Before Starting the CoC Application

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

 The Collaborative Applicant is responsible for reviewing the following:

 1. The FY 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
 2. The FY 2018 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
 3. All information provided to ensure it is correct and current.
 4. Responses provided by project applicants in their Project Applications.
 5. The application to ensure all documentation, including attachment are provided.
 6. Questions marked with an asterisk (*), which are mandatory and require a response.

1A. Continuum of Care (CoC) Identification

Instructions:

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

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

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

1A-3. CoC Designation: UFA

1A-4. HMIS Lead: Community Shelter Board

1B. Continuum of Care (CoC) Engagement

Instructions:

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

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

Organization/Person Categories	Participates in CoC Meetings	Votes, including selecting CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	Yes
Local Jail(s)	Yes	Yes
Hospital(s)	Yes	Yes
EMS/Crisis Response Team(s)	No	No
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	No	No
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	No
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Not Applicable	No
Non-CoC Funded Victim Service Providers	Yes	Yes
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	No
LGBT Service Organizations	Yes	No
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Mental Illness Advocates	No	No
Substance Abuse Advocates	No	No

Other:(limit 50 characters)		
Veterans Organizations	Yes	Yes
Faith-based Organizations	Yes	Yes
Universities	Yes	Yes

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

The CoC governing body includes a broad array of organizations and individuals with knowledge of and interest in preventing and ending homelessness. CoC Meetings are open to the public and details of each meeting are posted on the CoC website, in advance of meeting. CoC workgroups on Veteran, family, single adult, and youth homelessness meet regularly to monitor progress and develop and implement systems improvements. The Veteran System Operations Workgroup has nearly achieved an effective end to Veteran homelessness by emphasizing continuous communication and coordination across a range of community partners, including the Veterans Administration and Franklin County Veterans Service Commission. The Youth Committee has engaged youth-serving organizations across the community to develop a coordinated community plan to address youth homelessness. A Citizens Advisory Council (CAC) composed of homeless and formerly homeless individuals meets monthly and has two representatives on the CoC governing body. The CoC takes into account input from the CAC before approving new projects or initiatives. The CoC held a community-wide retreat in January 2018 to solicit input that was used to develop a new strategic framework that articulates our community's vision and approach for addressing homelessness. The retreat included over 100 partners from inside and outside the CoC and focused on improvements within the homelessness system and collaboration with other systems of care. The end result is a framework for action that includes 13 goals and multiple strategies. Over the next year the CoC will engage in more robust collaboration with landlords to improve the system's access to rental units in our tight housing market. The CoC is also working on a data-sharing initiative with health providers and law enforcement to identify people who are frequently served in all three systems so we can develop more collaborative approaches to serving them.

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

(1) Annually, the CoC Board reviews nominations for the CoC at their April or

May meeting and considers whether there are additional individuals or organizations that would improve the CoC's community perspective and expertise. The CoC Board then makes membership recommendations to the full CoC. The CoC considers the CoC Board recommendations during their May meeting, discusses any additional suggestions, and votes to determine which individuals or organizations will be invited to join the CoC with a July 1 effective date. Each new member attends an orientation session to familiarize them with the functions and responsibilities of the CoC. (2) The CoC governing body issues in March of each year a call for nominations – both for individuals and organizations – via a website posting and email to a large number of stakeholders and community partners. When there is an unexpected vacancy on the CoC or CoC Board, the Chair of the CoC Board promptly requests nominations from the rest of the CoC. The CoC governing body accepts nominations from any source. (3) The CoC solicits new members annually. (4) The CoC governing body works closely with the Citizens Advisory Council (CAC) – which meets monthly and consists of homeless and formerly homeless individuals – to designate two representatives from the CAC to serve on the CoC governing body. One of the CAC representatives also serves on the CoC Board. The Youth Action Board (YAB) – which includes homeless or formerly homeless youth – also designates a representative from the YAB to serve on the CoC governing body.

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

Community Shelter Board (CSB) on behalf of the CoC on January 11, 2018 solicited proposals for new Permanent Housing projects for consideration by the governing body for the FY18 competition. CSB sent an email to a wide array of organizations, including organizations that have not previously received CoC funding. CSB also posted the call for proposals on its website. The notification included instructions on the application to be submitted and a deadline for the application. The CoC advertised the FY18 Notice of Funding Availability on the CoC website on June 22, 2018 and again invited any entity interested in applying to contact CSB. The website posting also specifically referenced the new funding opportunity for DV projects. CSB also sent an email on June 27, 2018 to a wide array of organizations, including organizations that have not previously received CoC funding, announcing the DV funding opportunity and requesting project proposals. The application schedule was also posted on the website and included in the email notification. The CoC determined which projects would be included in the application based on the available funding and the CoC Review, Score, and Ranking Procedures attached to this application. The CoC welcomes participation from entities that have not previously received CoC funds and proactively seeks opportunity to involve additional partners.

1C. Continuum of Care (CoC) Coordination

Instructions:

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

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

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

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

(1) City of Columbus and Franklin County (ESG recipients) representatives are members of both the CoC Board and the CoC. The City and County are active participants in the CoC governance and funding allocation conversations that are part of the CoC meetings. The City and County grant all ESG allocations to

Community Shelter Board (CSB) as the CoC UFA. The City, County, and CSB propose ESG allocations to the CoC in accordance with the Consolidated Plan. The CoC also serves on the State Advisory Board on homelessness and provides input on state objectives and proposed ESG funding allocations. CSB is the collaborative applicant and sub-recipient of all State ESG RRH funding in the county, which is also allocated in accordance with the State Consolidated Plan. The CoC governing body approves annually all allocations. (2) CSB develops annual ESG performance standards for CoC approval. The CoC, City, and County receive quarterly performance evaluations that are based on these standards and use HMIS data. These evaluations include program-level reporting of all ESG funded projects. The CoC also reviews HIC and PIT data including system capacity by program type, a system gap analysis, system performance measures, and the AHAR. Funding allocations and performance outcomes determined through collaboration between ESG recipients and the CoC are codified in formal contracts between the City, County, and State as the ESG recipients and CSB as the ESG sub-recipient.

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

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

1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. Applicants must describe:
(1) the CoC's protocols, including the existence of the CoC's emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and
(2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.
(limit 2,000 characters)

(1) The Unified Supportive Housing System (USHS) – which manages PSH units in our CoC – works with PSH providers to quickly and safely implement standardized protocols when program participants need to transfer to a different location because of domestic violence. CoC programs notify USHS when a priority transfer is required because of violence or the threat of violence and USHS works quickly to identify alternative, safe housing. Each CoC program is required to have its own emergency transfer plan and the CoC monitors all homeless assistance programs annually to ensure that this plan is implemented consistently. (2) Domestic violence, dating violence, sexual assault, and stalking survivors have access to the CoC's entire portfolio of prevention, emergency shelter, RRH, and PSH programs, including CoC, ESG, DOJ, and HHS-funded

programs. The wide array of resources ensures that the system maximizes client choice and tailors assistance to best meet the needs of each program participant in a safe and secure way. For example, survivors have options for either single site PSH buildings with 24/7 front desk and security or scattered site housing units in the community, based on their need. Individuals and families enrolled in CoC programs are entered into HMIS anonymously to protect their privacy and security. The CoC is working with other systems of care to further integrate existing and new domestic violence services, shelter, and housing options into the homeless crisis response system and provide updated training for homeless crisis response system staff.

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

On April 26, 2018, CSB provided webinar training on domestic violence in collaboration with CHOICES, one of the local victim service providers. The training was open to all providers within the homeless system, including CoC-funded projects and Coordinated Entry staff. The training was recorded and is available on CSB's website for future reference and use during the year. All CoC projects and Coordinated Entry staff are required to receive training upon hire and annually thereafter on best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. This training includes how to refer and transport survivors to CHOICES shelter for victims of domestic violence safely without jeopardizing survivors' security. Project staff receives training at least annually on Trauma-Informed and Victim-Centered Care. CoC project and Coordinated Entry staff also receives training on how to collect and share survivors' information without inputting personal identifying data in HMIS. If survivors enter a program in the homeless assistance program, staff is trained to enter their information into HMIS anonymously to protect their privacy and prevent inadvertent disclosure of their identity and location.

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

CHOICES shelter for victims of domestic violence collects data outside HMIS in a comparable database to preserve survivors' security and safety. CHOICES provides aggregate anonymous data to the CoC to include in the annual PIT and HIC reports and annual numbers served data, as needed by the CoC. The CoC also collects via HMIS data on persons experiencing homelessness who report having experienced domestic violence, dating violence, sexual assault, and stalking. The CoC is conducting a youth needs assessment that will assess the scope of domestic violence, dating violence, sexual assault, and stalking among youth experiencing homelessness. The CoC uses the data from CHOICES, HMIS, and the youth needs assessment to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking.

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

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

SSO Coordinated Entry	
RRH	X
Joint TH/RRH	

1C-4b. Applicants must describe:
(1) how many domestic violence survivors the CoC is currently serving in the CoC's geographic area;
(2) the data source the CoC used for the calculations; and
(3) how the CoC collected the data.
(limit 2,000 characters)

(1) Between July 1, 2017 and June 30, 2018, we estimate the CoC served in emergency shelters 2,182 and in TH 50 individuals, domestic violence survivors in the CoC's geographic area, a total of 1,984 households. The average emergency shelter daily count of domestic violence survivors served in the CoC was 303, in comparison to the PIT count reported number of 257. Out of the individuals served in emergency shelters, 729 were also served by RRH programs. 186 unsheltered individuals and 481 individuals served in PSH during this time frame reported a history of domestic violence. (2) The data source for these calculations is HMIS and aggregate, anonymized data from CHOICES, our community's domestic violence shelter, which collects data outside HMIS in a comparable system. Because the CHOICES data was aggregated and we are aware that some CHOICES program participants are also served in the other local emergency shelters, we applied a 30% duplication rate to the CHOICES data. The total number of domestic violence survivors is an estimated number due to the inability to accurately de-duplicate the data. (3) The CoC collected the data by requesting information from CHOICES and through HMIS intake of persons into our CoC's various homelessness programs, including street outreach, emergency shelter, and TH, RRH, and PSH programs.

1C-4c. Applicants must describe:
(1) how many domestic violence survivors need housing or services in the CoC's geographic area;
(2) data source the CoC used for the calculations; and
(3) how the CoC collected the data.
(limit 2,000 characters)

(1) We estimate 1,528 households that include domestic violence survivors need housing or services in the CoC's geographic area annually (1,160 RRH and 368 PSH interventions). (2) The data source for these calculations is HMIS and aggregate, anonymized data from CHOICES, our community's domestic violence shelter, which collects data outside HMIS in a comparable system. (3)

The CoC collected the data by requesting information from CHOICES and through HMIS intake of persons into our CoC's various homelessness programs, including street outreach, emergency shelter, TH, RRH, and PSH programs.

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

(1) We aim to safely and quickly assist those who are homeless to break free from a violent relationship, the exploitation and abuse of human trafficking, or other abusive relationships. This includes survivors who need the level of support and safety offered by CHOICES, our community's domestic violence shelter, as well as many others who don't require that level of support but find themselves homeless and seeking a safer future free from violence and abuse. DV survivors in our community need the same general types of housing and services interventions as all other homeless individuals and families, as they experience the same housing instability and other barriers, with an added layer of need for specialized care due to their DV experience. We have a gap in the community in the provision of RRH and PSH for the general population and specifically for the DV population. (2) We estimate 1,160 DV survivor households need RRH and 368 households need PSH annually. In addition 1,984 households needed shelter and TH last year. CHOICES will expand shelter capacity next year from 51 to 120 beds and will create 14 new TH units, but at this time we do not have specialized DV capacity for any of the above RRH and PSH needs, other than prioritizing DV survivors for general RRH services. Additional improvements are needed to more closely coordinate and integrate access to victim services and trauma-informed care for survivors. (3) The data source for these calculations is HMIS and aggregate, anonymized data from CHOICES which collects data outside HMIS in a comparable system. (4) In 2017 we worked with Corporation for Supportive Housing to determine the unmet need for housing and services for the general population. We applied the same tool and logic to determine the unmet need for the DV population, using the number served in our system last year. We estimate 189 of the annual 2,170 households unsheltered or in emergency shelters and TH could be diverted to other safe housing options, outside the homeless system, with improvements to the coordinated entry system, and we are in the process of improving our system's prevention and diversion capacity. Out of the 1,981 households remaining, 279 families and 1,702 single adults, based on historical national and local data, 10% of families and 20% of single adults need PSH, for a total of 368 housing placements. We estimate that 25% of the remaining 1,613 households self-resolve, leaving 1,210 households. 50 of these households will continue to be served by TH, leaving 1,160 households that need RRH housing and services.

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

The DV project included in the CoC application will provide the first specialized RRH project in our community dedicated to the DV population, partially addressing the needs of the estimated 1,160 households who need RRH housing and services annually. Per the National Partnership for Women and Families, the primary two unmet needs for DV survivors are the need for long term housing and adequate resources for services, which include one-on-one counseling, safety planning, housing support and legal services, support groups for adults and children, job training programs, and mental and health needs. YMCA of Central Ohio will address these needs upon entry into the program by conducting an initial housing and services plan based on specific conditions on varying levels of danger and risk. Information will be used to provide appropriate, intensive services and supports from YMCA staff or through community linkages and referral. Through ongoing assessment, support and planning, the YMCA will be able to address continuous needs, safety concerns, and support for DV survivors and children. YMCA has many partners in the community. These include access to food, mental health, physical health, employment and benefits, counseling, and prenatal services. YMCA will follow up with program participants regularly to ensure access to community resources and make new referrals as needed. YMCA will work with survivors to identify safe and affordable housing. Once housing is identified, YMCA will provide rental support for survivors for an average of six months, based on need, coupled with supportive services. Staff will work with survivors to link to employment programs, assist with finding employment and completing benefit applications, and help find childcare. YMCA will incorporate trauma informed care and progressive engagement throughout all aspects and interactions, in addition to partnering with mental health service providers.

1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:
(1) rate of housing placement of DV survivors;
(2) rate of housing retention of DV survivors;
(3) improvements in safety of DV survivors; and
(4) how the project applicant addresses multiple barriers faced by DV survivors.
(limit 4,000 characters)

(1) As we currently do not have a RRH project dedicated to DV survivors, the applicant does not have a current rate of housing placements for DV population. We are projecting that the program will attain the same rate of success in housing as any other local RRH project, including the YMCA of Central Ohio, a 90% successful housing placement rate for families and 50% success rate for single adults exiting the project. (2) As we currently do not have a DV-dedicated RRH project, the applicant does not have a current rate of housing retention for DV survivors. Overall in our community, returns to homelessness for those who exited to a permanent housing destination are less than 10% after 13-24 months, per the 2018 HDX Competition Report. We expect similar performance from the DV RRH project. (3) YMCA has been serving the most vulnerable in our community since the 1920s. Over the years, YMCA has expanded from permanent supportive housing programming to include programs for single

adults and families in emergency shelter and rapid rehousing. Since the inception of the additional programs, YMCA has become well versed in diverse populations and their particular needs related to trauma as well as housing. The experience of the 40 case managers, 2 clinical directors and over 150 staff in current housing and shelter programs will be essential to the new DV RRH program. YMCA is already operating a RRH program and has the programmatic infrastructure in place. The case managers YMCA hires for this program will be specialized positions with a focus on DV. Specific training will be integrated into required training for all staff in all programs regarding working with DV survivors. Training will incorporate signs of safety, increased incident reporting parameters, safety planning, and mental health trainings for individuals with complex and co-occurring issues. YMCA housing and shelter programs have already implemented a process to develop personal safety plans with program participants. This process will include safety planning in the event that a participant returns to a formerly abusive partner. YMCA has a strong privacy policy in place and will build a separate HUD-compliant database to ensure the safety, security, and privacy of those in this program. (4) YMCA will review cases weekly for any areas of concern regarding safety and multiple barriers that could put DV survivors at risk. YMCA will provide community linkages and referrals as well as on-site support. YMCA will implement protocols that will align with best practices working with DV survivors from intake to the point of exiting the program. Through ongoing individualized service plans and regular case notes, YMCA will stay abreast of the various barriers for each program participant. YMCA case managers understand that program participants have varying experiences and situations and that each individual will have different barriers. As a result, YMCA case managers will tailor support to help survivors work through various barriers to housing and personal needs. YMCA will also promote a healthy and beneficial collaboration between mental health providers and survivors. Access to high-quality trauma treatment after being safely housed is an integral part of recovery. By facilitating integration into mental health and DV services, case managers will facilitate a solid approach to addressing trauma. Additionally, YMCA will provide aftercare once survivors are housed to help maintain safety and stability and continue to reduce barriers.

1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC's geographic areas:
(1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;
(2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and
(3) Indicate whether the CoC has a move on strategy. The information should be for Federal Fiscal Year 2017.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?
Columbus Metropolitan Housing Authority	16.00%	Yes-HCV	No

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

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

N/A

1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)? No

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

CoC policies ensure that shelter and housing assistance is available to any individual or group presenting for assistance together with or without children, regardless of marital status of relationship, actual or perceived sexual orientation, or gender identity, and irrespective of age, relationship, or whether a member of the household has a disability. Community Shelter Board (CSB), the UFA, monitors all homeless assistance programs annually for adherence to this policy and to the 2016 HUD final rule Equal Access in Accordance with an Individual's Gender Identity in Community Planning and Development Programs. Emergency shelters make every effort to accommodate program participants' gender preferences and ensure they feel safe and welcome throughout their shelter stay. CoC efforts to address the needs of LGBT individuals and their families include annual staff training to understand issues and supports related to sexual orientation and gender identity, including issues of privilege related to both. Staff also receives annual training on providing culturally competent care for LGBT individuals and families. All system partners have a formal grievance process. CSB is the ombudsman for the system and acts promptly on any concerns, including allegations of discrimination or failures to address the need of LGBT individuals.

1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate

if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.

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

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

Engaged/educated local policymakers:	X
Engaged/educated law enforcement:	X
Engaged/educated local business leaders:	X
Implemented communitywide plans:	X
No strategies have been implemented:	
Other:(limit 50 characters)	
Outreach strategy incl. the City Policy Department	X
Crisis Intervention Team training of police	X

1C-8. Centralized or Coordinated Assessment System. Applicants must:
(1) demonstrate the coordinated entry system covers the entire CoC geographic area;
(2) demonstrate the coordinated entry system reaches people who are least likely to apply homelessness assistance in the absence of special outreach;
(3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and
(4) attach CoC's standard assessment tool.
(limit 2,000 characters)

(1) The CoC's coordinated entry system covers the entire CoC geographic area by using a toll-free phone number for the CPoA. The CoC's street outreach team engages with people at known homeless camp locations and proactively seeks out new locations where people experiencing homelessness congregate. (2) Our Collaborative Outreach Team collaborates with the City, County, and

local businesses to identify opportunities to engage and support people experiencing homelessness. Ongoing communication with other systems of care–such as health care providers, faith-based organizations, social service providers, community programs, and law enforcement–identifies people who need supports and resources, but are unlikely to seek assistance. (3) We use standardized screening and assessment tools iteratively across our system to identify and prioritize people most in need of assistance. CPoA screens callers for safety needs, housing options, and diversion and prioritizes emergency shelter for only those who have no safe, alternative housing. Emergency shelters screen and refer the highest priority families and individuals to specialized family and single adult RRH programs. Our system prioritizes RRH for families with children, pregnant women, Veterans, transition-age youth, people with disabilities and/or long-term homelessness, and people with severe service needs, as identified by a standardized needs assessment. The Unified Supportive Housing System (USHS) uses HMIS data and case conferencing to screen people experiencing homelessness with disabilities for PSH. USHS prioritizes chronically homeless individuals first and screens all long-term homeless individuals and families using a standardized vulnerability screen to identify those with the most time homeless and most severe service needs. Coordinated entry protocols and standardized tools ensure the system resources are quickly and efficiently made available to those most in need of assistance. (4) Attached.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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

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

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

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

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

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

Instructions

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

1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:
(1) objective criteria;
(2) at least one factor related to achieving positive housing outcomes;
(3) a specific method for evaluating projects submitted by victim services providers; and
(4) attach evidence that supports the process selected.

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

1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:
(1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and
(2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.
(limit 2,000 characters)

(1) All CoC RRH and PSH programs prioritize for immediate assistance families with children, pregnant women, Veterans, transition-age youth, people with disabilities, people with severe service needs, and people with disabilities as identified by HMIS data, case conferencing, and standardized system-wide tools that screen and assess chronic homelessness, homeless time, criminal history, prior evictions, disabling conditions, current and past substance abuse, low or no income, and domestic violence and victimization. Standardized community-wide CPoA processes ensure that emergency shelter and TH resources are prioritized for those with no other safe, appropriate housing. The CoC's Unified Supportive Housing System (USHS) fills all new and vacated PSH units according to HUD Notice CPD-16-11. USHS uses the same prioritization guidelines for dedicated chronic homeless units and non-dedicated units. Because all programs in the system adhere to these prioritization and assessment guidelines, all programs are providing housing and services to the hardest to serve populations. The CoC takes into account during the review, ranking, and rating process that our community's CoC-funded TH project is the only project of its kind in the geographic area that serves transition-age youth.

(2) During the review, rating, and ranking process, the CoC prioritizes in Tier 1 renewal PSH that is 100% dedicated for chronically homeless populations. The CoC does not include projects in the CoC application that do not adhere to the system-wide standardized RRH, PSH, and TH prioritization and assessment requirements described above. The CoC can assess performance levels for similar programs evenly because all programs in the system provide housing and services to the hardest to serve populations.

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

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	☐	**CoC or other Website**	☐
Email	☐	**Email**	☐
Mail	☐	**Mail**	☐
Advertising in Local Newspaper(s)	☐	**Advertising in Local Newspaper(s)**	☐
Advertising on Radio or Television	☐	**Advertising on Radio or Television**	☐
Social Media (Twitter, Facebook, etc.)	☐	**Social Media (Twitter, Facebook, etc.)**	☐

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

Reallocation: No

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

The CoC actively reviews the performance of CoC Program-funded projects to determine whether reallocation is warranted. Quarterly performance reports and

monthly occupancy reports produced by Community Shelter Board (CSB, the UFA) and disseminated to the CoC highlight any performance issues. Annual performance evaluations produced by CSB compare program outcome goals with actual performance to determine consistency with CoC and HUD standards. Each project is assigned a performance rating of High, Medium, or Low as determined by achievement of performance outcomes. Ratings are based on the following: High achieve at least 75% of the measured outcomes and at least one of the successful housing outcomes; Medium achieve at least 50% but less than 75% of the measured outcomes; Low achieve less than 50% of the measured outcomes. Projects rated as Low or experiencing long-standing and/or serious program issues and/or systemic agency concerns are handled by CSB through a Quality Improvement Intervention process that includes enhanced oversight and technical assistance. Reallocation occurs if a sub-recipient is no longer interested in continuing a project or no longer needs the CoC funding as other funding is available, or if a sub-recipient underperforms, according to the above performance evaluation processes. The CoC has reallocated CoC funds based on the above processes, but has not reallocated 20 percent of the CoC's ARD between the FY2014 and FY2018 CoC Program Competitions because the CoC's comprehensive performance evaluation system has not detected a high and persistent level of underperformance among CoC projects. For projects that have experienced problems, enhanced oversight and technical assistance have often been successful in correcting performance and compliance issues. The CoC prefers to help partners improve their capacity and correct deficiencies before reallocating funds. Changing the sub-recipient is also used as an alternative to reallocation.

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

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.	Did not reject or reduce any project
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

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

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

Yes

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

(1) The roles and responsibilities of the CoC and HMIS Lead are found on pages 2-5 in the document referenced in 2A-1. (2) The attachment for question 2A-1 is an HMIS Governance Charter.

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

Yes

2A-3. HMIS Vender. What is the name of the HMIS software vendor?

Mediware

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

Single CoC

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

(3) total number of beds in HMIS.

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	1,098	51	1,047	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	106	18	88	100.00%
Rapid Re-Housing (RRH) beds	734	0	734	100.00%
Permanent Supportive Housing (PSH) beds	2,708	0	2,651	97.90%
Other Permanent Housing (OPH) beds	0	0	0	

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

N/A

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

2A-7. CoC Data Submission in HDX. Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 04/17/2018

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

Instructions:

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

2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy).   01/31/2018

2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).   04/17/2018

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

Instructions:

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

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

N/A

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

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

Beds Added:	0
Beds Removed:	0
Total:	0

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

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

Beds Added:	0
Beds Removed:	0
Total:	0

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

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

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

(1) Our local youth outreach organization (Huckleberry House) and local youth drop-in centers (Huckleberry House YOP Shop and Star House) participated in planning meetings for the 2018 PIT Count. They helped identify and map locations where youth stay and worked with local gathering points to create "come be counted" locations for youth who were not engaged during the early morning or school counts. (2) Volunteers collected surveys at Huckleberry House YOP Shop and Star House and at locations identified by youth providers as places where homeless youth congregate. 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. (3) Huckleberry House and Star House recruited youth volunteers to administer PIT surveys during the count.

2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count:
(1) individuals and families experiencing chronic homelessness;
(2) families with children experiencing homelessness; and
(3) Veterans experiencing homelessness.
(limit 2,000 characters)

(1) In addition to canvassing known locations and working with outreach providers to identify target areas, the CoC has continued over the past year to work with our local PATH program to improve and more effectively incorporate PATH outreach data into the PIT count. We also worked to standardize HMIS data collection and quality assurance protocols for all the street outreach providers to improve identification of those that meet chronic homeless criteria. Furthermore, a by-name list of chronic homeless individuals is issued and

reviewed monthly by system partners. (2) Our community has made a commitment to ensuring access to emergency shelter for all families with children. Consequently, very few families are unsheltered, and all sheltered families are included in HMIS. Standardized HMIS data collection and quality assurance protocols for emergency shelter and street outreach allow us to reliably identify sheltered and unsheltered families. A comprehensive daily by-name list of homeless families is available using HMIS data, enabling the availability of accurate and up-to-date data for the PIT count. (3) Our community maintains a by-name list of Veterans that is updated each business day and uses case conferencing for all homeless Veterans, enabling us to accurately identify all homeless Veterans for the PIT count. Also, our community has made a commitment to ensuring access to emergency shelter for all Veterans. Because of this, few Veterans are unsheltered, and all sheltered Veterans are included in HMIS. We continue to include all local VA HCHV community contract beds, GPD beds and VA-funded outreach clients in HMIS, enabling the availability of accurate and up-to-date data for the PIT count. Standardized HMIS data collection and quality assurance protocols for emergency shelter and street outreach allow us to reliably identify sheltered and unsheltered Veterans.

3A. Continuum of Care (CoC) System Performance

Instructions

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

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

Number of First Time Homeless as Reported in HDX.	5,936

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

(1) The CoC determined that reduced benefits and higher rents are primary risk factors for homelessness by collaborating with Abt Associates and The Columbus Foundation on a 2015 report that identified causes of homelessness and housing instability in our community. The CoC also conducts an annual evaluation examining self-reported factors contributing to homelessness to inform efforts to strengthen and target prevention efforts for persons becoming homeless for the first time. (2) To address families at risk of becoming homeless, a public/private collaborative is implementing a plan to improve existing family prevention services and create new services. The collaborative is also working with Legal Aid and City and County officials to adjust local eviction policies and procedures. The CoC works with Franklin County Children Services to help prevent homelessness among families involved with child protective services. CPoA connects families and individuals to homelessness prevention resources and programs to help avoid entering emergency shelter. The CoC recently initiated development of a targeted prevention hub in collaboration with Franklin County Department of Job and Family Services and the United Way of Central Ohio that uses standardized risk criteria and a corresponding screener to identify households who will lose housing imminently and have no viable housing alternatives or resources. Improved screening helps focus on those for whom literal homelessness will occur absent assistance. The hub will incorporate best practices from other communities and target prevention initiatives for specific sub-populations at greatest risk of homelessness. Collaboration with other systems of care will help identify housing needs prior to discharge from medical facilities or jail and prison. These efforts combined have reduced the number of first time homeless from 7,361 in FY2016 to 5,716 in FY2017. (3) Community Shelter Board is responsible for

overseeing this strategy.

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

(1) The average length of time individuals and persons in families remained homeless was 55 nights. (2) Emergency shelters screen guests and refer the highest priority families and individuals to RRH programs. Our CoC prioritizes for RRH families with children, pregnant women, Veterans, transition-age youth, people with disabilities, and people with severe service needs and long homeless times. RRH case manages work with households to develop housing plans, engage landlords, remove barriers, and promote housing stability. Over the next year the CoC will develop and implement a system-wide landlord recruitment and retention initiative, in concert with system partners, including marketing and outreach activities to improve the system's access to market-rate and subsidized rental units in our tight housing market, which impedes our ability to quickly house. The CoC is also supporting community efforts to increase the availability of and greater access to safe and affordable rental housing to meet the needs of individuals and families who are homeless or imminently at-risk of homelessness. The CoC also aggressively pursues resources and opportunities to increase the community's supply of RRH and PSH units. Quicker access to rental units and an increased supply of affordable housing will reduce length-of-stay. (3) An HMIS report is used regularly to review individuals and families with the longest homeless time. The CoC also uses a standardized system-wide needs assessment and case conferencing to identify those with the longest homeless time and most severe service needs. CoC projects prioritize for immediate assistance families, pregnant women, Veterans, transition-age youth, people with disabilities, and people with severe service needs. The CoC's Unified Supportive Housing System (USHS) fills all new and vacated PSH units according to HUD Notice CPD-16-11. (4) Community Shelter Board is responsible for overseeing the CoC's strategy to reduce length-of-time-homeless.

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

Percentage

Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	47%
Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	93%

3A-3a. Applicants must:
 (1) describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and
 (2) describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.
(limit 2,000 characters)

(1) Shelters and RRH programs collaborate to quickly house people, link them to resources and services, and provide aftercare to ensure stability. Shelters are required to screen people after entry in emergency shelter and refer to RRH those who are prioritized for assistance - families with children, pregnant women, Veterans, transition-age youth, people with disabilities, and people with severe service needs and long homeless times. RRH case managers work with households to develop housing plans, engage with landlords, remove barriers, quickly secure housing, and promote housing stability. TH programs work to stabilize households prior to permanent housing placement to increase the likelihood of success at program exit. Once housing is identified, RRH, TH, and shelter providers have access to financial assistance funds to pay security deposits and first few months of rent. The financial assistance is flexible in that it is offered based on the household's needs and landlord requirements, improving the positive housing rate. The CoC's system-wide landlord recruitment and retention initiative and active support of community efforts to increase the availability of affordable housing also enhances program participants' ability to obtain and retain stable, permanent housing by increasing the supply of options available to homeless people. No safe haven programs are available in the CoC. (2) Housing stability for persons in permanent housing is already quite high at 93%. To maintain and improve this percentage, PSH providers maintain close contact with residents so they can identify anyone who may become precariously housed and take immediate action to re-stabilize them. At least annually, PSH providers assess residents' readiness and willingness to move to independent housing using a standardized assessment tool. Residents are not exited from PSH until they feel confident that they can retain housing stability without PSH assistance.

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

	Percentage
Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX	9%

3A-4a. Applicants must:
 (1) describe how the CoC identifies common factors of individuals and

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

(1) Community Shelter Board (CSB, the UFA) tracks returns via HMIS and conducts an annual evaluation at program and system level, inclusive of recidivism rates. CSB examines if there are programs with recidivism rates outside the norm to identify factors that contributed to the higher or lower rates. CSB also examines self-reported factors contributing to homelessness. Constant collaboration between emergency shelter and RRH providers via case conferencing and regular system workgroup meetings also help inform the CoC of trends and factors that impact the return to homelessness. Periodic in-depth research projects augment information gathered from HMIS and workgroups. (2) To reduce recidivism, our CoC prioritizes assistance for those with the highest barriers and most severe service needs. RRH programs prioritize families with children, pregnant women, Veterans, transition-age youth, people with disabilities, and people with severe service needs and long homeless times. RRH case manages work with households to develop housing plans, engage landlords, remove barriers, and promote housing stability. They also provide aftercare to ensure that individuals and families maintain stability and have resources to leverage in case of setbacks. Housed individuals and families are encouraged to contact their former case manager if they encounter a housing crisis, even after services end, to problem-solve and reduce the likelihood of recidivism. CPoA staff link people to prevention programs to prevent repeat homelessness. For PSH, the Unified Supportive Housing System prioritizes chronically homeless individuals first and then those with the most time homeless and most severe service needs. All RRH and PSH programs have robust eviction prevention policies and procedures. The CoC is implementing system-wide targeted prevention initiatives to focus on those at highest risk of homelessness, including those most likely to return to homelessness. (3) CSB oversees this strategy.

3A-5. Job and Income Growth. Applicants must:
(1) describe the CoC's strategy to increase access to employment and non-employment cash sources;
(2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
(3) provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase job and income growth from employment.
(limit 2,000 characters)

(1) Shelter and housing providers make available to program participants various employment and income resources, including job search and application support. Providers have resource rooms where participants can access job sites and work on resumes. Several providers have implemented successful employment and work equity programs that include training, workshops, and collaboration with employers. Each provider is required to have certified staff who can apply for income assistance through the Ohio Benefits

Bank, an online portal for public benefit applications. Some providers also have SOAR-trained staff. Case managers, with program participant permission, apply for assistance on behalf of the participant, expediting the process. These efforts have resulted in an increase in both employment and non-employment income in our CoC for system-stayers between FY2016 and FY2017. (2) The CoC is collaborating with the Workforce Development Board of Central Ohio, which is refocusing services to better help people experiencing homelessness. Over the next year we will work with the Workforce Development Board to develop a standardized screening tool and related protocols for identifying employment-related needs and connecting people to the most appropriate community-based services. (3) Franklin County Department of Job and Family Services, Franklin County Workforce Development Board and Community Shelter Board oversee the CoC's strategy to increase job and income growth from employment.

3A-6. System Performance Measures Data Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017 (mm/dd/yyyy)   05/30/2018

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

Instructions

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

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

Total number of beds dedicated as DedicatedPLUS	0
Total number of beds dedicated to individuals and families experiencing chronic homelessness	2,001
Total	2,001

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

Yes

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

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

3B-2.2. Applicants must:
(1) describe the CoC's current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;
(2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and
(3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.
(limit 2,000 characters)

(1) Emergency shelters screen families within two days of entry for housing and service needs. Weekly case conferencing with emergency shelters and RRH and PSH providers help ensure that families are rehoused as quickly as possible. An HMIS report identifying long-staying families is routinely generated and discussed in case conferencing meetings, along with high complexity families. Our CoC prioritizes RRH assistance for families with children, particularly pregnant women and families that include people with severe service needs. RRH case manages work with families to develop housing plans, engage with landlords, remove barriers, and promote housing stability. Emergency shelter and RRH staff conduct RRH intake within 2 business days after families are assigned to a RRH program. The CoC collaborates with community partners to establish a care pathway for pregnant women. The CoC aggressively pursues resources and opportunities to increase the community's supply of RRH units. (2) RRH case managers provide aftercare to ensure that families maintain stability. RRH assistance, including financial assistance, is tailored to each family's need and assistance ends only when there is a high likelihood of success. Housed families are encouraged to contact their former case manager if they encounter a housing crisis, even after services end, to problem-solve and reduce recidivism. Over the next year the CoC will develop and implement system-wide landlord recruitment and retention initiative, including marketing and outreach activities to improve the system's access to rental units. The CoC is actively supporting community efforts to increase the availability of and greater access to safe and affordable rental housing to meet the needs of families who are homeless or at-risk of homelessness. Increasing access to and supply of affordable housing will help families exit shelter faster and retain housing more easily. (3) Community Shelter Board oversees this strategy.

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

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	☐
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	☐
CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	☐
CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	☐

CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	☐

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

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

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

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

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

(1) The CoC is aggressively pursuing new resources and leveraging existing resources by developing more effective collaboration with youth-serving entities in our community. Participation in the 100-Day Challenge in 2017 helped galvanize partners and illuminate areas for improvement. The CoC has secured private funding for a full-time youth system manager to further develop and implement the CoC's strategy to increase housing and services for youth experiencing homelessness. The CoC was awarded Youth Homelessness Demonstration Program funding to implement a coordinated community plan (CCP) to prevent and end youth homelessness. A draft CCP will be submitted to HUD by 11/13/2018. CSB also applied for a 2-year, $300,000 private foundation grant to support CCP planning and implementation, as well as RRH assistance for pregnant and parenting youth. Transition-age youth are one of

the priority populations for the CoC's single-adult RRH program and the CoC has approved development of a new PSH project for youth scheduled to open in fall 2020. This new PSH project will adhere to Housing First, Trauma Informed Care, and Positive Youth Development practices. Based on input from our community's Youth Action Board and other youth forums, the CoC will pursue more flexible shelter and housing options, including dormitory-style cooperative housing, intentional neighboring, shared housing with appropriate financial and other safeguards, and creative use of vacant property. This includes development of youth-centric PSH options that provide on-site access to stabilizing resources, such as employment, training, services, transportation, and supportive relationships. The goal is to launch youth into independent housing once stability is achieved. (2) For unsheltered and unsafely housed youth, the CoC is working to further develop and maintain an up-to-date by-name list and will implement related case conferencing to address complex issues. Based on a pilot implemented during the 100-day challenge, unsheltered youth included on this by-name list will have access to RRH assistance. The CoC will develop access points, shelter options, and services that are tailored for youth as part of the CCP and ongoing implementation of a comprehensive youth homeless crisis response system, including unsheltered youth The CCP will address comprehensive and unique outreach strategies involving a wide array of public system partners (e.g., high schools, libraries, recreation centers, college student centers, public transportation) and ensuring youth are quickly engaged, screened, and connected to needed shelter, housing, and services. Over the next year the CoC will develop and implement system-wide landlord recruitment and retention initiative, and is actively supporting community efforts to increase the availability of and greater access to safe and affordable rental housing.

3B-2.6a. Applicants must:
(1) provide evidence the CoC uses to measure both strategies in question 3B-2.6. to increase the availability of housing and services for youth experiencing homelessness;
(2) describe the measure(s) the CoC uses to calculate the effectiveness of the strategies; and
(3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC's strategies.
(limit 3,000 characters)

(1) The YHDP award, the addition of a youth system manager, a new youth-dedicated PSH project, tailored RRH for unsheltered youth, and prioritization of transition-age youth for RRH services increase housing and services availability for sheltered and unsheltered youth. The CoC is developing new coordinated entry access points for youth and outreach that will enable better tracking, identification, and linkage and provide a better understanding of youth homelessness in our area. The YHDP Coordinated Community Plan (CCP) will be completed by 11/13/18 and will provide a comprehensive approach for estimating demand for housing and services based on the size, characteristics, and service needs of homeless youth. We will compare this demand to the system inventory for all program types to identify gaps and implement strategies to fill these gaps. (2) The CoC uses HMIS data, feedback from the Youth Action Board (YAB), and quarterly youth needs assessments conducted by Star House drop in center and the Ohio State University. CSB, on behalf of the CoC, issues quarterly performance reports and annually a Snapshot report that has a

section dedicated to youth homelessness data. These reports will track the impact of the added resources by showing a decrease in youth homelessness, an increase in the success rate at exit for homeless youth, and a reduction in returns to homelessness. Feedback from the YAB will focus efforts on the needs of youth and tailor the new initiatives to best fit those needs. The Star House assessments are based on a voluntary, 20-minute, and 52-question structured one-on-one interview that surveys demographic data and areas relevant to homelessness. Data is cross-tabulated and filtered to examine youth sub-populations and feedback from youth on resources, housing and services to make sure they have the desired impact. The CoC gathers an annual aggregated count of homeless youth from local education agencies, as submitted to the U.S. Department of Education via the EdFacts data system. We expect these numbers to decrease as new housing and service opportunities for youth begin to operate effectively. (3) Our strategy for ending youth homelessness is in an incipient phase and we expect these measures to evolve over time. Using HMIS data, our CoC has experience measuring system and program performance to ensure effectiveness and efficiency, including annual measurement and reporting on youth that helped inform our efforts to date. We will adapt measurement and reporting approaches following CCP completion to assure valid, reliable measurement of system and program performance. The qualitative feedback from youth participating in our CoC governance structure, YAB, and the quarterly assessments conducted by Star House augment data-derived performance measurement and allow the CoC to evaluate the qualitative effects of strategies and solicit additional information to continuously improve initiatives aimed at reducing youth homelessness.

3B-2.7. Collaboration–Education Services. Applicants must describe how the CoC collaborates with:
(1) youth education providers;
(2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);
(3) school districts; and
(4) the formal partnerships with (1) through (3) above.
(limit 2,000 characters)

(1) The CoC collaborates with Columbus State Community College to identify ways to assist youth who are experiencing homelessness or at-risk of experiencing homelessness pursue educational opportunities. CoC-funded youth provider Huckleberry House collaborates with local high schools and GED providers on educational opportunities for youth served in Huckleberry House's youth shelter and transitional living program. (2) Two McKinney-Vento LEAs – Columbus City Schools and South-Western City Schools – participate in the CoC Committee to Prevent and End Youth Homelessness. (3) Columbus City Schools Project Connect (the largest LEA) works with social service agencies that provide shelter and housing services to families. These agencies identify children living in transition and refer them to Project Connect to keep children in their school of origin or ensure immediate enrollment in the school serving the family's temporary address. City school buses provide daily transportation for children staying in our community's two family emergency shelters, taking children to and from their school of origin. Project Connect also attends family system operations workgroup meetings, as needed. Additional partnership opportunities with the Franklin County Educational Services Center are being developed as part of the YHDP Coordinated Community Plan and youth

committee efforts. (4) Columbus State Community College, Huckleberry House, and Columbus City Schools Project Connect have voting representatives on the CoC governing body. Columbus City Schools and South-Western City Schools have formal Memoranda of Understanding with the CoC, codifying collaboration on the CoC's plan to prevent and end youth homelessness.

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

Each program in the homeless system is required to ensure that children and youth have access to public education and receive assistance exercising their rights as protected by the McKinney-Vento Homeless Assistance Act of 1987. Community Shelter Board (UFA), on behalf of the CoC, monitors all programs annually to ensure that program staff takes measures to ensure that program participants' rights are not violated in regard to public education, including contact with the local Homeless Education Liaison. Each program must demonstrate consistent implementation of processes for advising heads of households of their rights upon entry into the program. Participant files for households with children must demonstrate collaboration with the Homeless Education Liaison to place children in public school, early childhood programs such as Head Start, Part C services in accordance with the Individuals with Disabilities Education Act, and/or other programs authorized under Subtitle B of Title VII of the McKinney-Vento Homeless Assistance Act of 1987. If a family with school-aged children enters emergency shelter, Columbus City Schools Project Connect is informed immediately and the child(ren) will continue to attend school at their school of origin, using the Project Connect busses that pick up children from emergency shelters and transport them to their schools every morning. If a family with children is entering permanent housing, the program staff makes efforts to house the family as close as possible to its school of origin so as not to disrupt children's education.

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

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

YWCA Safe and Sound	No	Yes

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

Our CoC has nearly achieved an effective end to Veteran homelessness. We currently meet all federal criteria and are very close to meeting federal benchmarks as our average time to housing nears 90 days or less with only 1-2 chronic or long term homeless Veterans remaining. The system's outreach team, including the VA HCHV-funded outreach team, identifies unsheltered Veterans and CPoA screens all callers to identify Veterans who need prevention assistance or shelter. Our community ensures immediate access to shelter for all Veterans who lack another safe housing option, including immediate placement in HCHV-funded shelter beds for eligible Veterans. Each business day the VA uses HMIS to issue a list of Veterans who accessed the system the prior night. SSVF providers are required to engage, assess, and enroll SSVF-eligible Veterans or link them with locally funded RRH within 48 hours of identification. Homeless Veterans are assessed using a standardized system-wide housing needs assessment to determine whether GPD assistance is needed and which housing intervention(s) would be most appropriate. Bi-weekly case conferencing includes representative from all entities that can provide assistance to Veterans–including HUD-VASH, VA, SSVF, and GPD programs–and addresses Veterans who need more intensive interventions and collective effort. SSVF, our locally funded RRH program, outreach, and shelter programs continuously follow up with Veterans who decline assistance. Bi-weekly Veteran system operations workgroup meetings include representatives from the VA, Veterans Service Commission, system RRH, SSVF, HUD-VASH, HCHV, and GPD providers, emergency shelter, and street outreach staff. Participants discuss system performance, policies and practices, and improvements. The CoC conducted a new Veteran Challenge in summer 2018 with a focus on rapid resolution and re-housing. The CoC is also participating in the SSVF Rapid Resolution Pilot to further improve the local system.

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

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

3B-3.4. Does the CoC have sufficient resources to ensure each Veteran   Yes

experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?

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

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

People of different races or ethnicities are more or less likely to receive homeless assistance.	X
People of different races or ethnicities are more or less likely to receive a positive outcome from homeless assistance.	X
There are no racial disparities in the provision or outcome of homeless assistance.	X
The results are inconclusive for racial disparities in the provision or outcome of homeless assistance.	

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

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

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

Instructions:

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

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

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

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

(1) The CoC requires that all homelessness assistance programs have employees certified by Ohio Benefits Bank to help program participants enroll in benefit programs, including Ohio Works First, Healthy Start, WIC, Public Child Care, Head Start, SNAP, Medicaid, Medicare, SSI, and SSDI. Agencies also have or work with SOAR-trained personnel to augment the system's capability to enroll program participants in benefit programs. The CoC requires that all projects help households utilize benefits by helping participants make appointments and facilitating transportation for those appointments. Staff also helps participants understand how to use benefits appropriately and effectively. System providers deliver or contract with organizations that deliver Medicaid-reimbursable services and services funded by the local Alcohol, Drug, and

Mental Health Board. System partners also operate or collaborate with Federally-Qualified Health Centers. (2) The CoC keeps program staff up-to-date regarding mainstream resources by sharing information on cash assistance, non-cash benefits, and mental health and substance abuse treatment services during weekly system operations workgroup meetings and email communications. Community Shelter Board (CSB, the UFA) works with organizations that provide mainstream benefits to present information on their programs during system meetings. CSB is collaborating with other communities in Ohio to bring to our CoC best practices for leveraging Medicaid on behalf of homeless program participants. CSB, on behalf of the CoC, monitors all programs annually to ensure that system staff is trained and capable of helping program participants enroll in and utilize mainstream benefits. CSB is collaborating with the Franklin County Department of Job and Family Services (FCDJFS) to educate system staff on a new online benefits application process. (3) FCDJFS, Franklin County Workforce Development Board, and CSB are responsible for overseeing this strategy.

4A-2.Housing First: Applicants must report:
(1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and
(2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach–meaning that the project quickly houses clients without preconditions or service participation requirements.

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	31
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach–meaning that the project quickly houses clients without preconditions or service participation requirements.	31
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	100%

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

(1) The CoC's collaborative outreach team proactively engages people living in places not meant for human habitation. The cross-agency team coordinates and provides outreach coverage, engagement, assessment, housing search and placement, and services. The outreach team is widely known in the community and works closely with the City of Columbus, Franklin County, local hospitals, businesses and area business associations, law enforcement, and social service and faith-based organizations to quickly respond to requests for

engagement when unsheltered homeless persons are identified on the streets or in camps, vehicles, and abandoned buildings. Outreach Specialists also work closely with system operations workgroups that maintain by-name lists for priority sub-populations, such as chronically homeless persons and homeless Veterans and youth. (2) The CoC's street outreach covers 100 percent of the CoC's geographic area. (3) Outreach Specialists conduct street outreach daily. Outreach Specialists repeat contact and engagement attempts with each individual at least monthly with the goal of placing the individual in housing or emergency shelter. The Outreach team works with CPoA to link people to community resources and shelter, as needed. (4) The outreach team proactively seeks new locations where people experiencing homelessness congregate. Collaboration with the City, County, and local businesses help identify opportunities to engage and support people experiencing homelessness throughout the entire geographic area. Communication with other systems of care – such as health care providers, faith-based organizations, social service providers, community programs, and law enforcement –identifies people who need help, but are unlikely to seek homelessness assistance. Outreach specialists can access translators for people who speak languages other than English and have training and expertise on how to communicate with those with cognitive and physical disabilities.

4A-4. Affirmative Outreach. Applicants must describe:
(1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability; and
(2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above.
(limit 2,000 characters)

(1) Community Shelter Board (CSB, the UFA), on behalf of the CoC, monitors all homeless assistance programs annually to ensure that each partner agency affirmatively furthers fair housing and has a written affirmative marketing strategy to market the program and its benefits to those least likely to apply without regard to race, color, national origin, sex, religion, familial status, and disability, as required by 24 CFR Part 578.93(c). Regular system-wide training and initiatives related to racism and homelessness and youth – particularly LGBTQ youth – support efforts to affirmatively market programs to eligible people regardless of race, color, national origin, sex, religion, familial status, or disability. For example, our next system-wide training on Equal Access will be offered by CSB on September 17, 2018 and is open to all staff at programs serving homeless or at risk individuals and families. CSB is the ombudsman for the system and acts promptly on any concerns, including allegations of discrimination or violations of fair housing rules. (2) Trainings offered by CSB and by other community partners, like the Equal Access training noted above, provide homeless system providers the information necessary to provide effective communications for persons with disabilities. CSB ensures that each program has a cultural competency plan that includes access to translation services for persons with limited English proficiency and access to large print materials, sign-language interpreters, Braille, and other appropriate resources for persons with disabilities. CSB monitors implementation of this plan annually. Agencies are also required to ensure that information technology – including but

not limited to, computers, fax machines, copiers, and telephones – is accessible to persons with disabilities, as required by Section 508 of the Rehabilitation Act.

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

	2017	2018	Difference
RRH beds available to serve all populations in the HIC	392	734	342

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

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

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
1C-5. PHA Administration Plan–Homeless Preference	No	PHA Administratio...	08/17/2018
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	Coordinated Asses...	08/17/2018
1E-1. Objective Critiera–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes	CoC Rating and Ra...	08/17/2018
1E-3. Public Posting CoC-Approved Consolidated Application	Yes	Public Posting Co...	08/31/2018
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	Public Posting Pr...	08/17/2018
1E-4. CoC's Reallocation Process	Yes	CoC Process for R...	08/17/2018
1E-5. Notifications Outside e-snaps–Projects Accepted	Yes	Notifications Out...	08/30/2018
1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced	Yes	Project Rejection...	08/17/2018
1E-5. Public Posting–Local Competition Deadline	Yes	Local Competition...	08/17/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	CoC and HMIS Lead...	08/17/2018
2A-2. HMIS–Policies and Procedures Manual	Yes	HMIS Policy and P...	08/17/2018
3A-6. HDX–2018 Competition Report	Yes	FY 2018 CoC Compe...	08/17/2018
3B-2. Order of Priority–Written Standards	No	Order of Priority	08/17/2018

3B-5. Racial Disparities Summary	No	Racial Disparity ...	09/07/2018
4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
Other	No		
Other	No		
Other	No		

Attachment Details

Document Description: PHA Administration Plan

Attachment Details

Document Description:

Attachment Details

Document Description: Coordinated Assessment Tool

Attachment Details

Document Description: CoC Rating and Ranking Procedure

Attachment Details

Document Description: Public Posting CoC-Approved Consolidated Application

Attachment Details

Document Description: Public Posting Project Selections, Ranking, and CoC Application

Attachment Details

Document Description: CoC Process for Reallocation

Attachment Details

Document Description: Notifications Outside e-snaps–Projects Accepted

Attachment Details

Document Description: Project Rejection-Reduction Notification

Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: CoC and HMIS Lead Governance

Attachment Details

Document Description: HMIS Policy and Procedures Manual

Attachment Details

Document Description: FY 2018 CoC Competition Report

Attachment Details

Document Description: Order of Priority

Attachment Details

Document Description: Racial Disparity Assessment Summary

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	08/02/2018
1B. Engagement	08/23/2018
1C. Coordination	08/23/2018
1D. Discharge Planning	08/23/2018
1E. Project Review	08/23/2018
2A. HMIS Implementation	08/23/2018
2B. PIT Count	08/23/2018
2C. Sheltered Data - Methods	08/23/2018
3A. System Performance	08/29/2018
3B. Performance and Strategic Planning	08/23/2018
4A. Mainstream Benefits and Additional Policies	08/23/2018
4B. Attachments	08/31/2018

Submission Summary   No Input Required

July 16, 2018

Michelle Heritage
Community Shelter Board
111 Liberty Street, Suite 150
Columbus, OH 43215

Michelle,

The Columbus Metropolitan Housing Authority (CMHA) is a committed partner in the Columbus and Franklin County Continuum of Care and the work to end homelessness in our community. The local goal is to open one new permanent supportive housing project every year and so far, with the support of the Housing Choice Voucher (HCV) program, this goal has been met.

CMHA prioritizes homeless individuals and families for housing in the HCV program. The admission preference for the homeless population is included in CMHA's Housing Choice Voucher Administrative Plan.

CMHA has 2,341 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 the available HCV capacity. The Housing Opportunity Through Modernization Act of 2016 increased the PBV cap and ensures an increase in the number of PBV vouchers available for use in housing the homeless population.

Sincerely,

Ron Lebsock
SVP Housing Programs

2. CMHA ADMISSION PREFERENCES

CMHA has established the following Local Admission Preferences that will be used to select applicants to be placed on a Wait List and be issued a Housing Choice Voucher:

A. Under 30% of Area Median Income (HUD 75% Program requirement)

B. Family Composition Preference

1. Families with 2 or more persons

2. Families that include a person with disabilities.

3. A household headed by a disabled or elderly person (62 years or older)

4. Single persons who are age 62 or older, displaced, homeless or is a person with disabilities.

C. Families residing in or who have been hired to work in the eight county Columbus Metropolitan Area (Franklin, Union, Delaware, Madison, Pickaway, Licking, Union and Fairfield).

D. An active duty military or veteran's preference pursuant to the Ohio Revised Code

E. Families not receiving any permanent rental assistance. Rental assistance is defined as any type of federal, state, or local housing rental assistance payment that is currently received by the family. Examples include, but are not necessarily limited to, HOPWA, HOME, Section 202 rental assistance, Shelter Plus Care, Ohio Department of Alcohol and Drug Addiction Services and/or Mental Health rental assistance, Housing Choice Voucher Project-Based, or Public Housing Programs. Rental Assistance does not include any type of rental assistance that is categorized as temporary or transitional in nature.

F. Referrals from social service and housing organizations providing supportive services to participants in CMHA's Project-Based Voucher Program.

G. Referrals from local supportive service organizations that have agreements with CMHA to provide supportive services to homeless, displaced and/or disabled persons and families and other at-risk populations, including referrals from Columbus Community Shelter Board agencies and the Franklin County ADAMH Board.

3. ASSIGNMENT OF ADMISSION PREFERENCE POINTS

As Preliminary Applications are submitted and placed in the Lottery Pool, Admission Preference Points will be assigned without verification on a provisional basis. At the time Full Applications

CPOA Triage Form

Triage Performed By: _____ **Date:** _____

Type of Triage: _____Appointment _____Telephone

Time: _____

Begin Call:

Thank you for calling the Homeless Hotline. My name is (STATE YOUR NAME).

Before we start, do you have any minor children?

Are you under the age of 18?
If so, I can provide you with the number to Huckleberry House, a Teen Crisis Center (614-294-5553).

If not, I need to get some basic information from you (*ask all questions before contact resolution*).

All information in this call is confidential; it will only be shared with partnership agencies that are providing services. Is this okay with you? _____ Yes _____No

---

Collect the following information:

Social Security Number: _____
Name: _____
Date of Birth: _____
Gender: _____
Race: _____
Ethnicity: _____
Are you employed? _____

What is the phone number where you can be reached? _____

Where did you stay last night?

	1	Emergency shelter, including hotel or motel paid for with emergency shelter voucher
	2	Transitional housing for homeless persons (including homeless youth)
	3	Permanent housing for formerly homeless persons (such as SHP, S + C or SRO Mod Rehab)
	4	Psychiatric hospital or other psychiatric facility
	5	Substance abuse treatment facility or detox center
	6	Hospital (non-psychiatric)
	7	Jail, prison, or juvenile detention facility
	12	Staying or living in a family member's room, apartment, or house
	13	Staying or living in a friend's room, apartment, or house
	14	Hotel or motel paid for without emergency shelter voucher
	15	Foster care home or foster care group home
	16	Place not meant for habitation (e.g. a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside); inclusive of "non-housing service site (outreach programs only)"
	17	Other
	18	Safe Haven
	19	Rental by client with VASH housing subsidy
	20	Rental by client with other (non-VASH) ongoing housing subsidy
	21	Owned by client, with ongoing housing subsidy
	22	Rental by client, no ongoing housing subsidy
	23	Owned by client, no ongoing housing subsidy
	8	Don't Know
	9	Unknown

CPOA Triage Form

How long have you been staying there?
- ☐ One week or less
- ☐ More than one week, but less than one month
- ☐ One to three months
- ☐ More than three months, but less than one year
- ☐ One year or longer
- ☐ Don't Know
- ☐ Refused

Is it in the city of Columbus? _____ Yes   _____ No

Address? _____
If client is unsure of address, ask probing question to try and determine general location.

Why did you have to leave this place?

<mark>**Thank you for providing that basic information.**</mark>

How may I assist you today?

Can you tell me a little about your current situation? (Listen for what their needs are).

Try to Divert, (please use the following questions):

1. **Do you have any income?**

2. **How much money do you have (to determine if a motel or rent is possible)?**

3. **What is your housing status in this moment?**
   - ☐ Literally homeless

   - ☐ Imminently losing housing

     If you are not yet homeless, I would like to provide you with the number to our information and referral line, where specialists may be able to help you with community resources. The number is 614-221-2255.

   - ☐ Unstably Housed and at risk of losing housing

     If you are not yet homeless, I would like to provide you with the number to our 2-1-1 line, where specialists may be able to help you with community resources. The number is 614-221-2255.

   - ☐ Stably Housed

4. **Could any of these resources help you stay remain in your current housing?** (*If yes, give 2-1-1 number*)
   - ☐ Utility assistance to prevent disconnection
   - ☐ Mortgage assistance to prevent foreclosure
   - ☐ First month's rent to establish housing
   - ☐ Security deposit to establish housing
   - ☐ Rental assistance to prevent eviction
   - ☐ Help applying for SSI or other non-cash benefits
   - ☐ Employment
   - ☐ Mediation (family, roommate, landlord)

CPOA Triage Form

☐ Case Management
☐ Transportation
☐ Other: _____

5. **If you are staying with friends/family, can you stay there again tonight**?
☐ No: Ask them how long they have been staying there and why they cannot continue to stay there.

(If they still can't stay there ask them if they have any other family/friends in the area they can stay with tonight).

6. **Is there anyone else you could stay with for at least the next three (3) to seven (7) days if you were able to receive case management services/transportation assistance/limited financial support?** (*If yes, give 2-1-1 number*)

7. **Who do you usually call when you need help? Can you contact him or her?**

8. **If we are unable to provide you shelter for the night where will you stay?**

9. **Where do you have your personal belongings?**

10. **Do you belong to a church? If yes, is there a church member willing to help you?**

11. **Are you currently in a domestic violence situation?**
☐ Yes: I can provide you with the number to CHOICES (614-224-4663).

12. **Are you currently intoxicated or under the influence of another substance?**
☐ Yes: I can provide you with the number to Netcare (614-276-2273).

13. **Have you been diagnosed with a mental health disorder?**
☐ Yes: Are you linked with one of the mental health agencies?

☐ Yes: Do you have a case manager?

Is s/he aware of your situation?

☐ No: Netcare's Number is 614-276-2273. Netcare does not provide shelter, but it can link you with mental health services.

We have to do a local check for sex offenses

Have you ever been convicted of a Sex Offense? _____ Yes   _____ No

If Yes, what classification? (*Check One*):
☐ Tier I
☐ Tier II
☐ Tier III
☐ Pre AWA Sexually Oriented Offender
☐ Pre AWA Habitual Sex Offender w/o notification
☐ Pre AWA Habitual Sex Offender w/ notification
☐ Pre AWA Sexual Predator
☐ Pre AWA Aggravated Sexually Oriented Offense
☐ Pre AWA Child Victim Offender
☐ Pre AWA Child Victim Predator

Background check completed? (*Check one below*)

CPOA Triage Form

☐ Local (Free)
☐ National (Paid)
☐ Both (Local & National)
☐ NA (Client Diverted or not Homeless, call interrupted, etc.)

Demand for a shelter bed is very high and we cannot reserve a space for you in our program or place you on the waiting list unless you are ready to enter the program immediately.

14. Are you looking to obtain shelter services for tonight? _____ Yes _____No

Contact Resolution: (*check one*)
☐ Client Advised to Call Back Once Discharged from Current Shelter
☐ Client called from Shelter - Advised to Remain There
☐ Client Ineligible
☐ Waitlisted
☐ Diverted
☐ Admitted/Scheduled for Intake
☐ Refused Services
☐ Call Interrupted or Incomplete
☐ Scheduled for Appeal
☐ No Show; Other

If __Diverted__/Don't need shelter tonight, complete section C

C. Diversion

Client Diverted to:

Select Here	#	Disposition Reason
	1	Referred to Alcohol/Drug Treatment Facilities
	2	Diverted to Friends or Family
	3	Referred to Choices
	4	Referred to CIS Stable Families Program
	5	Referred to City/County Assistance
	6	Referred to HOCO 211
	7	Diverted to current household location
	8	Referred to Landlord Mediation and Resolution (Legal Aid)
	9	Referred to Mental Health Services
	10	Referred to ODJFS
	11	Diverted to Rental Assistance
	12	Referred to Utility Assistance
	13	Referred to Veteran Affairs
	14	Other:

CPOA Triage Form

If <u>NOT</u> Diverted/Need shelter tonight, finish intake (except section C)

1. **Are you an immigrant or refugee?** ____ Yes ____ No

   If yes, what is the country of your birth?_____

2. **What is the primary reason for your homelessness?** _____

3. **What is the secondary reason for your homelessness?** _____

4. **Have you been continuously homeless for a year or more OR have you had 4 (or more) episodes of homelessness in the past 3 years?_____Yes_____No**

5. **What is the zip code of your last permanent address?** _____
   If client is unsure of address, ask probing question to try and determine general location.

   Is this zip code in…? (*Check one below***)**
   ☐ Columbus
   ☐ Franklin County, not Columbus
   ☐ Outside Franklin County, in Ohio
   ☐ Outside Ohio
   ☐ Don't know

6. **Do you currently have a disability of a long duration?** ____ Yes ____ No

7. **Have you served as active duty in the military?** ____ Yes ____ No

8. **What is the highest level of education you obtained?** _____

9. **Have you ever received Vocational Training?** ____ Yes ____ No

D. Completing Call

Based on completion of the form, individual may be eligible for shelter? _____ Yes _____No

> *Waitlist:*
> **Based on our conversation, you may be eligible for a shelter. You indicated that you are seeking shelter for this evening. While we cannot guarantee you a place in the program, we would like to ensure your place on our wait list as long as you continue to call every day. If you have a phone number, we can reach you between now and 9PM to let you know if there is availability. If you do not hear from us, you will need to call me back around 9PM. If no bed is available at that point, you will need to call me back between 8 am-9 am to confirm your place on the waitlist.**

What is your approximate monthly income? _____

Have you received any income in the last 30 days? ____ Yes ____ No

Have you received any non-cash assistance? (Not calculated in monthly income) _____Yes_____No

*As soon as a bed becomes available, we will contact individuals and instruct them to go the shelter. Individuals can go after the call is concluded.

CPOA Triage Form

If assigning bed:
Based on our conversation and bed availability, it looks like there is a bed available at x shelter. Would you like me to go ahead and make a reservation for that bed for you?

In order to finalize your reservation, I need for you to answer the following income-related questions:

Have you received income from any of the following sources?

Yes/No	Source of Income	Amount of Income
	Earned Income	
	Unemployment Insurance	
	Supplemental Security Income (SSI)	
	Social Security Disability Income (SSDI)	
	Veteran's Disability payment	
	Worker's Compensation	
	Temporary Assistance for Needy Families (TANF)	
	General Assistance	
	Retirement Income from Social Security	
	Veteran's pension	
	Pension from a former job	
	Child Support	
	Alimony or other spousal Support	
	Other Source	

Have you received any following non-cash assistance? (Not calculated in monthly income)

Yes/No	Source of Non-Cash Assistance
	Supplemental Nutrition Assistance Program (SNAP)
	Medicaid
	Medicare
	SCHIP
	Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
	Veteran's Administration (VA) Medical Services
	TANF Child Care services
	TANF transportation services
	Other TANF-funded services
	Section 8, public housing or other ongoing rental assistance
	Other
	Temporary Financial Assistance

I have entered your reservation.

You need to report to x shelter within the x hours.

Please be aware, if you do not report to the shelter within x hours, you may lose your bed.

You are responsible for getting to the shelter. (If between 9pm and 2am, we may be able to provide a cab).

Is there anything else we may assist you with today?

CPOA Triage Form

If there is anything else we can assist you with, please call us back.

Please provide any additional notes regarding this triage or any unusual incidents that occurred while completing this triage.

_____

_____

_____

_____

_____

_____

Client/Resident Name: _____

CSP #: _____

Date: _____

If an interpreter is needed, which language/dialect: _____

Emergency Contact Information

Name: _____

Address: _____

Phone Number: _____

Relationship: _____

Last Date of Contact: _____

Do you have a legal guardian?

☐ Yes ☐ No ☐ Client doesn't know ☐ Client Refused

If yes:

Date of last contact _____

Name _____

Phone Number: _____

Do you need any special accommodations?:
(For example: 1st floor, outlet/electricity, other)

_____

Do you have any known allergies?

☐ Yes ☐ No ☐ Client doesn't know ☐ Client Refused

If yes, what allergies? _____

Do you have a mental health condition?

☐ Yes ☐ No ☐ Client doesn't know ☐ Client Refused

If yes, what is the condition?: _____

Does the condition keep you from holding a job or living in stable housing? (i.e., is it severe and persistent[1])

☐ Yes ☐ No ☐ Client doesn't know ☐ Client Refused

1 "Severe and persistent" means the condition:

(1) Is expected to be long-continuing or of indefinite duration;

(2) Substantially impedes the individual's ability to live independently; and

(3) Could be improved by the provision of more suitable housing conditions.

OH-503 Coordinated Assessment Tool

Are you currently using or recovering from drug and/or alcohol use?

☐ Yes　☐ No　☐ Client doesn't know　☐ Client Refused

If yes, what substances do/did you use: _____

Does the condition keep you from holding a job or living in stable housing? (i.e., is it severe and persistent[1])

☐ Yes　☐ No　☐ Client doesn't know　☐ Client Refused

Do you have any of the following health conditions? (check all that apply)

Which of these keep you from holding a job or living in stable housing? (i.e., is it severe and persistent1)

☐　Diabetes　☐
☐　COPD/Emphysema　☐
☐　Tuberculosis　☐
☐　Cancer　☐
☐　Post-Traumatic Stress Disorder　☐
☐　Tramatic Brain Injury　☐
☐　Hepatitis　☐
☐　Liver Disease　☐
☐　Heart Disease　☐
☐　Physical Disability　☐
☐ Other:_____　☐
☐　HIV+/AIDS[3]
☐　Developmental Disability[2]

Are you having thoughts of harming yourself?

☐ Yes　☐ No　☐ Client doesn't know　☐ Client Refused

If yes, are you having these thoughts currently?

☐ Yes　☐ No　☐ Client doesn't know　☐ Client Refused

Are you having thoughts of harming others?

☐ Yes　☐ No　☐ Client doesn't know　☐ Client Refused

If yes, are you having these thoughts currently?

☐ Yes　☐ No　☐ Client doesn't know　☐ Client Refused

Are you taking (or should be taking) any medications?

☐ Yes　☐ No　☐ Client doesn't know　☐ Client Refused

Please list medications: _____

Are you currently out of any of these medications?

☐ Yes　☐ No　☐ Client doesn't know　☐ Client Refused

2 A developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002);

3 The disease of acquired immunodeficiency syndrome (AIDS) or any condition arising from the etiologic agency for acquired immunodeficiency syndrome (HIV)

OH-503 Coordinated Assessment Tool

Does any of your medication require refrigeration, needles, other?

☐ Yes ☐ No ☐ Client doesn't know ☐ Client Refused
☐ Client doesn't know

Are you a victim of recent domestic violence from a significant other within the last 6 months?

☐ Yes ☐ No ☐ Client doesn't know ☐ Client Refused

Do you have any Evictions?

☐ Yes ☐ No ☐ Client doesn't know ☐ Client Refused

If yes, how many evictions have you had: _____

Have you ever been convicted of a felony?

☐ Yes ☐ No ☐ Client doesn't know ☐ Client Refused

If yes, how many felonies do you have: _____

Are you currently linked with any additional case management support?
(For Example: Mental health, FCCS, Veteran Services, etc.)

☐ Yes ☐ No ☐ Client doesn't know ☐ Client Refused

If yes, ask for contact information to obtain Release of Information (if known):

Contact Information
Case Manager Name:
Agency Name: _____
Phone Number: _____

Rapid Rehousing Program Eligibility

Basis for Referral

Client meets one or more of the following (check all that apply):

☐ Disabled: Client has one or more severe and persistent[1] disabling conditions
☐ Severe Service Needs: Client has <u>two or more</u> of the following, indicating severe service needs
    ☐ One felony
    ☐ Two or more felonies (counts as two severe service needs)
    ☐ One eviction
    ☐ Two or more evictions (counts as two severe service needs)
    ☐ No current income
    ☐ Victim of domestic violence within the last 6 months
☐ Youth: Client is between the ages of 18-24
☐ Pregnant: Client is currently pregnant

[1] A physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury that:
  (1) Is expected to be long-continuing or of indefinite duration;
  (2) Substantially impedes the individual's ability to live independently; and
  (3) Could be improved by the provision of more suitable housing conditions. OR

B. A developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); OR

C. The disease of acquired immunodeficiency syndrome (AIDS) or any condition arising from the etiologic agency for acquired immunodeficiency syndrome (HIV).

Unified Supportive Housing System (USHS) Vulnerability Assessment

1. In the past three months, how many times have you been to the emergency department/room?

❑0 (N/A) ❑1 ❑2 ❑3+ ❑ Refused

2. In the past six months, how many times have you taken an ambulance to the hospital?

❑0 (N/A) ❑1 ❑2 ❑3+ ❑ Refused

3. In the past six months, how many times have you used a crisis service, including distress centers and suicide hotlines?

❑0 (N/A) ❑1 ❑2 ❑3+ ❑ Refused

4. In the past year, how many times have you hospitalized as an inpatient?

❑0 (N/A) ❑1 ❑2 ❑3+ ❑ Refused

5. In the past six months, how many of your encounters with police resulted in a jail or prison stay?

❑0 (N/A) ❑1 ❑2 ❑3+ ❑ Refused

6. In the past 12 months where have you resided most frequently?

❑ Emergency shelters   ❑ Treatment   ❑ Transitional Housing
❑ Outside   Facility/Hospital   ❑ Your own home or apartment
(Camp/Streets/Park)   ❑ Residential Care Facility ❑ Foster Care
❑ Car/Van/RV   ❑ Abandoned Home   ❑ Other
❑ Jail/Prison   ❑ With Friends or Family

7. Do you currently have Kidney disease/ End Stage Renal Disease or Dialysis?

❑ Yes ❑ No ❑ Refused

8. Do you currently have Liver Disease, Cirrhosis, Hepatitis C or End-Stage Liver Disease?

❑ Yes ❑ No ❑ Refused

9. Are you currently pregnant?

❑ *Yes ❑ No ❑ N/A ❑ Refused

*(Must be documented and included with file submission)

10. Do you have a permanent physical disability that limits your mobility? (i.e., wheelchair, amputation, unable to climb stairs)

❑ Yes ❑ No ❑ Refused

11. Do you currently have Cancer?

❑ Yes   ❑ No   ❑ Refused

12. If "yes" to any of the above, is medical condition under treatment?

❑ Yes   ❑ No   ❑ N/A, client answered "no" to all medical conditions above.   ❑ Refused

OBSERVATION ONLY
13. Interviewer, if client said "no" to questions 7-11, do you observe signs or symptoms of serious health conditions?

❑ Yes   ❑ No   ❑ N/A, Client answered yes to at least one question above.

14. Do you currently have problematic drug or alcohol use, abused drugs or alcohol or been told that you do?

❑ Yes   ❑ No   ❑ Refused

15. Have you consumed alcohol almost every day for the past month?

❑ Yes   ❑ No   ❑ Refused

16. Do you currently use injection drugs or shots?

❑ Yes   ❑ No   ❑ Refused

17. Have you ever been treated for drug or alcohol problems and returned to drinking or using drugs within the past 6 months?

❑ Yes   ❑ No   ❑ Refused

OBSERVATION ONLY
18. Interviewer, if client said "no" to questions 14-17, do you observe signs or symptoms of problematic alcohol or drug abuse?
(Deterioration in functioning, cognitive damage, lack of self-care or active use.)

❑ Yes   ❑ No   ❑ N/A, Client answered yes to at least one question above.

19. Have you ever been diagnosed with a mental health issue?

❑ Yes   ❑ No   ❑ Refused

20. Are you currently receiving or have you ever received treatment for mental health reasons?

❑ Yes   ❑ No   ❑ Refused

21. Have you had a serious brain injury or head trauma that required hospitalization or surgery?

❑ Yes   ❑ No   ❑ Refused

22. Have you been diagnosed with a learning or developmental disability?

❑ Yes   ❑ No   ❑ Refused

OBSERVATION ONLY
23. Interviewer, if the client said "no" to questions 19-22, do you observe signs of confusion, evidence of developmental disability, dementia, or memory impairment? (Self-talk, distracted, paranoia, fear, phobic, depressed or manic)

❑ Yes   ❑ No   ❑ N/A, Client answered yes to at least one question above.

24. As a minor were you ever in foster care or abused or neglected by caregivers?

❑ Yes   ❑ No   ❑ Refused

25. Did you leave your last living situation due to violence from an intimate partner?

❑ Yes   ❑ No   ❑ Refused

OBSERVATION ONLY
26. Interviewer, do you observe signs of problematic social behavior? (Responds in angry, profane, obscene or menacing verbal ways, intimidating, impaired ability to deal with stress, no apparent social network, difficulty engaging positively with others)

❑ Yes   ❑ No

27. Do you have any friends, family, or other people in your life you can count on?

❑ Yes   ❑ No   ❑ Refused

OBSERVATION ONLY
28. Interviewer, do you observe signs of Prospective Applicant not being able to meet basic needs? (Poor hygiene/ clothing, unable to access food on own or no insight on needs)

❑ Yes   ❑ No

29. How do you get money?

❑ Work (earned income) ❑ Work (under the table) ❑ Plasma Center	❑ Pension/ Retirement ❑ Unemployment ❑ VA Benefits	❑ SSDI/SSI ❑ General Assistance ❑ No Income	❑ Panhandling ❑ Sex Work/Trade ❑ Drug Trade ❑ Recycling/ Scrapping

Columbus and Franklin County Continuum of Care (OH-503)
2018 CoC Review, Score, and Ranking Procedures

Date CoC Competition Opened:	June 20, 2018
Date e-snaps Opened:	On or after June 28, 2018
Date CoC Application due to HUD:	September 18, 2018
Columbus/Franklin County Annual Renewal Demand (ARD):	$12,008,834 *(pending HUD confirmation)*

I.   2018 HUD Funding Available

Tier 1	(94% of ARD)	$11,288,304
Tier 2	(6% of ARD plus bonus funding)	$720,530
Bonus Funding	(6% of ARD)	$720,530
CoC Planning Funding	(3% of ARD, not ranked)	$360,265
UFA Funding	(2% of ARD, not ranked)	$240,177

II.   Priority Guideline

The CoC awards the highest priority to PSH, RRH, and TH programs serving youth. The following **Priority Guideline** will be used, while also applying the scoring process detailed below:

Tier 1:

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

Tier 2:

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

III. Columbus and Franklin County CoC Scoring Process

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

Renewal projects	Points Available	Description
Program Evaluation ranking		HUD emphasizes performance of funded programs. The latest program evaluation available (FY2018) evaluates each project based on its performance for the period 7/1/2017 – 12/31/2017. Program Evaluation rankings 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 and annual Program Review and Certification to confirm compliance with HUD and local regulations. Participant Eligibility for permanent supportive housing is ensured and enforced via the Unified Supportive Housing System and, therefore, is not incorporated into the Program Evaluation. The Program Performance Measurement and Program Performance Standards sections of this document detail the performance ranking.
High (meets 75% or more of measured outcomes and outputs)	9	
Medium (meets at least 50% but less than 75% of measured outcomes and outputs)	5	
Low/Not rated (meets less than 50% of measured outcomes and outputs)	1	
Usage of HUD grant funds		HUD 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 (6/30/2018).
100% funds used	10	
80-99% funds used	8	
60-79% funds used	5	
40-59% funds used	2	
0-39% funds used	0	
Maximum possible points	19	
Minimum possible points	1	

IV. Columbus and Franklin County CoC Ranking process

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

Below are listed the general ranking guidelines.
〈 Under Tier 1 ranking, first time renewal projects (new or reallocated) will be ranked first.
〈 Projects will be ranked in descending order, based on the accumulated total points and ranking options.
〈 If two or more projects receive the same number of points, the ranking will be randomized by project.
〈 Under Tier 1 ranking, the HMIS project will be ranked last.
〈 The Priority Guideline, any HUD prioritization criteria and, all else equal, the funding impact on the entire CoC will govern the ranking positions in any options considered.

Special Projects
〈 Projects serving families and youth

Option 1 (descending score based, renewals prioritized)

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

⟨ If there is a tie for the last ranked, renewal, non-special project in Tier 1, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.

⟨ All other projects are listed in Tier 2, in the order of the Priority Guidelines and their score.

⟨ List reallocation projects in Tier 2 (unless gap permits Tier 1).

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

⟨ List all renewal projects (including first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, up to Tier 1 amount or closest amount less the amount allocated for the next bullet.

⟨ Capture any reallocation project(s) in Tier 1, after the renewal projects.

⟨ If there is a tie for the last ranked, renewal, non-special project in Tier 1, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall, CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.

⟨ All other projects are listed in Tier II, in the order of the Priority Guidelines and their score.

Option 3 (descending performance based, prioritize any reallocations)

⟨ List all renewal projects in the order of their performance (HIGH, MEDIUM, LOW) and Priority Guidelines, (including first time renewals and HMIS project as detailed above) in Tier 1, up to Tier 1 amount or closest amount less the amount allocated for the next bullet.

⟨ Capture the reallocation project(s) in Tier 1, after the renewal projects.

⟨ If there is a tie for the last ranked, renewal, non-special project in Tier 1, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall, CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.

⟨ Projects rated as "LOW" performers based on the FY2018 Program Evaluation are listed in Tier 2 in the order of Priority Guidelines (renewal).

⟨ If the amount is not sufficient to meet the minimum amount of Tier 2 amount needed for Tier 2 ranking, renewal projects rated as "MEDIUM" will be listed in descending order of their score. If there is a tie for the last ranked, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall, CoC level funding amount (less funding is risked) will be moved last.

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

⟨ List all renewal projects (including first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, up to Tier 1 amount or closest amount less the amount allocated for the next bullet.

⟨ Capture one new project in Tier 1, after the renewal projects.

⟨ If there is a tie for the last ranked, renewal, non-special project in Tier 1, the tiebreaker is the amount of the grant. The program that has a grant amount that will have the least impact on the overall, CoC level funding amount (less funding is risked) will be moved to the first ranking(s) in Tier 2.

⟨ All other projects are listed in Tier II, in the order of the Priority Guidelines and their score.

Option 5 (spread the cuts across all programs) – WILL NOT BE USED IN 2018
⟨ List all renewal projects (include first time renewals and HMIS project as detailed above) in the order of their scoring.
⟨ List reallocation project(s) in Tier 1, after all renewal projects.
⟨ Apply the HUD published funding decrease (amount at risk in Tier 2) to all renewal and reallocation projects, by decreasing funding across the board, by a calculated percentage.

Option 6 (spread the cuts across all programs that scored low) – WILL NOT BE USED IN 2018
⟨ List all renewal projects (include first time renewals and HMIS project as detailed above) in the order of their scoring for Tier 1, up to Tier 1 amount or closest amount.
⟨ List reallocation project(s) in Tier 1, after all renewal projects.
⟨ Apply the HUD published funding decrease (amount at risk in Tier 2) to all renewal projects that scored below a certain level (10 points), by decreasing funding across these projects, by a calculated percentage.

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 rating[1] of High, Medium, or Low as determined by overall program achievement of performance outcomes for the evaluation period. Ratings are based on the following:

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

Programs rated as "Low" or experiencing long-standing and/or serious program issues and/or systemic agency concerns will be handled by CSB through a Quality Improvement Intervention (QII) process. This process is based on quarterly one-on-one dialogues between CSB and the provider agency and considers agency plans and progress on addressing program issues. If the agency and/or CSB find that the QII process is not working, either may refer the concerns/issues to the CoC Board for handling (if the program is solely funded by HUD and not CSB). The provider will be given

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[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.

an opportunity to present its case, if the CoC Board decision is being appealed, to the CoC before a final decision is made by the CoC.

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

VI. FY2019 Program Performance Standards[3] *(in alpha order)*

Based on CSB Governance Ends Policies, HUD standards, CoC local standards and best practices program performance.

Homelessness Prevention

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.
Access to resources and services to maintain and stabilize housing	Successful housing outcomes (%)	At least 90% will maintain or obtain housing.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
	Housing Affordability at Exit (%) (Stable Families 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%.
	Financial Stability at Exit (Stable Families programs only)	At least 40% of households that exit the program achieve financial stability.
	If applicable, usage of CSB Direct Client Assistance ($)	Average DCA will be consistent with program design.
	If applicable, usage of CSB Direct Client Assistance (%)	% of households that receive CSB DCA will be consistent with prior performance and/or program design.
Not enter the emergency shelter system	Recidivism (%)	$\leq$5% of those who have successful housing outcomes will enter shelter within 365 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.

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[3] Additional system performance measures will be calculated based on HUD guidance.

| | Pass program certification | Provide access to and coordination with community resources and services to prevent homelessness. |
| | Average length of participation | Based on program design. |

Emergency Shelter – Coordinated Point of Access

Ends	Measurement	*Annual Metrics*
Efficient number of households served	Households served (#)	Set based on system demand.
Access to resources to address immediate housing need	Successful diversion outcome (%)	At least 25% of single adults and 30% of families contacting the central point of access will be diverted to other community resources through phone diversion. At least 35% of families will be diverted to other community resources through face-to-face diversion.
	Pass program certification	Provide access to and coordination with community resources and services to prevent homelessness.
	Shelter Linkage (%)	At least 95% of those referred for intake into an emergency shelter will enter shelter.
Not re-enter the emergency shelter system	Diversion Recidivism (%)	<10% of those diverted will enter shelter within 30 days of diversion.
Efficient and effective use of a pool of community resources	Pass program certification	Provide access to resources and services to end homelessness.
	Cost per household	Cost per household will be consistent with budget. Evaluated annually and presented to the CoC.

Emergency Shelter

Ends	Measurement	*Annual Metrics*
Efficient number of households served	Households served (#)	Set based on prior year(s) attainment, fair share of system demand, facility capacity, and funds available to program.

	Occupancy rate (%) (Adult Tier 2[4] shelters only)	Set at 100% to ensure efficient use of available capacity. .
Access to resources to address immediate housing need	Successful housing outcomes (%)	Obtain housing at standard below or greater if prior year(s) achievement was greater: • At least 33% for adult Tier 2 shelters • At least 70% for family shelters.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
	Successful outcomes (%) (Safety shelter only)	The percent of distinct clients who exit from the Maryhaven Safety shelter to adult Tier 2 shelters or other successful destinations, at least 30%.
	Successful outcomes (#) (Safety shelter only)	Calculated based on the Successful outcomes % measurement.
	Usage of CSB Direct Client Assistance (%) (family shelters only)	% of households that receive CSB DCA will be consistent with prior performance and/or program design.
	Usage of CSB Direct Client Assistance (#) (family shelters only)	# of households that receive CSB DCA will be consistent with prior performance and/or program design.
Basic needs met in secure, decent environment	Pass program certification	Provide secure, decent shelter.
Temporary, short-term stay	Average length of stay	Not to exceed standard below or average for prior year(s) if less than standard below: • 30 days for adult Tier 2 shelters • 25 days for family shelters • 12 days for Safety shelter.
Not re-enter the emergency shelter system	Recidivism (Not applicable to Overflow shelters)	<10% of those who obtain housing will return to homelessness within 180 days of exit.
	Movement (%) (Adult Tier 2 shelters only)	<15% of those who exit the Tier 2 emergency shelter will immediately re-enter another Tier 2 shelter. (Monitored only.)
	Detox exits (Safety shelter only)	At least 10% of Safety shelter exits will enter a detoxification program.
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.

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[4] Tier 2 shelters include LSS Faith Mission shelters, Southeast Friends of the Homeless and VOAGO Men's shelters, YMCA Women's shelter and Maryhaven Shelter2Housing shelter. Overflow and Safety homeless shelters are not included.

| | Pass program certification | Provide access to resources and services to end homelessness. |

Outreach Programs

Ends	Measurement	*Annual Metrics*
Efficient number of households served	Households served (#)	Set based on prior year(s) attainment and funds available.
	New households served (#)	Set based on prior year attainment and funds available.
Access to resources to address immediate housing need	Usage of CSB Direct Client Assistance (%)	At least 25% will receive CSB DCA.
Basic human needs met in secure, decent environment	Successful outcomes (%)	At least 75% successful housing/shelter outcomes.
	Successful outcomes (#)	Calculated based on the Successful outcomes % measurement.
	Successful housing outcomes (%)	At least 55% of successful outcomes obtain housing.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
	Exited Households to PSH (#)	Set based on anticipated vacancies and prior year(s) attainment.
Do not re-enter the emergency shelter system	Recidivism (%)	<10% of those who obtain housing will return to homelessness within 180 days.
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 access to resources and services to address immediate housing or shelter needs.

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.

Ends	Measurement	*Annual Metrics*
Access to resources/services to move to and stabilize housing	Housing Stability	At least standard below or greater if prior year(s) achievement was greater • At least 12 months for PSH (goal to be set not to exceed 24 months, actual attainment may be greater than goal) • Up to 4 months for TH
	Housing Affordability at Exit (%) (PSH only)	At least 50% of successful households have their housing affordability ratio, measured as cost of housing (rent and utilities) divided by the household's income at exit, lower than 50%. (Monitored only.)
Basic needs met in a non-congregate environment	Successful housing outcomes (%)	At least 90% successful housing outcomes for PSH and 77% successful housing outcomes for TH.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
	Successful housing exits (%) (PSH only)	At least 50% of exits are successful housing outcomes.
Not re-enter the emergency shelter system	Exit to Homelessness (%)	<10% of those who obtain housing will return to homelessness within 180 days of exit.
Efficient and effective use of a pool of community resources	Cost per household	Cost per household will be consistent with budget. Evaluated annually and presented to the CoC.
	Cost per unit	Cost per unit will be consistent with budget. Evaluated annually and presented to the CoC.
	Program Occupancy Rate (%)	Full occupancy (>95%). For rental assistance units the occupancy goal is 100%.
	Turnover Rate (%) (PSH only)	Set based on prior year(s) attainment, an annual 20% turnover rate is desirable. (Monitored only.)
	Pass program certification	Provide access to resources and services to end homelessness.
CoC or HUD Standards	Negative Reason for leaving (%)	Less than 20% leave for non-compliance or disagreement with rules
	Increase in cash income, other than employment, from entry to exit or end	At least 30% of adults will increase income from other sources than

Ends	Measurement	*Annual Metrics*
	of reporting period (%)	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.
	Average length of participation	Not to exceed standard below: • 100 days for all family programs except J2H • 90 days for the single adult RRH program • 180 days for J2H
Access to resources/services to move to and stabilize housing	Usage of CSB Direct Client assistance ($)	Average DCA amount will be consistent with prior performance and/or program design.
	Usage of CSB Direct Client Assistance (%)	% of households that receive CSB DCA will be consistent with prior performance and/or program design.
	Average length of shelter stay	Average stay in Emergency Shelter not to exceed: • 15 days for families • 23 days for single adults (calculated from the date of program entry to shelter exit).
	Housing Affordability at Exit (%) (Family programs only)	At least 50% of successful households have their housing affordability ratio, measured as cost of housing (rent and utilities) divided by the household's income at exit, lower than 50%.
	Increase in cash income, other than employment, from entry to exit or end of reporting period (%) (J2H only)	At least 30% of adults will increase income from other sources than employment from entry to exit or end of reporting period.

Ends	Measurement	*Annual Metrics*
	Increase in income from employment, from entry to exit or end of reporting period (%) (J2H only)	At least 15% of adults will have increased employment income from entry to exit or end of reporting period.
Basic needs met in a non-congregate environment	Successful housing outcome (%)	At least 90% successful housing outcomes for families and 70% for single adults exiting the RRH Program. At least 33% successful housing outcomes for single adults exiting Tier 2 emergency shelters (RRH single adult program only).
	Successful housing outcome (#)	Calculated based on the Successful housing outcomes % measurement.
Not re-enter the emergency shelter system	Recidivism (%)	<10% of those who obtain housing will return to homelessness within 180 days of program exit.
	Movement (%) (RRH single adult program only)	<15% of clients served who exit the emergency shelter will immediately re-enter another shelter. (Monitored only)
	Average Number of Service Instances (RRH single adult program only)	Average number of shelter stays per distinct clients served within 12 months. Not to exceed 2.3.
Efficient and effective use of a pool of community resources	Cost per household	Cost per household will be consistent with budget. Evaluated annually and presented to the CoC.
	Pass program certification	Provide resources and services to end homelessness.

Transition Program Direct Client Assistance

Ends	Measurement	*Annual Metrics*
Efficient number of households served	Households served (#)	Set based on prior year(s) attainment and funds available to program.
Access to resources/services to move to and stabilize housing	Usage of CSB Direct Client Assistance (%)	At least 95% will receive financial assistance
	Usage of CSB Direct Client assistance ($)	Average DCA amount will be consistent with prior performance, funds available and /or program design.

Basic needs met in a non-congregate environment	Successful housing outcomes (%)	At least 98% successful housing outcomes.
	Successful housing outcomes (#)	Calculated based on the Successful housing outcomes % measurement.
Not re-enter the emergency shelter system	Recidivism (%)	<10% of those who obtain housing will return to homelessness within 180 days of 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 access to resources and services to end homelessness.

As directed by the CoC, this document was created by CSB, the Collaborative Applicant and Unified Funding Agency.

Last reviewed and approved by the CoC on January 22, 2018.

CoC Info

Good afternoon,

In this year's Continuum of Care (CoC) competition, the U.S. Department of Housing and Urban Development (HUD) has set aside $50 million 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. We are encouraging partners with extensive experience providing successful rapid re-housing programming to consider this opportunity, as it will be a highly competitive process.

Applications will be completed using e-snaps, HUD's CoC application system. As the Collaborative Applicant for the CoC, Community Shelter Board (CSB) will provide assistance in completing the application according to the attached timeline. Projects selected by HUD will be eligible to apply for renewal funding each year and will be subject to the HUD regulations contained in 24 CFR Part 578, including a match requirement.

OH-503 CoC Rating and Ranking Procedure

The full HUD Notice of Funding Availability (NOFA) and other details regarding the competition are located [here](#).

From the NOFA: *Domestic Violence (DV) Bonus.* The FY 2018 HUD Appropriations Act provides up to $50 million for "rapid re-housing projects and supportive service projects providing coordinated entry and for eligible activities that the Secretary determines are critical in order to assist survivors of domestic violence, dating violence, and stalking." In the FY 2018 CoC Program Competition, CoCs will be able to apply for a DV Bonus for PH-RRH projects, Joint TH and PH-RRH component projects, and SSO projects for coordinated entry (SSO-CE). A CoC may apply for up to 10 percent of its Preliminary Pro Rata Need (PPRN), or a minimum of $50,000, whichever is greater, or a maximum of $5 million, whichever is less, to create up to three DV Bonus projects.

A CoC may apply for one of each of the following types of projects:

(1) Rapid Re-housing (PH-RRH) projects that must follow a housing first approach.

(2) Joint TH and PH-RRH component projects as defined in Section II.C.3.m of this NOFA that must follow a housing first approach.

(3) SSO Projects for Coordinated Entry (SSO-CE) to implement policies, procedures, and practices that equip the CoC's coordinated entry to better meet the needs of survivors of domestic violence, dating violence, sexual assault, or stalking (e.g., to implement policies and procedures that are trauma-informed, client-centered or to better coordinate referrals between the CoC's coordinated entry and the victim service providers coordinated entry system where they are different).

Please contact CSB Grants and Compliance Director Heather Notter (hnotter@csb.org, 614-715-2534) if you have questions or would like to discuss this opportunity.

Please feel free to forward this to anyone in the community who may be interested in this opportunity.

HUD APPLICATION

HUD Continuum of Care Application

FY 2018 Notice of Funding Availability

The U.S. Department of Housing and Urban Development (HUD) has released the FY 2018 Continuum of Care (CoC) Program Competition Notice of Funding Availability. The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, states, 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. CoCs were required to designate a Collaborative Applicant to submit a consolidated CoC application for funding for the community as a whole, and the Community Shelter Board (CSB) is Columbus and Franklin County's collaborative applicant. Please contact CSB Grants and Compliance Director Heather Notter if you have a new, eligible program that you would like to discuss for this year's CoC application (hnotter@csb.org).

Funding Opportunity for Programs Serving Survivors of Domestic Violence

In this year's CoC competition, HUD has set aside $50 million 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.

2018

2018 Continuum of Care Application Schedule

2018 Continuum of Care Review, Score, and Ranking Procedures

2018 Continuum of Care Process for Funding Reallocation

2017

2017 Continuum of Care Application

2017 Continuum of Care Priority Listing

OH-503 CoC Rating and Ranking Procedure

2017 Continuum of Care Project Rankings

2017 Continuum of Care Application Schedule

2017 Continuum of Care Review, Score and Ranking Procedures

2017 Continuum of Care Process for Funding Reallocation

2016 ✚

2015 ✚

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Continuum of Care

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HUD APPLICATION

HUD Continuum of Care Application

FY 2018 Notice of Funding Availability

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2018

2018 Continuum of Care Application

2018 Continuum of Care Priority Listing

2018 Continuum of Care Project Rankings

2018 Continuum of Care Application Schedule

2018 Continuum of Care Review, Score, and Ranking Procedures

8:31 PM
8/30/2018

OH-503 Consolidated Application

HUD APPLICATION

HUD Continuum of Care Application

<mark>FY 2018 Notice of Funding Availability</mark>

The U.S. Department of Housing and Urban Development (HUD) has released the FY 2018 Continuum of Care (CoC) Program Competition Notice of Funding Availability. The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, states, 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. CoCs were required to designate a Collaborative Applicant to submit a consolidated CoC application for funding for the community as a whole, and the Community Shelter Board (CSB) is Columbus and Franklin County's collaborative applicant. Please contact CSB Grants and Compliance Director Heather Notter if you have a new, eligible program that you would like to discuss for this year's CoC application (hnotter@csb.org).

2018

    2018 Continuum of Care Application Schedule

    2018 Continuum of Care Process for Funding Reallocation

2017

    2017 Continuum of Care Application

    2017 Continuum of Care Priority Listing

    2017 Continuum of Care Project Rankings

    2017 Continuum of Care Application Schedule

    2017 Continuum of Care Review, Score and Ranking Procedures

    2017 Continuum of Care Process for Funding Reallocation

2016 ✚

OH-503 Public Posting Project Selections, Ranking, and CoC Application

2015 ✚

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HUD APPLICATION

HUD Continuum of Care Application

FY 2018 Notice of Funding Availability

The U.S. Department of Housing and Urban Development (HUD) has released the FY 2018 Continuum of Care (CoC) Program Competition Notice of Funding Availability. The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, states, 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. CoCs were required to designate a Collaborative Applicant to submit a consolidated CoC application for funding for the community as a whole, and the Community Shelter Board (CSB) is Columbus and Franklin County's collaborative applicant. Please contact CSB Grants and Compliance Director Heather Notter if you have a new, eligible program that you would like to discuss for this year's CoC application (hnotter@csb.org).

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APPLYING FOR FUNDS

Home > **Partner Agencies** > **Applying For Funds**

Gateway Application Materials

APPLICATION INFORMATION FORMS

BUDGET

   FY19 CSB Budget

PROGRAM DESCRIPTION FORM

PROGRAM OUTCOMES PLAN

Permanent Housing Development Process

It's time again to consider proposals for new Permanent Supportive Housing (PSH) projects or Rapid Re-Housing (RRH) projects. The Information Packet, Concept Paper format, and other resources are below. If you would like to propose a new PSH or RRH project, please submit a Concept Paper to Heather Notter (hnotter@csb.org) at CSB by **5pm, Monday April 30, 2018**.

Permanent Housing Development Information Packet

Concept Paper

Project Plan

Community Acceptance Guidelines

PARTNER AGENCIES

OTHER COMMUNITY PARTNERS

OH-503 Public Posting Project Selections, Ranking, and CoC Application

ENDING HOMELESSNESS NEWS

APPLYING FOR FUNDS

FINANCIAL TOOLS

HOUSING MATERIALS

SHELTER MATERIALS

CSB HEARTH OPERATING POLICIES

MONITORING

COLUMBUS SERVICEPOINT

TRAINING - BEST AND PROMISING PRACTICES

LOGOS AND COMMUNITY RELATIONS MATERIALS

PRIVACY AND DATA SECURITY POLICY

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OH-503 Public Posting Project Selections, Ranking, and CoC Application

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🐦 **@CommShelterBd** - *Jan 10*

RT @StarHouseCbus: We are in great need of shirts size 4x and pants size 54x30 or 54x32 pants. We are currently serving a guest who only ha…

Community Shelter Board
111 Liberty Street, Ste 150
Columbus, Ohio 43215
p: 614.221.9195
f: 614.221.9199

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

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OH-503 Public Posting Project Selections, Ranking, and CoC Application

Heather Notter

Good afternoon,

HUD has opened the annual CoC competition. The NOFA is available here. Please read it. **HUD estimates that project applications will be available in e-snaps on or after Thursday, June 28.** Please let me know if you need to add e-snaps users for your agency.

The full application is due to HUD on September 18. The 2018 Application Schedule is attached. Here are the significant dates that we have to meet to conform with NOFA rules:

> **August 8**: Draft Applications are due to CSB by 5pm – Each applicant must submit one copy of the draft project application(s) electronically <u>via email</u> to me.

> **August 16**: Final Applications are due by 5pm – Each applicant must submit the final project application(s) via e-snaps, once CSB approves the draft.

Review this guidance carefully:

> HUD has not yet released the New and Renewal Project Application Detailed Instructions and Instructional Guides. They will be posted at the link above. These resources include specific instructions on how to create your projects in e-snaps and import information from last year's application. For renewal projects, <u>use the import option</u> as directed in the Guide. These guides also provide insight into exactly what HUD is looking for on each question.

> Once the Guides are released, we will disseminate a document to everyone that provides consistent responses across the CoC and guidance on specific questions. Please carefully read and use this document when we send it – **it will make the application process easier for you.**

> When you create your project(s), use the following naming template so we can easily identify the project and application year: "**Agency Name or Acronym 2018 Program Name**" (e.g., CHN 2018 Safe Haven).

> We will send the HUD-approved Grant Inventory Worksheet (GIW) when HUD finalizes it. You will need the GIW to complete the application budgets.

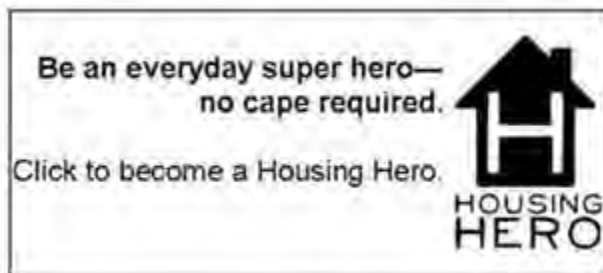> If you are new to e-snaps, there are additional guides and resources available. Let me know what assistance you need.

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

Thank you,
Heather

Heather Notter
Grants and Compliance Director
Community Shelter Board
111 Liberty Street, Suite 150
Columbus, OH 43215
614-715-2534 desk
www.csb.org

Heather Notter

From:	Heather Notter
Sent:	Thursday, January 11, 2018 10:51 AM
To:	Heather Notter
Cc:	Lianna Barbu; Tom Albanese; Kate Harkin
Subject:	Request for New Permanent Housing Project Proposals - due Apr 30

Good morning,

It's time again to consider proposals for new Permanent Supportive Housing (PSH) or Rapid Re-Housing (RRH) projects. The Information Packet and Concept Paper format are located on our website here: https://www.csb.org/providers/applying-for-funds. If you would like to propose a new PSH or RRH project, please submit a Concept Paper to CSB by **5pm, Monday April 30, 2018**.

We do not know how much new funding we will be able to apply for in the FY18 Continuum of Care (CoC) competition. We want to have projects lined up so we can take full advantage of the opportunity to apply for the funds when they are available.

The general timeline for the process is below. We won't know the exact timing for Project Plans/CoC applications until HUD announces CoC application deadlines.

April 30, 2018	Concept Papers due to CSB
May 23, 2018	Concept Papers discussed at RLFC Board meeting
June 5, 2018	Concept Papers discussed/approved at RLFC meeting
TBD	Project Plans/CoC project applications due to CSB
TBD	Project Plans/CoC project applications presented at RLFC Board meeting
TBD	Project Plans/CoC project applications presented/approved at RLFC meeting
TBD	FY18 CoC application due
February 2019	OHFA tax credit application due

Please let me know if you have any questions.

Thank you,
Heather

communityshelterboard

Heather Notter
Grants Administrator
Community Shelter Board
111 Liberty Street, Suite 150
Columbus, OH 43215
614-715-2534 desk
www.csb.org

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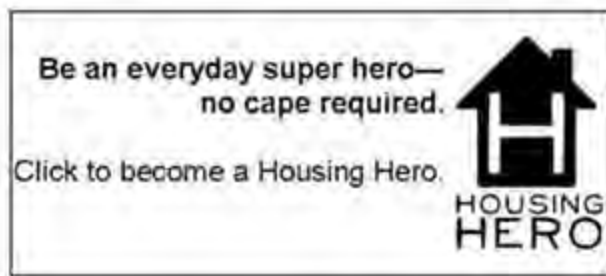
Columbus and Franklin County Continuum of Care (OH-503)
Funding Reallocation Process

Policy

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

1. Sub-recipient is no longer interested in continuing the project or part of the project. The procedure below is implemented as soon as the CoC or Community Shelter Board (Collaborative Applicant and Unified Funding Agency) is made aware by the current sub-recipient of the intent to close or decrease the size of the project.

2. Sub-recipient no longer needs the CoC funding as other funding is available for the project or part of the project. The procedure below is implemented as soon as the CoC or Community Shelter Board is made aware by the current sub-recipient that HUD funding is no longer needed for the project or part of the project.

3. Sub-recipient underperforms and the CoC and CoC Board decide to reallocate the full or partial funding of the project to a new sub-recipient. The procedure below is implemented as soon as the CoC and CoC Board make the decision to defund a current sub-recipient, a project or part of a project due to underperformance. Underperformance is defined as any of the following:

   a. Continued underperformance as it relates to local and federal performance outcomes

   b. Continued underperformance as it relates to efficient use of available project capacity, the project is not using its available capacity

   c. Continued underperformance as it relates to full drawdowns of allocated HUD CoC funds

   d. Continued underperformance as it relates to compliance with local and federal project review and certification standards

   e. Misuse of federal funds and not following federal legislation with no plans to come in compliance are grounds for immediate defunding. In this case Community Shelter Board, on behalf of the CoC, will take immediate steps to accelerate the procedure below as to not put at risk the households served by the underperforming project.

Procedure

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

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

If a site-based permanent supportive housing development is proposed, the project development steps must be followed, as detailed in the Information Packet posted on CSB's website at http://csb.org/providers/applying-for-funds.

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

From: Heather Notter
Sent: Thursday, August 30, 2018 5:22 PM
To: Alex Dull; Alex Murphy; Allison Sponhaltz; Amanda Frankl; Amanda Glauer; Amy McFarlan; Andrea Ropp; Annette McCormick (annettemccormick@equitashealth.com); April Steffy; Becky Westerfelt; Bob Davis; Brittani Perdue; Colleen Bain; Courtney Elrod; De Andree Nekoranec; Faith Williams; Fikru Nigusse; 'Heather Notter'; Jason Hartman; Jason Walton; Jennifer Sharma; Joan Deever; Judy Peterson; Kelly Browning; Kim Eberst; Krista Edwards; Laura Brenner; Lianna Barbu; Luke Sutherland; Lynda Leclerc; Lynk Current; Marc Otte; Marsha Zimmerman; Melinda Robbins; Michelle Fraelich; Nick Winslow; Nina Santarelli; Noel Welsh; Peggy Anderson; Ron Lebsock; Ryan Pickut; Sanleda Morgan; Scott Jackson; Shanda McJunkins; Sheena Crawford; Sherry Inskeep; Sue Darby; Susan Reamsnyder; Taylor Keating; Thelma Young; Tom Albanese; Valerie Henthorn; Vicky Bowman; Wilhelmina Spinner
Cc: Lianna Barbu; Tom Albanese; Adam Rice
Subject: Project ranking for the FY18 CoC application

Good afternoon,

Thank you for submitting Project Applications for the FY18 CoC competition. The CoC Board met on August 30 to review the FY18 CoC Application and rank Project Applications according to the attached 2018 CoC Review, Score, and Ranking Procedures.

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

Thank you,
Heather

communityshelterboard

Heather Notter
Grants and Compliance Director
Community Shelter Board
111 Liberty Street, Suite 150
Columbus, OH 43215
614-715-2542 desk **NEW**
www.csb.org

Be an everyday super hero—
no cape required.

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HOUSING HERO
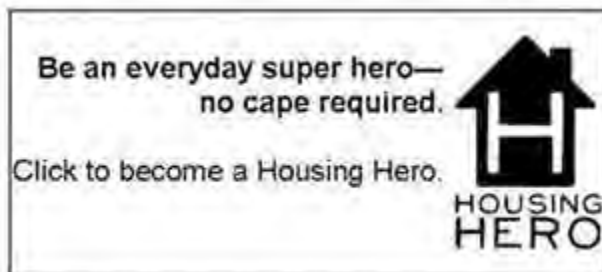
#	Project Name	Grant Number	Total ARA	Cummulative	%	Most recent closed HUD Grant Amount	Amount Expended Per CSB Records	Balance	% of HUD Grant Amount Spent	Usage Points	FY2018 Program Evaluation Rating	Evaluation Points	Total Points Usage Points + Evaluation Points	Project Ranking
29	CHN Briggsdale II and TRA II	OH0537U5E031500	$539,581	$539,581	4%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1
2	YMCA 2017 Isaiah Project	OH0075U5E031707	$1,819,252	$2,358,833	20%	$2,344,432	$2,339,371	$5,061	N/A	N/A	N/A	N/A	N/A	2
25	NCR 2017 Commons at Buckingham	OH0394U5E031707	$110,051	$2,468,884	21%	$130,051	$130,051	$0	100.0%	10	High	9	19	3
24	NCR 2017 Commons at Third	OH0372U5E031706	$110,051	$2,578,935	21%	$130,051	$130,051	$0	100.0%	10	High	9	19	4
21	YWCA 2017 WINGS	OH0102U5E031710	$257,848	$2,836,783	24%	$265,848	$265,848	$0	100.0%	10	High	9	19	5
19	Huckleberry House 2017 Transitional Living Program	OH0099U5E031710	$232,135	$3,068,918	26%	$254,645	$254,645	$0	100.0%	10	High	9	19	6
12	CHN 2017 East Fifth Avenue Apartments	OH0088U5E031710	$232,914	$3,301,832	27%	$262,914	$262,914	$0	100.0%	10	High	9	19	7
9	NCR 2017 PSH Expansion + Enhancement	OH0085U5E031710	$297,024	$3,598,856	30%	$130,051	$130,051	$0	100.0%	10	High	9	19	8
4	CHN 2017 Briggsdale Apartments	OH0078U5E031710	$234,491	$3,833,347	32%	$232,162	$232,162	$0	100.0%	10	High	9	19	9
1	TSA 2017 Job 2 Housing	OH0074U5E031706	$294,017	$4,127,364	34%	$281,081	$247,608	$33,473	88.1%	8	High	9	17	10
27	YMCA 2017 S+C SRA	OH0445U5E031705	$205,706	$4,333,070	36%	$198,850	$176,810	$22,040	88.9%	8	High	9	17	11
18	CHN 2017 Safe Haven	OH0097U5E031710	$188,951	$4,522,021	38%	$181,951	$180,062	$1,889	99.0%	8	High	9	17	12
13	Maryhaven 2017 Supportive Housing Project	OH0090U5E031710	$183,196	$4,705,217	39%	$183,196	$154,775	$28,421	84.5%	8	High	9	17	13
5	Equitas Health 2017 PSH	OH0080U5E031710	$783,195	$5,488,412	46%	$645,339	$639,173	$6,166	99.0%	8	High	9	17	14
3	Alvis Inc 2017 Amethyst Program	OH0076U5E031710	$555,143	$6,043,555	50%	$355,565	$342,836	$12,729	96.4%	8	High	9	17	15
28	Van Buren Village PSH	OH0470U5E031701	$64,200	$6,107,755	51%	$73,647	$73,647	$0	100.0%	10	Medium	5	15	16
26	CHN 2017 Inglewood Court	OH0410U5E031705	$60,247	$6,168,002	51%	$60,247	$60,247	$0	100.0%	10	Medium	5	15	17
22	CHN 2017 Southpoint Place Apartments	OH0281U5E031709	$376,578	$6,544,580	54%	$361,639	$361,639	$0	100.0%	10	Medium	5	15	18
16	VOAGO 2017 Permanent Supportive Housing for Families Expansion	OH0094U5E031710	$508,099	$7,052,679	59%	$518,999	$518,999	$0	100.0%	10	Medium	5	15	19
14	CHN 2017 Terrace Place Apartments	OH0092U5E031710	$135,549	$7,188,228	60%	$125,549	$125,549	$0	100.0%	10	Medium	5	15	20
8	CHN 2017 S+C TRA	OH0084U5E031710	$1,385,703	$8,573,931	71%	$1,246,159	$1,287,433	-$41,274	103.3%	10	Medium	5	15	21
7	CHN 2017 S+C SRA	OH0083U5E031710	$1,702,243	$10,276,174	86%	$1,464,603	$1,377,514	$87,089	94.1%	8	Medium	5	13	22
10	CHN 2017 Community ACT	OH0086U5E031710	$273,026	$10,549,200	88%	$242,837	$241,965	$872	99.6%	8	Medium	5	13	23
15	CHN 2017 Parsons Avenue Apartments	OH0093U5E031710	$256,811	$10,806,011	90%	$256,811	$253,837	$2,974	98.8%	8	Medium	5	13	24
23	CHN 2017 Leasing SHP Program	OH0312U5E031706	$232,221	$11,038,232	92%	$197,442	$194,369	$3,073	98.4%	8	Medium	5	13	25
20	CHN 2017 Wilson Apartments	OH0101U5E031710	$66,279	$11,104,511	92%	$36,279	$36,179	$100	99.7%	8	Medium	5	13	26
6	CHN 2017 Family Homes	OH0082U5E031710	$13,310	$11,117,821	93%	$6,267	$3,735	$2,532	59.6%	2	Medium	5	7	27
11	CSB 2017 HMIS/CSP	OH0087U5E031710	$164,070	$11,281,891	94%	$169,070	$165,241	$3,829	N/A	N/A	N/A	N/A	N/A	28
17	CHN 2017 Rebuilding Lives PACT Team Initiative	OH0096U5E031710	$726,943	$12,008,834	100%	$631,030	$623,055	$7,975	98.7%	8	Medium	5	13	29
NEW	CHN Marsh Brook Place	new - 20 units	$253,354	$12,262,188	102%									30
NEW	CHN Parsons Place	new - 37 units	$467,176	$12,729,364	106%									31
DV	YMCA DV RRH		$1,200,883	$13,930,247	116%									32

69
42
22

Option 1 (descending score based, renewals prioritized)	ARD	$12,008,834	-$6,413 Tier 1 gap		2017 Score	157	T2 units	147
⟨ List all renewal projects in the order of their scoring	Tier 1 (94%)	$11,288,304			Score ratio	39	exist	90
⟨ List projects that don't fit in Tier 1 in Tier 2	Tier 2 (6%)	$720,530			Housing First	10	new	57
⟨ The last non-HMIS project in Tier 1 maximizes Tier 1								

OH-503 Projects Accepted Notification

Project Rejection-Reduction Notification

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

HUD APPLICATION

HUD Continuum of Care Application

FY 2018 Notice of Funding Availability

The U.S. Department of Housing and Urban Development (HUD) has released the FY 2018 Continuum of Care (CoC) Program Competition Notice of Funding Availability. The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, states, 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. CoCs were required to designate a Collaborative Applicant to submit a consolidated CoC application for funding for the community as a whole, and the Community Shelter Board (CSB) is Columbus and Franklin County's collaborative applicant. Please contact CSB Grants and Compliance Director Heather Notter if you have a new, eligible program that you would like to discuss for this year's CoC application (hnotter@csb.org).

2018

2018 Continuum of Care Application Schedule

2018 Continuum of Care Process for Funding Reallocation

2017

2017 Continuum of Care Application

2017 Continuum of Care Priority Listing

2017 Continuum of Care Project Rankings

2017 Continuum of Care Application Schedule

2017 Continuum of Care Review, Score and Ranking Procedures

2017 Continuum of Care Process for Funding Reallocation

2016 ✚

OH-503 Local Competition Deadline

2015 ✚

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Columbus & Franklin County Continuum of Care 2018 HUD Application Schedule

Activity	Timing	Detail
2018 HUD NOFA Released	6/20/18	Announced via HUD listserv & posted on HUD Exchange
HUD Application schedule and guidance released	6/22/18	CSB establishes program review & application schedule; releases to applicants via email
Application available in e-snaps	On or after 6/28/18	All applications must be completed in e-snaps using guidance provided by CSB
Draft Applications (new and renewal) due to CSB	8/8/18	All applications due to CSB by 5pm via email
CSB review	8/8/18 – 8/16/18	CSB reviews draft applications and works with applicants to finalize
Final Applications due to CSB	8/16/18 (30 days prior to HUD due date, per NOFA)	Final corrected applications due to CSB via e-snaps
CoC Board Meeting Packet	8/23/18	Disseminate meeting packet to CoC Board
CoC Board Meeting	8/30/18	Consider CoC Consolidated Application and project prioritization
Notify CoC Applicants	8/31/18 (15 days prior to HUD due date, per NOFA)	Notify CoC Applicants of project prioritization
Post to CoC Website	8/31/18	Post project prioritization to CoC website
CoC Meeting Packet	9/7/18	Disseminate meeting packet to CoC
CoC Meeting	9/14/18	Consider CoC Consolidated Application and project prioritization
Submit Application	9/17/18	Submit consolidated application electronically via e-snaps
Application due	9/18/18	

Heather Notter

From:	Heather Notter
Sent:	Friday, June 22, 2018 2:23 PM
To:	Alex Murphy; Amanda Frankl; Amanda Glauer; Amy McFarlan; Andrea Ropp; April Steffy; Becky Westerfelt; Bob Davis; Brittani Perdue; Colleen Bain; Courtney Elrod; De Andree Nekoranec; Faith Williams; Fikru Nigusse; Heather Notter; Jason Hartman; Jennifer Sharma; Joan Deever; Judy Peterson; Kelly Browning; Kim Eberst; Krista Edwards; Laura Brenner; Lianna Barbu; Luke Sutherland; Lynda Leclerc; Lynk Current; Marc Otte; Marsha Zimmerman; Melinda Robbins; Nick Winslow; Nina Santarelli; Noel Welsh; Peggy Anderson; Rich Bodemann; Ryan Pickut; Sanleda Morgan; Scott Jackson; Shanda McJunkins; Sherry Inskeep; Sue Darby; Susan Reamsnyder; Thelma Young; Valerie Henthorn; Wilhelmina Spinner
Cc:	Lianna Barbu; Tom Albanese
Subject:	FY18 CoC Competition is Open
Attachments:	FY18 CoC Application Schedule.pdf

Good afternoon,

HUD has opened the annual CoC competition. The NOFA is available here. Please read it. **HUD estimates that project applications will be available in e-snaps on or after Thursday, June 28.** Please let me know if you need to add e-snaps users for your agency.

The full application is due to HUD on September 18. The 2018 Application Schedule is attached. Here are the significant dates that we have to meet to conform with NOFA rules:

> **August 8**: Draft Applications are due to CSB by 5pm – Each applicant must submit one copy of the draft project application(s) electronically via email to me.

> **August 16**: Final Applications are due by 5pm – Each applicant must submit the final project application(s) via e-snaps, once CSB approves the draft.

Review this guidance carefully:

> HUD has not yet released the New and Renewal Project Application Detailed Instructions and Instructional Guides. They will be posted at the link above. These resources include specific instructions on how to create your projects in e-snaps and import information from last year's application. For renewal projects, use the import option as directed in the Guide. These guides also provide insight into exactly what HUD is looking for on each question.

> Once the Guides are released, we will disseminate a document to everyone that provides consistent responses across the CoC and guidance on specific questions. Please carefully read and use this document when we send it – **it will make the application process easier for you.**

> When you create your project(s), use the following naming template so we can easily identify the project and application year: "**Agency Name or Acronym 2018 Program Name**" (e.g., CHN 2018 Safe Haven).

> We will send the HUD-approved Grant Inventory Worksheet (GIW) when HUD finalizes it. You will need the GIW to complete the application budgets.
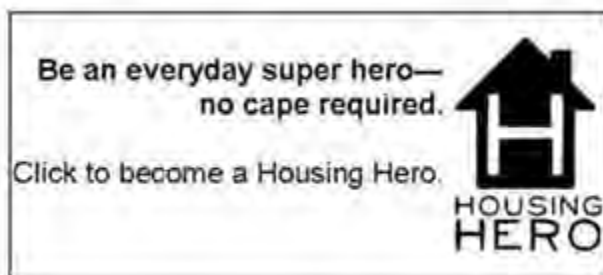
> If you are new to e-snaps, there are additional guides and resources available. Let me know what assistance you need.

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

Thank you,
Heather

Heather Notter
Grants and Compliance Director
Community Shelter Board
111 Liberty Street, Suite 150
Columbus, OH 43215
614-715-2534 desk
www.csb.org

Columbus and Franklin County Continuum of Care Homeless Management Information System Governance Charter

The Columbus and Franklin County Continuum of Care (CoC) operates a Homeless Management Information System (HMIS) to record and store client-level information about the numbers, characteristics, and needs of persons who use homeless housing and services and for persons at risk of homelessness. The CoC uses the HMIS to aggregate data about the extent and nature of homelessness over time; produce an unduplicated count of homeless persons; understand patterns of service use; and measure the effectiveness of homeless assistance projects and programs. Data produced is used for planning, education and reporting purposes. The goal of the HMIS is to support the delivery of homeless and housing services in Columbus and Franklin County. The HMIS benefits individuals through enhanced service delivery; a tool for provider agencies in managing programs and services; and a guide for the CoC and funders regarding community resource needs and service delivery.

The CoC uses the local HMIS as the primary data source to evaluate efforts to implement *A Place to Call Home: A Framework for Action to Address Homelessness in Columbus and Franklin County* (Community Framework). The CoC uses the HMIS to enhance data collection activities related to the Community Framework and uses the HMIS as a monitoring, outcomes measurement, and performance-based contracting tool across systems, to inform the community about the progress of the Community Framework, and to meet U.S. Housing and Urban Development (HUD) requirements.

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

CoC Responsibilities

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

1. Designate a single information system as the official HMIS software for the CoC.

2. Designate an HMIS Lead to operate the system.

1

3. Provide for governance of the HMIS Lead.

4. Maintain documentation demonstrating compliance with governance standards.

5. Review, revise, and approve policies and plans required by federal regulation.

CoC Board Responsibilities

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

1. Develop, annually review, and, as necessary, revise a privacy plan, security plan, and data quality plan for the HMIS, and any other HMIS policies and procedures required by HUD.

2. Develop a plan for monitoring the HMIS to ensure that recipients and subrecipients consistently participate in the HMIS; the HMIS satisfies all HUD requirements; and the HMIS Lead is fulfilling the obligations outlined in the written CoC HMIS Policies and Procedures.

Designations

The CoC designates Mediware's ServicePoint software as the official HMIS for the CoC. The HMIS is also known as Columbus ServicePoint (CSP).

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

HMIS Lead Responsibilities

1. Ensure that the HMIS complies with all HUD requirements and coordinate all related activities including training, maintenance, and technical assistance to Contributing HMIS Organizations (CHO). Monitor and enforce compliance by all CHOs and report on compliance to the CoC and HUD.

2. Ensure consistent participation in HMIS and monitor HMIS users to ensure that all recipients of financial assistance under the CoC and Emergency Solutions Grant (ESG) programs use the HIMS to collect client-level data on persons served.

3. Develop written policies and procedures and document all assignments and designations consistent with the policy. Annually update the Security Plan, Data

Quality Plan, and Privacy Policy. During these annual updates, the HMIS Lead must incorporate feedback from the CoC Board and CHOs.

    a. At a minimum, the privacy policy must include data collection limitations; purpose and use limitations; allowable uses and disclosures; openness description; access and correction standards; accountability standards; protections for victims of domestic violence, dating violence, sexual assault, and stalking; and such additional information and standards as may be established by HUD in notice.

    b. The security plan must meet the requirements as established by HUD in notice. The HMIS Lead must designate one staff member as the HMIS security officer and ensure that each CHO designates a security officer. The HMIS Lead must complete an annual security review to ensure the implementation of the security requirements for itself and CHOs. The HMIS Lead must ensure that each user completes security training at least annually and prior to being given HMIS access.

    c. The HMIS Lead must implement a policy and chain of communication for reporting and addressing security incidents, as established by HUD in notice.

4. Execute a written HMIS Participation Agreement with each CHO, including the obligations and authority of the HMIS Lead and CHO, the requirements of the security plan with which the CHO must abide, the requirements of the privacy policy with which the CHO must abide, the sanctions for violating the Participation Agreement (e.g., imposing a financial penalty, requiring completion of standardized or specialized training, suspending or revoking user licenses or system privileges, or pursuing criminal prosecution), and an agreement that the HMIS Lead and the CHO will process Protected Identifying Information consistent with the agreement.

5. Develop a disaster recovery plan, which must include at a minimum, protocols for communication with staff, the CoC, and CHOs and other requirements established by HUD in notice.

6. Develop and implement a data quality plan. Set data quality benchmarks including bed coverage rates and service-volume coverage rates.

7. The HMIS Lead may archive data in the HMIS, but must follow standards published in Federal Register notices.

8. Submit reports to HUD as required. At least annually, or upon request from HUD, submit an unduplicated count of clients served and analysis of unduplicated counts.

9. Serve as the applicant to HUD for grant funds to be used for HMIS activities for the CoC, as directed by the CoC, and, if selected for an award by HUD, enter into a grant agreement with HUD to carry out the HUD-approved activities.

10. Annually conduct an anonymous Administrator/User survey.

11. Schedule, coordinate, and hold quarterly HMIS Administrators meetings.

Reporting

The HMIS Lead will submit reports to HUD as required and within HUD-established deadlines. The HMIS Lead will oversee and monitor HMIS data collection and production of the following reports at the minimum:

1. Sheltered Point-in-Time Count (PIT Count)
2. Housing Inventory Chart (HIC)
3. Annual Homeless Assessment Report (AHAR)
4. Annual Performance Reports (APR)
5. System Performance Measures (SPM)

HMIS Standards

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

Participation Fee

The HMIS Lead will collectively charge CHOs for a participation fee not to exceed $11,000 per year, billed annually at the start of each fiscal year, for existing licenses. Each CHO will receive one user license for a $250 fee. All other user licenses will carry a fee calculated so that altogether the collective participation fee will not exceed $11,000. In addition, each CHO will receive two reporting licenses at no cost. CHOs may purchase additional reporting licenses, at the cost established by Mediware. CHOs will purchase additional user licenses from Mediware through the HMIS Lead. Mediware determines the cost for user licenses and the HMIS Lead will not change these costs.

Training and Technical Assistance

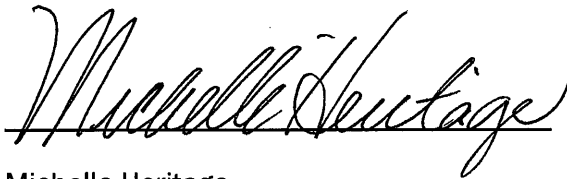The HMIS Lead is responsible for the following:

1. Schedule, coordinate, and hold quarterly HMIS Administrator meetings
2. Ensure required basic training is regularly available and accessible to CHOs
3. Ensure that technical assistance is regularly available and accessible to CHOs.

4. Ensure that CHOs have access to the reports, technical assistance, and training required to develop a data quality improvement plan when necessary.
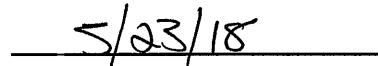
CHO Responsibilities

The CoC has established an HMIS Administrators Group – a provider group comprised of representatives of agencies using the local HMIS – as a committee under the CoC. The group discusses and implements developments and improvements to the system. CHOs are expected to participate. Each agency with access to the HMIS must have a designated primary and backup administrator. Both are invited to participate in the quarterly meetings.

CHOs must comply with federal HMIS regulations and requirements. CHOs must comply with federal, state, and local laws that require additional privacy or confidentiality protections. When a privacy or security standard conflicts with other federal, state, and local laws to which the CHO must adhere, the CHO must contact the HMIS Lead and collaboratively update the applicable policies for the CHO to accurately reflect the additional protections. CHOs must abide by the CoC's written HMIS Policies and Procedures. The HMIS Lead and CHOs are jointly responsible for ensuring that HMIS processing capabilities remain consistent with the privacy obligations of the CHO. CHOs must use the HMIS guidance, documentation, and forms posted on CSB's website (www.csb.org).

Michelle Heritage   _5/23/18_

Michelle Heritage   Date
Chair, Continuum of Care

Community Shelter Board

Columbus ServicePoint

Policies and Procedures

Last Revised: 04/2018

TABLE OF CONTENTS

1. Introduction

1.1 Community Shelter Board

VISION

Everyone has a place to call home.

MISSION

Community Shelter Board leads a coordinated, community effort to make sure everyone has a place to call home. CSB is the collective impact organization driving strategy, accountability, collaboration, and resources to achieve the best outcomes for people facing homelessness in Columbus and Franklin County.

1.2 Project Summary

Columbus ServicePoint (CSP) is used to collect, monitor, and evaluate homeless and housing services in Columbus and Franklin County. Currently, over 230 users in 16 agencies are using CSP to collect data for over 90 homeless and housing related programs throughout Franklin County. The CSP project is supported by CSB through a Data and Evaluation Department staffed by a full time CSB Database Administrator, Data and Evaluation Manager, Operations Administrator and Operations Director.

HUD requires each local CoC to have an HMIS that complies with the HUD standards, is used by all HUD funded entities in the continuum and is able to produce aggregate reporting at system and community level. Prior to 2008, CSB's HMIS did not fully comply with these standards, which led to the need to upgrade the system.

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

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

1.3 Governing Principles

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

- a benefit to individual clients through enhanced service delivery

- a tool for the provider agencies in managing programs and services

- a guide for CSB and its funders regarding community resource needs and service delivery

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

With this in mind, CSP will also be:

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

1.4 Terminology

Definitions of some of the terms used in this manual are as follows:

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

Mediware Information Systems: Formerly known as Bowman. The company who developed the software used for CSP.

CSP: Columbus ServicePoint, the specific HMIS utilized in Columbus, Ohio. Currently the HMIS uses software called ServicePoint produced by Mediware Information Systems.

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

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

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

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

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

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

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

Partner Agency: Agencies receiving funding from Community Shelter Board.

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

ServicePoint: A software package developed by Mediware Information Systems which tracks data about people in housing crisis in order to determine individual needs and provide aggregate data for reporting and planning. This software is web-based and uses a standard web browser to access the database.

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

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

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

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

1.5 Ownership

CSP, and any and all data stored in CSP, is the property of the Community Shelter Board. CSB has final control over the creation, maintenance and security of CSP. In order to ensure the integrity and security of sensitive client confidential information and other data maintained in the database, CSB will require all CHOs to sign an agreement ("Agreement") prior to being given access to CSP. The Agreement includes terms regarding the confidentiality of client information, duration of access, an acknowledgement of receipt of the Policies and Procedures Manual, and an agreement to abide by policies and procedures related to CSP, including all security provisions contained therein.

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

2. Implementation Overview

2.1 Relationship to CHOs

Contributing HMIS Organizations (CHOs) are those agencies allowed by CSB to connect to CSP for the purposes of data entry, data editing and data reporting. These agencies are CSB Partner Agencies and Other Agencies. Partner Agencies are agencies receiving funding directly and/or pass-through from Community Shelter Board. Other Agencies choose to participate in the CSP though they do not receive funding from Community Shelter Board.

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

2.2 Relationship to Mediware Information Systems

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

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

2.3 Central Server

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

ServicePoint grants access only to authorized users by utilizing username and password authentication ServicePoint supports commercial-grade, TLS1.0/1.1/1.2 browser encryption. ServicePoint also includes multiple security levels to control the amount of access a valid user can have.

2.4 Security Infrastructure

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

This arrangement provides protection against:

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

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

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

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

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

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

Data Traps: Mediware supports TLS encryption of all data passing from agency to server, or server to agency. Encryption is the translation of data from a readable "clear text" to an encoded hash using complex mathematical algorithms. TLS, short for Transport Layer Security, is a data transport protocol which encrypts data using a public-key infrastructure. When data is encrypted, even if information packets could be captured or recorded as they travel across the Internet, they could not be decoded and read.

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

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

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

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

3. Roles and Responsibilities

3.1 Project Organization

3.1.1 Project Management

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

Explanation: As the coordinating body for CSP, Community Shelter Board is responsible for all system-wide policies, procedures, communication and coordination. CSB is the primary contact with Mediware Information Systems, and with its help, implements all necessary system-wide changes and updates.

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

3.1.2 Agency Administrator

Policy: Each CHO designates an Agency Administrator. The Agency Administrator must have an email address.

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

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

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

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

3.1.3 User Access Levels

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

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

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

3.1.4 CSB Communication with CHOs

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

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

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

3.1.5 CHO Communications with CSB

Policy: CHOs are responsible for communicating needs and questions regarding CSP directly to the CSB Database Administrator. For CSP IT requests, the CHO uses Spiceworks to submit support tickets.

Explanation: CHOs communicate needs and questions directly to the CSB Database Administrator. For IT support tickets, the CHO uses Spiceworks to communicate issues with CSB. The Data and Evaluation team reviews the Spiceworks tickets and provides an initial response to the CHO within 24 hours.

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

3.1.6 System Availability

Policy: CSB and Mediware Information Systems provides a highly available database server and informs users in advance of any planned interruption in service.

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

Procedure: In the event that the database server is or will be unavailable due to disaster or routine maintenance, Mediware Information Systems contacts the CSB Database Administrator. The CSB Database Administrator contacts Agency Administrators and informs them of the cause and duration of the interruption in service. The CSB Database Administrator logs all downtime for purposes of system evaluation.

3.1.7 Ethical Data Use

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

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

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

3.1.8 CHO Grievances

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

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

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

3.1.9 Client Grievance

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

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

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

3.1.10 CHO Hardware/Software Requirements

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

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

WORKSTATIONS

ServicePoint 5 relies on the client machine more than previous versions. Therefore, faster machines will have better results, where in the past most of the performance was related to the server and connection speed. Fast internet connection and browser speed are still important.

MEMORY
> 4 Gig recommended, (2 Gig minimum)

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

PROCESSOR
> Avoid using single-core CPUs

INTERNET CONNECTION
> Broadband or other high-speed option

BROWSER
> Mozilla Firefox is recommended; Internet Explorer, Microsoft Edge and Google Chrome are acceptable.

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

3.1.11 CHO Technical Support Requirements

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

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

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

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

> **Policy:** CSB provides a CSP Policies & Procedures Manual, QA Standards & Data Dictionary, and relevant forms and user guides for all CSP Agency Administrators. These documents are kept up to date and in compliance with all HUD policies and requirements.

Explanation:

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

A CSP Agency Administrator manual provides information about how the software product is used in our community, contains procedures that are held in common for all CHOs, and common CSP related forms. The manual also provides specific technical instruction to CSP users about how to use ServicePoint. The QA Standards & Data Dictionary provides detailed information on the quality assurance standards and the data requirements for all programs and CHOs. CSB provides an electronic copy of the QA Standards & Data Dictionary for all CHOs.

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

3.2 Security

3.2.1 User Access

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

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

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

3.2.2 User Changes

Policy: The CHO Agency Administrator makes any necessary changes to the role of CHO users.

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

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

3.2.3 Passwords

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

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

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

3.2.4 Password Recovery

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

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

> **Procedure:** In the event of a forgotten password, the user whose password is forgotten contacts the Agency Administrator. The Agency Administrator resets the user password, and issues a temporary password to allow the user to login and choose a new password. The new password is valid from that time forward, until the next password expiration.

3.2.5 Extracted Data

Policy: CSP users maintain the security of any client data extracted from the database and stored locally, including all data used in custom reporting. CSP users do not electronically transmit any unencrypted client data across a public network. CSB may initiate encrypted electronic communication via secure email.

Explanation: The custom report-writer function of ServicePoint and ART allows client data to be downloaded to an encrypted file on the local computer. Once that file is unencrypted by the user, confidential client data is left vulnerable on the local computer, unless additional measures are taken. Such measures might include restricting access to the file by adding a password. For security reasons, unencrypted data may not be sent over a network that is open to the public. For example, while unencrypted data might be stored on a server and accessed by a client computer within the private local area network, the same unencrypted data may not be sent via email to a client computer not within the same local area network. CSB may initiate encrypted electronic communication via NeoCeritified secure email. Replies to these emails must be done through the NeoCertified secure reply interface, by clicking the link within the email, to maintain confidentiality of any sensitive information. CSP users should apply the same standards of security to local files containing client data as to the CSP database itself.

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

3.2.6 Data Access Location

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

Explanation: Because ServicePoint is web-enabled software, users could conceivably connect to the database from locations other than the agency itself, using computers other than agency-owned computers. If such a connection is made, the highest levels of security must be applied, and client confidentiality must still be maintained. For situations where this type of access may be needed regularly, please see the Remote Access Policy 3.2.9.

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

3.2.7 Hardware & Software Security Measures

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

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

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

Computers:
　　Locking screen savers
　　Virus protection with auto update
　　Individual network firewalls

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

3.2.8 Multiple Log-on Restriction Policy

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

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

Procedure: There are two acceptable scenarios for compliance:

1. When user logs on at the 2nd workstation, the system can provide a message notifying the user that they must first log off of the 1st workstation, or

2. When the user logs on at the 2nd workstation, the system can automatically log the user off of the 1st workstation and allow access at the 2nd workstation.

3.2.9 Remote Access Policy

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

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

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

The Agency Administrator has the responsibility to assure the user is in compliance with this and all other Policies, Procedures, Agreements and rules governing CSP.

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

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

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

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

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

Remote Access Authorization

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

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

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

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

3.3.0 Digital Data Retention Policy

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

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

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

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

4. Standard Operations

4.1 Access to CSP

4.1.1 Agreements

> **Policy:** The Executive Director (or other empowered officer) of any agency wishing to connect to CSP signs an Agreement with CSB before any member of that agency is granted access.

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

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

4.1.2 New User Licenses

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

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

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

4.1.3 Existing Licenses Redistribution

> **Policy:** CSB conducts an annual reallocation process of unused licenses, to start in May of each year for the next Fiscal Year.

Explanation: Based on the contract that CSB has with Mediware Information Systems the annual maintenance fee for each license is $238, while the purchase cost for a new license is $250. Given the high cost of purchasing and maintaining the licenses, it is not feasible for the agencies and CSB to keep a large amount of unused licenses in stock and it is more cost effective to reallocate licenses if they are needed, throughout the system.

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

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

At any point in the FY, or if there are no available "reallocation" licenses agencies can purchase new licenses for $250/license. In addition to the "new license fee" the agencies have to contribute the agreed upon annual maintenance fee/license, based on the current number of licenses, starting with the next FY.

4.1.4 CSP License Invoicing

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

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

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

4.1.5 User Activation

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

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

Procedure: Agency Administrators distribute user licenses for their CHO, adding and deleting users as needed. The CSB Database Administrator and the Agency Administrators are responsible for training new users. The CSB Database Administrator provides training to Agency Administrators and users and will supplement this training as necessary. The initial username and password are temporary and the user has to be CSP certified within 60 days of his/her CSP access in order to continue operations in CSP.

4.1.6 CSP User License Ownership

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

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

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

4.1.7 CSP User Agreements

> **Policy:** Each CHO User signs a CSP User Agreement before being granted access to CSP.

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

> **Procedure:** The CHO Agency Administrator distributes CSP User Agreements to new CSP Users for signature. The user signs the CSP User Agreement. The Agency Administrator collects and stores signed CSP User Agreements for all users. The existence of signed CSP User Agreements is verified during the annual CSP on-site review.

4.1.8 CSP User Authorization

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

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

> **Procedure:** Agency Administrators are required to file a signed CSP User Agreement for each user with CSB prior to the user receiving access to CSP. Agency Administrators are also required to delete a user's account and notify CSB immediately by fax or email when a user's need for access changes (i.e. termination or employment, taking a new position, etc.).
>
> CSB's Database Administrator maintains a file for these user agreements and reconciles the active user list in CSP to the hard copy files of signed CSP User Agreement at least once each month. If it is found that there are users in the system that do not have a signed agreement on file those user accounts will be immediately deactivated and an email notification sent to the Agency Administrator. An agency found to be noncompliant in this regard will require corrective action to be taken. For the sake of expedience it is acceptable to fax a copy of the agreement to CSB. The fax should consist of the signed user agreement marked "NEW USER". Agency Administrators and CSB are required to keep a copy of the user's CSP certification on file. No end-user will be permitted to access CSP more than 30-60 (dependent on project type) days, without having CSP certification.
>
> Agency Administrators are authorized to pre-certify end users to get them working in the system quickly. Precertification must include:
>
> - Full training provided by the Agency Administrator or their chosen power-user, utilizing the CSP Training site.
> - CSP User Agreement signed by end user and signed by the Agency Administrator and submitted and received by the Database Administrator at CSB.
> - End-user signed up for the next applicable CSP Certification training offered by CSB.

4.1.9 CSP User Agreement Breach

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

Explanation: CSB enforces the Agreements signed by CHO Executive Directors, Agency Administrators, and end users.

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

4.1.10 Training

> **Policy:** CSB provides adequate and timely ServicePoint training.

Explanation: CSB provides training in the ServicePoint software.

> **Procedure:** The CSB Database Administrator provides training to all new users. Agency Administrators are given additional training relevant to their position. Agency Administrators are expected to train new agency staff with the assistance of the CSB Database Administrator. The CSB Database Administrator provides periodic training updates and refreshers for all users, based on need.
>
> Regular monthly, quarterly or bi-quarterly in-person trainings are scheduled by the CSB Database Administrator for each project type. New CSP users are required to attend an in-person training within 60 days from their CSP access. Successful completion of the training and a test will be required for CSP Certification of the user. If the user fails to become certified within 60 days of CSP access, his/her access to CSP will be turned off.

4.2 Data Collection

4.2.1 Required Data Collection/Fields

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

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

Procedure: The Agreement contains a reference to a listing of data elements to be collected and entered in CSP for each client contact.

4.2.2 Appropriate Data Collection

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

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

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

4.2.3 CSP Protected Personal Data Collection and Privacy Protection

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

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

Procedures:

1. The CHO has a privacy notice sign posted at each intake desk, minimally the one provided by CSB. The sign is posted in an area accessible and easily viewed by clients.

2. The CHO has a written privacy policy, minimally the one provided by CSB, to cover the electronic data collection, use and maintenance of the client's protected personal information. Clients are made aware of the privacy policy. The policy is posted on the agency's website and shared with the client upon request. The policy is reviewed at least annually and updated as needed.

3. The CHO presents each client with a Client Acknowledgement for Electronic Data Collection form and informs the client about the provisions of the form. The CHO attempts to obtain a signed Client Acknowledgement for Electronic Data Collection form from each client before data is entered into the database and maintains this form on file at the agency, in the client's file.

4. In case the acknowledgment form is not signed, the CHO still has to electronically collect in CSP any and all CSP required data elements provided by the client to the agency. Based on current HUD regulations, CSB does not require client consent for the electronic data collection. The agency may also elect to implement a more restrictive client privacy policy than the one provided by CSB with respect to other data that is not CSP required.

5. If the CHO has a more restrictive privacy policy than the one provided by CSB that disallows the collection and/or entry of the protected personal information (name, birth date and social security number) in CSP without written client consent and the client refuses to provide written consent, the agency must enter the data by creating an Unnamed record for tracking purposes. This is a function within CSP which involves entering the client's protected personal information (name, birth date and social security number) which the system then uses to create a unique record identifier. The system then strips PPI out of the record. If the client consents with the electronic data collection, the agency must electronically collect in CSP any and all CSP required data elements provided by the client to the agency. Generally, the more restrictive CSP related privacy policy should be implemented only by agencies that by law are required to have privacy standards more restrictive than the HUD standards (i.e. HIPAA, etc).

6. The agency must provide CSB with its client privacy policy at the beginning of each CSB program year, with any updates made throughout the previous program year.

4.2.4 Educating Clients of Privacy Rights

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

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

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

4.2.5 Scanned Document Management

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

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

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

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

Security on Uploaded Documents:
- Permanent Documents OPEN
- Temporary Documents CLOSED

Documents to be uploaded:
- Only documents relevant to achieving a goal plan and needed for accessing housing and services should be uploaded, for example DCA Applications.
- Avoid duplication; if the document is already uploaded don't upload again.

Naming Standards for uploading documents:
- Format: Client ID#. Document Title. Date Saved
- Example: 77045. DCA Application Rent and Deposit. 120409

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

4.3 Data Entry

4.3.1 ShelterPoint Data Entry (applies only to emergency shelters)

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

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

Procedure: All clients served by the shelter must be entered into ServicePoint <u>and</u> ShelterPoint.

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

Example

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

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

4.3.2 Customizations

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

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

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

4.3.3 Additional Customization

Policy: CHOs purchase any additional database customization directly from Mediware Information Systems. CSB does not provide additional customizations. However any proposed customizations must be approved by CSB.

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

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

4.3.4 Data Corrections

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

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

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

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

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

4.3.5 Annual Data Freeze

Policy: Annually, as of October 1st no changes are allowed to data records which have an exit date on or before the last day of the previous fiscal year. The fiscal year data is effectively "frozen" on an annual basis.

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

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

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

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

4.3.6 Data Entry for Couples in Supportive Housing Programs

Policy: Data entry practices correspond with the target population of Supportive Housing programs/units.

Explanation: Couples present a challenge in data entry and reporting. The Columbus community encourages programs to serve couples, wherever possible, in the supportive housing programs.

Procedure: For Permanent Supportive Housing units, an eligible client may share a unit with a non-eligible client. Because only the homeless, eligible clients must be accounted for, the couples are entered in CSP as a household with the eligible client as the head of household. By the same token, if both members of the couple are eligible clients, then both need to be entered in CSP and reported on as individuals.

4.4 Quality Control

4.4.1 Data Integrity

Policy: CSP users are responsible for the accuracy of their data entry.

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

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

4.4.2 Data Integrity Expectations

Policy: CHOs provide the following levels of data accuracy and timeliness:
- All data entered is accurate.
- Entry Dates and Exit Dates must match intake and exit forms within the client file and must be completed for each individual served.
- Blank, "Client Doesn't Know", "Client Refused", and "Data Not Collected" entries do not exceed, collectively, 5% per data field, per month.
- Data entry is completed in CSP as real-time as possible. Data entry for shelter stays is completed by 9am each day for the previous night. Data entry for all other services provided is entered within 48 hours. Allowing for quality checks and corrections for any given calendar month-end, these must be completed within CSP by the fourth working day of the following calendar month.

Explanation: Users enter client data as provided by the client and, preferably, confirmed by documentation. Of the fields required in the Agreement, less than 5% of fields will be left blank or marked as "Client Doesn't Know", "Client Refused", or "Data Not Collected" in one month. For example, if the last zip code field is left blank for 2% of clients, then the last zip code field should not have more than 3% of "Client Doesn't Know", "Client Refused", or "Data Not Collected" responses for clients entered during one month. When service records are added, no services are entered by programs that do not provide that type of service. For example, rental assistance should not be entered by a program that only provides emergency shelter. When service records for shelter stays are added, the client must meet the most basic requirements of the program listed as providing shelter. For example, no clients listed as women should have shelter stays in shelters restricted to men. Agencies strive to complete entry data as real-time as possible. Data entry for shelter stays is completed by 9am each day for the previous night. Other services and items are entered within 48 hours of provision. Data entry for all services provided in one month must be accurately entered into CSP by the fourth working day of the following month. For example, if April 30th falls on a Friday, data for April must be completed by close of business Thursday, May 6.

Procedure: The CSB Database Administrator performs regular data integrity checks in CSP. Any patterns of error at a CHO are reported to the Agency Administrator. When patterns of error have been discovered, users are required to correct data entry techniques and will be monitored for compliance.

4.4.3 Quality Assurance

Policy: CSB performs at least a quarterly quality assurance process for data entered by each CHO, related to CSP.

Explanation: To keep the data integrity at the program and system level, CHOs and CSB perform a quality assurance process, at least quarterly, for data entered in CSP.

Procedure:
All agencies are required to run monthly the Client Duplicate report and inform the CSB Database Administrator of any client duplicates found, by the 4th working day following the end of a month (by fax). This report becomes an integral part of the Monthly/Quarterly quality assurance process.

The Monthly QA review roster is based on the results of the initial run of the preceding Quarterly QA run. If an agency receives a noncompliant rating on the initial run of a quarterly QA review that agency will receive monthly reviews for the next two months.
- **The purpose of the Monthly QA is to encourage Agency Administrators to monitor their compliance status and catch problems early. We are also looking to focus an agency's attention on the QA problems.**
- Review for the previous month is run by the Agency Administrator by the 5th working day of the month.
- Results are distributed (or emailed) to CSB Database Administrator by the 6th working day of the month.
- Administrators are expected to set their own schedule to review and effect a cure prior to the end of the third month of the quarter.
- Agencies will <u>not</u> have to do a monthly report for the third month of each quarter as this is when the Quarterly QA is run.

The Quarterly QA review schedule is 2-tiered:
- For the initial run, the Agency Administrator receive compliance results.
  - **The purpose of this step is to help Agency Administrators in determining the data integrity problems from the previous quarter and allow them sufficient time to correct the errors prior to inclusion in community reports.**
  - Review is run by the Agency Administrator by the 9th working day of the month following the end of the quarter.
  - Summaries are distributed (emailed or faxed) to the CSB Database Administrator by the 10th working day of the month.
  - Non-compliance will result in the Agency Administrator receiving a Non-Compliance email on the 11th working day of the month.
  - Non-compliant agencies are given 5 working days to cure.

- • All noncompliant agencies on this run will be added to the Monthly QA Roster.
- • Compliance will result in a formal letter addressed to the Agency Administrator and their Executive Director.
- • The 2nd run is only for those agencies found non-compliant in the 1st run; Agency CSP Administrator and Executive Director receive the results.
  - • **The purpose of the 2nd run is to make sure that all agencies are compliant with the minimal CSB data quality standards which in turn allow us to present the agency and system data in community reports and help the planning process to cover the ongoing homelessness related needs of our community.**
  - • CSB Database Administrator will do the 2nd review on the 17th working day of the month.
  - • Results are distributed within 3 working days.
  - • Compliance will result in a formal letter addressed to the Agency Administrator and their Executive Director.
  - • Non-compliance results in a hard-breach letter being issued and signed by CSB's Executive Director.

Any agencies receiving a hard-breach letter may have funding suspended until a cure has been achieved. CSB will not include that agency's data in the Quarterly and/or Semi-Annual System and Program Indicator Report (SPIR) and the program will be issued a "program of concern". The System Results in the SPIR will be revised after the agency becomes compliant. Agency results will NOT be changed.

CSB will not include the agency data in the SPIR or any other reports if CSB staff is not confident in the reliability of that particular agency's data in CSP, independent of the QA results.

CPOA and Quality Assurance Accountability
The Coordinated Point of Access (CPOA) staff collects and enters the majority of the required data elements for each emergency shelter client, however all serving agencies remain accountable for the accurate representation of the client's data within CSP. Programs receiving clients directed to their shelters via CPOA must review all required data elements and ensure all are entered and accurate as of the client's entry. When shelter staff discover an omission or mistake it should be promptly reported to CPOA for entry or correction as needed. Proof of this report should be included in the client's file.

4.4.4 On-Site Review

> **Policy:** CSB performs annual on-site reviews at each CHO of data processes related to CSP.

Explanation: On-site reviews enable CSB to monitor compliance with the Policies and Procedures Manual and Agreements.

> **Procedure:** This review is part of the Annual Program Review and Certification process. The Monitoring Guide for Sub-recipients Program Review & Certification details the annual on-site review.

4.5 Data Retrieval

4.5.1 Contributing HMIS Organizations (CHOs)

> **Policy:** CHOs have access to retrieve any individual and aggregate data entered by their own programs. CHOs do not have access to retrieve aggregate data for other agencies or system-wide.

Explanation: Any data entered within an agency is available for reporting. Data entered by other agencies is not available, unless there are explicit data-sharing agreements in place.

> **Procedure:** When using the report writer, ART or Qlik modules, users are only able to extract data from those records to which they have access. These modules will limit user access and only report data from records to which the individual user has access.

4.5.2 CSB Access

Policy: The Community Shelter Board has access to retrieve all data in CSP. CSB does not access individual client data for purposes other than direct client service-related activities, reporting, maintenance, and checking for data integrity, with the exception of compliance with local or federal law enforcement warrants.

Explanation: CSB Data & Evaluation and Programs and Planning departments have access to all data in the database. No other staff member of CSB has access to client-level data. CSB protects client confidentiality in all reporting.

Procedure: CSB's Operations Director is responsible for ensuring that no individual client data is retrieved for purposes other than direct client service, reporting, maintenance, and performing data integrity checks. CSB's Operations Director will oversee all reporting for the CSB.

4.5.3 Public Access

Policy: CSB addresses all requests for data from entities other than CHOs or clients. Individual client data is provided, upon request, to the CHO which entered the data, CSB's funder for the specific program for which individual client data is requested, outside organizations under contract with CSB for research, data matching, and evaluation purposes, or the client him or herself. Proper authorization is required for all requests.

Explanation: Any requests for reports or information from an individual or group who has not been explicitly granted access to CSP will be directed to CSB. No individual client data is provided to meet these requests without proper authorization.

Procedure: All requests for data from anyone other than a CHO or a client are directed to the CSB Database Administrator. It is CSB's policy to provide aggregate data on homelessness and housing issues in Columbus and Franklin County. CSB also issues periodic public reports about homelessness and housing issues in Columbus and Franklin County. No individual client data is reported in any of these reports. CSB may share client level data with contracted entities as follows: CSB's funder for the specific program for which individual client data is requested, outside organizations under contract with CSB for research, data matching, and evaluation purposes. The results of this analysis are always reported in aggregate form, client level data is not publicly shared under any circumstance.

4.5.4 Data Retrieval Support

Policy: Agencies create and run agency-level reports. CSB provides its own reports to agencies for their own use.

Explanation: The Agency Administrator has the ability to create and execute reports on agency-wide data. This allows agencies to customize reports and use them to support agency-level goals.

Procedure: The Agency Administrator is trained in reporting by Mediware Information Systems or by the CSB Database Administrator. CSB's Database Administrator provides the template for reports specifically required by the Community Shelter Board. CSB's Database Administrator is a resource for report creation.

4.5.5 Appropriate Data Retrieval

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

Explanation: The purpose of CSP is to support the delivery of homeless and housing services in Columbus and Franklin County. The database should not be used to retrieve or report information not related to serving people in a housing crisis.

Procedure: Agency Administrators ask the CSB Database Administrator for any necessary clarification of appropriate data retrieval.

4.5.6 Inter-Agency Data Sharing

> **Policy:** Data included in the Profile, EntryExit, and Service Transaction section of a client record is viewed by all users with the exceptions below. CHOs determine the security settings of the additional information entered in CSP.

Explanation: When new clients and new service records are entered into ServicePoint, the information, by default is open to be viewed by users from other CHOs. Open sections of the record can be seen and changed by users from another CHO. There are a few agencies that are regulated by HIPAA Standards and those Agencies' records, by default, are closed. Closed sections of the record can neither be seen nor changed by users from another CHO. Regardless of status, all sections of each record will appear in aggregate reports

Currently, the following are the agencies that are entering and sharing information in CSP:

Alvis House	Homeless Families Foundation	The Salvation Army
	Huckleberry House	U.S. Department of Veteran's Affairs
Community Housing Network	Lutheran Social Services/Faith Mission/Faith Housing	Volunteers of America of Greater Ohio
Equitas Health	Maryhaven	YMCA
Gladden Community House	National Church Residences	YWCA
HandsOn Central Ohio	Southeast, Inc.	

> **Procedure:** It is the intent of CSB to allow as much data sharing as appropriate and necessitated by the clients' needs and the services provided to meet those needs. Client profiles are set as "Open", as are Service Transactions and EntryExit records. HIPAA regulations, as followed by some of the CHOs take precedence over the above Policy and Procedure. HIPAA regulated agencies will have all their clients' data CLOSED.

4.5.7 Agency Data Sharing

> **Policy:** CHOs can share their data for research and data analyses purposes with prior approval by CSB.

Explanation: CSP provides the ability to run reports and download client-level data by all CHOs. CHOs are encouraged to analyze their data and make programmatic decisions based on the information contained in CSP. Data sharing must be done in conjunction with careful consideration of data confidentiality and privacy protocols.

> **Procedure:** The following steps are required by each CHO that wishes to share its data with an external contractor or vendor for research and data analysis purposes:
>
> 1. Data sharing will have to be approved by CSB
> 2. The provider will have to submit to CSB the data sharing agreement that will need to contain, at the minimum:
>   a. Scope of the analysis/research that must be limited to the data that pertains to the individuals served by provider
>   b. Information transmittal protocols
>   c. Data confidentiality/privacy protocols
>   d. Data handling after the analysis/research is complete

4.6 Contract Termination

4.6.1 Initiated by CHO

Policy: The termination of the Agreement by the agency will affect other contractual relationships with the CSB. In the event of termination of the Agreement, all data entered into CSP remains an active part of CSP, and records keep their original security settings.

Explanation: While agencies may terminate relationships with CSB and CSP, the data entered remains part of the database. This is necessary for the database to provide accurate information over time and information that can be used to guide planning for community services in Columbus and Franklin County. The termination of the Agreement will affect any other contractual relationships with CSB.

Procedure: Partner Agencies are required to participate in CSP as a condition of their funding. For Partner Agencies, termination of the Agreement will be addressed in the context of the larger contract with CSB. For the Other CHOs terminating the Agreement, CSB will need to receive official notification with a date of termination of the Agreement. The Executive Director of CSB will notify the CSB Database Administrator. In all cases of termination of Agreements, the CSB Database Administrator will inactivate all users from that CHO on the date of termination of the Agreement.

4.6.2 Initiated by the Community Shelter Board

Policy: CSB will terminate the Agreement for non-compliance with the terms of that contract upon 30 days written notice to the CHO. CSB will require any CSP violations to be rectified before the Agreement termination is final. CSB may also terminate the Agreement with or without cause upon 30 days written notice to the CHO and according to the terms specified in the Agreement. The termination of the Agreement by CSB may affect other contractual relationships with the CSB. In the event of termination of the Agreement, all data entered into CSP will keep their initial security settings.

Explanation: While CSB may terminate the Agreement with the CHO, the data entered by the CHO prior to termination of contract remains part of the database. This is necessary for the database to provide accurate information over time and information that can be used to guide planning for community services in Columbus and Franklin County. The termination of the Agreement may affect other contractual relationships with the Community Shelter Board.

Procedure: CSB Partner Agencies are required to participate in CSP as a condition of their funding. For Partner Agencies, termination of the Agreement will be addressed in the context of the larger contract with CSB. When terminating the Agreement, the Executive Director of CSB will notify the CHO at least 30 days prior to the date of contract termination. The Executive Director of CSB will also notify the CSB Database Administrator. In all cases of termination, the CSB Database Administrator will inactivate all users from that CHO on the date of contract termination.

4.7 Programs in CSP

4.7.1 Adding a New Program in CSP

Policy: Agency Administrators follow the prescribed procedure to notify CSB 's Database Administrator prior to implementing a new program within CSP. The CSB Database Administrator follows a standard formula when naming a new program within CSP.

Explanation: When a new program is to be added or activated within CSP the Agency Administrator is required to submit the requested information via the provided form prior to implementation. The CSB Database Administrator follows a standard pattern when creating a name for new programs being added to the CSP and obtains approval from the Data & Evaluation department prior to implementation.

Procedure: When a new program is to be added or activated within the CSP, the following steps occur:
1. At least 60 days prior to the anticipated implementation date, Agency Administrators complete a "CSP Program Implementation Request Form" and submit to the CSB Database Administrator.
2. If being newly added in CSP, the CSB Database Administrator ensures that the following standard formula is used when creating a name within CSP:
    Agency (Abbreviation) – CSB Contract/Program Name
    Example:
    CSB Test Program
3. The CSB Database Administrator present the completed request form and recommended program name to the Data & Evaluation Department for review and approval.
4. The CSB Database Administrator notifies the Agency Administrator of approval status at least 30 days prior to the requested CSP implementation date.
5. The CSB Database Administrator assists the Agency Administrator with the CSP implementation as needed.

4.7.2 Making Changes to Existing Programs

Policy: The Agency Administrator notifies the CSB Database Administrator of programmatic changes per the procedure below.

Explanation: Agencies must notify CSB of any program changes which affect data collection, data entry, data quality and/or data reporting. Agency Administrators accomplish this via the provided form which requests details such as (but not limited to) funding status, program type, quality assurance participation, program start and end date, capacity, bedlist specifications etc.

Procedure:
1. The Agency Administrator notifies the CSB Database Administrator of any applicable programmatic changes to existing programs which may have an effect on data collection, data entry, data quality or data reporting (i.e. program expansion of capacity or scope; termination; deactivation; discontinuance of CSP participation, etc.) Notification is made in writing at least 45 business days before the proposed implementation date of the change.
2. CSB's Database Administrator will circulate the completed form to the Data & Evaluation Department for review & comment.
3. Recommendations and timeline for assistance are returned to the agency no fewer than 10 business days prior to the requested implementation date.
4. The CSB Database Administrator assists with changes within CSP as necessary.

While the Agency Administrators have the access to make changes to programs within the system, it is required that any changes first be reviewed with the CSB Database Administrator to determine the overall effect of the changes and to allow for documentation of changes as well as the arrangement of any necessary support.

4.7.3 Maintaining a CSP Program Matrix

Policy: The CSB Database Administrator maintains a complete and up to date Program Matrix of CSP.

Explanation: The Program Matrix is a complete index of all programs existing in CSP, their status and other details such as (but not limited to) funding status, program type, quality assurance participation, program start and end date, etc.

Procedure: The CSB Database Administrator records changes being made to any existing program in CSP (termination, deactivation, etc.) and the addition of the new programs via the Program Matrix, upon receipt of the proper documentation from the Agency Administrator and after the finalization of the implementation plan. The CSB Database Administrator is responsible for ensuring the Program Matrix reflects any and all changes to programs within CSP. The CSB Database Administrator reviews the Program Matrix with the Data & Evaluation Department on a monthly basis.

2018 HDX Competition Report

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

Total Population PIT Count Data

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

Chronically Homeless PIT Counts

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

2018 HDX Competition Report

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

Homeless Households with Children PIT Counts

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

Homeless Veteran PIT Counts

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

2018 HDX Competition Report

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

HMIS Bed Coverage Rate

Project Type	Total Beds in 2018 HIC	Total Beds in 2018 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	1098	51	1047	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	106	18	88	100.00%
Rapid Re-Housing (RRH) Beds	734	0	734	100.00%
Permanent Supportive Housing (PSH) Beds	2708	0	2651	97.90%
Other Permanent Housing (OPH) Beds	0	0	0	NA
Total Beds	4,646	69	4520	98.75%

2018 HDX Competition Report

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

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

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

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

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

Rapid Rehousing Beds Dedicated to All Persons

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

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

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

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more "metrics" used to measure the system performance. Click through each tab above to enter FY2017 data for each measure and associated metrics.

RESUBMITTING FY2017 DATA: If you provided revised FY2017 data, the original FY2017 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and "save" before closing.

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.

FY2017 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2016	Revised FY 2016	FY 2017	Submitted FY 2016	Revised FY 2016	FY 2017	Difference	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
1.1 Persons in ES and SH	10752		9388	40		51	11	27		39	12
1.2 Persons in ES, SH, and TH	10976		9529	48		55	7	30		40	10

b. This measure is based on data element 3.17.

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

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

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2016	Revised FY 2016	FY 2017	Submitted FY 2016	Revised FY 2016	FY 2017	Difference	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	10704		9673	110		172	62	35		54	19
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	11075		9817	120		179	59	38		57	19

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

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

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months			Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years	
	Revised FY 2016	FY 2017	Revised FY 2016	FY 2017	% of Returns	Revised FY 2016	FY 2017	% of Returns	Revised FY 2016	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO		133		8	6%		8	6%		9	7%	25	19%
Exit was from ES		4124		390	9%		353	9%		471	11%	1214	29%
Exit was from TH		260		23	9%		18	7%		27	10%	68	26%
Exit was from SH		0		0			0			0		0	
Exit was from PH		1444		129	9%		107	7%		112	8%	348	24%
TOTAL Returns to Homelessness		5961		550	9%		486	8%		619	10%	1655	28%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

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

	January 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1724	1691	-33
Emergency Shelter Total	1244	1229	-15
Safe Haven Total	0	0	0
Transitional Housing Total	141	122	-19
Total Sheltered Count	1385	1351	-34
Unsheltered Count	339	340	1

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	11216		9684	-1532
Emergency Shelter Total	10859		9519	-1340
Safe Haven Total	0		0	0
Transitional Housing Total	700		323	-377

OH-503 FY 2018 CoC Competition Report

FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	1348		1079	-269
Number of adults with increased earned income	37		67	30
Percentage of adults who increased earned income	3%		6%	3%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	1348		1079	-269
Number of adults with increased non-employment cash income	120		253	133
Percentage of adults who increased non-employment cash income	9%		23%	14%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	1348		1079	-269
Number of adults with increased total income	142		292	150
Percentage of adults who increased total income	11%		27%	16%

2018 HDX Competition Report
FY2017 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	439		580	141
Number of adults who exited with increased earned income	80		56	-24
Percentage of adults who increased earned income	18%		10%	-8%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	439		580	141
Number of adults who exited with increased non-employment cash income	113		99	-14
Percentage of adults who increased non-employment cash income	26%		17%	-9%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	439		580	141
Number of adults who exited with increased total income	176		147	-29
Percentage of adults who increased total income	40%		25%	-15%

OH-503 FY 2018 CoC Competition Report

FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	10380		8951	-1429
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.	3019		3235	216
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)	7361		5716	-1645

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	10871		9601	-1270
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.	3337		3665	328
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.)	7534		5936	-1598

FY2017 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in FY2017 (Oct 1, 2016 - Sept 30, 2017) reporting period.

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

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	428		676	248
Of persons above, those who exited to temporary & some institutional destinations	83		165	82
Of the persons above, those who exited to permanent housing destinations	238		265	27
% Successful exits	75%		64%	-11%

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

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	9681		8688	-993
Of the persons above, those who exited to permanent housing destinations	4803		4082	-721
% Successful exits	50%		47%	-3%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	2896		2912	16
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	2687		2703	16
% Successful exits/retention	93%		93%	0%

2018 HDX Competition Report

FY2017 - SysPM Data Quality

OH-503 - Columbus/Franklin County CoC

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

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

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

2018 HDX Competition Report
FY2017 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017
1. Number of non-DV Beds on HIC	732	899	1034	1070	131	141	136	102	2235	2368	2661	2732	376	422	378	392				
2. Number of HMIS Beds	716	883	1034	1051	131	141	136	98	1927	2013	2249	2239	376	422	378	365				
3. HMIS Participation Rate from HIC (%)	97.81	98.22	100.00	98.22	100.00	100.00	100.00	96.08	86.22	85.01	84.52	81.95	100.00	100.00	100.00	93.11				
4. Unduplicated Persons Served (HMIS)	10621	10445	10436	9117	672	723	700	323	272820	2904	3021	3129	2363	4784	5278	4892	243	205	178	470
5. Total Leavers (HMIS)	9487	9510	9276	7954	487	484	599	251	636	581	493	560	1700	3609	3965	4212	144	114	78	342
6. Destination of Don't Know, Refused, or Missing (HMIS)	898	1611	2445	1050	6	22	39	14	16	19	40	41	9	829	1099	997	2	42	36	6
7. Destination Error Rate (%)	9.47	16.94	26.36	13.20	1.23	4.55	6.51	5.58	2.52	3.27	8.11	7.32	0.53	22.97	27.72	23.67	1.39	36.84	46.15	1.75

OH-503 FY 2018 CoC Competition Report

2018 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 2018 PIT Count	1/31/2018	

Report Submission Date in HDX

	Submitted On	Met Deadline
2018 PIT Count Submittal Date	4/17/2018	Yes
2018 HIC Count Submittal Date	4/17/2018	Yes
2017 System PM Submittal Date	5/30/2018	Yes

Unified Supportive Housing System

Vacancy Management and Lease Up

Narrative Manual

and

Policies & Procedures

Revised effective: July 1, 2018

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OH-503 Order of Priority

Appendixes

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OH-503 Order of Priority

Purpose

This set of policies and procedures provides administrative guidance and structure for the vacancy management and lease up processes of projects within the Unified Supportive Housing System.

Background

The Unified Supportive Housing System (USHS) is a collaborative effort managed by The Alcohol, Drug, and Mental Health Board of Franklin County (ADAMH), the Columbus Metropolitan Housing Authority (CMHA) and the Community Shelter Board (CSB). These partners work together with other agencies in the community including behavioral health, housing, shelter, and outreach providers. Funds from the Osteopathic Heritage Foundation, Fannie Mae and Battelle were used to develop the Unified Supportive Housing System.

Goal

The goal of USHS is to streamline and provide a standardized coordinated system for applying for, approving, and placing individuals and families experiencing homeless and have the greatest vulnerability in permanent supportive housing. USHS is also designed to provide similar access to ADAMH supported non-homeless specific units provided in conjunction with units dedicated for people who are experiencing homeless.

Key Terms

Break in Homelessness: at least seven (7) or more consecutive nights for which homelessness is not documented. If the break is less than seven (7) days, the time between one occasion and another can be counted towards homeless time. A break in homelessness for seven (7) days or more should be documented. Self-certification is an acceptable method of documentation only as it relates to non-homeless time to verify a specific break in homelessness.

Certification of Disability (COD)[1] –a USHS form that acts as verification of disability. The form must be signed by a professional licensed by the state to diagnose AND treat the disability and his or her certification that the disability is expected to be long-continuing or of indefinite duration and substantially impedes the individual's ability to live independently.

Columbus ServicePoint – our community's homeless management information system (HMIS). Partner Agencies collect client data and enter it in this electronic database.

Chronically Homeless (CH) Applicant–(a) "homeless individual with a disability" who:
   i. lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
   ii. Has been homeless and living as described in paragraph (a)(i) continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as

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[1] Disability may also be documented via (HUD CH notice):Written verification from the Social Security Administration; The receipt of a disability check(e.g., Social Security Disability Insurance check or Veteran Disability Compensation)

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<u>Procedure Name:</u> System Prioritization

<u>Policy:</u>

All Prospective Applicants will be prioritized for potential housing placement in their respective eligibility pools, prior to referral to the Housing Provider. <mark>USHS uses the order of priority outlined in HUD Notice CPD-16-11 issued July 25, 2016.</mark> Individuals and families with a disability and experiencing chronic homelessness, with the longest history of homelessness and the most severe service needs, are given first priority in all PSH projects.

This process was created to allow PSH to target individuals with the greatest barriers toward obtaining and maintaining housing on their own, and not on a first come, first serve basis. Individuals and families experiencing chronic homelessness will have priority over non-chronically homeless individuals and families, as defined in HUD Notice CPD-16-11. The purpose of a prioritized pool is to ensure that:

- Chronically homeless Prospective Applicants are prioritized in the USHS process.

- The most vulnerable Prospective Applicants receive a higher score, ensuring that they are housed within their category in order of need.

- All Prospective Applicants receive an equal opportunity for housing consideration based on their eligibility and service needs.

<u>Procedures:</u>

The USHS Program Manager will sort each Prospective Applicant into one of the following pools:

1. **Homeless Pools** (Prospective Applicants who are literally homeless residing in a place not meant for human habitation, a safe haven, or an emergency shelter):

    a. Chronically homeless households without children

    b. Chronically homeless households with children

    c. Non-chronically homeless households without children

    d. Non-chronically homeless households with children

2. **Non-Homeless Pool** (ADAMH, Veterans and Medical Choice Prospective Applicants who are not literally homeless):

    a. Non-homeless households without children

    b. Non-homeless households with children

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USHS Chronically Homeless and Non-Chronically Homeless Prioritization

The USHS Program Manager will sort chronically homeless Prospective Applicants into a separate pool and by household type (per above), which will be prioritized in accordance with HUD Notice CPD-16-11, Section III. A. USHS will prioritize chronically homeless households for all vacant PSH beds, regardless of whether those beds are dedicated or prioritized for the chronically homeless population.

<u>Priority Order</u>

1. **Chronically Homeless Persons.**
   a. Is eligible for USHS PSH dedicated for people who are homeless and is currently residing in a place not meant for human habitation, a safe haven, or in an emergency shelter,
   b. Qualifies as chronically homeless,
   c. Prioritization within this category: Higher priority is given to chronically homeless persons with the **longest history of homelessness** and the **most severe service needs,** based on the combined score of both length of time homeless and service needs on the Vulnerability Assessment.

If there are no chronically homeless individuals in the Columbus and Franklin County CoC geographic area, the USHS Program Manager will sort non-chronically homeless Prospective Applicants into the following prioritization pools in accord with HUD Notice CPD-16-11 Section III. B. Within each prioritization pool, Prospective Applicants with the **longest history of homelessness** and the **most severe service needs** will be prioritized**,** based on the combined score of both length of time homeless and service needs on the Vulnerability Assessment.

2. **Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs.** An individual or family that:
   a. Is eligible for USHS PSH dedicated for people who are homeless and is currently residing in a place not meant for human habitation, a safe haven, or in an emergency shelter,
   b. Does not qualify as chronically homeless (Priority 1),
   c. Has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months, *and*
   d. Has been identified as having severe service needs, based on meeting or exceeding a minimum score on the Vulnerability Assessment.

3. **Homeless Individuals and Families with a Disability with Severe Service Needs.** An individual or family that:
   a. Is eligible for USHS PSH dedicated for people who are homeless and is currently residing in a place not meant for human habitation, a safe haven, or in an emergency shelter,
   b. Does not qualify as chronically homeless or have long periods of episodic homelessness (Priorities 1 or 2),

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c. Has been identified as having severe service needs, based on meeting or exceeding a minimum score on the Vulnerability Assessment.

4. **Homeless Individuals and Families with a Disability without Severe Service Needs.**
   An individual or family that:
   a. Is eligible for USHS PSH dedicated for people who are homeless and is currently residing in a place not meant for human habitation, a safe haven, or in an emergency shelter,
   b. Does not qualify as chronically homeless or have long periods of episodic homelessness (Priorities 1 or 2), and
   c. Has not been identified as having severe service needs, based on not meeting or exceeding a minimum score on the Vulnerability Assessment.

5. **Homeless Individuals and Families with a Disability Coming from Transitional Housing.** An individual or family that:
   a. Is eligible for USHS PSH dedicated for people who are homeless and is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

Non-Homeless Prospective Applicant Prioritization

a. Non-Homeless Prospective Applicants with a disability will not be scored by the USHS Program Manager when the Housing Provider is exclusively filling vacancies designated for non-homeless, medical or ADAMH units.

b. Non-Homeless Prospective Applicants will be prioritized depending on Housing Provider. For those units, the Housing Provider will ensure that the USHS Program Manager has sufficient Prospective Applicants to fill available units.

c. ADAMH Prospective Applicants who are currently residing in residential ADAMH housing will be prioritized by residential length of stay and any other prioritization method that the sponsor for these units prefers to use.

Severity of Service Needs and Length of Time Homeless Assessment

a. Severity of service needs and length of time homeless are assessed through the standardized Vulnerability Assessment. All homeless single adults are required to have a Vulnerability Assessment as part of the Prospective Applicant File in order to be considered a complete file..

b. The USHS Program Manager will evaluate Prospective Applicants' Vulnerability Assessment results when allotting each Prospective Applicant a score for severity of service needs and length of time homeless. The USHS Program Manager will score

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the Vulnerability Assessment and will assign a score for each Prospective Applicant. When available, service utilization data provided through ADAMH will also be incorporated into the Vulnerability Assessment and score for each Prospective Applicant.

c. Prospective Applicant's total scores will be a combination of service utilization (when available), service needs, and length of time homeless.

d. In the event that two or more homeless households are identically prioritized for referral to the next available unit, and each household is also eligible for referral to that unit, the USHS Program Manager should refer the household that first presented for services in the next available unit.

Adopted: July 2011
Revised: June 2018

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Supporting Partnerships for Anti-Racist Communities (SPARC)

Columbus, Ohio

Initial Findings from Quantitative and Qualitative Research

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Contents

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

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

The Center for Social Innovation (C4) launched Supporting Partnerships for Anti-Racist Communities (SPARC) in 2016 in response to overwhelming evidence that people of color were dramatically overrepresented in the nation's homeless population—across the country and regardless of jurisdiction. Since then, SPARC has launched mixed methods research and action in six communities to better understand how people are experiencing systemic racism in relation to homelessness, and to leverage that knowledge toward systems transformation.

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

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

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

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

Quantitative Data

Demographics

Table 1 compares the racial/ethnic breakdown of the general population, the population in poverty, the population in deep poverty, and the homeless population.

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

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

[a] Data includes PSH, so some clients did not experience homelessness during the 3-year period, but were homeless upon admission to PSH; [b] ACS 5yr 2015, Less than 50% federal poverty level; [c] ACS 5yr 2015, Less than 100% federal poverty level; [d] ACS 5yr 2015 Total

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

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

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

White, Black, and Hispanic/Latinx individuals varied little in the rate *exiting* to doubled up situations from an emergency shelter or street outreach program. Individuals exited into doubling up at rates of 36.0%, 34.8%, and 37.0%, respectively.

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

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

Predictors of exiting into homelessness

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

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

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

A second logistic regression examined other variables

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

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

Note. OR = odds ratio; CI = confidence interval.
*$p < .05$, **$p < .01$.
*** White is reference group
32,754 is the total number of individuals in the system; 32,639 is the number of individuals without missing values listed in the table on racial/ethnic groups.

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

Workforce

The provider workforce survey included data from 100

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

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

Qualitative Data

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

Pathways into Homelessness

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

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

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

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

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

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

Barriers to Exiting Homelessness

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

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

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

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

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

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

> I have an eviction on my record from my last apartment because when I got

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

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

Recommendations

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

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

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

inequity in homelessness:

Organizational Change

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

Research

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

Policy

- Collaborate to increase affordable housing availability. Develop new affordable housing stock through broader use of inclusionary zoning and mandatory affordable units for new developments. We need to look more deeply at both the rate of production of housing units and subsidy amounts to stabilize people within units now available.
- Introduce regulation or legislation to prevent speculators from conducting mass evictions or choosing not to renew leases of tenants, and implement and enforce existing fair housing protections.
- Increase homelessness prevention efforts, including targeted eviction prevention for people at risk of homelessness and working with connected systems—criminal justice, child welfare, and public health systems— to reduce the number of people exiting into homelessness from sites within those systems.
- Investigate flexible subsidies. Many financial crises start as non-rent related. Respondents' initial needs were for food, car repair, or bills. This suggests that for some people, flexible subsidies could be used to avert crises that spiral into homelessness.

Individual Action

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

Summary

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

Conclusion

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

Methods

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

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

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

Quantitative Methods

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

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

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

Qualitative Methods

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

The research team used a Grounded Theory approach[2] to identify themes and concepts in the data and to develop a codebook, which allows for themes and concepts to emerge organically from the transcripts, rather than approach the data with any set hypothesis. NVIVO software was used to code the transcripts and run analyses.[3]

Limitations

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

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

Institutional Review Board Approval

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

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