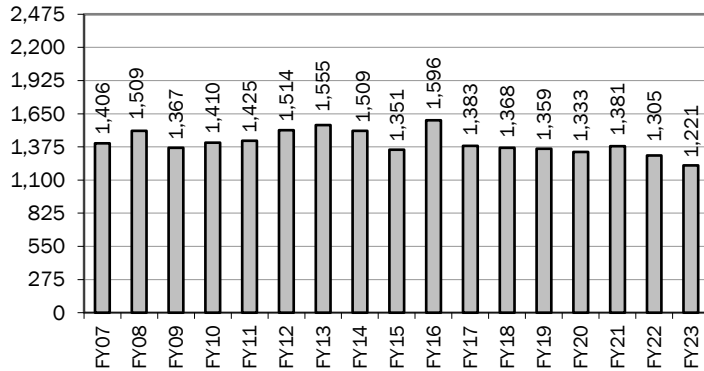
² Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.

³ Due to rounding percentages do not add up to 100%.

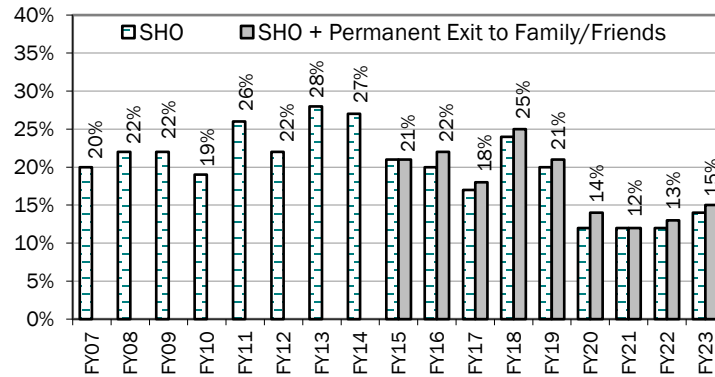
System and Program Indicator Report

FY23 EMERGENCY SHELTER	Households Served			Nightly Occupancy		Average Length of Stay (Days)			Successful Housing Outcomes ¹					
4/1/2023 - 6/30/2023	Goal	Actual	Outcome Achievement	Capacity ²	Actual	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Men's System	1,200	1,221	√	427	439	45	62	≠	171	124	≠	25%	15%	≠

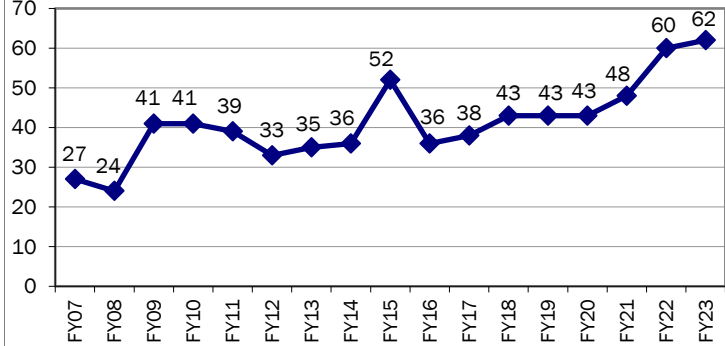
Q4 Households Served (#)



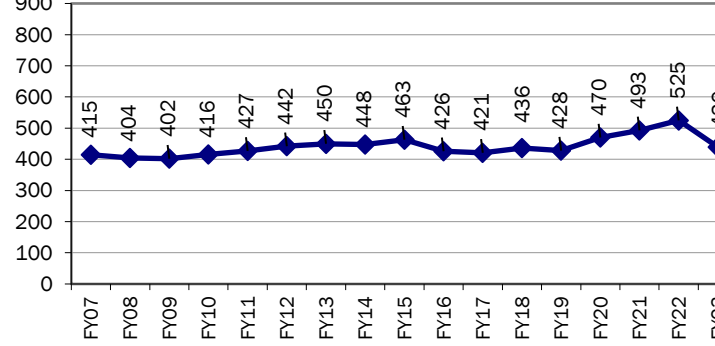
Q4 Successful Housing Outcomes (%)¹



Q4 Average Length of Stay (Days)



Q4 Average Nightly Occupancy (#)



DEMOGRAPHICS	Men
Households Served	1,221
Percent Newly homeless	48%
Average Age	46
Men as a percent of total single adults served	70%
Veterans (U.S. Military) served	105
Veterans % of all adults	9%
Average Monthly Household Income	\$615
Percent Working at Entry	19%
Average Daily Waitlist Number	88
Race - Black ³	64%
Race - White ³	29%
Race - Multi-Racial ³	5%
Race - Other ³	3%
Non-Hispanic	95%
Hispanic	5%
Adults 18 - 24 years ³	4%
Adults 25 - 34 years ³	22%
Adults 35 - 44 years ³	22%
Adults 45 - 55 years ³	23%
Adults 56 - 61 years ³	15%
Adults 62+ years ³	16%
Self-Reported Disability (HoH)	67%
Franklin County Residents	84%

The number of single men sheltered decreased 6% when compared to the same reporting period of the prior fiscal year as sheltering capacity decreased for the first time since the onset of COVID-19, creating a shelter waitlist that averaged 88 people daily. The success rate increased by 2 percentage points to 15%. Lack of available safe, decent, affordable housing is making it very difficult to successfully move individuals out of shelter quickly. The average length of time homeless increased slightly. The employment rate at entry decreased 5 percentage points to 19% when compared to the FY22 annual rate of 24%, and the average income decreased to \$615 (FY22 \$644). 386 men (32%) had multiple stays in shelter during the timeframe. The rate of adults 62+ increased by 9 percentage points to 16% since the same reporting period of the prior fiscal year (7%).

¹ Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.

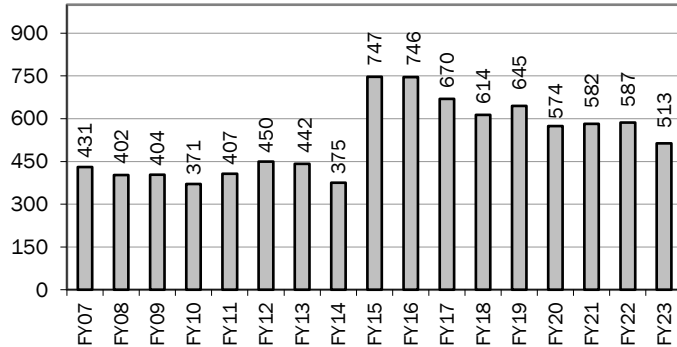
² Overflow capacity is not included. Additional overflow beds opened 10/15/22 and closed 4/15/23.

³ Due to rounding percentages do not add up to 100%.

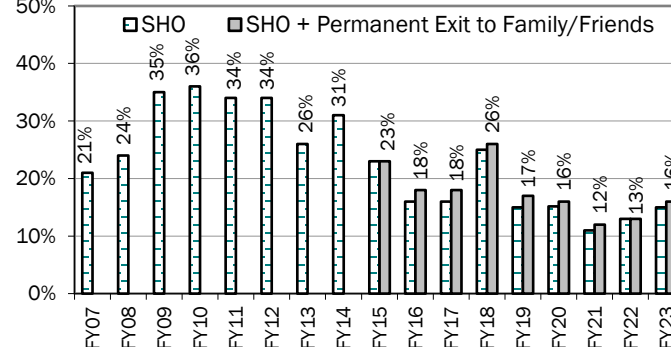
System and Program Indicator Report

FY23 EMERGENCY SHELTER	Households Served			Nightly Occupancy		Average Length of Stay (Days)			Successful Housing Outcomes ¹					
4/1/2023 - 6/30/2023	Goal	Actual	Outcome Achievement	Capacity ²	Actual	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Women's System	575	513	≠	208	206	45	63	≠	92	51	≠	25%	16%	≠

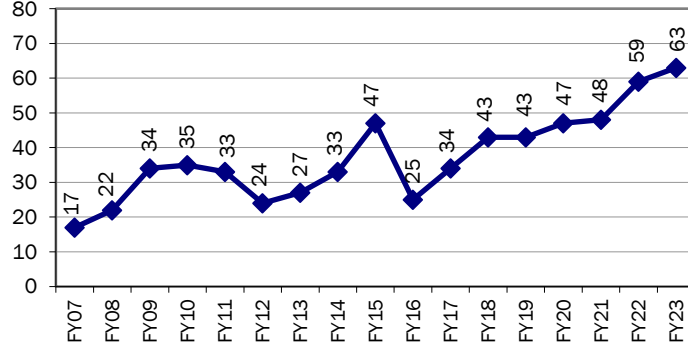
Q4 Households Served (#)



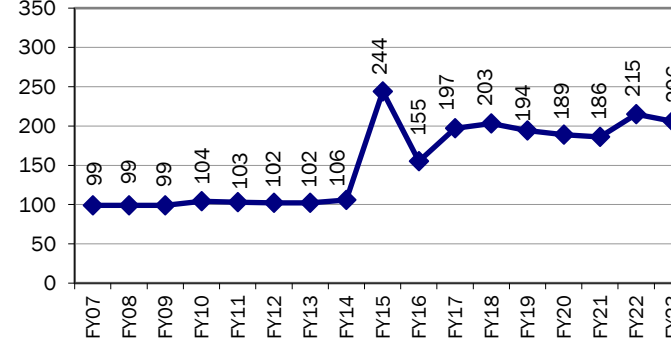
Q4 Successful Housing Outcomes (%)¹



Q4 Average Length of Stay (Days)



Q4 Average Nightly Occupancy (#)



DEMOGRAPHICS	Women
Households Served	513
Percent Newly homeless	56%
Average Age	45
Women as a percent of total single adults served	30%
Veterans (U.S. Military) served	8
Veterans % of all adults	2%
Average Monthly Household Income	\$661
Percent Working at Entry	20%
Average Daily Waitlist Number	51
Race - Black	60%
Race - White	32%
Race - Multi-Racial	7%
Race - Other	1%
Non-Hispanic	98%
Hispanic	2%
Adults 18 - 24 years	6%
Adults 25 - 34 years	21%
Adults 35 - 44 years	22%
Adults 45 - 55 years	27%
Adults 56 - 61 years	12%
Adults 62+ years	12%
Pregnant Women Served	35
Self-Reported Disability (HoH)	74%
Franklin County Residents	81%

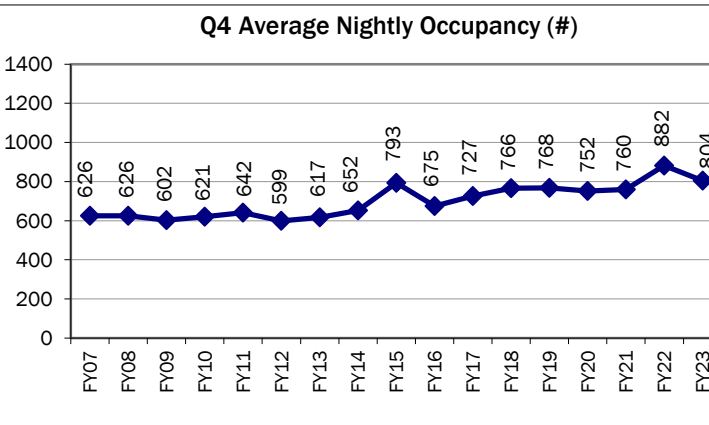
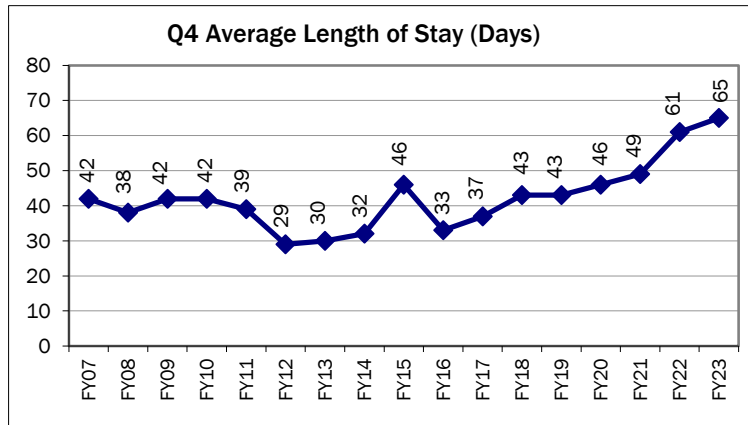
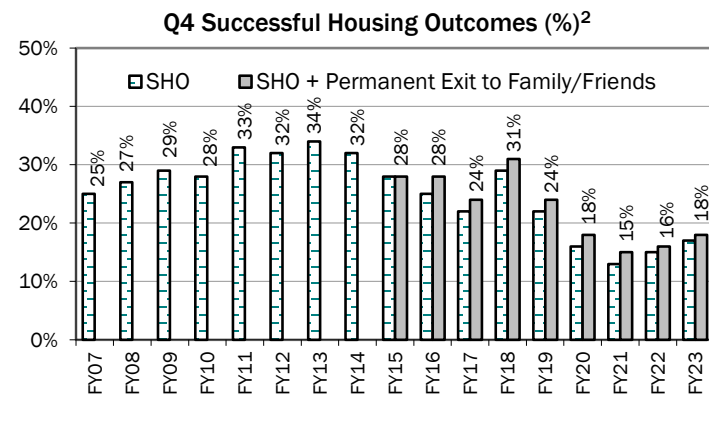
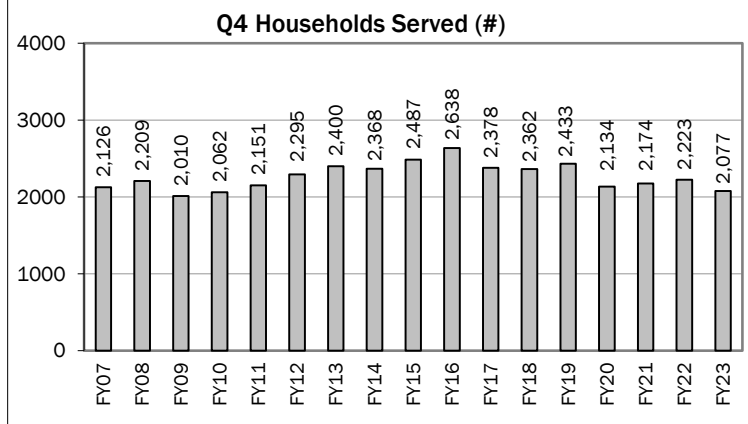
The number of single women sheltered decreased 13% when compared to the same reporting period of the prior fiscal year. The success rate at exit increased by 3 percentage points to 16%. Lack of available safe, decent, affordable housing is making it very difficult to successfully move individuals out of shelter quickly. The average length of time homeless increased by 4 days to 63 days. The employment rate at entry decreased by 2 percentage points to 20% when compared to the FY22 annual rate of 22%, and the average income remained flat (FY22 \$661). 124 women (24%) had multiple stays in shelter during the timeframe. The shelter waitlist averaged 51 people daily. The rate of adults 62+ and women self-declaring as disabled increased by 5 percentage points since last year (7%, 69%).

¹ Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.

² Overflow capacity is not included. Additional overflow beds opened 10/15/22 and closed 4/15/23.

System and Program Indicator Report

FY23 EMERGENCY SHELTER	Households Served			Nightly Occupancy		Average Length of Stay (Days)			Successful Housing Outcomes ²					
4/1/2023 - 6/30/2023	Goal	Actual	Outcome Achievement	Capacity	Actual	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Emergency Shelter System ¹	2,150	2,077	√	749	804	54	65	≠	394	231	≠	30%	18%	≠



DEMOGRAPHICS	Family & Adults
Households Served	2,077
Percent Newly homeless	54%
Clients Served	2,954
Adults Served	2,196
Children Served	758
Average Age (HoH)	44
Gender - Male (HoH)	59%
Gender - Female (HoH)	40%
Gender - Other (HoH)	1%
Veterans (U.S. Military) served	118
Veterans % of all adults	5%
Average Monthly Household Income	\$640
Percent Working at Entry	21%
Average Daily Waitlist Number	139
Race - Black (HoH)	63%
Race - White (HoH)	29%
Race - Multi-racial (HoH)	6%
Race - Other (HoH)	2%
Non-Hispanic (HoH)	96%
Hispanic (HoH)	4%
Adults 18-24 years (HoH)	6%
Pregnant Women Served	62
Self-Reported Long Term Disability (HoH)	65%
Franklin County Residents	83%

The number served by the system decreased 7% when compared to the same reporting period of the prior fiscal year as sheltering capacity for single adults decreased for the first time since the onset of COVID-19. The successful housing outcome rate increased 2 percentage points to 18%. Lack of available safe, decent, affordable housing is making it very difficult to successfully move individuals and families out of shelter quickly. The average length of time homeless increased by 4 days to a record high of 65 days. The average income decreased to \$640 when compared to the FY22 annual rate of \$670. The system served 20 more (20% increase) veterans and 12 more (24% increase) pregnant women when compared to the same reporting period of FY22 (98, 50).

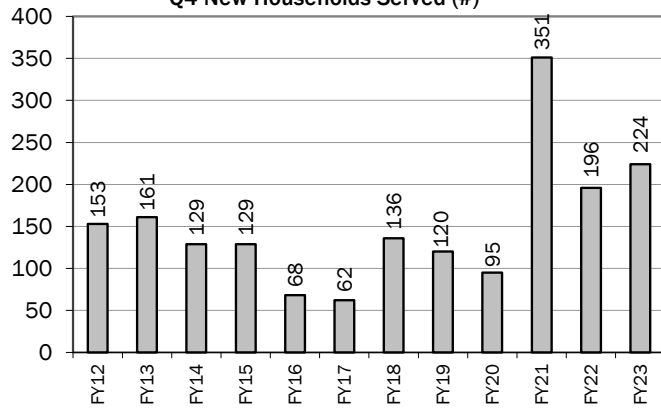
¹ Includes single adult and family shelters. Overflow capacity closed during the reporting period. Excludes Huckleberry House Emergency Shelter and YMCA Family Overnight; total distinct households served including the youth shelter and overnight program is 2,231.

² Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.

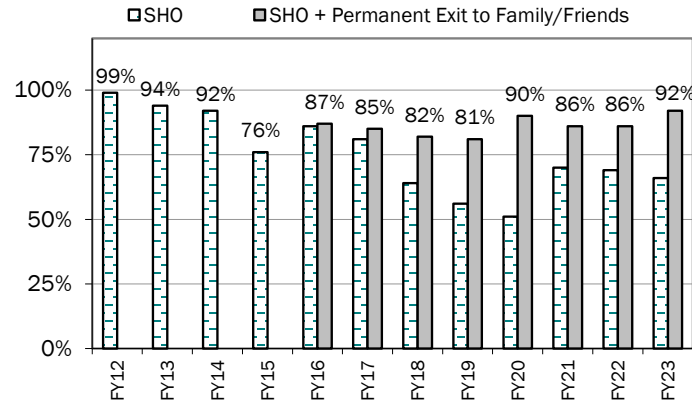
System and Program Indicator Report

FY23 Prevention	New Households Served			Households Served			Average Length of Participation (Days)			Successful Housing Outcomes ³					
4/1/2023 - 6/30/2023	Goal	Actual	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Prevention System ¹	230	224	√	525	535	√	150	171	≠	180	205	√	80%	92%	√

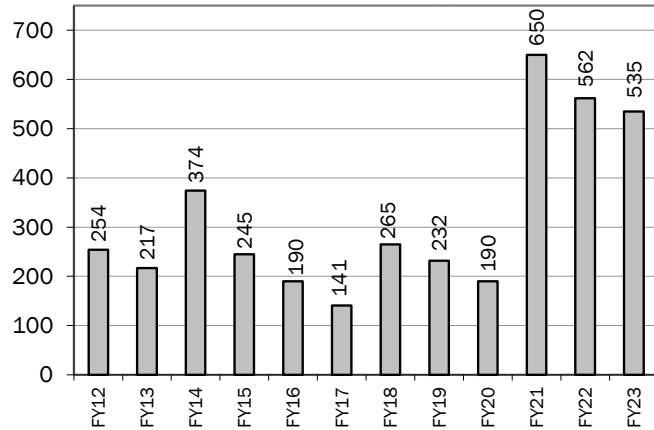
Q4 New Households Served (#)



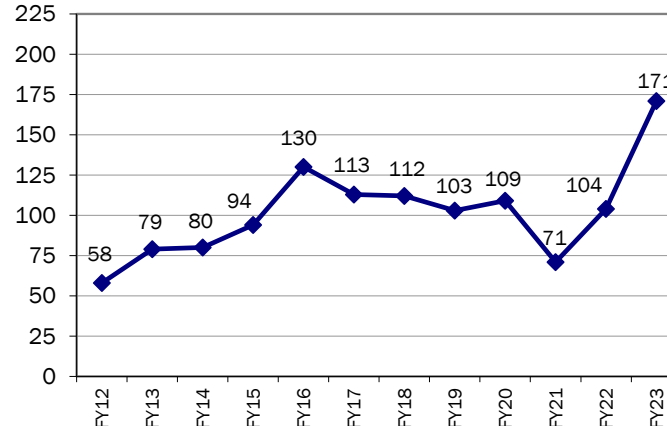
Q4 Successful Housing Outcomes (%)³



Q4 Households Served (#)



Q4 Average Length of Participation (Days)



DEMOGRAPHICS	Family & Adults
Households Served	535
Clients Served	1,579
Average Age (HoH)	33
Gender - Female (HoH)	84%
Gender - Male (HoH)	16%
Gender - Other (HoH)	0%
Veterans (U.S. Military) served	56
Veterans % of all adults	9%
Average Monthly Household Income	\$890
Percent Working at Entry	39%
Race - Black (HoH)	75%
Race - White (HoH)	18%
Race - Multi-racial (HoH)	6%
Race - Other (HoH)	1%
Non-Hispanic (HoH)	96%
Hispanic (HoH)	4%
Adults Served	618
Children Served	961
Mean Family Size ²	3.5
Average Number of Children ²	2.3
Adults 18 - 24 years (HoH)	26%
Adults 25 - 34 years (HoH)	41%
Adults 35 - 44 years (HoH)	19%
Adults 45 - 55 years (HoH)	8%
Adults 56 - 61 years (HoH)	2%
Adults 62+ years (HoH)	4%
Self-reported Disability (HoH)	26%
Pregnant Women Served	69

The number of households served decreased 5% when compared to the same reporting period of the prior fiscal year. The successful housing outcome rate increased by 6 percentage points to 92%. At exit, 66% of households are stable in their own housing and 26% decided to permanently move in with family/friends. The average length of participation in the programs increased significantly by 67 days, on average. The percent working at entry increased compared to the FY22 annual rate of 37% to 39% currently. The number of veterans served increased by 13 (30% increase) and the number of pregnant women served increased by 13 (23% increase) when compared to the same reporting period in FY22 (43, 56).

¹ System includes Gladden Community House prevention programs, Home for Families prevention programs, and VOAIO SSVF program for veterans.

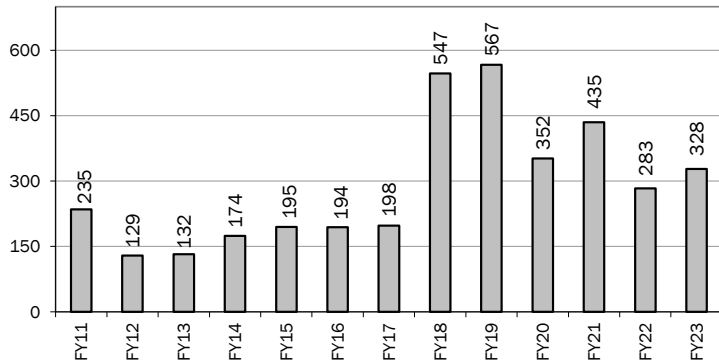
² Data refers to the families served.

³ Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.

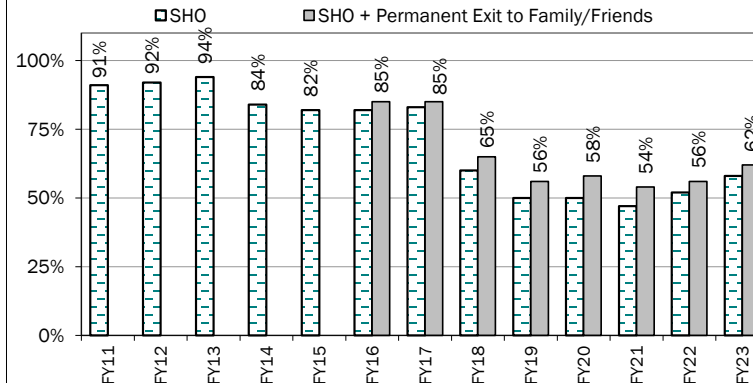
System and Program Indicator Report

FY23 Rapid Re-housing	New Households Served			Households Served			Average Length of Participation (Days)			Successful Housing Outcomes ²					
4/1/2023 - 6/30/2023	Goal	Actual	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Rapid Re-housing System ¹	500	328	≠	1,300	1,090	≠	150	201	≠	275	201	≠	55%	62%	√
Single Adults ³	-	225	-	-	710	-	-	193	-	-	120	-	-	56%	-
Families ³	-	103	-	-	380	-	-	217	-	-	81	-	-	74%	-

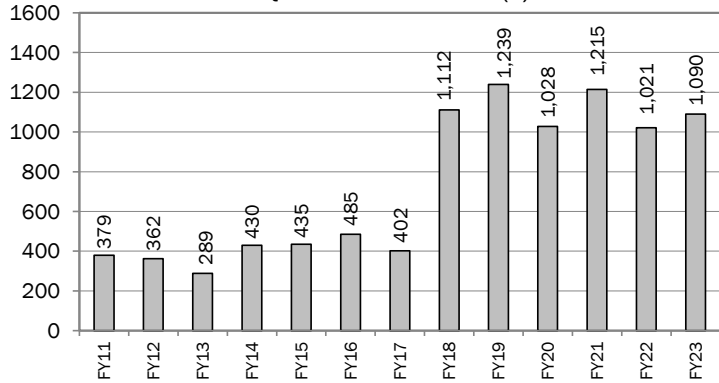
Q4 New Households Served (#)



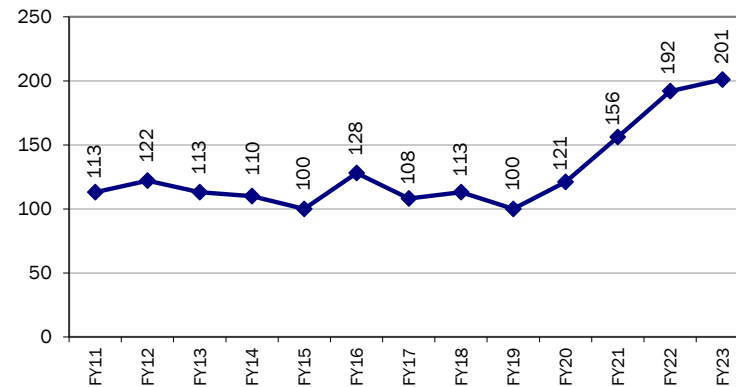
Q4 Successful Housing Outcomes (%)²



Q4 Households Served (#)



Q4 Average Length of Participation (Days)



DEMOGRAPHICS	Family	Single Adults ³
Households Served	380	710
Clients Served	1,299	714
Average Age (HoH)	32	47
Gender - Male (HoH)	7%	71%
Gender - Female (HoH)	93%	28%
Gender - Other (HoH)	0%	1%
Veterans (U.S. Military) served	6	222
Veterans % of all adults	2%	31%
Average Monthly Household Income	\$681	\$708
Percent Working at Entry	33%	23%
Adults Served	467	-
Children Served	832	-
Race - Black (HoH) ⁴	74%	59%
Race - White (HoH) ⁴	17%	33%
Race - Multi-racial (HoH) ⁴	8%	6%
Race - Other (HoH) ⁴	1%	1%
Non-Hispanic (HoH)	95%	96%
Hispanic (HoH)	5%	4%
Mean Family Size	3.4	-
Average Number of Children	2.2	-
Adults 18-24 years (HoH) ⁴	30%	14%
Adults 25 - 34 years (HoH) ⁴	36%	13%
Adults 35 - 44 years (HoH) ⁴	26%	17%
Adults 45 - 55 years (HoH) ⁴	6%	22%
Adults 56 - 61 years (HoH) ⁴	1%	15%
Adults 62+ years (HoH) ⁴	0%	20%
Self-reported Disability (HoH)	45%	77%
Pregnant Women Served	25	11

The number served increased 7% when compared to the same reporting period of the previous year. Rapid Re-housing providers are struggling to keep programs staffed, which directly impacts the number served and they are reporting continued difficulty securing low-income, affordable housing. The success rate at exit increased 6 percentage points to 62 percent and the length of participation increased by 9 days. The rate of self reported disability decreased by 3 percentage points for both population types compared to last year's rates (FY22 Families: 48%, Single Adults: 80%).

¹ System includes HFF Rapid Re-housing programs, VOAOL Rapid Re-housing, TSA Rapid Re-housing and J2H, YMCA Rapid Re-housing programs, Homefull RRR programs, LSS SSVF, and VOAOL SSVF programs.

² Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.

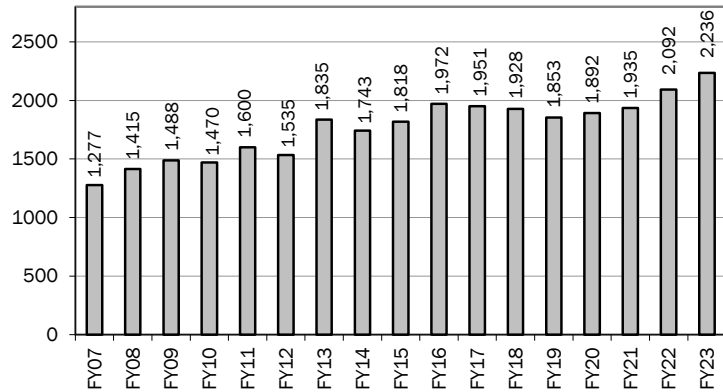
³ No outcome goals are set by subpopulation. Households with only adults are included in the single adult population.

⁴ Due to rounding percentages do not add up to 100%.

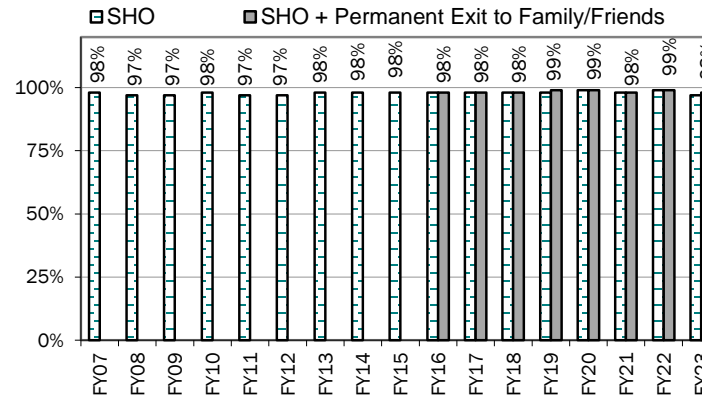
System and Program Indicator Report

FY23 Permanent Supportive Housing (PSH)	Households Served			Occupancy Rate			Housing Stability (Months)			Successful Housing Outcomes ¹					
4/1/2023 - 6/30/2023	Goal	Actual	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Total PSH System	2,566	2,236	≠	95%	86%	≠	24	43	√	2,309	2,176	√	90%	98%	√

Q4 Households Served (#)

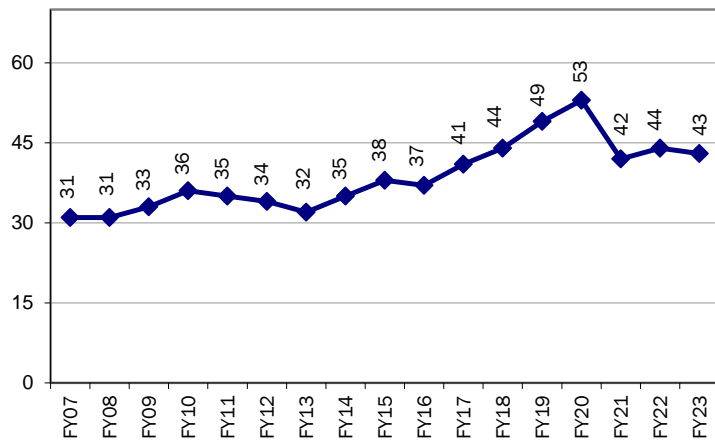


Q4 Successful Housing Outcomes (%)¹

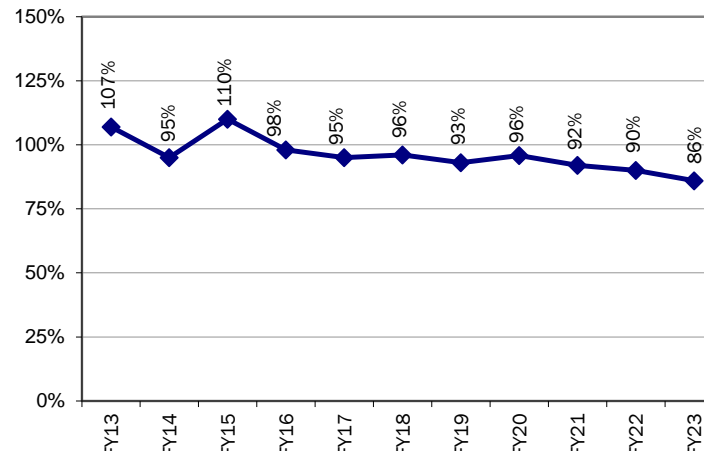


The system had a 7% increase in numbers served. The occupancy rate decreased to 86% due to 1. difficulty in finding scattered sites affordable housing to rent in the community; 2. overstated capacity for a program in comparison to the available funding, an issue that will be corrected next fiscal year; and 3. low occupancy in a couple of site based facilities due to property management issues and issues related to slow unit turnover and mismatch of unit availability and demand of units by youth households. The current capacity of Permanent Supportive Housing units in HMIS and reported on here is 2,456. VA VASH voucher capacity of 377 is not included.

Q4 Housing Stability (Months)



Q4 Occupancy Rate (%)

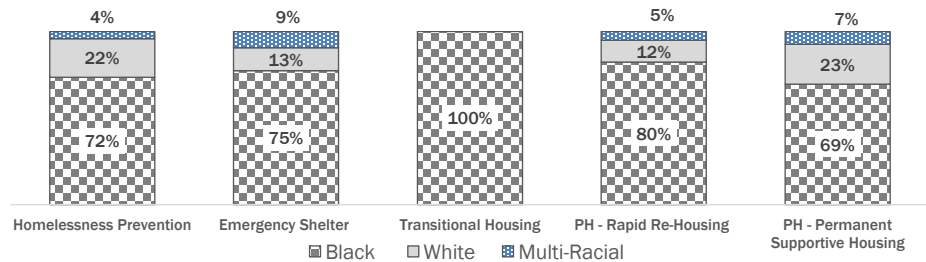


¹ Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.

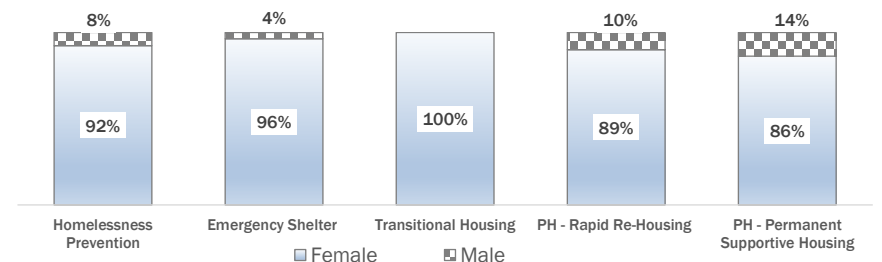
System and Program Indicator Report

Special Populations Served: 4/1/2023 - 6/30/2023		Families Served by Program Type					
Families	Totals	Homelessness Prevention	Street Outreach	Emergency Shelter	Transitional Housing	PH - Rapid Re-Housing ³	PH - Permanent Supportive Housing
Youth Households (18 - 24)	229	78	0	27	19	100	39
Pregnant Youth Households (18 - 24)	34	21	0	3	4	9	2
Households (25+)	922	284	2	282	0	255	271
Pregnant Households (25+)	70	39	0	23	0	16	2
Total Households Served (#)	1,245	422	2	335	23	380	316
Total Households Entered	371	196	0	182	6	103	11
Total Households Exited	375	182	0	169	4	109	10
Successful Housing Outcomes (#) ¹	N/A	170	N/A	55	2	81	313
Successful Housing Outcomes (%) ¹	N/A	93%	N/A	33%	50%	74%	99%
Average Length of Shelter Stay (Days) ²	N/A	142	N/A	78	10	217	40
Average Length of Participation (Days) ²							
Housing Stability (Months) ²							
	DEMOGRAPHICS						
	Race - Black (HoH) ⁴	76%	0%	68%	78%	74%	69%
	Race - White (HoH) ⁴	17%	100%	23%	17%	17%	22%
	Race - Multi-racial (HoH) ⁴	6%	0%	7%	4%	8%	7%
	Race - Other (HoH) ⁴	1%	0%	1%	0%	1%	1%
	Gender - Female (HoH)	93%	50%	93%	96%	93%	86%
	Gender - Male (HoH)	7%	50%	7%	4%	7%	14%
	Gender - Other (HoH)	0%	0%	0%	0%	0%	0%
	Non-Hispanic (HoH)	96%	100%	94%	87%	95%	97%
	Hispanic (HoH)	4%	0%	6%	13%	5%	3%
	Self Reported Disability	20%	100%	42%	57%	45%	93%
	Franklin County Residents	91%	50%	83%	78%	84%	94%

Breakdown of Successful Housing Outcomes by Program Type and Race



Breakdown of Successful Outcomes by Program Type and Gender



The system-wide number of families served increased by 2% (FY22 1,216) when compared to the same reporting period of the prior fiscal year. While the rate of families receiving homelessness prevention services decreased by 14% (FY22 492), the rate of families in emergency shelter stayed about the same (FY22 338) during the same timeframe. The rate of families in permanent supportive housing increased by 20% (FY22 263). The rate of Black/African American families and women-headed families served system-wide is substantially disproportionate compared to the Franklin County population and to the Franklin County population in poverty. From an outcomes perspective, the homelessness system has no substantial impact on these families.

¹ Successful outcomes measure for Street Outreach. No families were served by Street Outreach for the reporting period.

² Average Length of Shelter Stay (Days) measured for Emergency Shelter. Average Length of Participation (Days) measured for Street Outreach, PH - Rapid Re-Housing and Homelessness Prevention. Housing Stability (Months) measured for PH - Permanent Supportive Housing and Transitional Housing.

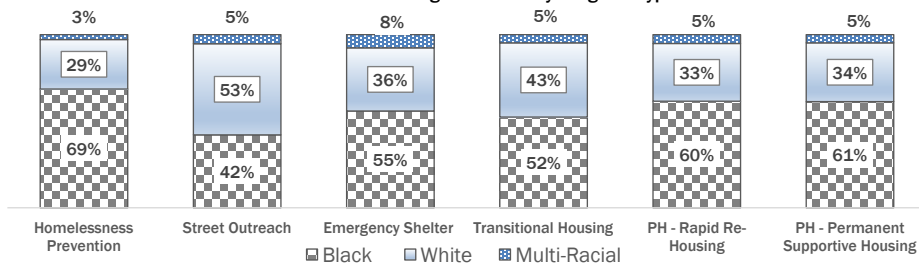
³ PH - Rapid Re-Housing households with adults only were excluded from totals.

⁴ Due to rounding, percentages do not add up to 100%.

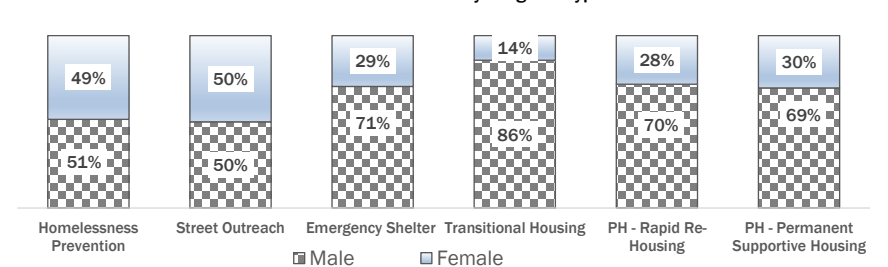
System and Program Indicator Report

Special Populations Served: 4/1/2023 - 6/30/2023		Single Adults Served by Program Type					
Single Adults	Totals	Homelessness Prevention	Street Outreach	Emergency Shelter	Transitional Housing	PH - Rapid Re-Housing	PH - Permanent Supportive Housing
Unaccompanied Youth under 18	4	0	0	0	4	0	0
Unaccompanied Youth (18 -24)	279	28	12	66	45	90	78
Pregnant Unaccompanied Youth (18 -24)	21	7	0	15	1	3	1
Households without Children (18 - 24)	6	1	0	0	0	1	4
Pregnant Households without Children (18 - 24)	3	1	0	0	0	2	0
Single Adult (25+)	4,219	72	258	1,643	52	605	2,133
Pregnant Single Adult (25+)	24	1	3	20	0	6	0
Households without Children (25+)	90	3	1	1	0	3	83
Total Households Served (#)	4,634	113	274	1,741	101	710	2,299
Total Households Entered	1,152	28	118	1,020	40	225	82
Total Households Exited	1,169	41	88	1,125	35	216	93
Successful Housing Outcomes (#) ¹	N/A	35	38	173	21	120	2,231
Successful Housing Outcomes (%) ¹	N/A	85%	43%	15%	60%	56%	98%
Average Length of Shelter Stay (Days) ²	N/A	298	95	61	5	193	47
Average Length of Participation (Days) ²							
Housing Stability (Months) ²							
	DEMOGRAPHICS						
	Race - Black (HoH) ³	71%	33%	62%	62%	59%	61%
	Race - White (HoH) ³	24%	59%	30%	28%	33%	34%
	Race - Multi-racial (HoH) ³	4%	5%	5%	7%	6%	5%
	Race - Other (HoH) ³	1%	2%	2%	3%	1%	1%
	Gender - Male (HoH) ³	52%	62%	69%	68%	71%	69%
	Gender - Female (HoH) ³	48%	38%	30%	28%	28%	30%
	Gender - Other (HoH) ³	0%	0%	1%	4%	1%	1%
	Non-Hispanic (HoH)	96%	97%	96%	94%	96%	98%
	Hispanic (HoH)	4%	3%	4%	6%	4%	2%
	Self Reported Disability	54%	100%	69%	74%	77%	97%
	Franklin County Residents	92%	85%	83%	85%	84%	95%

Breakdown of Successful Housing Outcomes by Program Type and Race



Breakdown of Successful Outcomes by Program Type and Gender



This is the first 4th quarter system level dashboard for single adults and no comparable information is available. The rate of Black/African American single adults served system-wide is substantially disproportionate compared to the Franklin County population and to the Franklin County population in poverty. From an outcomes perspective, the homelessness system has no substantial impact on these single adults.

¹ Successful outcomes measure for Street Outreach.

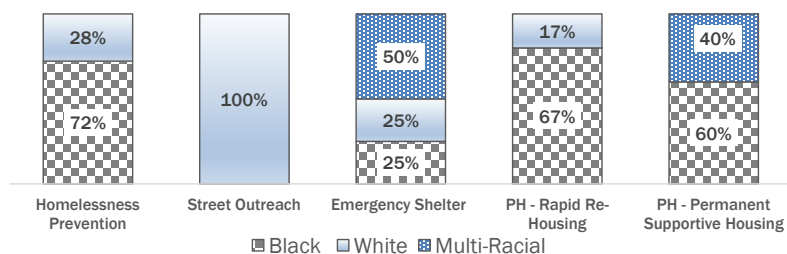
² Average Length of Shelter Stay (Days) measured for Emergency Shelter. Average Length of Participation (Days) measured for Street Outreach, PH - Rapid Re-Housing and Homelessness Prevention. Housing Stability (Months) measured for PH - Permanent Supportive Housing and Transitional Housing.

³ Due to rounding, percentages do not add up to 100%.

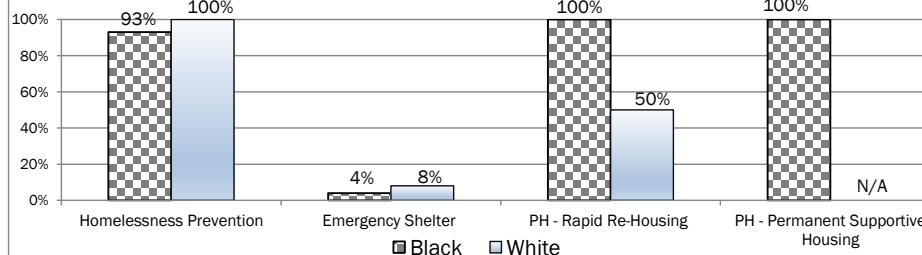
System and Program Indicator Report

Special Populations Served: 4/1/2023 - 6/30/2023		Pregnant Women Served by Program Type					
Pregnant Women	Totals	Homelessness Prevention	Street Outreach	Emergency Shelter	Transitional Housing	PH - Rapid Re-Housing	PH - Permanent Supportive Housing
Unaccompanied Youth (under 18)	1	0	0	1	0	0	0
Unaccompanied Youth (18 -24)	24	8	0	15	1	5	1
Single Adults (25+)	24	1	3	20	0	6	0
Parenting Youth Households (18-24)	34	21	0	3	4	9	2
Parenting Households (25+)	70	39	0	23	0	16	2
Total Households Served (#)	150	69	3	62	5	36	5
Total Households Entered	77	32	2	46	3	19	0
Total Households Exited	54	19	1	42	0	7	0
Successful Housing Outcomes (#) ¹	N/A	18	1	4	N/A ³	6	5
Successful Housing Outcomes (%) ¹	N/A	95%	100%	10%	N/A ³	86%	100%
Average Length of Shelter Stay (Days) ²							
Average Length of Participation (Days) ²	N/A	62	181	33	3	224	52
Housing Stability (Months) ²							
DEMOGRAPHICS							
	Race - Black (HoH) ⁴	77%	33%	58%	60%	58%	60%
	Race - White (HoH) ⁴	17%	67%	26%	20%	22%	0%
	Race - Multi-Racial (HoH) ⁴	4%	0%	15%	20%	14%	40%
	Race - Other (HoH) ⁴	1%	0%	2%	0%	6%	0%
	Non-Hispanic (HoH)	90%	100%	94%	100%	94%	100%
	Hispanic (HoH)	10%	0%	6%	0%	6%	0%
	Self Reported Disability	13%	100%	42%	60%	56%	100%
	Franklin County Residents	94%	100%	87%	80%	86%	100%

Breakdown of Successful Housing Outcomes by Program Type and Race¹



Successful Housing Outcomes Rate by Program Type and Race¹



The system-wide number of pregnant women served remained flat when compared to the same reporting period of the prior fiscal year. Pregnant women served by homelessness prevention increased by 23% and rapid re-housing decreased by 18% (FY22 56, 44). The number served by emergency shelters increased by 24% (FY22 50) when compared to prior fiscal year. The rate of Black/African American women served system-wide is substantially disproportionate compared to the Franklin County population and to the Franklin County population in poverty. From an outcomes perspective, the homelessness system has no substantial impact on these pregnant women.

¹ Successful outcomes measure for Street Outreach.

² Average Length of Shelter Stay (Days) measured for Emergency Shelter. Average Length of Participation (Days) measured for Street Outreach, PH - Rapid Re-Housing and Homelessness Prevention. Housing Stability (Months) measured for PH - Permanent Supportive Housing and Transitional Housing.

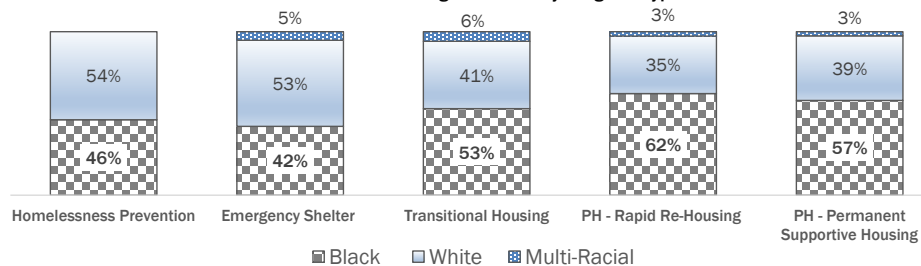
³ Program didn't have any household exits; unable to calculate measure.

⁴ Due to rounding, percentages do not add up to 100%.

System and Program Indicator Report

Special Populations Served: 4/1/2023 - 6/30/2023		Veterans Served by Program Type					
Veterans (All Adults)	Totals	Homelessness Prevention	Street Outreach	Emergency Shelter	Transitional Housing	PH - Rapid Re-Housing	PH - Permanent Supportive Housing ³
Unaccompanied Youth (18 -24)	6	0	0	0	0	4	2
Single Adults (25+)	834	51	8	113	51	218	537
Parenting Youth Households 18-24	1	0	0	0	0	0	1
Parenting Households (25+)	49	5	0	5	0	6	33
Total Households Served (#)	885	56	8	118	51	228	573
Total Households Entered	101	14	4	69	27	45	2
Total Households Exited	125	17	4	71	29	56	21
Successful Housing Outcomes (#) ¹	N/A	13	0	19	17	37	559
Successful Housing Outcomes (%) ¹	N/A	76%	0%	27%	59%	66%	98%
Average Length of Shelter Stay (Days) ²	N/A	474	67	32	2	323	60
Average Length of Participation (Days) ²							
Housing Stability (Months) ²							
	DEMOGRAPHICS						
	Race - Black (HoH) ⁴	70%	0%	61%	47%	57%	57%
	Race - White (HoH) ⁴	25%	88%	34%	45%	39%	39%
	Race - Multi-Racial (HoH) ⁴	4%	13%	4%	6%	4%	3%
	Race - Other (HoH) ⁴	2%	0%	1%	2%	0%	1%
	Gender - Male (HoH) ⁴	80%	88%	91%	100%	95%	91%
	Gender - Female (HoH) ⁴	20%	13%	9%	0%	5%	8%
	Gender - Other (HoH) ⁴	0%	0%	1%	0%	0%	1%
	Non-Hispanic (HoH)	96%	100%	97%	96%	96%	98%
	Hispanic (HoH)	4%	0%	3%	4%	4%	2%
	Self Reported Disability	55%	100%	73%	61%	56%	86%
	Franklin County Residents	98%	88%	77%	82%	77%	93%

Breakdown of Successful Housing Outcomes by Program Type and Race



Breakdown of Successful Housing Outcomes by Program Type and Gender



The system-wide number of veterans served increased 9% when compared to the same period of the prior fiscal year (FY22 814). The number of veterans receiving homelessness prevention services increased by 30% (FY22 43), the number of veterans in emergency shelter increased by 20% (FY22 98) and the number in transitional housing increased by 21% (FY22 42). The number of veterans served in rapid re-housing increased by 37% (FY22 166) and the number in permanent supportive housing decreased by 4% (FY22 597) when compared to the prior fiscal year. The rate of Black/African American veterans served system-wide is substantially disproportionate compared to the Franklin County veteran population. From an outcomes perspective, the homelessness system has no substantial impact on these veterans.

¹ Successful outcomes measure for Street Outreach.

² Average Length of Shelter Stay (Days) measured for Emergency Shelter. Average Length of Participation (Days) measured for Street Outreach, PH - Rapid Re-Housing and Homelessness Prevention. Housing Stability (Months) measured for PH - Permanent Supportive Housing and Transitional Housing.

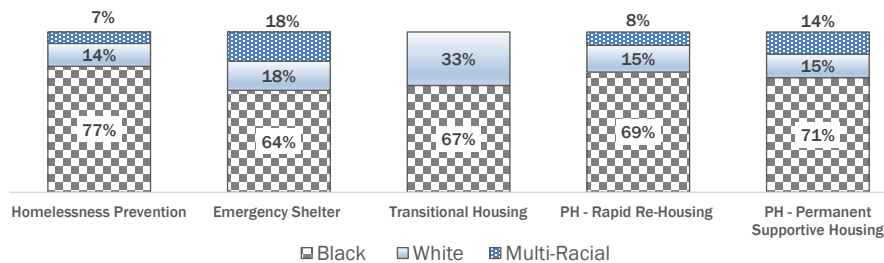
³ VASH vouchers are included under the PH - Permanent Supportive Housing category.

⁴ Due to rounding, percentages do not add up to 100%.

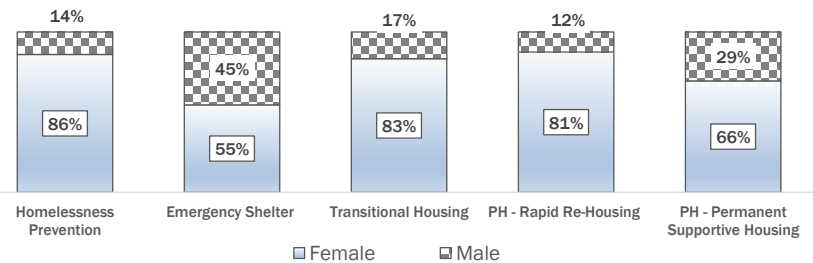
System and Program Indicator Report

Special Populations Served: 4/1/2023 - 6/30/2023		Transition Age Youth Served by Program Type					
Transition Age Youth ¹	Totals	Homelessness Prevention	Street Outreach	Emergency Shelter	Transitional Housing	PH - Rapid Re-Housing	PH - Permanent Supportive Housing ³
Unaccompanied Youth under 18	92	0	0	89	4	0	0
Unaccompanied Youth 18-24	306	36	12	81	46	96	83
Parenting Youth Households Under 18	0	0	0	0	0	0	0
Parenting Youth Households 18-24	262	99	0	30	23	109	41
Total Pregnant Women Served	57	29	0	28	5	14	3
Total Households Served	658	135	12	200	72	205	124
Total Households Entered	226	47	10	148	19	47	7
Total Households Exited	252	60	4	167	11	41	3
Successful Housing Outcomes (#) ²	N/A	57	1	11	6	26	124
Successful Housing Outcomes (%) ²	N/A	95%	25%	13%	55%	63%	100%
Average Length of Shelter Stay (Days) ³	N/A	130	107	45	9	231	26
Average Length of Participation (Days) ³							
Housing Stability (Months) ³							
	DEMOGRAPHICS						
	Race - Black (HoH) ⁴	77%	75%	64%	79%	72%	70%
	Race - White (HoH) ⁴	13%	8%	21%	11%	15%	14%
	Race - Multi-Racial (HoH) ⁴	9%	8%	13%	7%	12%	14%
	Race - Other (HoH) ⁴	1%	8%	3%	3%	1%	2%
	Gender - Female (HoH) ⁴	90%	50%	56%	69%	75%	66%
	Gender - Male (HoH) ⁴	10%	50%	40%	25%	22%	29%
	Gender - Other (HoH) ⁴	0%	0%	5%	6%	3%	6%
	Non-Hispanic (HoH)	93%	92%	93%	90%	92%	95%
	Hispanic (HoH)	7%	8%	7%	10%	8%	5%
	Self Reported Disability	25%	92%	36%	76%	52%	96%
	Franklin County Residents	96%	83%	85%	85%	88%	97%

Breakdown of Successful Housing Outcomes by Program Type and Race²



Breakdown of Successful Housing Outcomes by Program Type and Gender²



The number of transition age youth served increased 7% (FY22 615) when compared to the same reporting period of the prior fiscal year. The number of youth served by homelessness prevention remained flat (FY22 133), the number of youth served in PSH increased by 8% (FY22 115), and youth in rapid re-housing increased by 19% (FY22 172). The number of youth served in emergency shelters decreased by 9% (FY22 219) and transitional housing increased by 13% (FY22 64). The rate of Black/African American youth and female youth served system-wide is substantially disproportionate compared to the Franklin County population and to the Franklin County population in poverty. From an outcomes perspective, the homelessness system has no substantial impact on these youth. In addition, the high rate of homeless Black/African American underage and young adult girls shows a system failure that must be addressed with urgency.

¹ Includes unaccompanied and pregnant/parenting youth where all adult members are between 18 - 24 years of age and unaccompanied/parenting youth under 18.

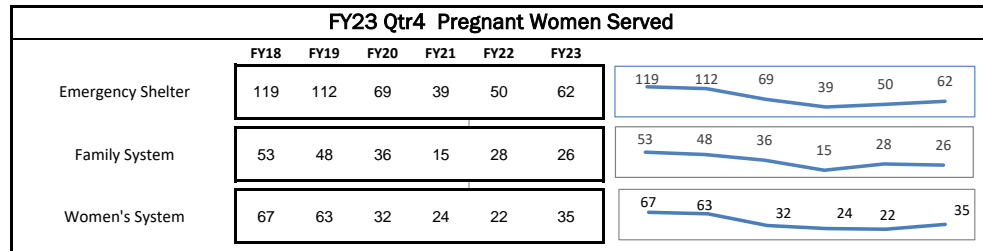
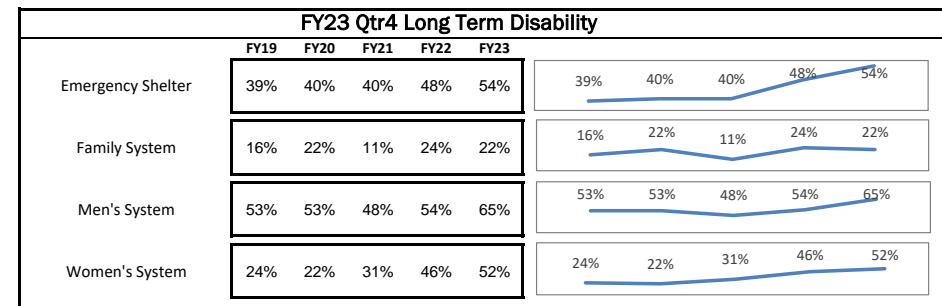
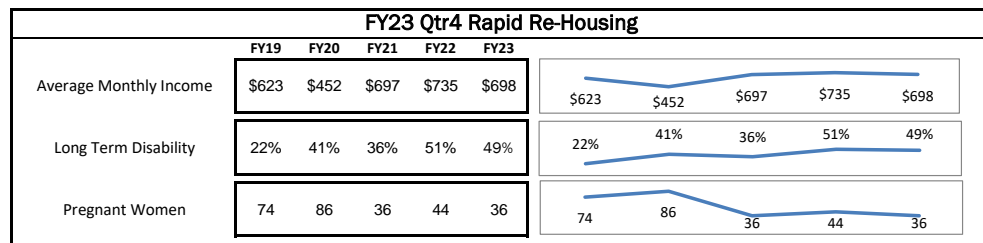
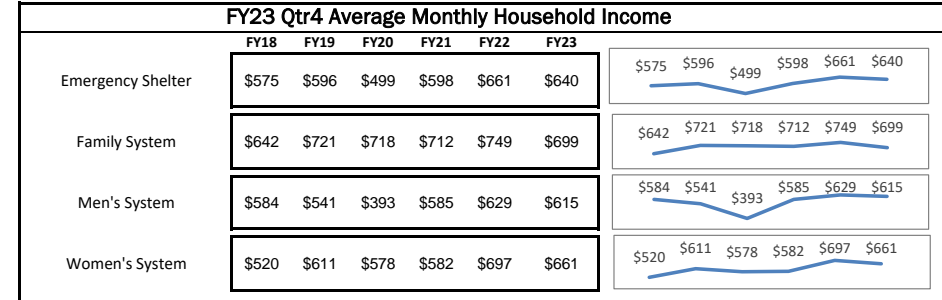
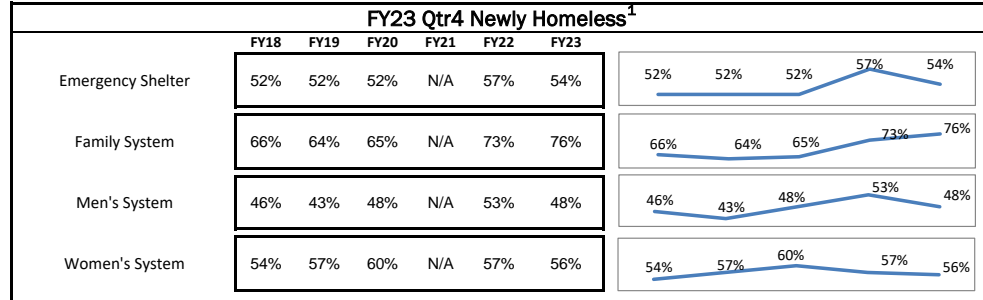
² Successful outcomes measure for Street Outreach. Unaccompanied youth served by Huckleberry House were excluded from Emergency Shelter successful housing outcomes.

³ Average Length of Shelter Stay (Days) measured for Emergency Shelter. Unaccompanied youth served by Huckleberry House were excluded from Emergency Shelter ALOS calculation. Average Length of Participation (Days) measured for Street Outreach, PH - Rapid Re-Housing and Homelessness Prevention. Housing Stability (Months) measured for PH - Permanent Supportive Housing and Transitional Housing.

⁴ Due to rounding, percentages do not add up to 100%

System and Program Indicator Report

Emergency Shelter and Rapid Re-housing Trends Appendix : 4/1/2023 - 6/30/2023



¹ Did not access a homeless program in the past two years. FY21 data not available due to system migration.

² Exited successfully but returned to shelter within 180 days of successful exit.

HOMELESS HOTLINE	Total Households Served			Average Wait Time (minutes)			Successful Diversion/Outcomes					
4/1/2023 - 6/30/2023	Goal (#)	Actual (#)	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Gladden Community House - Family Diversion	425	646	✓	N/A	N/A	N/A	149	236	✓	35%	50%	✓
Netcare - Homeless Hotline (Families)	750	979	✓	<5	0:59	✓	225	420	✓	30%	38%	✓
Netcare - Homeless Hotline (Single Adults)	2,600	2,809	✓	<5	0:59	✓	520	478	✓	20%	13%	✗

STREET OUTREACH	New Households Served			Total Households Served			Average Length of Participation			Successful Outcomes					Successful Housing Outcomes ³					Usage of CSB DCA (%) ¹				
4/1/2023 - 6/30/2023	Goal (#)	Actual (#)	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Mt. Carmel - Capital Crossroad SID Outreach	25	16	✗	40	33	✗	90	93	✓	19	10	✗	75%	67%	✗	10	8	✗	55%	80%	✓	N/A	40%	N/A
Mt. Carmel - Outreach	73	32	✗	233	139	✗	90	123	✗	55	17	✗	75%	40%	✗	30	11	✗	55%	65%	✓	25%	14%	✗
Southeast - PATH Outreach ²	35	67	✓	65	101	✓	90	73	✓	18	6	✗	50%	33%	✗	N/A	6	N/A	N/A	100%	N/A	N/A	N/A	N/A

TRANSITION AGE YOUTH	New Households Served			Households Served			Program Occupancy Rate				Average Length of Shelter Stay (days)			Average Length of Participation / Housing Stability ⁴			Successful Outcomes / Housing Outcomes ³						Usage of CSB DCA (%) ¹		
4/1/2023 - 6/30/2023	Goal (#)	Actual (#)	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Capacity	Actual	Actual (%)	Outcome Achievement (95% Goal)	Goal	Actual	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Huckleberry House - TAY CARR Team & Expansion	30	27	✓	80	39	✗	N/A	N/A	N/A	N/A	N/A	N/A	N/A	90	73	✓	19	9	✗	75%	35%	✗	N/A	N/A	N/A
Huckleberry House - Emergency Shelter	N/A	80	N/A	110	89	✓ ⁵	16	6	40%	✓ ⁵	10	8	✓	N/A	N/A	N/A	80	77	✓	80%	92%	✓	N/A	N/A	N/A
Huckleberry House - Youth SOP	N/A	6	N/A	N/A	6	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	27	N/A	N/A	0	N/A	N/A	0%	N/A	N/A	N/A	N/A
Huckleberry House - TLP TH	N/A	5	N/A	33	27	✗	24	22	93%	✓	N/A	N/A	N/A	10	8	✓	4	2	✗	80%	50%	✗	N/A	N/A	N/A
Huckleberry House - TLP RHY TH	N/A	3	N/A	7	9	✓	7	6	89%	✗	N/A	N/A	N/A	12	10	✓	1	1	✓	80%	50%	✗	N/A	N/A	N/A
Home for Families - Homelessness Prevention/RRH - ODH TAY	9	12	✓	19	49	✓	N/A	N/A	N/A	N/A	N/A	N/A	N/A	180	126	✓	8	22	✓	85%	96%	✓	N/A	N/A	N/A
Home For Families - TAY Transition to Home TH	N/A	12	N/A	34	37	✓	28	27	98%	✓	N/A	N/A	N/A	10	9	✓	6	3	✗	80%	60%	✗	77%	0%	✗
Home For Families - TAY Transition to Home RRH	6	32	✓	46	99	✓	N/A	N/A	N/A	N/A	35	24	✓	180	140	✓	4	7	✓	60%	47%	✗	60%	20%	✗
Home For Families - TAY RRH	30	14	✗	110	93	✗	N/A	N/A	N/A	N/A	35	34	✓	180	309	✗	18	15	✗	60%	71%	✓	60%	57%	✓

¹ Households that exited successfully without accessing DCA are excluded from calculation.² The goal of PATH Outreach is to outreach to homeless individuals for the purpose of linking them to ongoing mental health and other treatment.³ Successful Outcomes for CARR, SOP, and Emergency Shelter; Successful Housing Outcomes for prevention, transitional housing (TH), and rapid re-housing (RRH); Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.⁴ Average Length of Participation (days) for CARR, SOP, and RRH; Housing Stability (months) for TH.⁵ Project served all households that needed services.

System and Program Indicator Report

EMERGENCY SHELTER ⁴	Households Served				Nightly Occupancy				Average Length of Stay (Days)			Successful Housing Outcomes ³					
4/1/2023 - 6/30/2023	Goal (#)	Actual (#)	Variance	Outcome Achievement	Capacity ¹	Actual	Actual (%)	Outcome Achievement (Goal: 100%)	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
FAMILY																	
YMCA - Van Buren Family Shelter	175	239	64	√	64	100	157%	√	54	70	≠	56	27	≠	50%	21%	≠
YWCA - Family Center	110	110	0	√	50	55	110%	√	54	86	≠	30	28	√	50%	50%	√
MEN																	
LSS - Faith Mission - Men's on Grant ²	N/A	223	N/A	N/A	95	93	98%	N/A	45	80	N/A	N/A	41	N/A	25%	32%	N/A
LSS - Faith Mission on 8th ²	N/A	245	N/A	N/A	95	91	96%	N/A	45	72	N/A	N/A	29	N/A	25%	19%	N/A
Southeast - Friends of the Homeless - Men's Shelter	460	493	33	√	160	153	96%	√	45	37	√	75	20	≠	25%	6%	≠
YMCA - Men's Social Distancing (including overflow) ⁵	N/A	103	N/A	N/A	41	41	N/A	N/A	N/A	88	N/A	N/A	11	N/A	N/A	11%	N/A
WOMEN																	
LSS - Faith Mission - Women's on Grant ²	N/A	89	N/A	N/A	38	37	98%	N/A	45	62	N/A	N/A	12	N/A	25%	23%	N/A
YMCA - Van Buren Women's Shelter	450	387	(63)	≠	158	151	95%	√	45	64	≠	73	38	≠	25%	16%	≠
YMCA - Women's Overflow ⁵	N/A	12	N/A	N/A	N/A	1	N/A	N/A	N/A	4	N/A	N/A	0	N/A	N/A	0%	N/A
INEBRIATE																	
Maryhaven - Engagement Center Safety	275	271	(4)	√	34	43	127%	√	20	15	√	72	44	≠	30%	19%	≠
Maryhaven - Engagement Center Shelter2Housing	32	36	4	√	16	15	96%	√	45	68	≠	4	6	√	25%	33%	√
VA EMERGENCY HOUSING																	
LSS - VA Men & Women	60	52	(8)	≠	24	21	87%	≠	45	60	≠	18	9	≠	50%	27%	≠
VOAOI - VA Emergency Housing	40	36	(4)	≠	15	11	76%	≠	45	53	≠	12	9	≠	50%	43%	≠
AGENCY																	
Lutheran Social Services - Faith Mission ²	675	543	(132)	≠	228	221	97%	√	45	76	≠	112	82	≠	25%	25%	√
Lutheran Social Services - Faith Mission - Medical Respite	35	38	3	√	16	15	91%	≠	45	51	≠	5	1	≠	25%	4%	≠

¹ Shelter capacities do not include overflow, unless a dedicated overflow program. Winter overflow opened 10/15/22 and closed 04/15/23.

² Lutheran Social Services is evaluated at the agency level rather than at the individual project level. Inclusive projects are Faith Mission Men's on Grant, Faith Mission on 8th, and Women's on Grant.

³ Successful outcomes measure for Maryhaven ECR Safety. Exit to family (permanent tenure) is a successful housing outcome for all starting 7/1/2015. Exit to friends (permanent tenure) is a successful housing outcome for all starting 7/1/2018.

⁴ Housing services are provided by Rapid Re-housing projects. Some of the measures for emergency shelters are shared with the Rapid Re-housing projects.

⁵ Social distancing shelter for men opened 3/20/2020 and closed 4/15/2023. Shelter for Isolation and Quarantine opened 4/1/2020 and closed 4/30/2023. No person was served in April 2023. Women's Overflow opened 10/15/2022 and closed 3/22/2023

System and Program Indicator Report

PERMANENT SUPPORTIVE HOUSING - Site-Based		Households Served				Program Occupancy Rate			Housing Stability (Months)			Successful Housing Outcomes ¹					
4/1/2023 - 6/30/2023	Capacity	Goal (#)	Actual (#)	Variance	Outcome Achievement	Actual (#)	Actual (%)	Outcome Achievement (Goal: 95%)	Goal (# of months)	Actual (# of months)	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Community Housing Network - Briggsdale	65	68	65	(3)	√	64	99%	√	24	53	√	61	62	√	90%	97%	√
Community Housing Network - Cassady ²	10	11	11	0	√	11	110%	√	24	34	√	10	11	√	90%	100%	√
Community Housing Network - Creekside Place	23	24	22	(2)	√	20	89%	≠	21	21	√	22	20	√	90%	91%	√
Community Housing Network - East 5th Avenue	38	40	39	(1)	√	36	94%	√	24	39	√	36	37	√	90%	97%	√
Community Housing Network - Inglewood Court	45	47	45	(2)	√	45	100%	√	24	63	√	42	45	√	90%	100%	√
Community Housing Network - Marsh Brook Place	40	42	40	(2)	√	39	97%	√	24	28	√	38	40	√	90%	100%	√
Community Housing Network - North 22nd Street	30	32	31	(1)	√	29	95%	√	24	67	√	29	30	√	90%	97%	√
Community Housing Network - Parsons Place	62	65	63	(2)	√	61	98%	√	24	24	√	59	63	√	90%	100%	√
Community Housing Network - Safe Haven	13	13	13	0	√	13	100%	√	24	69	√	12	13	√	90%	100%	√
Community Housing Network - Southpoint Place ²	46	48	48	0	√	47	103%	√	24	59	√	43	48	√	90%	100%	√
Community Housing Network - Terrace Place	47	49	48	(1)	√	46	99%	√	24	72	√	44	46	√	90%	100%	√
Community Housing Network - Wilson	8	8	8	0	√	8	100%	√	24	55	√	7	8	√	90%	100%	√
Maryhaven - Commons at Chantry	50	53	45	(8)	≠	45	89%	≠	24	66	√	48	44	√	90%	98%	√
National Church Residences - Commons at Buckingham	77	81	77	(4)	√	76	98%	√	24	78	√	73	75	√	90%	97%	√
National Church Residences - Commons at Chantry TAY ³	20	20	1	N/A	N/A	1	5%	N/A	9	6	N/A	18	1	N/A	90%	100%	N/A
National Church Residences - Commons at Grant	54	57	54	(3)	√	49	91%	√	24	94	√	51	51	√	90%	98%	√
National Church Residences - Commons at Livingston ²	69	72	72	0	√	70	102%	√	24	61	√	65	69	√	90%	97%	√
National Church Residences - Commons at Third	71	75	66	(9)	≠	64	90%	√	24	59	√	68	64	√	90%	100%	√
National Church Residences - Van Buren Village	60	63	63	0	√	60	100%	√	24	49	√	57	58	√	90%	94%	√
YMCA - Transition	51	54	53	(1)	√	50	99%	√	24	40	√	49	50	√	90%	96%	√
YMCA - SRA	27	28	28	0	√	26	97%	√	24	37	√	25	27	√	90%	96%	√
YMCA - Touchstone Place	56	59	56	(3)	√	56	100%	√	6	6	√	53	56	√	90%	100%	√
YMCA - Franklin Station	75	79	75	(4)	√	72	96%	√	24	86	√	71	73	√	90%	99%	√
YWCA - WINGS	91	96	88	(8)	√	86	94%	√	24	54	√	86	82	√	90%	94%	√

¹ Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.

² Funding allows overleasing.

³ Project is in lease-up. NCR TAY Chantry will reach capacity through turnover of existing units.

System and Program Indicator Report

PERMANENT SUPPORTIVE HOUSING - Scattered-Site		Households Served				Program Occupancy Rate			Housing Stability (Months)			Successful Housing Outcomes ¹					
4/1/2023 - 6/30/2023	Capacity	Goal (#)	Actual (#)	Variance	Outcome Achievement	Actual #	Actual (%)	Outcome Achievement (Goal:95%)	Goal (#)	Actual (#)	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
Community Housing Network - Family Homes	10	10	10	0	√	10	100%	√	24	16	≠	9	10	√	90%	100%	√
Equitas Health - TRA	89	93	86	(7)	√	86	96%	√	24	132	√	84	85	√	90%	99%	√
Homefull - Leasing ⁴	217	228	135	(93)	≠	130	60%	≠	24	26	√	205	134	≠	90%	99%	√
Homefull - Isaiah	160	168	161	(7)	√	150	94%	√	24	36	√	151	153	√	90%	96%	√
Homefull - SRA ⁴	100	105	103	(2)	√	99	99%	√	24	28	√	95	102	√	90%	100%	√
Homefull - TRA ⁴	261	274	237	(37)	≠	232	89%	≠	24	31	√	247	231	√	90%	98%	√
Homefull TRA - EHV ²	304	304	235	(69)	≠	223	74%	≠	9	13	√	274	232	≠	90%	99%	√
Homefull TRA Mainstream ²	94	99	55	(44)	≠	53	57%	≠	12	20	√	89	50	≠	90%	93%	√
Veterans Affairs - VASH I-XI ³	377	396	381	(15)	√	377	100%	√	24	62	√	356	375	√	90%	99%	√
VOAOI - Family Supportive Housing	38	40	39	(1)	√	36	96%	√	24	44	√	36	38	√	90%	97%	√
YMCA - Scattered Sites HOME	55	58	52	(6)	√	50	91%	√	24	50	√	52	52	√	90%	100%	√

TRANSITIONAL HOUSING		Households Served				Program Occupancy Rate			Housing Stability (Months)			Successful Housing Outcomes ¹						
4/1/2023 - 6/30/2023																		
	Capacity	Goal (#)	Actual (#)	Variance	Outcome Achievement	Actual #	Actual (%)	Outcome Achievement (Goal:95%)	Goal (#)	Actual (#)	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement	
	VOAOI - Veterans	40	35	52	17	√	26	64%	≠	4	2	√	18	17	√	77%	61%	≠

¹ Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.

² Project in lease-up.

³ Franklin County VASH capacity fluctuates based on need

⁴ Starting July 2022, Homefull program capacities changed: TRA increased from 246 to 261, SRA decreased from 160 to 100, and Leasing increased from 147 to 217. Leasing project occupancy is lower than expected as it is waiting on approval for a hotel conversion and the current funding is not sufficient to cover the stated capacity.

RAPID RE-HOUSING	New Households Served			Total Households Served			Average Length of Shelter Stay (Days) ²			Average Length of Participation (Days)			Successful Housing Outcomes ³						Usage of CSB DCA (%) ¹		
	Goal (#)	Actual (#)	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
4/1/2023 - 6/30/2023																					
Homefull - Rapid Re-housing Single Adults & Expansion	45	20	≠	105	59	≠	35	29	√	110	156	≠	23	12	≠	50%	67%	√	50%	14%	≠
Home for Families - Rapid Re-housing Families	44	33	≠	109	76	≠	34	34	√	125	163	≠	33	19	≠	75%	79%	√	75%	69%	≠
Home for Families - Rapid Re-housing Families Intensive	15	19	√	35	34	√	34	16	√	180	247	≠	11	8	≠	75%	89%	√	75%	86%	√
The Salvation Army - Rapid Re-housing Families	37	0	≠	91	27	≠	34	N/A ⁴	N/A	125	198	≠	28	9	≠	75%	64%	≠	75%	58%	≠
The Salvation Army - Job2Housing Families	15	0	≠	50	22	≠	34	N/A ⁴	N/A	180	195	√	11	9	≠	75%	60%	≠	75%	54%	≠
VOAOI - Rapid Re-housing Families	18	18	√	46	37	≠	34	42	≠	125	270	≠	13	7	≠	75%	64%	≠	75%	50%	≠
YMCA - Rapid Re-housing Single Adults & Expansion	210	105	≠	489	275	≠	35	29	√	110	143	≠	105	47	≠	50%	47%	√	50%	42%	≠
YMCA - Rapid Re-housing Families	35	20	≠	65	40	≠	34	31	√	125	157	≠	26	9	≠	75%	60%	≠	75%	33%	≠
YMCA - Rapid Re-housing DV	34	29	≠	164	89	≠	35	19	√	180	147	√	17	18	√	50%	64%	√	50%	47%	√

PREVENTION	New Households Served			Total Households Served			Average Length of Participation (Days)			Successful Housing Outcomes ³						Usage of CSB DCA (%) ¹		
	Goal (#)	Actual (#)	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
4/1/2023 - 6/30/2023																		
Gladden Community House - Family Homelessness Prevention	125	153	√	275	244	≠	120	73	√	100	118	√	80%	94%	√	60%	88%	√
Gladden Community House - FCCS Prevention	29	21	≠	51	43	≠	90	101	≠	23	24	√	80%	92%	√	70%	80%	√
HFF - Homelessness Prevention for Expectant Mothers	8	13	√	38	38	√	365	319	√	6	3	≠	80%	100%	√	80%	100%	√
HFF - Housing for Pregnant Women Prevention and RRH	N/A	0	N/A	N/A	47	N/A	N/A	552	N/A	N/A	19	N/A	N/A	100%	N/A	N/A	100%	N/A
HFF - Resiliency Bridge	15	2	≠	35	46	√	365	328	√	13	4	≠	85%	57%	≠	N/A	0%	N/A
HFF - Success Bridge	15	10	≠	35	32	√	210	504	≠	13	5	≠	85%	100%	√	N/A	0%	N/A

SSVF - Supportive Services for Veteran Families	New Households Served			Total Households Served			Average Length of Shelter Stay (Days) ²			Average Length of Participation (Days)			Successful Housing Outcomes ³						Usage of SSVF DCA (%) ¹		
	Goal (#)	Actual (#)	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal	Actual	Outcome Achievement	Goal (#)	Actual (#)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement	Goal (%)	Actual (%)	Outcome Achievement
4/1/2023 - 6/30/2023																					
LSS - SSVF Rapid Re-housing and Prevention	28	6	≠	58	42	≠	35	59	≠	110	193	≠	21	8	≠	75%	80%	√	75%	78%	√
VOAOI - SSVF Prevention	35	12	≠	73	51	≠	N/A	N/A	N/A	120	474	≠	32	13	≠	90%	76%	≠	90%	40%	≠
VOAOI - SSVF Rapid Re-housing	35	37	√	72	187	√	35	18	√	110	358	≠	27	29	√	75%	64%	≠	75%	63%	≠

¹ Households that exited successfully without accessing DCA are excluded from calculation.² Households were excluded from ALOS measure if they still resided in emergency shelter at the time of the report.³ Starting 7/1/15, Successful Housing Outcomes include permanent exits to family. Starting 7/1/18, Successful Housing Outcomes include permanent exits to friends.⁴ Program didn't serve any new households during reporting period; unable to calculate measure.



355 e. campus view blvd. | columbus, ohio 43235
614 221 9195/ main | 614 221 9199/ fax | www.csb.org

