

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: PA-508 - Scranton/Lackawanna County CoC

1A-2. Collaborative Applicant Name: United Neighborhood Centers

1A-3. CoC Designation: CA

1A-4. HMIS Lead: United Neighborhood Centers

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

| | | |
|--|-----|-----|
| Other:(limit 50 characters) | | |
| Local Workforce Investment Board | No | Yes |
| County - Aging and Children and Youth | Yes | Yes |
| Veterans Administration Medical Center | 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 solicits & considers a full range of opinions in meetings and subcommittees including 2 publicly advertised meetings per year and a bi-monthly CoC meeting where providers including ESG and Supportive Housing Programs(SHP) (including Victim Service Providers), SSVF, HUD-VASH, CoC staff, ESG Jurisdiction, PHAs, and more are able to share information and knowledge. VA, SSVF, Office of Youth and Family Services (OYFS), outreach, and SHP providers case conference for households on the Chronic Homeless & Veterans' lists at monthly meetings to assist in quickly entering housing. Input from providers at this meeting informed the policy developed to improve Identification and referral of Veterans. The Office of Youth and Family Services, regional and individual school homeless liaisons and other youth-serving organizations attend Education and Youth Homeless Committee Meetings to discuss and inform policies and activities. Input from this committee lead to a collaborative effort to get Coordinated Entry outreach into all school districts within the county, with a specific emphasis on referring doubled up and couch-surfing family and youth to prevention services. Input from a youth and LGBTQ provider at a CoC public meeting was also used to improve outreach for the youth PIT. PIT/HIC and AHAR analysis, along with program entry input from providers, were used to inform the board's decision on priorities for bonus funds. Lastly, the CoC's participation in the larger Lackawanna County Housing Coalition, attended by the SHP providers plus housing developers, neighborhood associations and a variety of service providers, assisted in development of a quarterly landlord forum as a means to attract and maintain a cadre of landlords willing to provide housing for the SHPs as well as housing choice vouchers and a homeless preference with a low-income housing provider.

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),2)&3)In order to solicit new members, the CoC places an advertisement in the local, most widely distributed newspaper at least once, and most often, twice yearly to invite any and all interested parties to the public meetings and to

participate in the CoC. For the two public meetings, e-mail blasts are also sent to a larger subset of community members/providers to solicit a wide array of community input and to inform as many community members as possible about CoC activities, the CoC meetings and contact information as well as solicit a wide array of community input. The CoC Board has also recruited Board members from key community partners in order to better facilitate an efficient system of homeless services. 4) In terms of outreach to ensure persons with lived experience of homelessness join the CoC, service providers have personally invited clients to meetings, and invited clients to sit on the CoC Board, providing transportation as needed. This outreach occurs at least twice yearly. Special training/CoC 101 has been offered to persons with lived experience of homelessness who wish to join the CoC Board.

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)

In order to notify the public that the CoC was accepting & considering FY 2018 CoC Program proposals from organizations that hadn't previously received CoC Program funding, an ad was placed in the Scranton Times Tribune, which is the most widely distributed publication throughout the county, on July 13, 2018. On that date, notice was also sent to CoC members via e-mail regarding the RFP. The application was made available on the publicly accessible United Neighborhood Center's website. Notices advised that e-mail would be the method of proposal submission. The CoC convened an evaluation committee comprised of 3 objective individuals who do not receive and had not applied for CoC funding within this county. These evaluators used a standardized scoring tool to develop consensus on the application scores. The applicant(s) with the highest score would be included in the FY 2018 Competition process. The highest scoring new project this year is from a new provider, who has not previously received funding within this CoC. This project is being submitted within the current competition in hopes that it will enhance our ability to provide RRH to youth.

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) | Not Applicable |
| Head Start Program | Yes |
| Funding Collaboratives | Not Applicable |
| 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) | |
| Housing & serv. prog. through VAMC | Yes |
| | |

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)**

The CoC collaborates with the Scranton Con Plan Jurisdiction(Scranton), which encompasses over 85% of our projects/units, bi-monthly (at least 1 hour/month)at CoC and the broader Housing Coalition meetings, where they receive HIC/PIT data, collect and disburse information as needed. In addition,

phone calls and e-mails are exchanged. The CoC ensures local information is clearly communicated by sharing at meetings, making comment on the Con Plan and giving system-wide updates as requested. To determine funding allocation, the CoC board comes together to determine community need with HIC/PIT, AHAR and Coordinated Assessment data and works with Scranton to choose programs that best move the community towards the goal of ending homelessness. The CoC provides all HMIS data as requested by the city. For the state jurisdiction(PA), the CoC obtains certification of consistency with PA's Con Plan and attends quarterly state-wide meetings, lasting usually 1.5 hours each, where community needs, statewide and HUD initiatives, among other relevant topics are discussed. PA has access to the CoC's HIC/PIT data which is reported out during these meetings, and we are open to further involvement.

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 CoC's protocols prioritizing safety and incorporating trauma-informed include: adoption of an emergency transfer plan (ET) that requires all providers to use consistent procedures allowing for victims to exit programs for reasons of safety. Victims of DV, dating violence, sexual assault, stalking and/or human trafficking who identify a threat of imminent harm from further violence by remaining in their current residence can request an ET to a new unit. The ET plan and CoC policies require safety, privacy, choice and access to trauma-informed, victim-centered services for all survivors. The CoC provided free training on trauma-informed care for all housing service providers including coordinated entry staff. Upon DV disclosure, HH is referred to a DV provider, which can provide lethality screening and connection to DV safe housing (shelter), taking care to provide private meeting space, maintaining confidentiality and keeping all PII confidential, sharing information only with a signed release. Safety planning is conducted via CoC and/or Victim Service Provider (VSP) staff. Survivors may enter the homeless services system via

local Victim Services Provider, which is a CoC member, or via the Coordinated Entry System. 2)Both VSP and non-VSP providers take individual circumstances and safety needs into account when conducting assessments and making referrals, taking care to uphold client choice within the available safe options for housing and services, including client and provider coming up with additional options if none provided were acceptable.

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)

The CoC conducts annual training given by the local Victim Service Provider (VSP) and the community based mental health provider for CoC, ESG, including Coordinated Entry (CE) staff, and other social service providers on the dynamics of DV, including identification, trauma-informed care, risk assessment, security concerns, safety planning and best practices in serving survivors of domestic violence, dating violence, sexual assault, stalking and human trafficking. Trainings also include the CE process for survivors, administering the VI-SPDAT, available housing resources and how to safely collect and record personal information. Trainings also include client-centered services (i.e. affirming the client's ability and right to make her own choices. Additional related web-based trainings are offered to DV, sexual assault, homeless service and CE staff multiple times per year on topics including working with people who have experienced multiple traumas, especially women, people with disabilities, LGBTQ people and other underserved communities, and how to make informed referrals that strengthen providers' responses to survivors of violence.

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)

The CoC uses HMIS and HMIS-comparable database data as well as additional Victim Service Provider (VSP) database data to assess the scope of needs related to domestic violence, dating violence, sexual assault and stalking. The HMIS-comparable database is used by VSP which allows for collection of HUD-required data of survivors while ensuring VAWA compliance. The CoC uses de-identified, disaggregated data to identify the special needs of survivors. Data collected in the comparable database is used, for example, to identify the demographic makeup of the population, previous living situations, sources and amounts of employment and non-employment income, and information on disabling conditions. The CoC uses these data to inform service delivery and training needs. In addition, information from this system is used to evaluate the extent to which CoC-funded DV projects are meeting the needs of survivors, i.e.) increasing earned and other income, ensuring enrollment into non-cash benefits, and helping survivors maintain PH and exit to PH. All HUD required data is collected and entered by non-VSPs about DV survivors into HMIS. Victims sign a waiver to be entered into HMIS and are counseled around any potential risks to safety. An additional option is to have victims demographic

information entered “anonymously”, where PII is not linked with a person's name, etc. This data is analyzed in the same way the comparable database information is to ensure that households are able to access appropriate services and that those services are effective. Data from VSP data system are also used. These data offer an even broader scope of community needs, beyond housing, such as a need for economic advocacy and the nuances needed in outreach for victims including that for human trafficking.

**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 | <input type="checkbox"/> |
| RRH | <input checked="" type="checkbox"/> |
| Joint TH/RRH | <input type="checkbox"/> |

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) During fiscal year 2017-18, WRC served 1,533 survivors of domestic violence in Lackawanna County. Homeless service providers who enter data into HMIS, served 179 households with 248 children, totaling 427 people who responded "yes" to having experienced domestic violence. WRC's Emergency Safe Housing (ESH), or shelter program, served 129 females, 2 males, and 1 transgender adult for 792 nights. Additionally, 112 children received 1030 nights of ESH. Of the 132 families served, 29 survivors and 57 children benefited from WRC's HUD-funded RRH Project, an additional 11 survivors with 19 children received rental assistance from WRC's other funding sources, totaling 40 adults and 131 receiving.

2) The data sources for the calculations are threefold: WRC's HMIS-comparable database, where information is collected on CoC and ESG-funded programs so as to be able to report out on the progress of each project and program participant; the CoC's HMIS system, in which DV experience is a question asked of each person entering any of our homeless programs, including coordinated assessment and prevention programs; an additional database used by the victim service provider.

3) Data is collected at all non-VSP, CoC and ESG-funded housing provider sites during face to face interviews where data is directly input into the HMIS system in live time. All HMIS users are trained on confidentiality, data security and informed consent requirements prior to being allowed access to the system and adhere to same. WRC data is collected by an advocate via face to face interview or hotline call. All data is recorded on hard copy and then a data entry

technician enters same into the appropriate database depending on client need. The VSP advocates and staff are also trained on confidentiality and data security requirements and adhere to same.

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) During fiscal year 2017-18, Women's Resource Center (WRC), the only victim service provider in Lackawanna County, served 1,533 survivors of domestic/sexual violence in Lackawanna County. A conservative estimate suggests more than one-third seeking services from the WRC requested some form of housing assistance. This estimate is supported by the HMIS system data which indicates that 427 people began program enrollments who had an experience of domestic violence. This number includes all people entering prevention, coordinated assessment, ES, SH, TH and PH programs, the majority of whom did not enter PH programs within the year. It should also be noted that the current COC's chronic homeless waiting list has 3 DV survivors, out of 7 individuals, awaiting PSH. 2) The data source for this response was WRC's HMIS-comparable database, another database housed at WRC and the CoC's HMIS database. 3) Data is collected at WRC and HMIS contributing sites by end-users who are trained in their roles and responsibilities in terms of informed consent, confidentiality and security as well as client rights. At WRC data is collected on paper via person to person or phone interview and then entered by a data entry technician. At HMIS input locations, data is entered in real-time, as a person or household is being interviewed face to face. Research on incarcerated women reveals that upwards of 90% of women in prison have experienced domestic and/or sexual violence. In the last two years, OUTREACH (formerly Employment Opportunity Training Center), the community agency that provides prisoner re-entry services, served 106 incarcerated women aged 18-24, of which 64 identified the need for permanent housing options. Extrapolated out, this would come to 29 women over the course of 1 year who had experienced DV who are exiting prison and in need of housing. OUTREACH provided the data for this population.

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&2) The unmet need for housing and services for DV survivors is estimated to be above 250 persons per year. Even though over 1,500 people came to Women's Resource Center for DV services during the last fiscal year, and 1/3 of

them requested housing assistance, housing assistance was only given to 244 persons, leaving over 250 survivors without housing services. While it is possible that a small fraction of this number was served in other CoC-funded projects (there is no current process for de-duplication of numbers in the separate databases), the system does not have capacity at current levels of funding, to serve all victims with supportive housing needs. In fact, of the 132 families receiving WRC's ESH (shelter); a total of ninety-two (92) adults and 36 children had no immediate access to rental assistance or permanent housing options upon leaving ESH.

The Institute for Women's Policy and Research (IWPR) reported, in a study of residents in domestic violence shelters across the country, 84% reported that they needed help finding affordable housing. IWPR also reports, among mothers with children experiencing homelessness, more than 80% had previously experienced domestic violence. In 2017, HMIS data indicates that 339 mothers with children (a total of 1,454 people in these households) were experiencing homelessness or housing instability in Lackawanna Co. Extrapolate out the number of mothers previously experiencing DV and the numbers estimate 271 mothers with over 800 children. As reported by the National Alliance for Safe Housing, studies show that as many as 57% of all homeless women report domestic violence as the immediate cause of their homelessness. According to IWPR, 1 study estimates the cost of intimate partner violence (IPV) to U.S. society, including health costs and productivity losses, to be \$5.8 billion, including \$4.2 billion for physical violence, \$320 million for partner rape, and \$342 million for partner stalking, in 1995 dollars. Converted to 2017 dollars, the cost of IPV in the United States would be \$9.3 billion.

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 Community Collaborative to Transition and Rapidly Re-house Youth, Families and Incarcerated Survivors of Domestic and Sexual Violence will provide Eight PH-RRH and four TH scattered site units. Collaborative partners for the project will be the OUTREACH and Saint Joseph's Center's Mother-Infant Program/Walsh Manor shelter (SJC). A maximum of 24 months assistance will be provided to program participants and all attempts will be made to permanently house participants. The WRC will take into account neighborhood choice based on the survivor's safety risks and support systems and participants will have opportunity to choose TH or RRH based on an assessment of need. Annually it is projected that 6 households with children; and 12 households without children will be served. Both the TH and RRH components will be used to move program participants with complex needs out of ESH (shelter) as soon as possible. In turn, this will reduce the costs of ESH and increase opportunity to permanently house marginalized, underserved populations in the community. Coordination of services and collaboration between WRC, OUTREACH and SJC will greatly enhance the overall system response to homeless women and children and reduce service overlap. OUTREACH and SJC will dedicate their expertise to providing intensive supportive services.

Given the myriad & very specific complex issues that go along with surviving domestic & sexual violence, this TH & PH-RRH project, increasing the

continuum of housing options, provides room to better meet individualized needs. While always striving to meet clients where they are & assist them to achieve higher levels of self-sufficiency as quickly & safely as possible, there are times when a longer course of supportive housing is necessary & appropriate in order to achieve sustainable permanent housing. This project will allow WRC to honor those households with greater needs while still championing the goals of ending homelessness in the county.

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) This project proposes to serve 12 households & 20 people at a single point in time. Given the nature of RRH, however, it is anticipated that the Women's Resource Center (WRC) will be able to serve 18 households per year, increasing the CoC's capacity to meet the large unmet need of DV survivors for supportive housing assistance in Lackawanna County. WRC has strived to balance quality of service with providing assistance to as many survivors as possible within budget constraints. 2) For example, in WRC's 2017 APR, 100 percent of survivors exiting the RRH program reported a positive housing destination; upward of 60 percent of survivors had an income increase upon exit; almost all received non-cash benefits; & all were housed in under a year. 3) The overall WRC Safe Housing Program demonstrates that upward of 75 percent of households receiving TH or RRH were able to escape the abuse & stay out of the abusive relationship over time. 4) WRC has been a member of the Lackawanna Co. COC since 1995, currently receiving HUD funds for a rapid re-housing project. WRC established an Economic Advocacy Project with a Safe Housing Program component 7 years ago to advance the agency's economic justice work & develop a continuum of housing options for survivors fleeing. WRC received TA from the Center for Survivor Agency & Justice &, as a result, established the Community Council to Enhance Economic Justice for Women/Survivors; the mission being to develop strategies to improve the economic well-being of women/survivors. Additionally, a Consumer Advisory Council has also been established to provide input on program growth & changes. WRC subscribes to Housing First principles, assessing for ways to "screen in" potential program participants versus "screening out" due to mental illness, drug addiction or other related issues. All WRC advocates have received professional training on trauma affects & response in order to provide trauma informed counseling & advocacy services. Given the myriad & very specific complex issues that go a long with surviving domestic & sexual violence, this TH & PH-RRH project, increasing the continuum of housing options provides room to better meet individualized needs. While always striving to meet clients where they are & assist them to achieve higher levels of self-sufficiency as quickly & safely as possible, there are times when a longer course of supportive housing is necessary & appropriate in order to achieve sustainable permanent housing. This project will allow WRC to honor those households with greater needs & still move towards

the goals of ending homelessness in the county.

4) Collaborative services WRC will provide include safety planning, emergency safe housing, 24-hour crisis response, rapid re-housing, relocation, individual & group empowerment counseling, court accompaniment, systems' advocacy & legal representation by the Barbara J Hart Justice Center (Justice Center), a civil legal project of WRC. Additionally, the WRC acknowledges the emerging Latina/Hispanic population in Scranton & has made efforts to provide language/culturally appropriate services, employing 5 Spanish-speaking advocates, including two Economic & Housing Advocates & a Legal Advocate, & provides translated forms & handouts in Spanish. Additionally, the WRC is an identified grant partner with the Pennsylvania Utility Law Project (PULP), giving survivors access to attorneys with an expertise in negotiating utility hook-ups & expunging arrearages. Lastly, WRC has established relationships with the local administrators of TANF, Medicaid, SLHDA, EARN & other entitlement programs. WRC is committed to addressing the needs of underserved, marginalized survivors & has long standing relationships with community organizations that provide mental health services, drug & alcohol treatment, free to low cost medical services, SOAR certified workers, ESL classes & other related services to address a spectrum of needs.

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? |
|---|--|--|--|
| Carbondale Housing Authority | 0.00% | No | No |
| Housing Authority of the County of Lackawanna | 18.00% | Yes-Both | No |
| Scranton Housing Authority | 10.00% | Yes-Both | 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)**

One of the three PHA's within our jurisdiction does not have a homeless preference. In order to encourage them to adopt such a policy, the CoC invites the Housing Authority to CoC Public and General meetings. In addition, CoC member agencies have attended quarterly meetings with the Housing Authorities to discuss homeless issues, problem-solve around specific cases in order to prevent eviction, and present information about those experiencing homelessness throughout the county. We have used these meetings to explore options for better collaboration. The Carbondale Housing Authority has the lowest population of households experiencing homelessness of the 3 authorities. Specific action steps taken are attending quarterly meetings with Housing Authority representatives, asking the remaining HA adopt a homeless preference, presenting data on local homelessness and building and maintaining a working relationship by assisting with application process, eviction prevention, etc. The CoC and County HHS office have also convened a monthly multi-disciplinary team/Housing Authority meeting to provide additional eviction prevention support as well as serve to support Move-On programs once they are adopted.

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)? Yes

**Move On strategy description.
(limit 2,000 characters)**

A local affordable housing provider has implemented a homeless preference which can be used as a move-on for any of our supportive housing programs including permanent supportive housing, as it takes referrals specifically from homeless service providers in this county. United Neighborhood Community Development Corporation has a homeless preference in the following projects: Stowe - 18 1,2&3 BR units, Cedar - 30 1,2&3 BR units, and Cabrini, a HUD 202 program for seniors - 16 units. The preference indicates that every other entry into the projects will be referred and certified as formerly homeless from one of the CoC providers. Therefore, the preference allows for entry to those wishing to leave permanent supportive housing programs. This preference has been approved by HUD and advertised at local Housing Coalition and Continuum of Care meetings.

Permanent Supportive Housing providers assess program participants for "program graduation" readiness using a "Move-On Assessment." This assessment evaluates client's history of rental payment, income stability, budgeting, social and family supports, independent living skills, and lease compliance. Providers take care to uphold client choice while encouraging self-sufficiency if the assessment indicates that intensive supportive services are no longer needed. Graduates are also able to receive case management services for up to 6 months after leaving the program and connected with community supports should further assistance be needed.

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)

The CoC addresses LGBT needs by providing equal access in a sensitive and informed manner to homeless services, and has had a local LGBT organization, NEPA Rainbow Alliance, present and distribute materials regarding the LGBTQ needs and homelessness to local housing providers at CoC meetings. Topics covered include terminology, LGBT homeless statistics, challenges and rights of this population and sensitivity to any specialized needs and/or circumstances. A free Equal Access and Gender Identity Rules training, with instruction on how to access same, was advertised via CoC meeting and e-mail to all CoC members, offering several dates and times. All CoC members were encouraged to attend. Finally, the CoC provided a local Equal Access training, soliciting input on the most convenient date and time, which allowed the presenter, a local university professor specializing in the topic, to go more deeply into terminology and the unique vantage point of some who identify as LGBTQ. The training also covered scenarios which LGBT individuals may encounter in the homeless system and sensitive and inclusive ways to handle those situations in a way that is consistent with the Equal Access Rule, leaving plenty of time for attendees to ask questions and discuss specific scenarios which they had encountered.

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: | <input checked="" type="checkbox"/> |
| Engaged/educated law enforcement: | <input checked="" type="checkbox"/> |
| Engaged/educated local business leaders: | <input checked="" type="checkbox"/> |
| Implemented communitywide plans: | <input type="checkbox"/> |

| | |
|--------------------------------------|----------------------|
| No strategies have been implemented: | <input type="text"/> |
| Other:(limit 50 characters) | |
| | <input type="text"/> |
| | <input type="text"/> |
| | <input type="text"/> |

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 Assessment System covers the entire CoC geographic area via community homeless outreach efforts from all service providers, and, especially, CiC and CSS with their office locations in various parts of the county and ability to go to where people experiencing homelessness have been seen and/or reported. Outreach is regularly conducted in known and rumored homeless locations, libraries, and now in all school districts within the county. Agencies also provide transportation as necessary and when agreeable to persons experiencing homelessness to office locations where the assessment can be completed in HMIS. 2) A brochure has been developed and distributed among ESG, CoC, CDBG and legal service providers, early childhood programs, schools, the City of Scranton, behavioral health and physical healthcare providers, food distribution centers, etc. to inform all community members about the CA system and how to access it. Live presentations, including Q&A time, have accompanied brochures for many of the aforementioned providers. Depending on the service provider, translation services are available on site, or via phone for those needing that assistance. For others, needing special assistance, the system utilizes the victim service providers (CoC member and service provider), the Center for Independent living, and local behavioral healthcare providers for assisting those who have different risks, abilities and skill levels.

3) This CoC uses the VI-SPDAT as part of the CA system. This, in combination with length of time homeless data and case conferencing as a means to present any information not captured by the VI-SPDAT, prioritizes people most in need of assistance, ensuring assistance is as timely as possible given the resources available.

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

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

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) The CoC considers the severity of needs and vulnerabilities of participants when determining project application priority using rates of project entries with high barriers as scoring criteria for renewal projects including: current/past substance abuse, MH diagnosis, physical disability, developmental disability, HIV/AIDS, chronic health condition, no income, and history of domestic violence, as well as rate of literal homelessness prior to project entry. 2) For all of the above, the higher rates of entries with barriers or from homeless locations, the higher a project would score and rank. For new projects, the criteria included for scoring considered participation in Coordinated Entry, which considers and highly prioritizes those with greater severity of needs and longer length of time homeless, the target population served and the applicant's adherence to housing first (commitment to prioritizing project participants without pre-requisites such as sobriety, income, project participation, treatment, etc.) and barrier responses on project applications. Discussion regarding the types of new projects accepted and final ranking further addressed programs' specialized target populations and their severity of need.

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 | <input checked="checked" type="checkbox"/> | CoC or other Website | <input checked="checked" type="checkbox"/> |
| Email | <input checked="checked" type="checkbox"/> | Email | <input checked="checked" type="checkbox"/> |
| Mail | <input type="checkbox"/> | Mail | <input type="checkbox"/> |
| Advertising in Local Newspaper(s) | <input type="checkbox"/> | Advertising in Local Newspaper(s) | <input type="checkbox"/> |
| Advertising on Radio or Television | <input type="checkbox"/> | Advertising on Radio or Television | <input type="checkbox"/> |
| Social Media (Twitter, Facebook, etc.) | <input type="checkbox"/> | Social Media (Twitter, Facebook, etc.) | <input type="checkbox"/> |

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 performance of existing CoC Program-funded projects to determine the viability of reallocating to new high performing projects

in the following ways:

The CoC has developed an evaluation tool which incorporates performance data and benchmarks and ranks projects taking that performance data into account. The performance measures include increase in household income, maintaining housing, exits to permanent housing, and cost effectiveness, which is calculated using expenditure per household excluding leasing/rental assistance. Lower scoring projects are encouraged to look closely at improvement strategies, or reallocation as mentioned above. Even with some well-performing projects, the CoC has encouraged providers to look at their inventory and either add clients when budgets allow, change to more cost-effective interventions which are shown to yield better outcomes, or reduce from one project type in order to add to another, already existing project which is struggling to meet outcome standards because of capacity. In this way the CoC looks at right-sizing for both individual projects and for the whole system. To this end, the CoC has either reallocated or replaced TH projects with permanent housing options such as Rapid Re-Housing and Permanent Supportive Housing; and the system has taken excess money out of PSH for families where the need is lower, putting it into an expansion project for a struggling RRH project for families where there is a much greater need. In total, the CoC has reallocated over 17% of it's ARD between the FY2014 and FY2018 Competitions

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. | Yes |
| (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: Page 1, MOU
 (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).

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? Eccovia Solutions (ClientTrack)

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 (ES) beds | 95 | 6 | 71 | 79.78% |
| Safe Haven (SH) beds | 11 | 0 | 11 | 100.00% |
| Transitional Housing (TH) beds | 76 | 9 | 67 | 100.00% |
| Rapid Re-Housing (RRH) beds | 93 | 40 | 53 | 100.00% |
| Permanent Supportive Housing (PSH) beds | 219 | 0 | 164 | 74.89% |
| 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)**

With the winter weather being extremely cold during parts of this past season, 46 seasonal beds were added in our area. While 24 of the additional were tracked in HMIS (an increase from last year), the remaining 22 were not. In fact, these 22 spaces were not beds, but single adults were allowed to stay overnight in a day shelter - living room area, sleeping on chairs or floors or wherever there was space. These spaces were available for a short period of time during the coldest nights, and one of those nights happened to be the PIT night. As winter approaches this year, we will be in communication with this faith-based program to determine the feasibility of HMIS participation, including the offer of training and payment for HMIS licensing. This approach was successful with the other seasonal faith-based shelter, as we were able to capture their data this year after several years of trying without success.

The only PSH beds not in HMIS are HUD-VASH. The CoC houses the Veterans master list and works closely with the VAMC to keep that current, exchanging data frequently. In the next 12 months the CoC intends to increase this percentage by working with HUD Vets @ Home TA in order to gain insight on how other communities include these beds, develop and execute appropriate confidentiality agreements for data inclusion, and participate in discussion with regional and local HUD-VASH experts and staff to explore solutions, including direct input into this CoC's system and CSV import into the system. Additional action steps will depend on the solution, but may include working with the HMIS vendor to learn/facilitate the data import process and providing HMIS training to HUD-VASH staff.

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

**2A-7. CoC Data Submission in HDX. 04/11/2018
Applicants must enter the date the CoC
submitted the 2018 Housing Inventory Count
(HIC) data into the Homelessness Data
Exchange (HDX).**

(mm/dd/yyyy)

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 01/31/2018
the date the CoC conducted its 2018 PIT
count (mm/dd/yyyy).

2B-2. HDX Submission Date. Applicants 04/10/2018
must enter the date the CoC submitted its PIT
count data in HDX (mm/dd/yyyy).

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? Yes

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: | 18 |
| Beds Removed: | 0 |
| Total: | 18 |

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 an 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) Several community stakeholders serving youth experiencing homelessness were engaged in the youth PIT planning process, including youth after school programs, post-foster care and youth homeless service providers, a new homeless youth non-profit, and the Office of Youth and Family Services. This group participated in several planning meetings and activities such as advertising, organizing and leading youth focus groups, leading up to the PIT. 2) Committee members, including several youth service providers, reached out to youth as well as local schools to solicit input and participation. Homeless and other youth were engaged in planning efforts and implementation via focus group, one-on-one discussion and committee input on efforts such as method of information gathering, the survey tool, where and how to advertise, and locations where youth experiencing homelessness are most likely to be identified. 3) As referenced above, youth experiencing homelessness were involved through one-on-one contact, soliciting input regarding outreach and engagement methods and locations, and invitation to participate in focus groups.

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 order to better count individuals and families experiencing chronic homelessness during the 2018 PIT, the CoC met and planned with the day shelter which had agreed to extend their hours to overnight and had 18 ppl on the night of the count and provide survey team for this temporary, religiously affiliated, winter shelter, the CoC sent a survey team to the other religiously

affiliated seasonal shelter to count those individuals, several of whom were chronically homeless, and met with the outreach team to share information about homeless camps/locations of unsheltered persons from the greater CoC and integrate that into the PIT canvassing plan. As was the case last year, the ESG-funded emergency shelters stayers were counted using HMIS, capturing additional chronically homeless individuals. There were no chronic homeless families counted in the last several years as those families had been entered into permanent supportive housing.

2)To better count families with children experiencing homelessness, the CoC collaborated with the Office of Youth and Family Services as well as schools, using those community partners to help complete surveys for families not yet accessing CoC homeless services, the CoC's Victim Service Provider completes surveys with program participants in their Safe Housing (Emergency Shelter) and Transitional Housing programs, and all CoC and ESG and other-funded HMIS contributing Shelters and Transitional Housing contribute to the PIT via HMIS.

3)To better count Veterans experiencing homelessness, the CoC collaborates with the VAMC as well as the Veteran Grant Per Diem provider. The VA assists in locating Veterans experiencing homelessness, adding to the outreach teams and shelter knowledge, and the GPD program enters data into HMIS which is used for the PIT count. Of course, all of the methods outlined above would also be used to capture chronic homeless veteran individuals or families and veteran families with children.

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. | 544 |
|---|-----|

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)To identify homeless risk factors, the CoC conducts fact-finding with providers and institutions having discharged to homelessness & looked at data from the AHAR report. The CoC also works closely with mainstream & general assistance providers as well as school districts to determine trends in the population they are seeing leading to homelessness, i.e.) lack of home plan for those exiting prison/jail, loss of employment, increasing rents, evictions or foreclosures, spikes in substance abuse or serious mental illness, or reduction in BH service availability. 2)The CoC's efforts to reduce the number of first-time homeless include diversion efforts built into the Coordinated Entry (CE) system. CE is conducted for literally homeless as well as those at imminent risk, identifying any other resources (i.e. prevention, utility assistance, HAP case management & rental assistance) or avenues of support a household might use, & assisting with referrals & connections to safely divert people from the homeless system. In addition, the CoC participates in the re-entry task force to advocate for improved home planning for prisoners. Two re-entry housing programs within our network resulted from this which serve to transition prisoners needing a higher degree of assistance upon exit to permanent housing. A new strategy has been to share information about the CE system with all faculty and staff in all of the school districts within the county. Scranton School District alone reported 250 homeless children last year. Most of these children fall under the definition of doubled-up or couch surfing. The CoC is working with the schools to ensure that all of these families/youth are referred to CE & linked with appropriate diversion services. The CoC also participates in the larger Housing Coalition, identifying & creating low-income housing solutions for the county. 3)United Neighborhood Centers, the CoC Lead Agency oversees the strategies.

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 148 days.
- 2) The CoC's strategy to reduce LOT homeless includes increasing PH inventory using reallocation, bonus projects and philanthropic funds, and ensuring programs are housing first/low barrier. The CoC added RRH inventory this year for both youth and families with children and increased request for ESG RRH for singles. The CoC holds landlord forums and keeps an inventory list of landlords willing to take clients in supportive housing programs in order to have an inventory of apartments when needed. The CoC employs case management in family and individual shelters in order to connect households with needed services, collect documents, complete PHA applications, etc. so as to move as quickly into PH as possible. Outreach efforts are also consistently employed especially with those persons resistant to housing interventions. In addition, the CE efforts below contribute to reduction in LOT homeless.
3. The CoC uses an assessment in the Coordinated Entry (CE) system to determine those households with the longest length of time homeless, using this as a factor in prioritizing those people for housing. CE participants have staff follow up until the household is permanently housed or cannot be reached after 90 days, ensuring timely assistance is given.
4. United Neighborhood Centers, the CoC Lead Agency, and CoC Board are responsible for overseeing this strategy.

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. | 39% |
| 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. | 98% |

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)The CoC's strategy to increase the rate at which individuals & persons in families in ES, SH, TH & RRH include connection with mainstream resource, employment opportunities & training, life skills training, behavioral & physical health care as well as improved protocols to hasten connection of Vets to PH providers & to assess & refer all shelter guests to appropriate, right-fitted, resources via the CES. The individual shelter & family shelter employ case mngt to achieve the above plus collect documents, & apply for PHAs & other housing opportunities. The CoC participates in an initiative to recruit & retain local landlords. Low income housing units have implemented a homeless preference. This, in addition to the homeless preference of 2 local PHAs is an additional strategy to increase exits to PH.

2)In terms of households in PH other than RRH, in order to retain &/or exit to PH, some same strategies as above are used such as linkages to mainstream resources, behavioral & physical health care, & using CES to ensure referrals are made to the appropriate intervention for the level of client need. The CoC connects those no longer in need of intensive supportive services to sustainable housing options in the way of low income and subsidized housing if that is needed. To this end, CoC staff has been meeting with local housing authorities to both increase homeless entries & establish a move-on program with supports in place to facilitate transition out of PSH.

For all supportive housing program populations the use of initial & regularly updated individual service programs, where client-centered services & best practices are utilized to move clients toward agreed-upon goals, continuously re-evaluating & re-tooling as circumstances and motivations change in order to both maintain & exit to PH destinations. Educational opportunities for staff such as motivational interviewing, housing first, & local resources contribute to this strategy as well.

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 | 4% |

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. The CoC identifies common factors of individuals and persons in families who return to homelessness by analyzing trends in the data for those who are returning to homelessness (System Performance Measures) and identifying interventions that CoC can either implement or strengthen in order to change those trends.

2. The CoC's strategy to reduce the rate of additional returns to homelessness includes increasing PH options such as Rapid Re-housing, which includes vital supports to create and maintain housing stability, increasing subsidized PH options in the way of homeless preferences with low income housing providers and PHAs, providing up-to-date trainings to staff on current best practices such as housing first, motivational interviewing and the like, as well as presentations on local resources such as employment and mainstream resources. Program evaluations also help identify any trends in which individuals program/agency models may need improvement, and the requirement for accountability in outcomes facilitates this.

3. United Neighborhood Centers as the CoC Lead Agency is responsible for overseeing these CoC strategies.

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. The CoC's strategy to increase access to employment and non-employment cash sources include SOARS training for all PSH providers, linkage with mainstream benefits, childcare providers, employment agencies, including assistance with completing forms, collection of documents, transportation and follow-up, and life skills training and soft skills as needed. This strategy also involves the development and presentation of learning opportunities for CoC staff including web-based training, presentations by local providers at CoC meetings as well as more in-depth workshops on County Assistance benefits and Workforce Development opportunities.

2. The primary mainstream employment organizations with which the CoC works are Careerlink, the EARN program, EOC and Pathstone. They help clients with aptitude testing, school loan deferments, counseling on employment options offering sustainable incomes, resume writing interview training, providing updated lists of job opportunities and career training. Projects have been assisted via trainings on criminal record expungement and mainstream resources, facilitating information-sharing opportunities and sharing additional provider education opportunities such as conferences, webinars and trainings on best practices via e-mail and meeting announcements.

3. United Neighborhood Centers as the CoC Lead Agency is responsible for overseeing this strategy.

3A-6. System Performance Measures Data 05/31/2018 Submission in HDX. Applicants must enter

| | | |
|------------------------|---------|------------|
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**the date the CoC submitted the System
Performance Measures data in HDX, which
included the data quality section for FY 2017
(mm/dd/yyyy)**

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 | 67 |
| Total number of beds dedicated to individuals and families experiencing chronic homelessness | 76 |
| Total | 143 |

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) | <input checked="" type="checkbox"/> |
| Number of previous homeless episodes | <input checked="" type="checkbox"/> |
| Unsheltered homelessness | <input checked="" type="checkbox"/> |
| Criminal History | <input checked="" type="checkbox"/> |
| Bad credit or rental history | <input checked="" type="checkbox"/> |
| Head of Household with Mental/Physical Disability | <input checked="" type="checkbox"/> |

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)

The CoC's strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless includes the use of the Coordinated Entry System to identify & provide correct referrals. The CES uses a vulnerability index prioritizing those appropriate for RRH or PSH & CE staff follow up with families until permanently housed or contact attempts are unsuccessful for 90 days. Additionally, the CoC prioritizes funds for RRH based on the HIC, PIT, AHAR & CE data. Current funding requests for ESG & CoC RRH funding is increased compared to previous years, including an additional RRH program for youth. TH family programs were re-classified or reallocated to more effective RRH models, & PSH family programs have been reduced to create new RRH, as a means of right-sizing the system in order to reach this goal. Additional strategy is working with low-income housing providers and PHAs to develop preferences as well as attending quarterly landlord forums to increase flow through our system and increase viable PH exit options for all experiencing homelessness.

2) Some of the ways the CoC addresses housing needs is outlined above with increased program & sustainable PH exit options. The CoC addresses service needs to ensure families successfully maintain their housing once assistance ends by conducting initial comprehensive service plans along with households in order to set and move forward in goals leading to housing stability. While these plans vary widely from family to family, they often involve many of the following: connection to all eligible mainstream benefits, childcare, schools, educational & job readiness programs, behavioral & physical health programs, peer support services, facilitation of family &/or social connections, transportation assistance, life skills and budgeting training, & application for SSI/DI as necessary via SOART-trained staff. Service plans are updated regularly.

3) UNC, CoC lead agency, is responsible.

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. | <input type="checkbox"/> |
| CoC conducts optional training for all CoC and ESG funded service providers on these topics. | <input checked="" type="checkbox"/> |

| | |
|---|-------------------------------------|
| CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients. | <input checked="" type="checkbox"/> |
| 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. | <input checked="" type="checkbox"/> |
| CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers. | <input checked="" type="checkbox"/> |

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) | <input checked="" type="checkbox"/> |
| Number of Previous Homeless Episodes | <input checked="" type="checkbox"/> |
| Unsheltered Homelessness | <input checked="" type="checkbox"/> |
| Criminal History | <input checked="" type="checkbox"/> |
| Bad Credit or Rental History | <input checked="" type="checkbox"/> |

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)

The CoC's strategies to increase 1) housing and services for all youth experiencing homelessness include successfully acquiring grants from local private foundations for a new RRH program for youth, which began earlier this year; securing over \$160,000 annually from the office of youth and family services for a youth TH program; and increased collaboration with regional youth service providers and schools. Specifically, within the past 2 years the

CoC has collaborated with local Health and Human Services (HHS) office in implementing a Cross-Systems Transitions Conference which meets regularly to find solutions for any youth at risk of homelessness ages 15 through 18. Attendees of these meetings include the most relevant providers for the specific case at hand which can and have been any of the following: mental health providers, substance abuse providers, housing providers, case management providers including intensive case management, independent living providers, education and legal advocates.

In addition, the CoC is submitting a youth RRH project as a bonus along with this NOFA application as well as a new youth RRH project to the Home4Good grant opportunity in PA shortly thereafter.

2) For youth experiencing unsheltered homelessness, strategies to increase availability of housing and services include all of the items outlined above, giving youth options which are accessible and specifically targeted to their needs, partnering with providers which are experienced and knowledgeable in youth outreach and engagement strategies, housing services for homeless LGBTQ youth and the use of RRH with youth. In addition, the county HHS office assisted the CoC's outreach to and collaboration with the school districts throughout the county, offering Coordinated Entry presentations to all faculty and staff in each district. This will facilitate referrals to appropriate prevention, shelter and supportive housing projects and services. All of the strategies/resources outlined in sections 1 and 2 of this response serve to offer alternatives to unsheltered homelessness as well as outreach to identify and bring youth into housing as quickly as possible. For both sheltered and unsheltered, the CoC also increased inventory by adding 4 youth-specific PSH beds.

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 CoC uses evidence such as changes in youth PIT/AHAR/LSA data as well as rates of youth increase in income and returns to homelessness from the System Performance Measures to measure the strategies in question 3B-2.6. The community Housing Inventory Chart is also a measure of increasing the availability of youth-specific housing. Data from the Coordinated Assessment System is also used more as a measure of housing instability for youth, prompting the CoC to look at how prevention strategies are functioning and gauge commonalities in terms of barriers and/or previous systems experience or locations/systems from which youth are entering.

2) To calculate effectiveness of the strategies, given that this is a relatively small CoC, any increase in sheltered and/or unsheltered youth within the PIT or the AHAR/LSA would be reason to change/develop a more effective strategy. Likewise for increase in youth coming to through the Coordinated Assessment system. If more volume is seen here, data will be evaluated to determine trends, i.e) have increased outreach efforts just brought forward those already experiencing housing insecurity, or is the scope of youth homelessness

increasing? Income levels will help determine whether education and job-readiness strategies are effective.

3) The measure is an appropriate way to determine the effectiveness of the strategies because it provides evidence of the results being achieved by the strategies indicated (i.e. - are the numbers of homeless youth increasing or decreasing during the PIT in the AHAR/LSA? - are there more or less unsheltered youth in the PIT/LSA? What are the exit to PH/housing stability rates for youth? Return to homelessness rates? increase in income rates?) The data will indicate whether strategies are on the right path or need changing.

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)**

The CoC collaborates with (1&3) youth education providers by presenting the regulations on the rights of homeless children and an overview of all CoC services available to all of the school districts' faculty and staff within the county as well as some early childhood education providers, including Head Start. Information presented focuses on the coordinated entry system, as well as prevention services, as most homelessness reported by local school districts includes families or individuals who are doubled-up or couch-surfing. During these presentations, teachers, staff and homeless liaisons are urged to refer all families in need of any assistance to our network of services, and especially all of those families meeting the educational definition of homelessness. These presentations were established with the assistance of the local Office of Youth and Family Services and the (2) Education for Children and Youth Experiencing Homelessness (ECYEH) Liaison, who is available to schools for additional advocacy and assistance in accessing education. The ECYEH Liaison attends CoC meetings as do some local district Homeless Liaisons. The ECYEH Liaison is also used as a point of contact with school counselors, teachers, superintendents and early education programs. These relationships are helping to provide the CoC with additional local data and systems knowledge which the CoC is using to find solutions such as increased prevention and diversion efforts, better youth count strategies and increase in youth supportive housing beds.

This year the CoC attended a regional information session by the ECYEH liaison along with local school districts and early childhood education providers on the relevant services available and regulations applicable to educational and homeless systems.

(4) The CoC has a formal agreement with the local Head Start Provider for collaboration and prioritization for services.

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)

The educational policies and procedures the CoC adopted to inform individuals and families who become homeless are: 1) all providers serving children and youth must have an educational liaison; 2) all providers must share information on educational rights to homeless families upon program entry; and 3) provider staff must facilitate and coordinate educational access for the child/children at the school(s) and/or educational site(s) the family chooses and as is within their rights.

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 | Yes | No |
| Early Head Start | Yes | No |
| Child Care and Development Fund | No | No |
| Federal Home Visiting Program | No | No |
| Healthy Start | No | No |
| Public Pre-K | No | No |
| Birth to 3 years | No | No |
| Tribal Home Visiting Program | No | No |
| Other: (limit 50 characters) | | |
| | | |
| | | |

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)

The CoC achieved a functional end to Veteran homelessness in the spring of 2017, as designated by USICH. Key strategies employed in this achievement are Housing First; increasing PH options; improving referral and communication processes once a Veteran has been identified; use of a by-name list and case conferencing; and increasing outreach to known and rumored homeless camps; the soup kitchen and shelters; identification and engagement protocols have been added whereby any Veteran identified at the year-round emergency shelter are referred to call the VA homeless hotline upon entry. Thus, verification of Veteran status and a solid connection to a Veteran provider are delivered more efficiently. Veterans are identified via an intake question in HMIS upon program entry, including Coordinated Entry for CoC, ESG and other homeless programs. The Coordinated Entry assesses the level of appropriate intervention and staff refer to appropriate programs including HUD-VASH, SSVF, GPD, CoC and ESG supportive housing programs. The VA determines

eligibility for VA services and makes internal referrals for same. While the number of homeless veterans in this CoC has been reduced since 2011, this county houses a GPD program which pulls Veterans from 18 counties throughout the region. This program has 30 beds and works to keep its beds full in order to assist Veterans in need who choose this more intensive intervention, always offering PH options as well as GPD. The GPD program has worked to reduce length of stays and move people into PH as quickly as possible, with most participants staying 12 months or less. The program is still, however, considered TH and SH, making up the majority (26 of 34) of Veterans in the PIT. Another contributing factor to the PIT number is that our Emergency Shelter is the only one within several peripheral counties that does not have a residency requirement. In the past 6 years, the county has had no unsheltered Veterans during the PIT.

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

3B-5. Racial Disparity. Applicants must: Yes
(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.

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. | <input checked="" type="checkbox"/> |
| People of different races or ethnicities are more or less likely to receive a positive outcome from homeless assistance. | <input type="checkbox"/> |
| There are no racial disparities in the provision or outcome of homeless assistance. | <input checked="" type="checkbox"/> |
| The results are inconclusive for racial disparities in the provision or outcome of homeless assistance. | <input type="checkbox"/> |

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. | <input type="checkbox"/> |
| The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC. | <input checked="" type="checkbox"/> |
| The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups. | <input type="checkbox"/> |
| The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups | <input type="checkbox"/> |
| The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness. | <input checked="" type="checkbox"/> |
| The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector. | <input type="checkbox"/> |
| The CoC has staff, committees or other resources charged with analyzing and addressing racial disparities related to homelessness. | <input checked="" type="checkbox"/> |
| 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. | <input checked="" type="checkbox"/> |
| The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness. | <input checked="" type="checkbox"/> |
| 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. | <input checked="" type="checkbox"/> |
| The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness. | <input type="checkbox"/> |
| Other: | <input type="checkbox"/> |

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: | Yes | Yes |
| 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 works with mainstream programs that assist persons experiencing homelessness to apply for and receive benefits in the following ways: requiring SOARS training for all PSH providers, routine connection of participants with mainstream benefits (including TANF, SSA, food stamps, medical assistance and behavioral health programs), childcare and early childhood educational resources including assistance in completion of any forms, collection of necessary documents, transportation and follow-up, use of committees to present and share current information on mainstream resources, and securing cash and in-kind match sources, including over \$50,000 from Office of Youth and Family Services and \$27,000 from ODAP, which can increase participants' application for mainstream benefits. 2) The CoC systematically keeps program

staff up-to-date regarding mainstream resources by providing a bi-annual training in same given by local providers with information on how to access resources, requirements for same and how to access assistance when questions and/or problems arise and convening information sharing opportunities on topics stated above as well as sharing additional provider education opportunities such as conferences, webinars and trainings on best practices via e-mail, and meeting announcements. 3) The organization responsible for overseeing the CoC's strategy for mainstream benefits is United Neighborhood Centers, the CoC Lead Agency.

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. | 18 |
| 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. | 18 |
| 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) CoC outreach identifies and engages households living in environs unfit for human habitation by, at least weekly, scouting known and rumored locations where people experiencing homelessness converge throughout the county via word of mouth with the area's homeless and fluid communication and collaboration among housing, homeless and other providers, including local and state police.

2) CoC's Street Outreach covers 100 percent of the CoC's geographic area by making at-least weekly rounds to homeless camps and other known locations where the homeless sleep throughout the county, as well as following up on calls from local citizens, and other providers/community organizations outlined above.

3) The CoC conducts street outreach at least weekly as described above, and on an as-needed basis depending on reports from aforementioned organizations and community members including homeless and formerly

homeless individuals.

4) The CoC tailors its street outreach to persons experiencing homelessness who are least likely to request assistance by Homeless information and services are available via local hotline and internet; outreach workers have access to a 24-7 phone translation service for non-English speakers. Additional outreach is provided by SSVF and VA providers specific to Veterans. Providers collaborate to meet clients where they are. As such, if any of the following barriers exist: transportation, language, mobility, technical access or any disability, outreach teams utilize resources mentioned above as well as going to the client, accessing cell phones for clients, working with behavioral health or independent living providers, including the Blind Association, to tailor outreach to the individual.

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)

1The strategies the CoC has implemented that further fair housing as detailed in 23.CFR 578.93(c) are as follows: the CoC has clauses on serving people with limited English proficiency and non-discrimination in its Policies and Procedures, encouraging strategies for inclusion and prohibiting discrimination to populations listed in the question; several providers publicize services via written materials in Spanish, the most commonly used language in our county besides English; providers have staff and volunteers who speak other languages, including sign; phone services and the local University have additional language translation services used; assistance is also provided by Lackawanna Blind Association and United Cerebral Palsy, including acquiring assistive devices and TTY machines, etc.; and publicizing agency and service information on the internet where translation services are available and via local hotline.

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 | 99 | 93 | -6 |

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

4A-7. Homeless under Other Federal Statutes. No
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?

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 Preference an... | 09/06/2018 |
| 1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference | No | | |
| 1C-8. Centralized or Coordinated Assessment Tool | Yes | Coordinated Asses... | 09/12/2018 |
| 1E-1. Objective Criteria–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix) | Yes | New & Renewal Pro... | 09/12/2018 |
| 1E-3. Public Posting CoC-Approved Consolidated Application | Yes | Public Posting Co... | 09/18/2018 |
| 1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP) | Yes | Public Posting RF... | 09/14/2018 |
| 1E-4. CoC's Reallocation Process | Yes | Reallocation Proc... | 09/14/2018 |
| 1E-5. Notifications Outside e-snaps–Projects Accepted | Yes | Notification of P... | 09/12/2018 |
| 1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced | Yes | New Projects Acce... | 09/12/2018 |
| 1E-5. Public Posting–Local Competition Deadline | Yes | Public Posting Lo... | 09/12/2018 |
| 2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA) | Yes | CoC HMIS MOU | 09/06/2018 |
| 2A-2. HMIS–Policies and Procedures Manual | Yes | Scranton/Lackawan... | 09/06/2018 |
| 3A-6. HDX–2018 Competition Report | Yes | SPM 2018 Report | 09/06/2018 |
| 3B-2. Order of Priority–Written Standards | No | CoC Policies, p.2... | 09/10/2018 |

| | | | |
|---|----|----------------------|------------|
| 3B-5. Racial Disparities Summary | No | Race Disparities ... | 09/14/2018 |
| 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 Preference and supporting documents

Attachment Details

Document Description:

Attachment Details

Document Description: Coordinated Assessment in HMIS

Attachment Details

Document Description: New & Renewal Project Eval & Ranking Tools

Attachment Details

Document Description: Public Posting CoC Consolidated Application

Attachment Details

Document Description: Public Posting RFP, Rate, Rank Review, etc.

| | | |
|------------------------|---------|------------|
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|------------------------|---------|------------|

Attachment Details

Document Description: Reallocation Process 2018

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: New Projects Accepted, ranked, reduced

Attachment Details

Document Description: Public Posting Local Competition Deadline

Attachment Details

Document Description: CoC HMIS MOU

Attachment Details

Document Description: Scranton/Lackawanna HMIS P&P

Attachment Details

Document Description: SPM 2018 Report

Attachment Details

Document Description: CoC Policies, p.2(Article III) and
p.4(Coord.Asses.)

Attachment Details

Document Description: Race Disparities Report

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 | 09/17/2018 |
| 1B. Engagement | 09/18/2018 |
| 1C. Coordination | 09/18/2018 |
| 1D. Discharge Planning | 09/17/2018 |
| 1E. Project Review | 09/17/2018 |
| 2A. HMIS Implementation | 09/17/2018 |
| 2B. PIT Count | 09/17/2018 |
| 2C. Sheltered Data - Methods | 09/17/2018 |
| 3A. System Performance | 09/18/2018 |
| 3B. Performance and Strategic Planning | 09/18/2018 |
| 4A. Mainstream Benefits and Additional Policies | 09/18/2018 |
| 4B. Attachments | 09/18/2018 |

| | | |
|------------------------|---------|------------|
| FY2018 CoC Application | Page 51 | 09/18/2018 |
|------------------------|---------|------------|

Submission Summary

No Input Required

Housing Authority of the County of Lackawanna
Administrative Office: 2019 West Pine Street, Dunmore, Pennsylvania 18512
(570) 342-7629 FAX: (570) 342-5756 E-Mail: hac15@comcast.net

November 16, 2015

Michael J. Hanley
Chief Executive Officer
United Neighborhood Centers
425 Alder Street
Scranton, PA 18505

Dear Mike,

I am writing to confirm that Housing Authority of the County of Lackawanna has a general preference for individuals and families experiencing homelessness for the Public Housing.

Sincerely,



Jim Dartt
Executive Director
Housing Authority of the County of Lackawanna
2019 W. Pine Street
Dunmore, PA 18512



Housing Authority of the County of Lackawanna

HOUSING AUTHORITY OF THE COUNTY OF LACKAWANNA

R2

2019 W. Pine Street, Dunmore, PA 18512

Name: _____

Phone: _____

Address: _____

Alt. Phone _____

Email _____

QUESTIONNAIRE FOR PREFERENCE

I DO HAVE ONE OR MORE OF THE LISTED REASONS FOR PREFERENCE FOR HOUSING ASSISTANCE.

Please check one or more of the following:

1. ☐ I am a victim of domestic violence.
2. ☐ I am a Veteran
3. ☐ Immediate family of an active military person
4. ☐ I am a victim of a Federally Declared Disaster
5. ☐ I have been displaced due to a fire, government condemnation, or flood, through no fault of my own
6. ☐ I am homeless
7. ☐ *****
The head, spouse, or sole member of my household is employed at least 24 hours per week, and has been employed for at least 6 months, **OR**
☐ The head, spouse, or sole member of my household is an active **full-time** participant in, or a recent (within the past one year) graduate of, educational and/or training programs designed to prepare individuals for the job market, **OR**
☐ The head, spouse, or sole member of my household is working part-time **AND** participating part-time in educational and training programs designed to prepare individuals for the job market, **OR**
☐ The head, spouse, or sole member of my household is 62 years of age or older, **OR**
☐ The head, spouse, or sole member of my household is receiving Social Security Disability benefits, Supplemental Security Income (SSI) Disability benefits, or other payments based on inability to work.

8. ☐ **NONE OF THE ABOVE** numbers 1 through 7.

In all categories, priority for admission will be given to applicants who reside, work, or have been hired to work in Lackawanna County, excluding the City of Scranton and the City of Carbondale. Second Priority will be given to residents who reside, work, or have been hired to work in Scranton and/or Carbondale.

Please check one of the following ONLY if it applies to you:

The head, spouse, or sole member of my household has been hired for a job, **(but has not started work yet)** to work in:

- ☐ Lackawanna County, other than the Cities of Scranton or Carbondale
- ☐ the City of Scranton or the City of Carbondale

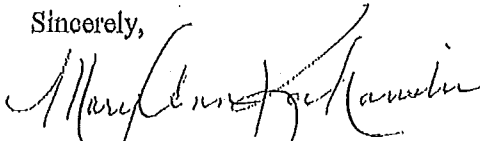
November 13, 2015

Shannon Quinn-Sheeran
Director of Program Analysis and Data Quality
United Neighborhood Centers
425 Alder Street
Scranton, PA 18505

Dear Shannon,

I am writing to confirm that Scranton Housing Authority has a general preference for individuals and families experiencing homelessness for both the Public Housing and Housing Choice Voucher Programs.

Sincerely,

A handwritten signature in cursive script, appearing to read "Mary Ann Kochanski".

Mary Ann Kochanski
Administrative Assistant of Operations
Scranton Housing Authority
400 Adams Avenue
Scranton, PA 18510

Scranton Housing Authority
400 ADAMS AVENUE
SCRANTON, PA. 18510

QUESTIONNAIRE FOR PREFERENCE

PUBLIC HOUSING

DATE: _____

NAME: _____

ADDRESS: _____

The Scranton Housing Authority will give priority in the selection of applicants from the public housing waiting list in the following order. Please check the preference that applies to your situation.

Office
Use Only

Wt

- | | |
|---|---|
| <input type="checkbox"/> Applicant who is involuntarily displaced from his/her home as a result of fire, disaster or government action. | 8 |
| <input type="checkbox"/> Single or two parent household who resides in the City of Scranton where the head of household or spouse works or has been hired to work in the City of Scranton. Head of household or spouse must be employed a minimum of 30 hours per week. | 7 |
| <input type="checkbox"/> Head of household or spouse or sole member who is 62 years of age or older, or who receives Social Security, SSI or any benefits resulting from an individual's inability to work will be counted as the equivalent to the second preference. | 7 |
| <input type="checkbox"/> Head of household or spouse that has graduated from an education and/or training program that is designed to prepare individuals for the job market | 6 |
| <input type="checkbox"/> Applicant who is a victim of domestic violence. | 5 |
| <input checked="" type="checkbox"/> Applicant who is homeless. | 4 |
| <input type="checkbox"/> Applicant living in substandard housing. | 3 |
| <input type="checkbox"/> Applicant paying more than 50% of income for rent. | 2 |
| <input type="checkbox"/> No preference | 1 |

All applicants will be selected by date and time of application according to the criteria herein stated.

Applicant must verify preference based on current status at initial lease up.

DATE

SIGNATURE

Coordinated Assessment

Basic Client Information

Complete the client's identifying information. Name and social security number have associated data quality fields. Data quality fields are used to indicate the reason full information wasn't collected. Name and social security number data quality fields allow users to indicate when a client doesn't know or refuses to provide information. If the required data is collected then ClientTrack automatically records that full data quality was met.

First Name: * _____
Last Name: * _____
Middle Name: _____
Suffix: _____
Name Quality: * ☐ Full name reported
☐ Partial, street name, or code name reported
☐ Client doesn't know
☐ Client refused
☐ Data not collected
Social Security Number: _____ - _____ - _____

Basic Client Demographics

Birth Date: * _____
Client Age: 103
Date of Birth Quality: * ☐ Approximate or Partial DOB Reported
☐ Full DOB Reported
☐ Client doesn't know
☐ Client refused
☐ Data not collected
Ethnicity: * ☐ Hispanic/Latino
☐ Non-Hispanic/Latino
☐ Client doesn't know
☐ Client refused
☐ Data not collected
Race: * White
Gender: * ☐ Male
☐ Female
☐ Trans Male (FTM or Female to Male)
☐ Trans Female (MTF or Male to Female)
☐ Gender Non-Conforming (i.e. not exclusively male or female)
☐ Client doesn't know
☐ Client refused
☐ Data not collected
Veteran Status: * ☐ Yes
☐ No
☐ Client doesn't know
☐ Client refused

☐ Data Not Collected

Show Address and Contact
Information: ☐

Family Information - Use this section to collect data about a client's family. The Family search field allows you to search for and select an existing family account. This is appropriate when adding a family member to an existing family.

Family:

Relationship to Head of Household:

*

☐ Self

☐ Son

☐ Daughter

☐ Dependent Child

☐ Spouse

☐ Other Family Member

☐ Other Non-Family

☐ Partner

☐ Roommate

Hidden - FamilyAcct:

29949

Begin Date:

End Date:

Prescreen Assessment

The purpose of this form is to collect initial information regarding the client.

Assessment Date:

*

Homeless / Will become homeless
within the next 72 hours?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Residing with / Trying to leave an
intimate partner who threatens or
makes the client fearful?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

HUD Program Enrollment

Select the Project you are enrolling the client into. ClientTrack will display a list of clients in the client's family. Please select all the clients you are enrolling.

The Project Start Date is:

- **for Street Outreach projects** – it is the date of first contact with the client.
- **for Emergency Shelters** – it is the night the client first stayed in the shelter for the consecutive shelter period from entry to exit. Night by night shelters, which use a bed-night tracking method will have a project start date and will allow clients to re-enter as necessary without “exiting and restarting” for each stay for a specified period.
- **for Safe Havens and Transitional Housing** – it is the date the client moves into the residential project (i.e. first night in residence).
- **for all types of Permanent Housing, including Rapid Re-Housing** – it is the date following application that the client was admitted into the project. To be admitted indicates the following factors have been met:
 - 1) Information provided by the client or from the referral indicates they meet the criteria for admission (for example if chronic homelessness is required the client indicates they have a serious disability and have been homeless long enough to qualify – though all documentation may not yet have been gathered ;
 - 2) The client has indicated they want to be housed in this project;
 - 3) The client is able to access services and housing through the project. The expectation is the project has a housing opening (on-site, site-based, scattered-site subsidy) or expects to have one in a reasonably short amount of time
- **for all other types of Service projects including but not limited to:** services only, day shelter, homelessness prevention, coordinated assessment, health care it is the date the client first began working with the project and generally received the first provision of service.

Project:

* ☐ CoC - Coordinated Assessment

Household - *Excerpt from the HMIS Data Standards Manual* "A household is a single individual or a group of persons who apply together to a continuum project for assistance and who live together in one dwelling unit (or, for persons who are not housed, who would live together in one dwelling unit if they were housed)."

| <input type="checkbox"/> Name | Gender | Age | Project Start Date | Case Manager | Relationship to Head of Household* |
|--|--------|-----|--------------------|--------------|---|
| <input type="checkbox"/> Mouse, Mickey | Male | 103 | | | <input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Dependent Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Guardian <input type="checkbox"/> Spouse <input type="checkbox"/> Other Family Member <input type="checkbox"/> Other Non-Family <input type="checkbox"/> Other Caretaker <input type="checkbox"/> Ex Spouse <input type="checkbox"/> Partner <input type="checkbox"/> Roommate |

| <input type="checkbox"/> Name | Gender | Age | Project Start Date | Case Manager | Relationship to Head of Household* |
|-------------------------------------|--------|-----|-----------------------|--------------|---|
| | | | | | <input type="checkbox"/> Self |
| | | | | | <input type="checkbox"/> Parent |
| | | | | | <input type="checkbox"/> Son |
| | | | | | <input type="checkbox"/> Daughter |
| | | | | | <input type="checkbox"/> Dependent Child |
| | | | | | <input type="checkbox"/> Grandparent |
| | | | | | <input type="checkbox"/> Guardian |
| <input type="checkbox"/> Dog, Pluto | Male | 6 | | | <input type="checkbox"/> Spouse |
| | | | | | <input type="checkbox"/> Other Family Member |
| | | | | | <input type="checkbox"/> Other Non-Family |
| | | | | | <input type="checkbox"/> Other Caretaker |
| | | | | | <input type="checkbox"/> Ex Spouse |
| | | | | | <input type="checkbox"/> Partner |
| | | | | | <input type="checkbox"/> Roommate |

0

Diversion Assessment

The purpose of this form is to assist in determining the client's eligibility for diversion.

Assessment Active

Assessment Date:

* _____

Where client slept last night?

- * ☐ Place not meant for habitation
- ☐ Emergency shelter, including hotel or motel paid for with emergency shelter voucher
- ☐ Safe Haven
- ☐ Interim Housing
- ☐ Foster care home or foster care group home
- ☐ Hospital or other residential non-psychiatric medical facility
- ☐ Jail, prison or juvenile detention facility
- ☐ Other
- ☐ Long-term care facility or nursing home
- ☐ Psychiatric hospital or other psychiatric facility
- ☐ Substance abuse treatment facility or detox center
- ☐ Hotel or motel paid for without emergency shelter voucher
- ☐ Owned by client, no ongoing housing subsidy
- ☐ Owned by client, with ongoing housing subsidy
- ☐ Permanent housing (other than RRH) for formerly homeless persons
- ☐ Rental by client, no ongoing housing subsidy
- ☐ Rental by client, with VASH subsidy
- ☐ Rental by client, with GPD TIP subsidy
- ☐ Rental by client, with other housing subsidy (including RRH)
- ☐ Residential project or halfway house with no homeless criteria
- ☐ Staying or living in a family member's room, apartment or house
- ☐ Staying or living in a friend's room, apartment or house
- ☐ Transitional housing for homeless persons (including homeless youth)
- ☐ Client doesn't know
- ☐ Client refused
- ☐ Data not collected

Is it safe?

- * ☐ Yes
- ☐ No
- ☐ Not Applicable

Why did they leave?

- * ☐ Lack of transportation
- ☐ Moved
- ☐ Childcare issues
- ☐ Work schedule conflict
- ☐ Incarcerated
- ☐ Program didn't meet expectations
- ☐ Not indicated
- ☐ Referred to other services
- ☐ Deceased
- ☐ Diverted
- ☐ Other

- Could client stay there again? * ☐ Yes
☐ No
☐ Not Applicable
- Does client need help to stay there? * ☐ Yes
☐ No
☐ Not Applicable
- Would it help to contact the person they stayed with? * ☐ Yes
☐ No
☐ Not Applicable

Individual + Family VI-SPDATs are Available in HMIS. Spanish + Transition-Aged-Youth versions are available in hard copy form

Vulnerability Index (VI) and Service Prioritization Decision Assistance Tool (SPDAT)

OrgCode Consulting Inc. and Community Solutions are the authors of the VI-SPDAT and F-VI-SPDAT. ClientTrack Inc. is licensed to include these tools within ClientTrack. The terms of this license require that users must be trained on the use and implementation of the tool by OrgCode Consulting, Inc. or an approved and certified trainer of Licensors. It is not permissible to alter the wording or scoring of the VI-SPDAT or F-VI-SPDAT forms without permission and written consent from Community Solutions and/or Org Consulting, Inc.

Administration

Interviewer
Name: _____

Agency: _____

☐ Team ☐ Staff
☐ Volunteer

Date/Time: _____

*

Interview
Location: _____

Basic Information

Name: _____

Mouse,
Mickey

Nickname: _____

In what language do you feel best
able to express yourself?

- ☐ English
☐ Spanish
☐ French
☐ German
☐ Italian
☐ Polish
☐ Portugese
☐ Russian
☐ Arabic
☐ Armenian
☐ Farsii
☐ Hebrew
☐ Turkish
☐ Cantonese
☐ Mandarin
☐ Mien
☐ Other Chinese Language
☐ Cambodian
☐ Hmong
☐ Lao
☐ Thai
☐ Vietnamese
☐ Tagalog
☐ Ilacano
☐ Japanese
☐ Korean
☐ Samoan
☐ American Sign Language
☐ Other Sign Language

Soc Sec No: _____

☐ Other- Non English

Age at Assessment:

103

Birthdate: 02/10/1915

Has Consented to Participate?

☐ No☐ Yes

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

SCORE:

A. History of Housing & Homelessness

1. Where do you sleep most frequently? ☐ Shelter ☐ Transitional Housing ☐ Safe Haven ☐ Outdoors
(check one): ☐ Other (specify) ☐ Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

SCORE:

2. How long has it been since you lived
in permanent stable housing? # of
Years: _____

of Months: _____

☐ Refused

3. In the last three years, how many
times have you been homeless? _____

☐ RefusedIF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS,
AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.**SCORE:**

B. Risks

4. In the past six months, how many times have you...:

a) Received health care at an emergency department/room?

☐ Refused

b) Taken an ambulance to the hospital?

☐ Refused

c) Been hospitalized as an inpatient?

☐ Refusedd) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate
violence, distress centers and suicide prevention hotlines?☐ Refusede) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged
perpetrator of a crime or because the police told you that you must move along?☐ Refusedf) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay
like the drunk tank, a longer stay for a more serious offence, or anything in between?☐ RefusedIF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY
SERVICE USE.**SCORE:**

5. Have you been attacked or beaten

☐ No☐ Yes☐ Refused

up since becoming homeless?

6. Have you threatened to or tried to harm yourself or anyone else in the last year? ☐ No ☐ Yes ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.
SCORE:

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ No ☐ Yes ☐ Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.
SCORE:

8. Does anybody force or trick you to do things that you do not want to do? ☐ No ☐ Yes ☐ Refused

9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that? ☐ No ☐ Yes ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.
SCORE:

C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? ☐ No ☐ Yes ☐ Refused

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? ☐ Yes ☐ No ☐ Refused

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR MONEY MANAGEMENT.
SCORE:

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? ☐ Yes ☐ No ☐ Refused

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.
SCORE:

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ Yes ☐ No ☐ Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE.

SCORE:

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?

☐ No ☐ Yes ☐ Refused

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.

SCORE:

D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?

☐ No ☐ Yes ☐ Refused

16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?

☐ No ☐ Yes ☐ Refused

17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?

☐ Yes ☐ No ☐ Client refused

18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?

☐ No ☐ Yes ☐ Refused

19. When you are sick or not feeling well, do you avoid getting help?

☐ No ☐ Yes ☐ Refused

20. FOR FEMALE RESPONDENTS ONLY: Are you currently pregnant?

☐ No ☐ Yes ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.

SCORE:

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?

☐ No ☐ Yes ☐ Refused

22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?

☐ No ☐ Yes ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE.

SCORE:

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

- a) A mental health issue or concern? ☐ No ☐ Yes ☐ Refused
- b) A past head injury? ☐ No ☐ Yes ☐ Refused
- c) A learning disability, developmental disability, or other impairment? ☐ No ☐ Yes ☐ Refused

24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help? ☐ No ☐ Yes ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH.

SCORE:

IF THE RESPONENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY.

SCORE:

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? ☐ No ☐ Yes ☐ Refused

26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? ☐ No ☐ Yes ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.

SCORE:

27. YES OR NO: Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced? ☐ No ☐ Yes ☐ Refused

IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.

SCORE:

| | |
|-------------------------------------|---|
| Prescreen Total: | 1 |
| PRE-SURVEY: | 1 |
| A. HISTORY: | 0 |
| B. RISK: | 0 |
| C. SOCIALIZATION & DAILY FUNCTIONS: | 0 |
| D. WELLNESS: | 0 |
| PRE-SCREEN TOTAL: | 1 |

SCORING SECTION

SECTION

SCORE

Results

PRE-SURVEY

Score**Recommendation**

A. HISTORY OF HOUSING & HOMELESSNESS

0-3

No housing intervention

B. RISK

4-7

An assessment for Rapid Re-Housing

C. SOCIALIZATION & DAILY FUNCTIONS

8+

An assessment for Permanent Supportive Housing/Housing First

D. WELLNESS

Grand Total

Follow-Up Questions

On a regular day, where
is it easiest to find you
and what time of day is
easiest to do so?

When?

☐ Mornings ☐ Afternoon ☐ Evening ☐ Night

Is there a phone
number and/or email
where someone can get
in touch with you or
leave a message?

Phone:

Email:

Photo Permission:

☐ No ☐ Yes ☐ Refused

Family Vulnerability Index (VI) and Service Prioritization Decision Assistance Tool (SPDAT) RM

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Type:

- ☐ Single Adults
☐ Family

Interviewer's Name: _____

Agency: _____

- ☐ Team ☐ Staff ☐ Volunteer

Survey Date/Time: _____

*

Interview Location: _____

PARENT 1

First Name: _____

MickeyLast Name: _____ MouseLanguage: _____

- ☐ English
☐ Spanish
☐ French
☐ German
☐ Italian
☐ Polish
☐ Portugese
☐ Russian
☐ Arabic
☐ Armenian
☐ Farsii
☐ Hebrew
☐ Turkish
☐ Cantonese
☐ Mandarin
☐ Mien
☐ Other Chinese Language
☐ Cambodian
☐ Hmong
☐ Lao
☐ Thai
☐ Vietnamese
☐ Tagalog
☐ Ilacano
☐ Japanese
☐ Korean
☐ Samoan
☐ American Sign Language
☐ Other Sign Language
☐ Other- Non English

Birthdate: _____

02/10/1915Age: 103SSN: 123-45-6789Consent to participate ☐ No ☐ Yes

Gender: _____

Male

PARENT 2No second parent currently part of the household: ☐

Name: _____

Language: _____

- ☐ English
☐ Spanish
☐ French
☐ German
☐ Italian
☐ Polish
☐ Portugese
☐ Russian
☐ Arabic
☐ Armenian
☐ Farsii
☐ Hebrew
☐ Turkish
☐ Cantonese
☐ Mandarin
☐ Mien
☐ Other Chinese Language
☐ Cambodian
☐ Hmong
☐ Lao
☐ Thai

- ☐ Vietnamese
- ☐ Tagalog
- ☐ Ilacano
- ☐ Japanese
- ☐ Korean
- ☐ Samoan
- ☐ American Sign Language
- ☐ Other Sign Language
- ☐ Other- Non English

IF EITHER HEAD OF HOUSEHOLD IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.
SCORE:

Children

1. How many children under the age of 18 are currently with you? ☐ Refused
2. How many children under the age of 18 are not currently with you, but you have reason to believe they will be joining you when you get housed? : ☐ Refused
3. IF HOUSEHOLD INCLUDES A FEMALE: Is any member of the family currently pregnant? ☐ No ☐ Yes ☐ Refused
4. Please provide a list of children's names and ages:

1 result found (+1).

| <input type="checkbox"/> First Name* | Last Name* | Gender* | Birth Date* | Age | SSN | Relationship to Head of Household* | Living With Head of Household | Race* | Ethnicity* | Disabling Condition | Veteran Status |
|--------------------------------------|------------|--|-------------|-----|-----|---|-------------------------------|-------|---|---|----------------|
| | | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Trans Male (FTM or Female to Male) <input type="checkbox"/> Trans Female (MTF or Male to Female) <input type="checkbox"/> Gender Non-Conforming (i.e. not exclusively male or female) <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data not collected | | | | <input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Dependent Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Guardian <input type="checkbox"/> Spouse <input type="checkbox"/> Other Family Member <input type="checkbox"/> Other Non-Family <input type="checkbox"/> Other Caretaker <input type="checkbox"/> Ex Spouse <input type="checkbox"/> Partner <input type="checkbox"/> Roommate | | | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data Not Collected | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data Not Collected | |
| <input type="checkbox"/> Pluto | Dog | | | 6 | | | <input type="checkbox"/> | White | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Trans Male (FTM or Female to Male) <input type="checkbox"/> Trans Female (MTF or Male to Female) <input type="checkbox"/> Gender Non-Conforming (i.e. not exclusively male or female) <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data not collected | | N/A | | | <input type="checkbox"/> | ... | | | |

IF THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD AGED 11 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR FAMILY SIZE.

IF THERE ARE TWO PARENTS WITH 3+ CHILDREN, AND/OR A CHILD AGED 6 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR FAMILY SIZE.
SCORE:

History of Housing and Homelessness

5. Where do you and your family sleep most frequently?

- ☐ Shelters
☐ Transitional House
☐ Safe Haven
☐ Outdoors
☐ Other (specify)
☐ Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.
SCORE:

6. How long has it been since you and your family lived in permanent stable housing? # Years: _____

Months _____

☐ Refused

7. In the last three years, how many times have you and your family been homeless? _____

☐ Refused

IF THE FAMILY HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.
SCORE:

B. Risks

8. In the past six months, how many times have you or anyone in your family...

a) Received health care at an emergency department/room? _____ ☐ Refused

b) Taken an ambulance to the hospital? _____ ☐ Refused

c) Been hospitalized as an inpatient? _____ ☐ Refused

d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? _____ ☐ Refused

e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told them that they must move along? _____ ☐ Refused

f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? _____ ☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.
SCORE:

9. Have you or anyone in your family been attacked or beaten up since they've become homeless? ☐ No ☐ Yes ☐ Refused

10. Have you or anyone in your family threatened to or tried to harm themselves or anyone else in the last year? ☐ No ☐ Yes ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.
SCORE:

11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ No ☐ Yes ☐ Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.
SCORE:

12. Does anybody force or trick you or anyone in your family to do things that you do not want to do? ☐ No ☐ Yes ☐ Refused

13. Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that? ☐ No ☐ Yes ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.
SCORE:

C. Socialization & Daily Functioning

14. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money? ☐ No ☐ Yes ☐ Refused

15. Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? ☐ Yes ☐ No ☐ Refused

IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 FOR MONEY MANAGEMENT.
SCORE:

16. Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled? ☐ Yes ☐ No ☐ Refused

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.
SCORE:

17. Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ No ☐ Yes ☐ Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE.
SCORE:

18. Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted? ☐ No ☐ Yes ☐ Refused

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.
SCORE:

D. Wellness

19. Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family? ☐ Yes ☐ No ☐ Refused

20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart? ☐ Yes ☐ No ☐ Refused

21. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you or anyone in your family? ☐ Yes ☐ No ☐ Refused

22. Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? ☐ Yes ☐ No ☐ Refused

- If any response is YES in questions 35 through 42, score 1 in the Substance Use column.

23. When someone in your family is sick or not feeling well, does your family avoid getting medical help? ☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.
SCORE:

24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past? ☐ Yes ☐ No ☐ Refused

25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing? ☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE.
SCORE:

26. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern? ☐ Yes ☐ No ☐ Refused

b) A past head injury? ☐ Yes ☐ No ☐ Refused

c) A learning disability, developmental disability, or other impairment? ☐ Yes ☐ No ☐ Refused

27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed? ☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH.
SCORE:

28. IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH: Does any single member of your household have a medical condition, mental health concerns, and experience with problematic substance use? ☐ Yes ☐ No ☐ Refused

IF "YES", SCORE 1 FOR TRI-MORBIDITY.
SCORE:

29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking? ☐ Yes ☐ No ☐ Refused

30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication? ☐ No ☐ Yes ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.

SCORE:

31. YES OR NO: Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced?

☐ Yes ☐ No ☐ Refused

IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.

SCORE:

E. FAMILY UNIT

32. Are there any children that have been removed from the family by a child protection service within the last 180 days?

☐ Yes ☐ No ☐ Refused

33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing?

☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY LEGAL ISSUES.

SCORE:

34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation?

☐ Yes ☐ No ☐ Refused

35. Has any child in the family experienced abuse or trauma in the last 180 days?

☐ Yes ☐ No ☐ Refused

36. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week?

☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 36, SCORE 1 FOR NEEDS OF CHILDREN.

SCORE:

37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that?

☐ Yes ☐ No ☐ Refused

38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed?

☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY STABILITY.

SCORE:

39. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that?

☐ Yes ☐ No ☐ Refused

40. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...

a) 3 or more hours per day for children aged 13 or older?

☐ Yes ☐ No ☐ Refused

b) 2 or more hours per day for children aged 12 or younger?

☐ Yes ☐ No ☐ Refused

41. IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER: Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that?

☐ No ☐ Yes ☐ Don't Know ☐ Refused

IF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 41, SCORE 1 FOR PARENTAL ENGAGEMENT.

SCORE:

SCORING SECTION

SECTION

SCORE

Results

GENERAL INFORMATION

Score

Recommendation

A. HISTORY

0-3

No housing intervention

B. RISK

4-8

An assessment for Rapid Re-Housing

C. SOCIALIZATION & DAILY FUNCTIONS

9+

an assessment for Permanent Supportive Housing/Housing First

D. WELLNESS

E. FAMILY UNIT

PRE-SCREEN TOTAL

Additional Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?

Is there a phone number and/or email where someone can get in touch with you or leave a message?

Ok, now I'd like to take your picture. May I do so?

☐ No

☐ Yes

☐ Refused

Universal Data Assessment

Complete the information below related to the selected client's housing status and other relevant information.

Note:

- Because 3.917 reflects real time data entry as described in the Data Dictionary, the Default Last Assessment button will not bring in any 3.917 data.
- Changing any project setup data with existing enrollments may affect or break the logic for 3.917.
- 3.917 may not always show as expected because of changed setup data or missing required data links

Master Assessment Active *Change Assessment Date*

Universal Data Assessment *

Information Date: _____

Age while in project: 103

Assessment Type:

- ☐ Annual
☐ Entry
☐ During Program Enrollment
☐ Exit
☐ Post Exit/Follow Up
☐ Other

Disabling Condition:

- * ☐ Yes
☐ No
☐ Client doesn't know
☐ Client refused
☐ Data Not Collected

Client Location - Select or enter the CoC code assigned to the geographic area where the head of household is staying at the time of project entry.

Client Location : * ☐ PA-508 - Scranton/Lackawanna County CoC

Living Situation - Identify the type of residence and length of stay at that residence just prior to (i.e., the night before) program admission.

Type of Residence:

- * ☐ Place not meant for habitation
☐ Emergency shelter, including hotel or motel paid for with emergency shelter voucher
☐ Safe Haven
☐ Interim Housing
☐ Foster care home or foster care group home
☐ Hospital or other residential non-psychiatric medical facility
☐ Jail, prison or juvenile detention facility
☐ Long-term care facility or nursing home
☐ Psychiatric hospital or other psychiatric facility
☐ Substance abuse treatment facility or detox center
☐ Hotel or motel paid for without emergency shelter voucher
☐ Owned by client, no ongoing housing subsidy
☐ Owned by client, with ongoing housing subsidy

- ☐ Permanent housing (other than RRH) for formerly homeless persons
- ☐ Rental by client, no ongoing housing subsidy
- ☐ Rental by client, with VASH subsidy
- ☐ Rental by client, with GPD TIP subsidy
- ☐ Rental by client, with other housing subsidy (including RRH)
- ☐ Residential project or halfway house with no homeless criteria
- ☐ Staying or living in a family member's room, apartment or house
- ☐ Staying or living in a friend's room, apartment or house
- ☐ Transitional housing for homeless persons (including homeless youth)
- ☐ Client doesn't know
- ☐ Client refused
- ☐ Data not collected

Length of stay in the prior living situation: *

Health Insurance - Please indicate whether or not the client is covered by health insurance. If so, you will be able to record health insurance sources for the client.

- Covered by Health Insurance: *
- ☐ Yes
 - ☐ No
 - ☐ Client doesn't know
 - ☐ Client refused
 - ☐ Data Not Collected

- All health ins. options are listed here - taking out some pages

| <input type="checkbox"/> Type | Status* | Reason No | Other Coverage |
|---|---|---|----------------|
| Combined Children's Health Insurance / Medicaid Program | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Applied; decision pending <input type="checkbox"/> Applied; client not eligible <input type="checkbox"/> Client did not apply <input type="checkbox"/> Insurance type n/a for this client <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data not collected | |
| Geisinger | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Applied; decision pending <input type="checkbox"/> Applied; client not eligible <input type="checkbox"/> Client did not apply <input type="checkbox"/> Insurance type n/a for this client <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data not collected | |

Domestic Violence Assessment

If the client has been a victim of domestic violence, select Yes for Domestic Violence Experience, and select when the experience occurred.

Assessment Active

Assessment Date: _____

Domestic Violence Experience : * ☐ Yes
☐ No
☐ Client doesn't know
☐ Client refused
☐ Data Not Collected

Interested in being Connected to DV Services: * ☐ Yes
☐ No

Program Eligibility

All programs available for enrollment are listed below. By default only programs that have eligibility criteria are displayed. The selected client is evaluated against the eligibility criteria for each program and a result for each is displayed below.

All programs listed here including prevention

Usage/Capacity:

Only Display Programs with Eligibility
Criteria:

☐

| Program Name | Usage/Capacity | Eligibility Result | Additional Criteria | Organization |
|--|----------------|--------------------|---|-------------------------------|
| <u>Emergency shelter</u> | | | | |
| CMC Emergency Shelter | 3 / 16 | Fail | | Catherine McAuley Center |
| CSS Nativity Place Shelter | 9 / 12 | Fail | Referrals must be made by the Office of Youth and Family Services | Catholic Social Services |
| CSS St. Anthony's Shelter | 141 / 26 | Passed | | Catholic Social Services |
| SJC Walsh Manor Shelter | 2 / 4 | Fail | Must be pregnant | St. Joseph's Center |
| <u>Homelessness Prevention</u> | | | | |
| CSS Fig St. HAP | | Not enough data | Must meet income guidelines & prove able to afford apartment after all monthly expenses | Catholic Social Services |
| UNC ESG Prevention | | Not enough data | Income below 30% AML, being evicted by Magistrate, in Scranton at least 90 days | United Neighborhood Centers |
| <u>PH - Permanent Supportive Housing (disability required for entry)</u> | | | | |
| CIC Permanent Supportive Housing | 8 / 8 | Fail | | Community Intervention Center |
| CIC Permanent Supportive Housing 2 | 6 / 6 | Fail | | Community Intervention Center |
| CIC Permanent Supportive Housing 3 | 12 / 12 | Fail | | |
| CMC Permanent Supportive Housing | 8 / 8 | Fail | | Catherine McAuley Center |
| CMC Permanent Supportive Housing FAMS | 25 / 28 | Fail | | Catherine McAuley Center |
| CSS Permanent Supportive Housing | 7 / 8 | Fail | | Catholic Social Services |
| CSS Permanent Supportive Housing 2 | 5 / 5 | Fail | | Catholic Social Services |

| Program Name | Usage/Capacity | Eligibility Result | Additional Criteria | Organization |
|---|----------------|--------------------|--|-------------------------------|
| CSS Permanent Supportive Housing Veterans | 8 / 8 | Fail | | Catholic Social Services |
| UNC Permanent Supportive Housing | 17 / 16 | Fail | | United Neighborhood Centers |
| UNC Permanent Supportive Housing for Families | 33 / 24 | Fail | | United Neighborhood Centers |
| UNC Permanent Supportive Housing for Families 2 | 30 / 26 | Fail | | United Neighborhood Centers |
| <u>PH - Rapid Re-Housing</u> | | | | |
| CMC Rapid Re-Housing | 19 / 25 | Fail | | Catherine McAuley Center |
| CMC Rapid Re-Housing 2 | 6 / 5 | Fail | | |
| UNC Rapid Re-Housing for Families | 43 / 27 | Fail | | |
| Safe Haven | | | | |
| CIC Safe Haven Apartments | 4 / 4 | Fail | | Community Intervention Center |
| CSS VA Grant Per Diem Low Demand | 1 / 7 | Fail | | |
| <u>Transitional housing</u> | | | | |
| CMC Bridge Housing | 13 / 12 | Fail | | Catherine McAuley Center |
| CSS Mental Health Homeless | 6 / 6 | Not enough data | | Catholic Social Services |
| CSS St. James Manor Transitional Housing | 0 / 16 | Fail | | Catholic Social Services |
| CSS Veteran Grant Per Diem | 23 / 30 | Fail | | Catholic Social Services |
| CSS Veteran SRO | 0 / 8 | Fail | | Catholic Social Services |
| SJC Mother Infant | 8 / 10 | Fail | | St. Joseph's Center |
| UNC Intensive Family Reunification | 0 / 24 | Fail | Must have open case with OYFS, be involved with a TX court and be referred by OYFS. | United Neighborhood Centers |
| UNC Post Foster Care Support | 12 / 8 | Fail | Must have been in foster Care. All referrals come from Office of Youth and Family Services | United Neighborhood Centers |

Renewal Project Evaluation Tool

| Question | Value |
|--|-------|
| Organization | |
| Project Name | |
| Total number of Adults (Q7) | |
| Total number of Clients (Q7) | |
| Total number of Households Served (Q9) | |
| Persons Proposed to Serve (Grant Application) | |
| Total number of leavers (Q7) | |
| Total HUD Award | |
| Total Project Budget (including all cash match) | |
| Continuum of Care Meetings | |
| HMIS Subcommittee Meetings | |
| Discharge Planning Subcommittee Meetings | |
| Education Subcommittee Meetings | |
| Chronic Homeless Subcommittee Meetings | |
| Coordinated Assessment Subcommittee Meetings | |
| Total Continuum of Care Meetings | |
| Total Program Enrollments | |
| Total Leasing amount for PSH projects only | |
| Total Households at single point in time proposed to serve | |
| Total Stayers | |

Renewal Project Eval. p.2

| Question # | Section | Data Title | Answer |
|------------|--|--|-----------|
| 6 | Data Quality | DoB # of Missing Data (Q06A) | |
| 7 | Data Quality | Residence Prior to Entry # of Missing Data (Q15) | |
| 8 | Data Quality | Substance Abuse (at Entry) # of Missing Data (Q13A) | |
| 9 | Data Quality | Domestic Violence (at Entry) # of Missing Data (Q14a) | |
| 10 | Data Quality | Destination # of Missing Data (Q6C) | |
| 11 | Housing First Principles | Average Number of Households Served (Q8b) | |
| 12 | Housing First Principles | Domestic Violence Experience (Adults) (Q14b) | |
| 13 | Housing First Principles | Persons with Physical & Mental Health Number of Conditions at Start (Adults) (Q13a2) | |
| 14 | Housing First Principles | | |
| 15 | Housing First Principles | | |
| 16 | Housing First Principles | Residence Prior to Entry - Homeless Situations (Number of Heads of Household) (Q15) | |
| 17 | Adults who are connected with mainstream benefits | | |
| 18 | Adults who are connected with non-cash benefits(excluding health insurance) | # of Non-Cash Benefit Sources - leavers & Stayers (1 + Sources) (Q20b) | |
| 19 | Adults who increased earned income | Earned income measure (Actual # of persons who accomplished this measure) (Q19a3) | |
| 20 | Adults who maintained or increased other income | Other (non-earned) income measure (Actual # of persons who accomplished this measure) (Q19a3) | |
| 21 | Clients who remained in program or exited the program to a HUD defined permanent destination | Housing stability measure - achieving sufficient enough safety level to discharge to PH (Actual # of persons who accomplished this measure) (Q23a + Q23b + Q05a) | |
| 22 | Cost Effectiveness | Amount of funds the project returned at end of most recent grant term (Q28)) | |
| 23 | Cost Effectiveness | Expenditure per Household (Total Project Funds minus Leasing)PSH for Individuals only | |
| 24 | Cost Effectiveness | Expenditure per Permanent Housing exit (not scored this year) | |
| 25 | Continuum of Care Participation | Continuum of Care Meetings Attended by Organization Personnel | |
| 26 | Continuum of Care Participation | HMIS Subcommittee Meetings Attended by Organization Personnel | |
| 27 | Continuum of Care Participation | Discharge Planning Subcommittee Meetings Attended by Organization Personnel | |
| 28 | Continuum of Care Participation | Education Subcommittee Meetings Attended by Organization Personnel | |
| 29 | Continuum of Care Participation | Chronic Homeless Subcommittee Meetings Attended by Organization Personnel | |
| 30 | Continuum of Care Participation | Coordinated Assessment Subcommittee Meetings Attended by Organization Personnel | |
| 31 | Coordinated Entry Implementation | Coordinated entry records exceeds number of agency program enrollments | |
| 32 | Coordinated Entry Implementation | All entries into the program were the highest priority(not scored this year) | |
| 33 | Client Satisfaction | Clients participating in survey | |
| 34 | | Date of Materials Submission | 5/18/2018 |

Renewal Project Evaluation Tool, p.3

| Question # | Section | Data Title | Calculation Explanation | Calculation | Points |
|--------------------------|--|---|--|-------------|---------|
| 1 & 6 | Data Quality | DoB # | Q06a Missing Data / Total Clients | #DIV/0! | #DIV/0! |
| 2 & 7 | Data Quality | Residence Prior to Entry # | Q15 Missing Data / Total Clients | #DIV/0! | #DIV/0! |
| 3 & 8 | Data Quality | Substance Abuse (at Entry) # | Q13a2 Missing Data / Total Clients | #DIV/0! | #DIV/0! |
| 4 & 9 | Data Quality | Domestic Violence (at Entry) # | Q14a Missing Data / Total Clients | #DIV/0! | #DIV/0! |
| 5 & 10 | Data Quality | Destination # of Missing (Q06c) | Q06c Missing Data / Total Clients | #DIV/0! | #DIV/0! |
| 11 | Housing First Principles | Average households served during operating year | Q08b / Households Proposed to Serve | #DIV/0! | #DIV/0! |
| 12, 13, & 14 | Housing First Principles | Domestic Violence, Physical, Mental Health Conditions | (Q14b + Q13a2) / Total Adults | #DIV/0! | #DIV/0! |
| 16 | Housing First Principles | Residence Prior to Entry - Homeless Situations (Number of Adult Clients) | Q20a1 / Total Adults | #DIV/0! | #DIV/0! |
| 17 & 18 | Adults who are connected with non-cash benefits (excluding health insurance) | # of Non-Cash Benefit Sources - Leavers & Stayers (1 + Sources) | Q20b / Total Adults | #DIV/0! | #DIV/0! |
| 19 | Adults who increased earned income | Earned income measure (Actual # of persons who accomplished this measure) (Q19a3) | Q19a3 / Total Adults | #DIV/0! | #DIV/0! |
| 20 | Adults who maintained or increased other income | Other income measure (Actual # of persons who accomplished this measure) (Q19a3) | Q19a3 / Total Adults | #DIV/0! | #DIV/0! |
| 21 | Clients who remained in program or exited the program to a HUD defined permanent destination | Housing stability measure - achieved sufficient level of safety to exit to PH (Actual # of persons who accomplished this measure) (Q23a & Q23b) | Q23a+23b+Stayers / Total Clients | #DIV/0! | #DIV/0! |
| | Leavers who exited to shelter, street or unknown | (Q23a & 23b) | Q23a+23b / Total Leavers | | |
| 22 | Cost Effectiveness | Amount of funds the project returned at end of grant term (Q28) | Q28(Total Award/Total Expenditures) | #DIV/0! | #DIV/0! |
| 23 | Cost Effectiveness | Expenditure per Household (Total Project Funds) | Total award + cash match-Leasing/avg # HH served | | |
| 24 | Cost Effectiveness | Expenditure per Permanent Housing exit | | | 0 |
| 25, 26, 27, 28, 29, & 30 | Continuum of Care Participation | Continuum of Care Meetings Total Participation | All Meetings Summed / Total Meetings | #DIV/0! | #DIV/0! |
| 32 | Coordinated Entry/Chronic Homeless Adherence | All entries into the program were taken from Chronic Homeless List | Total # entries from CH list/Total # entries during operating year | | 0 |
| | Length of Stay (RRH Only) | Q22a1 | Leavers under 12 months/Total Leavers | 0% | 0 |
| 33 | Client Satisfaction | At least 50% of clients participate in survey | Clients participating in survey / Total Adults | #DIV/0! | #DIV/0! |
| 34 | | Adherence to Project Ranking Deadline | Submission Date <= 04/25/2017 | True | 0 |

Total Ranking Score #DIV/0!

2018 Continuum of Care Program Evaluation Scoring Rubric

Data for this evaluation process will be acquired from program APRs either in SAGE or in HMIS, information from committee chairs, project applications and agency's solicited information. Scoring information will be used for rating and ranking Continuum of Care projects.

Data Quality

1 thru 5. This set of questions are Universal Data Elements or Program Specific Data Elements which are required across all pertinent programs in the Scranton / Lackawanna County Continuum of Care. All questions in this section are worth one point. Data elements are as follows: Date of Birth, Residence Prior to Entry, Substance Abuse at Entry, Domestic Violence at Entry, and Destination at Exit.

1 through 5.

| Percentage | Points |
|--------------------------|--------|
| 0 – 5% missing data | 1 |
| 6% and more missing data | 0 |

Utilization of Beds and Units

6. Occupancy rate based on quarterly unit utilization

| Percentage | Points |
|---------------|--------|
| 90% and above | 5 |
| 75% - 89% | 4 |
| 60% - 74% | 3 |
| 50% - 59% | 2 |
| 49% and below | 0 |

Housing First

7. Number of Adults with Barriers or Adult Survivors of DV

| Percentage | Points |
|--------------|--------|
| 90% or above | 5 |
| 76% – 89% | 4 |
| 61% – 75% | 3 |
| 46% - 60% | 2 |
| 30% - 45% | 1 |
| 29% or below | 0 |

8. Residence Prior to Project Entry –At Least 1 Adult from HUD-defined Literal Homelessness and/or Fleeing or attempting to flee DV/sexual assault

| Percentage | Points |
|---------------|--------|
| 90% and above | 10 |
| 85% - 89% | 9 |
| 80% - 84% | 8 |
| 75% - 79% | 7 |
| 70% - 74% | 6 |
| 65% - 69% | 5 |
| 60% - 64 | 4 |
| 59% and below | 0 |

Income and Employment

9. Adults who are connected with non-cash benefits excluding health insurance

| Percentage | Points |
|---------------|--------|
| 95% and above | 10 |
| 85% - 94% | 8 |
| 70% - 84% | 6 |
| 55% - 69% | 4 |
| 40% - 54% | 2 |
| 25% - 39% | 1 |
| 24% and below | 0 |

10. Adults who increased EARNED INCOME from entry to exit/follow-up (leavers & stayers)

HUD has granted Safe Haven projects exempt from this metric on the Annual Performance Report and will therefore not have it included in the final calculated percentage of possible available points.

| PSH Percentage | RRH Percentage | Points |
|----------------|----------------|--------|
| 25% and above | 40% and above | 10 |
| 20% - 24% | 30% - 39% | 8 |
| 15% - 19% | 25% - 29% | 6 |
| 10% - 14% | 15% - 24% | 4 |
| 5% - 9% | 10% - 14% | 2 |
| 4% and below | 9% and below | 0 |

11. Adults who maintained or increased OTHER INCOME (non-earned) from entry to exit/follow-up (leavers and stayers)

| PSH & SH Percentage | RRH Percentage | Points |
|---------------------|----------------|--------|
| 65% and above | 35% | 10 |
| 55% - 64% | | 8 |
| 45% - 54% | 25% | 7 |
| 35% - 44% | | 6 |
| 25% - 34% | 15 | 5 |
| 15% - 24% | | 4 |
| 5% - 14% | 10 | 2 |
| Below 4% | | 0 |

Housing Stability

12. Clients who remained in a program or exited the program to a HUD defined permanent destination

| Percentage | Points |
|---------------|--------|
| 90% and above | 10 |
| 75% - 89% | 8 |
| 65% - 74% | 6 |
| 60% - 64% | 4 |
| 50% - 59% | 2 |
| 49% and below | 0 |

13. Leavers who exited to shelter/streets or unknown

| Percentage | Points |
|--------------|--------|
| 10% or below | 10 |
| 11% - 20% | 8 |
| 21 - 30% | 6 |
| 31% or above | 0 |

Budget

14. Amount of funds the project returned at end of grant term

| Percentage | Points |
|--------------------------|--------|
| 0 – 2.5% return of funds | 10 |
| 2.6 – 5% return of funds | 8 |
| 6 – 7.5% return of funds | 6 |
| 7.6 – 10 return of funds | 4 |
| 11% and above | 0 |

Cost Effectiveness

15. Expenditure per Household

This year the information will be gathered but not scored. Metrics may be put in place to score programs in a way that encourages programs to be cost effective, but not so much so that they are not able to provide effective supportive services for program participants.

| Cost per Household | Points |
|--------------------|--------|
| | 5 |
| | 4 |
| | 3 |
| | 2 |
| | 0 |

16. Expenditure per PH Exit

The data for this metric will be collected and calculated, but it will not be scored this year. It is a potential new metric for next year.

| Cost per Household | Points |
|--------------------|--------|
| | 5 |
| | 4 |
| | 3 |
| | 2 |
| | 0 |

CoC Participation

17. CoC Meeting & Subcommittee Attendance Total

This metric measures engagement between grant recipient organizations with the Scranton / Lackawanna County Continuum of Care.

| Percentage | Points |
|------------------------|--------|
| Participate 91% - 100% | 5 |
| Participate 75% - 90% | 2 |
| Participate 50% - 74% | 1 |
| Participate 0 – 49% | 0 |

Coordinated Entry

19. PSH programs only: Program Entrants were taken from the Chronic Homeless Program –

| Percent | Points |
|--------------|--------|
| 90% or above | 5 |
| 76% – 89% | 4 |
| 61% – 75% | 3 |
| 46% - 60% | 2 |
| 30% - 45% | 1 |
| 29% or below | 0 |

Length of Stay

20. RRH programs only: Length of Stay for participants is 12 months or less

| Percent | Points |
|---------------|--------|
| 90% or above | 5 |
| 75% - 89% | 3 |
| 50% - 75% | 1 |
| 49% and below | 0 |

Client Satisfaction

20. Client Satisfaction Surveys Administered

| Percent | Points |
|---------|--------|
| 50-100% | 5 |
| 1-49% | 0 |

Penalties

21. Adherence to Deadline(s)

For this metric, if a deadline is missed, the 10 points are deducted from the total score.

INSTRUCTIONS

This is the application for Scranton/Lackawanna County Continuum of Care (PA-508)) permanent housing funds, including both permanent supportive housing and rapid re-housing. Projects may be funded through the permanent housing bonus. HUD has not yet announced the amount of funds that will be available.

The following types of new projects will be considered:

- New permanent supportive housing (PSH) projects that will serve 100 percent chronically homeless individuals experiencing chronic homelessness coming from places not meant for human habitation, safe havens, or emergency shelters.
- New rapid rehousing (RRH) projects that will serve homeless individuals AND families, including youth, coming directly from the streets or emergency shelters, or meeting the criteria of paragraph (4) of the HUD definition of homeless. (See Appendix for Definition of Category 4 - fleeing domestic violence, dating violence, sexual assault, stalking or other dangerous situations).

New projects to be included in the PA-508 2018 CoC Application to HUD will be selected by an independent scoring committee. Priority will be given to those projects serving 50% or more individuals. Final decisions regarding awards will be made by HUD via the national competition.

All applications will be reviewed to ensure they meet HUD's Threshold Standards. Applications that do not meet these standards will not be further reviewed.

All applications are due by August 10, 2018 and should be sent to: squinn-sheeran@uncnepa.org.

Project Requirement and Priorities:

- Eligible activities/projects for the Funds:

- All projects must be Permanent Supportive Housing or Rapid Re-Housing with TH-PH-RRH allowable for DV Bonus
- Projects can request funds for:
 - PSH: Leasing (tenant or project based only), operating funds, supportive services, admin
 - RRH: Rental assistance (tenant based only), supportive services, admin
 - TH-PH RRH for DV Bonus only
- Term – 1 year
- Eligible Supportive Services Costs are limited to the categories included in Section 17. Budget Detail.
- Operating funds or project based rental assistance may be used for units owned by the applicant organization. These must be units newly designated to serve homeless people and ready for occupancy no later than 6 months after the award of funds. Awards are anticipated to occur in approximately January 2019. Projects must provide a deed demonstrating site control for a building or units where evidence of site control exceeds the requested grant term.
- Projects applying for RRH should include at least \$4,000 per household served at a point in time for supportive services. For example, if the project will support 20 households at a given point in time, the annual supportive services budget should be at least \$80,000.
- Projects applying for PSH should include at least \$5,000 per household annually for supportive services.
- Projects cannot request rental assistance and operating funding in the same project.
- Projects must agree to enter client data into the PA-508 HMIS (with the exception of Victims Services Providers as they are prohibited from doing so by law. VSPs must enter data into a comparable data base), participate in the annual homeless count, participate in and accept referrals only from the applicable **Coordinated Assessment** and comply with all other HUD requirements and PA-508 CoC Policies.
- Applications must demonstrate:
 - A plan for **rapid implementation** of the program; the project narrative must document how the project will be ready to begin housing the first program participant within 6 months of the award (i.e., by no later than July 2019).
 - A connection to **mainstream service systems**, specifically:
 - 1) that services are in place to identify and enroll all Medicaid-eligible program participants and to connect Medicaid-enrolled participants to Medicaid-financed services, including behavioral health services, or other services important to supporting housing stability.
 - 2) that services are in place to connect participants to mainstream resources, including benefits, health insurance and employment services
 - 3) for stable PSH participants, that the project will assess participants' interest in moving on to independent affordable housing and offer assistance, to help tenants who would like to move on to explore independent housing options and apply for mainstream affordable housing opportunities.
 - Experience in operating a successful **housing first** program and a program design that meets the definition of Housing First as adopted by the PA-508 CoC and the additional housing first principles outlined in the Appendix.
 - A plan for outreach to the eligible population (see below).

- That they meet HUD’s match requirements. See Section #17, Sources of Match.
- Eligible localities:
 - Projects must be located within Lackawanna County, PA.
- Eligible populations:
 - PSH:
 - All projects must dedicate 100% of units to chronically homeless individuals.
 - Project applicants must demonstrate that they will first serve the chronically homeless and then prioritize as outlined in *Scranton/Lackawanna County Policies and Procedures: Adoption of HUD Notice CPD 16-11* (See Appendix).
 - Disabilities: All projects must serve exclusively disabled individuals as defined by HUD (See Appendix)
 - RRH: All projects must serve 100% literally homeless families and/or single adults coming directly from emergency shelters and/or unsheltered locations OR category 4: fleeing domestic violence, dating violence, sexual assault, stalking or other dangerous situations.
- Eligible applicants:
 - Eligible project applicants for the CoC Program Competition are nonprofit organizations, States, local governments, and instrumentalities of State and local governments, and public housing agencies.
 - Applications shall only be considered from project applicants in good standing with HUD, which means that the applicant does not have any open monitoring or audit findings, history of slow expenditure of grant funds, outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon, or history of serving ineligible program participants, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes.

New Project Application 2018 Scranton/Lackawanna County Continuum of Care

- Applications are due by close of business on August 10, 2018 and should be sent to: squinn-sheeran@uncnepa.org
- Please contact squinn-sheeran@uncnepa.org for questions about the form or process.
- Please save your document with the following naming convention:
 <Agency name –Program name-NEW PA508-18>.
 Example: ABC Services-Home to Stay-NEW PA508-18.doc
- The CoC reserves the right not to review late or incomplete applications or projects that do not meet the HUD threshold or Project Requirements and Priorities described above.

1. Project Applicant Information:

- Name of Organization: _____
- Organization Type
☐ Units of Local Government ☐ Non-profit 501(c)(3) ☐ PHA
☐ State Government ☐ Other: Describe _____
- DUNS Number: _____

2. Sub-Recipient Organization (if applicable):

- Name of Organization: _____
- Organization Type
☐ Units of Local Government ☐ Non-profit 501(c)(3) ☐ PHA
☐ State Government ☐ Other: Describe _____
- DUNS Number: _____

3. Contact person for this application:

- Name: _____ Title: _____
- Phone: _____
- Email: _____

4. Project Location (town(s)): _____

5. Type of Project: ☐ PSH ☐ RRH

6. Proposed Project Budget

| Activities | Total Assistance Requested |
|---|----------------------------|
| 1. Leasing | |
| 2. Rental Assistance | |
| Indicate Type of RA: <input type="checkbox"/> TBRA (required for RRH) <input type="checkbox"/> PBRA | |
| 3. Supportive Services | |
| 4. Operations | |
| 5. Administrative costs (Up to 7% of amount requested) | |
| 6. Sub-total Request (Add lines 1-5) | |
| 7. Cash Match | |
| 8. In-kind Match | |

| | |
|---|--|
| 9. Total Match (Add lines 6&7) – must equal at least 25% of line #6 for RRH projects or 25% of (line #6 minus line #1 (Leasing)) for PSH projects | |
| 10. Total Budget (Add lines 6 & 9) | |

7. **Housing Type**

- a. Type: ☐ Single Site ☐ Scatter Site
- b. Total Number of Units: _____
- c. Total Number of Beds: _____

8. A. Population to be Served in the Project (Point-in-Time)

| Households | HH's with At Least One Adult and One Child | Adult Households without Children | Households with Only Children | Total |
|----------------------------|--|-----------------------------------|-------------------------------|-------|
| Total Number of Households | | | | |

B. Population to be Served in the Project (Annually – over the course of a year)

(Not applicable for PSH - Applies to RRH only)

| Households | HH's with At Least One Adult and One Child | Adult Households without Children | Households with Only Children | Total |
|----------------------------|--|-----------------------------------|-------------------------------|-------|
| Total Number of Households | | | | |

9. Experience of Applicant/Sponsor

| |
|---|
| <p>A. Describe the experience of the project applicant, sub-recipients (if applicable), and partner organizations (e.g., key contractors, service providers if applicable) as it relates to providing supportive services and housing for homeless persons, and carrying out the activities of the project. Be sure to provide concrete examples that illustrate 1) experience/expertise with renting units, operating rental assistance, and providing supportive services similar to the activities proposed in the applications 2) working with and addressing the target population's identified housing and service needs. Specifically describe your experience with:</p> <ul style="list-style-type: none">• the Housing First model• delivering or securing Medicaid funded services for participants in the agency's programs• linking participants to mainstream resources, including benefits, health insurance, employments services, and mainstream affordable housing• assessing stable participants' interest in moving on to independent affordable housing and offering assistance, as indicated, to help tenants who would like to move on to explore independent housing options and apply for mainstream affordable housing opportunities (PSH ONLY) |
| <p>B. Describe experience of project applicant and partners (if applicable) relating to serving the eligible population you are proposing to serve.</p> |
| <p>C. Describe the basic organization and management structure of the applicant and subrecipients (if any). Include description of internal and external coordination, structures for managing basic organization operations, and an adequate financial accounting system that will be used to administer the grant.</p> |
| <p>D. Describe the experience of the applicant and potential subrecipients (if any), in effectively utilizing federal funds and performing the activities proposed in the application, given funding and time limitations.</p> |
| <p>E. Describe the experience of the applicant and potential subrecipients (if any) in identifying and securing matching funds and leveraging other Federal, State, local, and private sector funds. If the applicant and subrecipient have no experience, indicate "No experience leveraging other Federal, State, local or private sector funds."</p> |

F. Have any of your agency's HUD funded programs (including ESG) received a HUD audit in the last 12 months? yes ☐ no ☐

If yes, were there any findings from the audit? yes ☐ no ☐

If there were findings, please describe the findings and your agency's corrective actions to satisfy the findings and attach a copy of the corrective action plan that you submitted to HUD.

G. Are there any unresolved monitoring or audit findings for any HUD grants (including ESG) operated by the applicant or potential subrecipients (if any)?
☐ Yes ☐ No

- If Yes, describe the details of unresolved monitoring or audit findings and steps that will be taken to resolve.

H. Have you returned any funds to HUD on any existing grants in the last two years?
☐ Yes ☐ No

- If yes, how much has been returned?
- What is the reason that the funds have been returned?
- What actions are you taking to ensure full spending?

I. Do you have any outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon?
☐ Yes ☐ No

- If yes, how much is owed?
- What is the reason for the obligation to HUD?
- What is preventing establishing a payment schedule?

J. Have you consistently drawn down funds at least quarterly on all HUD CoC grants in the last two years? ☐ Yes ☐ No

- What is the reason that the funds have not been drawn down?
- What actions are you taking to ensure timely draw down?

K. Have you submitted on time Annual Progress Reports (APRs) for all HUD CoC grants in the last two years? ☐ Yes ☐ No

- What is the reason that APRs were late?
- What actions are you taking to ensure timely submission?

10. Project Description

A. Provide a description that addresses the entire scope of the proposed project. The project description should be complete and concise. It must address the entire scope of the project, including a clear picture of the community/target population(s) to be served, the plan for addressing the identified needs/issues of the CoC community/target population(s), projected outcome(s), and any coordination with other source(s)/partner(s). The description must be consistent with other parts of this application and identify the target population including the number of single adults and the number of families with children to be served when the project is at full capacity.

- Address and location of units
- Type and number of units – scatter site or single site, single or multi-family homes, etc.
- The specific services that will be provided and outreach methods to be used to serve the long-term homeless population
- Projected outcomes
- Coordination with partners
- Project timeline – when units will be developed or leased-up
- HMIS implementation
- How the project will leverage or deliver Medicaid and other mainstream services to participants

B. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.

| |
|--|
| <p>C. Will the project receive referrals only through the local Coordinated Entry Network?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If No, please explain.</p> |
| <p>D. PSH Only: Describe recipient/subrecipient capacity for assessing need, prioritizing persons with the most severe needs and outreaching to identify chronically homeless people and the specific plan for how the project will first serve the chronically homeless according to the order of priority established in HUD Notice CPD 16-11 (<i>SEE APPENDIX</i>).</p> |
| <p>E. Describe recipient/subrecipient experience with and a description of the program design for implementing Housing First.</p> |
| <p>F. Will participants be required to live in a particular structure, unit, or locality, at some point during the period of participation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will more than 16 persons reside in a structure? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please answer the following questions</p> <ul style="list-style-type: none"> • Describe local market conditions that necessitate a project of this size. • Describe how the project will be integrated into the neighborhood. |
| <p>G. If the project involves capital development, please describe the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property.</p> |

11. Supportive Services for Participants

A. For projects serving **families with dependent children and single adults 24 years old or younger**, does the applicant/sponsor have policies and practices that are consistent with, and do not restrict the exercise of rights provided by the education subtitle of the McKinney-Vento Act, as updated by the Every Student Succeeds Act, and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness?

☐ Yes

☐ No

B. For projects serving **families with dependent children and single adults 24 years old or younger**, does the applicant/sponsor have a designated staff person responsible for ensuring that children are enrolled in school and connected to the appropriate services within the community, including early childhood education programs such as Head Start, Part C of the Individuals with Disabilities Act, and McKinney-Vento education services?

☐ Yes

☐ No

C. Describe how participants will be assisted to obtain and remain in permanent housing. The description must be consistent with other parts of this application and identify:

- Plan to move eligible participants into the project
- Needs of tenants and plan for addressing those needs including but not limited to: health, behavioral health, education, employment, life skills and child care services
- How units will be identified and rent reasonableness will be determined

D. Describe how participants will be assisted to increase employment and/or income and to maximize their ability to live independently. The description must be consistent with other parts of this application and identify:

- Needs of target population and services required
- How tenants will access these services
- Coordination with other providers and mainstream systems
- How tenants will access SSI/SSDI and other mainstream benefits
- Unique needs of youth (if applicable)

- E. Describe how you will coordinate effort with and connect tenants to mainstream employment organizations. These are organizations that provide job readiness, job training, and/or employment opportunities for all individuals and not exclusively for homeless individuals (e.g. Labor Ready).
- F. Please identify whether the project will include the following activities:
- Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? ☐Yes ☐No
 - Regular follow-ups with participants to ensure mainstream benefits are received and renewed? ☐Yes ☐No
 - Will project participants have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency? ☐Yes ☐No
 - Indicate the last SOAR training date for the staff person providing the technical assistance: _____

12. Supportive Services Type and Frequency:

A. For all supportive services available to participants, indicate who will provide, how they will be accessed and how often they will be provided **regardless of the resources that will be used to pay for the services.**

For Provider, indicate: "Applicant" if the applicant will provide the service directly; "Subrecipient" if a subrecipient will provide the service directly; "Partner" if an organization that is not a subrecipient of project funds but with whom a formal agreement or memorandum of understanding (MOU) has been signed will provide the service directly; or, "Non-Partner" to if a specific organization with whom no formal agreement has been established regularly provides the service to clients.

| Supportive Services | Provider | Frequency – select one per service type | | | | |
|-------------------------------------|----------|---|--------|------------|---------|-----|
| | | Daily | Weekly | Bi-monthly | Monthly | N/A |
| Assessment of Service Needs | | | | | | |
| Assistance with Moving Costs | | | | | | |
| Case Management | | | | | | |
| Child Care | | | | | | |
| Education Services | | | | | | |
| Employment Assistance/Job Training | | | | | | |
| Food | | | | | | |
| Housing Search/ Counseling Services | | | | | | |
| Legal Services | | | | | | |
| Life Skills | | | | | | |
| Mental Health Services | | | | | | |
| Outpatient Health Services | | | | | | |
| Outreach Services | | | | | | |
| Substance Abuse Treatment Services | | | | | | |
| Transportation | | | | | | |
| Utility Deposits | | | | | | |

B. How accessible are basic community amenities (e.g. medical facilities, grocery store, recreation facilities, schools, etc.) to the proposed project?

- ☐ Yes, very accessible
- ☐ Somewhat accessible
- ☐ Not accessible

13. Population Characteristics

| Population Characteristics | Persons in HH's with At Least One Adult and One Child | Adult Persons in Households without Children | Persons in Households with Only Children | Total |
|--|--|--|--|-------|
| Disabled Adults over age 24 | | | | |
| Non-disabled Adults over age 24 | | | | |
| Disabled Adults ages 18-24 | | | | |
| Non-disabled Adults ages 18-24 | | | | |
| Accompanied Disabled Children under age 18 | | | | |
| Accompanied Non-disabled Children under age 18 | | | | |
| Unaccompanied Disabled Children under age 18 | | | | |
| Unaccompanied Non-disabled Children under 18 | | | | |

Totals from Above:

| | | | | |
|------------------------------------|--|--|--|--|
| Total Number of Adults over age 24 | | | | |
| Total Number of Adults ages 18-24 | | | | |
| Total Number of Children under 18 | | | | |
| Total Persons | | | | |

14. Subpopulations – For PSH, each person must be listed as chronically homeless and at least one adult in each household must be listed as disabled. DV is not considered a disability by HUD.

Households with At Least One Adult and One Child

| | Chron. Homlss Non- Vets | Chron. Homlss Vets | Chronic Subs. Abuse | Persons with HIV/ AIDS | Severely Mentally Ill | Dom. Violenc e | Phys. Disab | Dvlpmt Disab | Not Other-wise Represented |
|--|----------------------------------|--------------------------|---------------------------|---------------------------------|-----------------------------|----------------------|----------------|-----------------|----------------------------------|
| Disabled Adults over age 24 | | | | | | | | | |
| Non-disabled Adults over age 24 | | | | | | | | | |
| Disabled Adults ages 18-24 | | | | | | | | | |
| Non-disabled Adults ages 18-24 | | | | | | | | | |
| Disabled Children under age 18 | | | | | | | | | |
| Non-disabled Children under age 18 | | | | | | | | | |
| Total Persons | | | | | | | | | |

Adult Households without Children

| | Chron. Homlss Non- Vets | Chron. Homlss Vets | Chronic Subs. Abuse | Persons with HIV/ AIDS | Severely Mentally Ill | Victims of Dom. Viol. | Phys. Disab | Dvlpmt Disab | Not Other-wise Represented |
|---------------------------------------|----------------------------------|--------------------------|---------------------------|---------------------------------|-----------------------------|--------------------------------|----------------|-----------------|----------------------------------|
| Disabled Adults over age 24 | | | | | | | | | |
| Non-disabled Adults over age 24 | | | | | | | | | |
| Disabled Adults ages 18-24 | | | | | | | | | |
| Non-disabled Adults ages 18- 24 | | | | | | | | | |
| Total Persons | | | | | | | | | |

Households with Only Children

| | Chron. Homlss Non- Vets | Chron. Homlss Vets | Chroni c Subs. Abuse | Persons with HIV/ AIDS | Severely Mentally Ill | Victims of Dom. Viol. | Phys. Disab | Dvlpmt Disab | Not Other-wise Represented |
|--|----------------------------------|--------------------------|-------------------------------|---------------------------------|--------------------------|--------------------------------|----------------|-----------------|----------------------------------|
| Unaccom- panied Disabled Children >18 | | | | | | | | | |
| Unaccom- panied Non- Disabled Children >18 | | | | | | | | | |
| Accom- panied Disabled Children >18 | | | | | | | | | |
| Accom- panied Non- Disabled Children >18 | | | | | | | | | |
| Total Persons | | | | | | | | | |

15. Outreach for Participants

A. Enter the percentage of homeless persons who will be served by the proposed project for each of the following locations:

___ Persons who came from the street or other locations not meant for human habitation

___ Persons who came from Emergency Shelters

___ Persons who came from safe havens

___ Persons eligible under category 4 – e.g., fleeing DV, stalking, violence (see appendix for definition)

___ Total of above percentages

B. Describe the outreach plan to bring eligible homeless participants into the project.

16. HMIS Participation

a. Does your agency currently participate in HMIS? ☐ Yes ☐ No

b. Will your agency enter data into the HMIS for this proposed project? ☐ Yes ☐ No

17. Budget detail

Leased Unites Budget (enter number of units by unit type; the applicable Fair Market Rent (FMR) level, multiply units times FMR times 12 (1 year grant) and enter totals. Link for 2017 FMRs:

https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/select_Geography.odn

| Unit Size | No. of Units | FMR (Insert local FMR) | Term (12 months) | Total Costs (\$) |
|---------------|--------------|---------------------------|---------------------|------------------|
| Efficiency | | \$ | X 12 months | |
| 1 Bedroom | | \$ | X 12 months | |
| 2 Bedroom | | \$ | X 12 months | |
| 3 Bedroom | | \$ | X 12 months | |
| 4 Bedroom | | \$ | X 12 months | |
| Totals | | | | |

Rental Assistance Budget (enter number of units by unit type; the applicable Fair Market Rent (FMR) level, multiply units times FMR times 12 (1 year grant) and enter totals. Link for 2017 FMRs:

https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/select_Geography.odn

Indicate the Type of Rental Assistance: ☐ Project Based ☐ Tenant Based

| Unit Size | No. of Units | FMR (Insert local FMR) | Term (12 months) | Total Costs (\$) |
|---------------|--------------|---------------------------|---------------------|------------------|
| Efficiency | | \$ | X 12 months | |
| 1 Bedroom | | \$ | X 12 months | |
| 2 Bedroom | | \$ | X 12 months | |
| 3 Bedroom | | \$ | X 12 months | |
| 4 Bedroom | | \$ | X 12 months | |
| Totals | | | | |

Operating Costs

Enter the quantity and total budget request for each operating cost. The request entered should be equivalent to the cost of one year of the relevant operating costs. When including staff costs, please include title, salary and FTE.

| Operating Costs | Quantity Description (max 400 characters) | Annual Budget Request |
|--------------------------------|--|--------------------------|
| Maintenance and repair | | |
| Electricity, Gas and Water | | |
| Property Tax and Insurance | | |
| Furniture | | |
| Replacement Reserve | | |
| Equipment | | |
| Building Security | | |
| Total Operating Request | | |

Supportive Services: Enter the quantity and total budget request for each supportive services cost. The request entered should be equivalent to the cost of one year of the relevant supportive service. When including staff costs, please include title, salary and FTE.

| Eligible Costs | Quantity Description (max 400 characters) | Annual Budget Request |
|--|--|-----------------------|
| Assessment of Service Needs | | |
| Assistance with Moving Costs | | |
| Case Management | | |
| Employment Services | | |
| Food | | |
| Housing Search/Counseling | | |
| Legal Services | | |
| Life Skills | | |
| Outreach Services | | |
| Transportation | | |
| Utility Deposits (only if not included in lease agreement) | | |
| Total Annual Assistance Requested for Supportive Services | | |

Sources of Match – Please complete the match table below.

Match is actual cash or in-kind resources contributed to the grant. All costs paid for with matching funds must be for activities that are eligible under the CoC Program, even if the recipient is not receiving CoC Program grant funds for that activity. All grant funds must be matched with an amount no less than 25% of the awarded grant amount (with cash or in-kind resources). Match resources may be from public or private resources.

| Identify Type of Contribution: Cash or In kind | Name the Source of Contribution | Identify Source as: (G) Government or (P) Private | Date of Written Commitment | Value of Written Commitment |
|---|---------------------------------|--|----------------------------|-----------------------------|
| <i>Example: Cash</i> | DMHAS | G | 7/15/18 | \$10,000 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | TOTAL: | \$ |

APPENDIX

PA-508 Adopted Definition of Housing First

Housing First is an approach in which housing is offered to people experiencing homelessness without preconditions (such as sobriety, mental health treatment, or a minimum income threshold) or service participation requirements and in which rapid placement and stabilization in permanent housing are primary goals. PSH projects that use a Housing First approach promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services. HUD encourages all recipients of CoC Program-funded PSH to follow a Housing First approach to the maximum extent practicable.

Housing First Principles

Housing First is a programmatic and systems approach that centers on providing homeless people with housing quickly and *then* providing services as needed using a low barrier approach that emphasizes community integration, stable tenancy, recovery and individual choice.

Low barrier approach to entry:

- Housing First offers individuals and families experiencing homelessness immediate access to permanent supportive housing without unnecessary prerequisites. For example:
 - a. Admission/tenant screening and selection practices do not require abstinence from substances, completion of or compliance with treatment, or participation in services.
 - b. Applicants are not rejected on the basis of poor or lack of credit or income, poor or lack of rental history, minor criminal convictions, or other factors that might indicate a lack of “housing readiness.”
 - c. Blanket exclusionary criteria based on more serious criminal convictions are not applied, though programs may consider such convictions on a case by case basis as necessary to ensure the safety of other residents and staff.
 - d. Generally, only those admission criteria that are required by funders are applied, though programs may also consider additional criteria on a case by case basis as necessary to ensure the safety of tenants and staff. Application of such additional criteria should be rare, and may include, for example, denial of an applicant who is a high risk registered sex offender by a project serving children, or denial of an applicant who has a history of domestic violence involving a current participant.

Community integration and recovery:

- Housing is integrated into the community and tenants have ample opportunity and are supported to form connections outside of the project.
- Housing is located in neighborhoods that are accessible to community resources and services such as schools, libraries, houses of worship, grocery stores, laundromats, doctors, dentists, parks, and other recreation facilities.

- Efforts are made to make the housing look and feel similar to other types of housing in the community and to avoid distinguishing the housing as a program that serves people with special needs.
- Services are designed to help tenants build supportive relationships, engage in personally meaningful activities, and regain or develop new roles in their families and communities.
- Services are recovery-based and designed to help tenants gain control of their own lives, define their personal values, preferences, and visions for the future, establish meaningful individual short and long-term goals, and build hope that the things they want out of life are attainable. Services are focused on helping tenants achieve the things that are important to them and goals are not driven by staff priorities or selected from a pre-determined menu of options.

PA-508 Policy - Adoption of HUD Notice CPD 16-11

This CoC will base prioritization for permanent supportive housing on the Notices CPD-14-012 and CPD-16-11. Households meeting the definition of chronic homelessness will be prioritized for all Permanent Supportive Housing vacancies upon turnover.

All CoC Program-funded PSH must take new participants from the single prioritized Chronic Homeless list for individuals or for families as appropriate, which is created using the Coordinated Entry process along with the criteria outlined below.

Requirement to dedicate or prioritize PSH beds to people experiencing chronic homelessness:

All Scranton/Lackawanna County CoC-funded PSH beds are required to dedicate or prioritize 100% of their beds to people experiencing chronic homelessness. When filling vacant beds, CoC-funded PSH projects must seek referrals only through the Chronic Homeless List maintained in HMIS and should be filtered for prioritization decisions.

This by-name lists use the order of priority established in HUD Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing. Relevant guidance from the Notice appears below, and the full Notice is available at:

<https://www.hudexchange.info/resources/documents/notice-cpd-16-11-prioritizing-persons-experiencing-chronic-homelessness-and-other-vulnerable-homeless-persons-in-psh.pdf>

The notice defines which chronically homeless people get priority access to PSH beds and how to prioritize PSH beds when no chronically homeless persons exist within the geographic area.

Accepting Referrals through a Single Prioritized List for PSH

All CoC-funded PSH projects are required to accept referrals ONLY from the *Chronic Homeless List* that is maintained in HMIS and monitored by the Chronic Homeless Committee, and should be

filtered for prioritization decisions. The single prioritized list is updated frequently to reflect the most up-to-date and real-time data as possible.

Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Dedicated or Prioritized for Occupancy by Persons Experiencing Chronic Homelessness (excerpt from PA-508 Policies and Procedures):

I. The CoC hereby adopts the provisions and requirements set out in HUD Notice CPD-14-012 and updated Notice CPD-16-11 which are to be applicable to all CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness (which includes all PA-508 CoC Program-funded PSH):

(a) First Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
- ii. The CoC or CoC Program recipient has identified the chronically homeless individual or head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs

(b) Second Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness. A chronically homeless individual or head of household, as defined in 24 CFR 578.3, for which both of the following are true:

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,
- ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs.

(c) Third Priority—Chronically Homeless Individuals and Families with the Most Severe Service Needs. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

- i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an

emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and

ii. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs.

(d) Fourth Priority—All Other Chronically Homeless Individuals and Families. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is less than 12 months; and

ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs.

**Please see full CoC Policies and Procedures for the full text of the prioritization policy:
<http://www.uncnepa.org/scranton-lackawanna-county-continuum-of-care/>

DEFINITIONS OF KEY TERMS:

Category 4 – HUD Homeless Definition. HUD defines four categories under which individuals and families may qualify as homeless. Category four is individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

Chronically Homeless. The definition of “chronically homeless” currently in effect for the CoC Program is that which is defined in the CoC Program interim rule at 24 CFR 578.3, which states that a chronically homeless person is:

Chronically Homeless. The definition of “chronically homeless”, as stated in Definition of Chronically Homeless final rule is:

1. **(a)** A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), 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 described in paragraph (a) (i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the

individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;

(b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;

(c) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.

Disabling Condition:

Disabling Condition is defined by HUD as a condition that: (i) Is expected to be long-continuing or of indefinite duration; (ii) Substantially impedes the individual's ability to live independently; (iii) Could be improved by the provision of more suitable housing conditions; and (iv) Is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury; (2) A developmental disability, as defined in this section; or (3) The disease of acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome, including infection with the human immunodeficiency virus (HIV).

2018 Scranton/Lackawanna County (PA-508) Continuum of Care
Scoring Sheet for NEW Supportive Housing Bonus Project Applications

Applicant Organization Name: _____

Proposed Project Name: _____

Project Location (town(s)): _____

Type of Project: ☐ PSH ☐ RRH ☐ RRH

Reviewer's Name (please print): _____

SECTION I: SCORES *(Calculated only for applicants meeting threshold criteria as determined in Section II; enter scores below as indicated in Section III)*

1. Applicant Experience: _____ of 5

2. Project Quality:

a. Prioritizing Need _____ of 15

b. Housing First _____ of 15

c. Mainstream Services _____ of 15

FINAL TOTAL SCORE: _____ of 50

Bonus Points for meeting PA-508 Priority * _____ 10 Points

*PA-508 set this year's housing priority as Rapid ReHousing or Permanent Supportive Housing with at least 50% of funding/beds for individuals. DV Bonus can include TH-RRH.

SECTION II. Threshold Review:

Purpose: to determine whether applicant meets basic eligibility requirements for funding.

| Threshold Review Criteria <i>Projects that do not meet all of the threshold review criteria outlined below will not be further reviewed by the CoC except as noted.</i> | Meets Criteria? Yes or No |
|--|--|
| All projects must operate in the CoCs covered geography. This includes all the cities and towns in Lackawanna County. | |
| All projects must provide either Permanent Supportive Housing or Rapid Re-housing. The DV Bonus can include TH-RRH | |
| <p>The population served must meet program eligibility requirements, including:</p> <ul style="list-style-type: none"> • PSH: <ul style="list-style-type: none"> ○ All projects must dedicate 100% of units to chronically homeless individuals and/or families, as defined by HUD. ○ Project applicants must demonstrate that they will first serve the chronically homeless according to the order of priority established in PA-508 policy per HUD Notice CPD-16-11: <i>Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons</i>. ○ All projects must serve exclusively disabled individuals as defined by HUD • RRH: All projects must serve 100% literally homeless families and/or single adults coming from emergency shelters and/or unsheltered locations or fleeing violence/stalking. <ul style="list-style-type: none"> ○ Persons in transitional housing are not eligible for either project type, even if they met the criteria described above prior to entering the TH program. | |
| <p>Projects can request only these funds for a term of one year:</p> <ul style="list-style-type: none"> ▪ PSH: Leasing, Rental assistance (tenant or project based only) or operating funds ▪ RRH: Rental assistance (tenant based only) ▪ Supportive services | |
| Projects cannot request rental assistance/operating funding in the same project, except in TH-RRH. | |
| Applicant must clearly describe a viable plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant within 6 months of the award. | |
| Project applicants must meet eligibility requirements as described in the CoC program interim rule (i.e., only nonprofit organizations, States, local governments, and instrumentalities of State or local governments are eligible to apply) and be able to provide evidence of eligibility (e.g., nonprofit documentation). | |
| Project applicants must demonstrate the financial and management capacity and experience to carry out the project and administer federal funds (e.g., by demonstrating experience with similar projects and with successful administration of other federal funds.) | |
| Project applicants must be in good standing with HUD, which means that the applicant does not have any open monitoring or audit findings, history of slow expenditure of grant funds-outstanding obligation to HUD that is in arrears or for which a payment schedule has not | |

| Threshold Review Criteria <i>Projects that do not meet all of the threshold review criteria outlined below will not be further reviewed by the CoC except as noted.</i> | Meets Criteria? Yes or No |
|---|--------------------------------------|
| been agreed upon, or history of serving ineligible program participants, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes. | |
| Projects must administer their programs in the most integrated setting appropriate to the needs of qualified homeless people with disabilities (i.e., enabling participants to interact with others without disabilities to the fullest extent possible). | |
| Amenities (e.g., grocery stores, pharmacies, etc.) must be accessible in the community. | |
| Applications must meet HUD's cash match requirements as defined in the CoC Program Interim Rule (i.e., the recipient or subrecipient must match all grant funds with no less than 25% of funds or in-kind contributions from other sources. For PSH projects, the requirement is 25% of the total amount of the grant minus Leasing). | |
| Projects must agree to participate in HMIS (unless a DV program), the annual Homeless PIT count, the relevant Coordinated Entry process and comply with all CoC P+P. | |

Other threshold criteria that the CoC will review prior to submission to HUD:

- Projects must be cost effective (i.e., not deviating substantially from the norm in that locale for the type of structure or kind of activity).

Project meets threshold eligibility criteria?

- ☐ Yes
- ☐ No

Comments: _____

SECTION III: SCORED SECTIONS**Applicant/Sponsor History and Subrecipient Experience (5 Points) – See “Experience of Applicant/Sponsor” Section in Application**

- Applicant and subrecipient(s)’ prior experience in serving homeless people and in providing housing similar to that proposed in the application. **(2.5 points)**
- Satisfactory experience with prior HUD grants and other public contracts, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of APRs on existing grants. **(2.5 points)**

Score: _____

Comments:

Assessment of Project Quality - See “Project Description” Section in Application**A. PSH: Prioritizing Highest Need (15 points)**

Extent to which the applicant:

- ✓ Demonstrates that they will first serve the chronically homeless according to the order of priority established in *Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons*. **(9 points)**
- ✓ Clearly describes the system it currently uses to determine severity of need for the chronically homeless. **(2 points)**
- ✓ Clearly describes its process for prioritizing persons with the most severe needs. **(2 points)**
- ✓ Clearly describes the outreach process used to engage chronically homeless persons living on the streets and in shelter. **(2 points)**

Questions to consider:

- Does the applicant demonstrate a clear understanding of the order of priority established in *Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons*?
- Does the applicant describe a specific plan for how the project will participate in the CoC’s coordinated assessment system?
- Does the applicant describe a plan for an outreach process to engage those persons that is adequate and consistent with the Notice?
- Does the applicant identify specific and appropriate programs (street outreach, shelters, and safe havens) from which it obtains referrals of potential eligible program participants that will ensure the project operates at full capacity and that eligible persons are with the most severe needs are served?

PSH Score: _____

Comments:

B. RRH: Effective outreach system (15 points) - See "Project Description" & "Outreach for Participants" in Application

Extent to which the applicant:

- ✓ Clearly describes a specific plan for how the project will participate in the CoC's coordinated assessment system **(5 points)**
- ✓ Clearly describes the outreach process used to engage homeless persons living on the streets, in shelter, and fleeing or attempting to flee domestic violence. **(5 points)**
- ✓ Clearly describes a plan for obtaining referrals that will ensure the project operates at full capacity and serves only eligible people **(5 points)**

Questions to consider:

- Does the applicant describe a specific and viable plan for how the project will participate in the CoC's coordinated assessment system?
- Does the applicant describe a plan for an outreach process to engage eligible persons that is adequate and, if a PSH program, consistent with Notice CPD=16-011?
- Does the applicant identify specific and appropriate programs (street outreach, shelters) from which it obtains referrals of potential eligible program participants that will ensure the project operates at full capacity and that only eligible persons are served?

RRH Score: _____

Comments:

C. Housing First (15 points). See "Project Experience" & "Project Description" in Application

Extent to which the applicant:

- ✓ Demonstrates significant and long-standing experience in operating a housing first program. **(3 points)**
- ✓ Demonstrates success of the existing housing first program(s) it operates. **(3 points)**
- ✓ Clearly describe a program design that is consistent with a Housing First approach (i.e., A model of housing assistance that is offered without preconditions, such as sobriety or a minimum income threshold, or service participation requirements, and rapid placement and stabilization in permanent housing are primary goals) **(9 points)**

Questions to consider:

- Does the applicant clearly demonstrate a model that offers initial access to housing without preconditions, such as sobriety, income requirements and service participation?
- Does the applicant clearly demonstrate a model in which continuation of housing is not contingent on service participation requirements or compliance?
- Does the applicant clearly demonstrate that rapid placement and stabilization in permanent housing are primary goals of the project?
- Does the applicant clearly describe a project design that is adequate to accomplish those goals?

- Does the applicant clearly demonstrate a model in which participants are expected to comply with a lease agreement and are provided with services and supports to help maintain housing and prevent eviction?
- Does the type, scale, and location of the housing fit the needs of the participants?
- Does the type, scale, and location of the supportive services and mode of transportation to those services fit the needs of the program participants?
- Does the application indicate that program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs?

Housing First Score: _____

Comments:

D. Mainstream Services (15 points). See “Supportive Services” for Participants in Application

Extent to which the applicant:

- ✓ Clearly describes specific activities to identify and enroll all Medicaid-eligible program participants, regardless of whether the project applicant’s state is participating in Medicaid expansion under the Affordable Care Act; **(5 points) AND**
- ✓ Clearly and specifically demonstrates that the project includes Medicaid-financed services, including care management, behavioral health services, or other services important to supporting housing stability. Project applicants may include Medicaid-financed services either by the recipient receiving Medicaid coverage payments for services provided to project participants or through partnerships with one or more Medicaid billable providers (e.g., Federally Qualified Health Centers). No points will be awarded for Medicaid-financed health services provided in a hospital setting **OR**
- ✓ Clearly and specifically demonstrates that there are barriers to including Medicaid-financed services in all or some of the project AND clearly demonstrates that the project leveraged non-Medicaid resources available in the CoC’s geographic area, including mainstream behavioral health system resources such as mental health or substance abuse prevention, Centers of Excellence or state behavioral health system funding, education, vocational training and job-readiness services, TANF, food stamps and mainstream parenting resources to the maximum extent appropriate. **(10 Points)**

Questions to consider:

- Does the specific plan for ensuring program participants will be individually assisted to obtain benefits of the mainstream health, social, and employment programs for which they are eligible meet the needs of the program participants?

Score: _____

Comments:

http://www.uncnepa.org/scranton-lackawanna-county-continuum-of-care/

- Catholic Social Services
- Community Intervention Center
- Saint Joseph's Center
- Women's Resource Center

Continuum of Care Competition Application Materials

FY 2018 Continuum of Care Competition Materials

- PA-508 New Project Application 2018
- CoC Board Notes November 14, 2017
- CoC Board Notes March 13, 2018
- CoC Board Notes May 8, 2018
- CoC Board Notes August 21, 2018
- Project Priority List 2018
- FY2018 Rate, Rank, Review and Selection Criteria
- PA-508 FY2018 CoC Consolidated Application

FY 2017 Continuum of Care Competition Materials

- PA-508 FY2017 CoC Consolidated Application
- Project Priority List FY2017
- PA-508 New Project Application 2017
- 2017 Rating & Ranking Process
- Reallocation Process 2017
- CoC Board Notes June 16, 2017
- CoC Board Notes July 11, 2017
- CoC Board Notes Aug. 21, 2017
- CoC Board Notes Sept. 12, 2017

Homeless Management Information System Materials

- Scranton-Lackawanna County HMIS Policies and Standard Operating Procedures
- HMIS User Policy & Code of Ethics
- Client Consent Release of Information

Friday, September 14, 2018 3:16 PM 9/14/2018

Applicant: Scranton-Lackawanna County CoC

PA-508

Project: PA-508 CoC Registration FY2018

COC_REG_2018_159863

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.

From: [Shannon Quinn-Sheeran](#)
To: [Ackley, Charlene J.](#); [Andy Hurchick](#); [Dorette Harris](#); [Jason Kavulich](#); [Joe Hollander](#); [John Byrd](#); [Kim Cadugan](#); [Michael Hanley](#); [Nancy Lawton](#); [Crystal A. Newcomb](#); [Peg Ruddy](#); [Sr. Susan Hadzima](#); [Steve Nocilla](#); [Kim Cadugan](#); [Sister Therese Marques](#); [Virginia Turano](#); [Peg Kopko](#); [Ann Slack](#); [Ann Marie Witko](#); [Barbara Gomb](#); [Breanna Cawley](#); [Bridget Haggerty](#); [Carol Shoener](#); [Cathmc430](#); [Darian N. Banks](#); [Dawn Edwards](#); [Tom DiMatteo](#); [Gus Fahey](#); [Guzman, Jailyn](#); [Jason Kavulich](#); [jauriemma](#); [Jennifer Palickar](#); [Jerry Hallinan](#); [Jessica Wallo](#); [John Gleason](#); [Joe Hollander](#); [Jim Wansacz](#); [John Byrd](#); [Kathi Krablin](#); [Kevin Cope](#); [Kim Cadugan](#); [Kristen Baer](#); [Lisa Durkin](#); [Lisa Fumanti Francis](#); [Marcie Walker, PhD](#); [Mary Ann Kochanski](#); [Maureen Gray](#); [Meghan Loftus](#); [Michele Albright](#); [Crystal A. Newcomb](#); [Nichole Laiuvara](#); [Steve Nocilla](#); [Patricia Sack](#); [Rachel Schwartz](#); [Ryan Pollock](#); [Ryan Stefanovich](#); [Sarah Stavisky](#); [Shelton Miles](#); [Shelton Miles](#); [Stephanie Nichols](#); [Sr. Ann Walsh](#); [Sr. Susan Hadzima](#); [Stephanie Miller](#); [Kim Cadugan](#); [Tina Knorr](#)
Cc: [Marty Fotta](#)
Subject: FY2018 Continuum of Care Consolidated Application
Date: Friday, September 14, 2018 4:08:35 PM

Hi All,

Below please find a link to UNC's Continuum of Care page, where you will find all materials connected to this year's Continuum of Care competition for your weekend reading pleasure. The community is applying for over \$3,000,000 this year in homeless funding. Completed application is due Tuesday, September 18th.

<http://www.uncnepa.org/scranton-lackawanna-county-continuum-of-care/>

Please let me know if you have any questions or comments. Have a great weekend!

Best,

Shannon

Shannon M. Quinn-Sheeran
Continuum of Care Director
United Neighborhood Centers
777 Keystone Industrial Park Road
Throop, PA 18512
570-346-0759, ext. 108

The Scranton Times (Under act P.L. 877 No 160. July 9,1976)
Commonwealth of Pennsylvania, County of Lackawanna

UNITED NEIGHBORHOOD CENTERS
777 KEYSTONE INDUSTRIAL PARK R
THROOP PA 18512

Account # 65748
Order # 82231747
Ad Price: 146.50

LEGAL NOTICE SCRANTON/LAC

Ann Marie Fortese

Being duly sworn according to law deposes and says that (s)he is Billing clerk for The Scranton Times, owner and publisher of The Scranton Times, a newspaper of general circulation, established in 1870, published in the city of Scranton, county and state aforesaid, and that the printed notice or publication hereto attached is exactly as printed in the regular editions of the said newspaper on the following dates:

07/13/2018

Affiant further deposes and says that neither the affiant nor The Scranton Times is interested in the subject matter of the aforesaid notice or advertisement and that all allegations in the foregoing statement as time, place and character or publication are true.

Sworn and subscribed to before me
this 13th day of July A.D., 2018

Sharon Venturi
(Notary Public)

Commonwealth of Pennsylvania - Notary Seal
Sharon Venturi, Notary Public
Lackawanna County
My commission expires February 12, 2022
Commission number 1254228
Member, Pennsylvania Association of Notaries

Deadline listed as August 10, 2018

LEGAL NOTICE

Scranton/Lackawanna CoC is currently soliciting applications for Rapid Re-Housing projects for homeless individuals AND families (priority will be given to projects serving at least 50% individuals) and Permanent Supportive Housing projects for chronically homeless individuals. Funding will come from the US Department of Housing and Urban Development, Office of Community Planning and Development. Information on the CoC Program can be found at <https://www.hudexchange.info/program/coc/>. Applications are available at <http://www.uncnepa.org/scranton-lackawanna-county-continuum-of-care/> under PA-508 New Project Application 2018, and are due at close of business Friday, August 10th. See application for all requirements. For questions contact squinn-sheeran@uncnepa.org or 570-346-0759, ext. 108.

THE SCRANTON TIMES
DBA THE TIMES TRIBUNE
PO BOX 3478
SCRANTON PA 18505-0478
(570)348-9183
Fax (570)348-9149

ORDER CONFIRMATION

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Acct #: 65748 Ad #: 82231747 Status: New CHOLD
UNITED NEIGHBORHOOD CENTERS Start: 07/13/2018 Stop: 07/13/2018
777 KEYSTONE INDUSTRIAL PARK ROAD Times Ord: 1 Times Run: ***
THROOP PA 18512 TSLEG 1.00 X 30.00 Words: 103
Total TSLEG 30.00
Class: X1010 LEGALS & PUBLIC NOTICES
Rate: CLL Cost: 146.50
Affidavits: 1
Contact: BOB OBRIEN Ad Descrpt: LEGAL NOTICE SCRANTON/LAC
Phone: (570)346-0759ext Given by: *
Fax#: (570)207-4242 P.O. #:
Email: dconnors@uncnepa.org (Clair Created: svent 07/12/18 12:02
Agency: Last Changed: svent 07/12/18 12:26

PUB ZONE EDT TP RUN DATES
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STIN INTR 3 S 07/13

AUTHORIZATION

Under this agreement rates are subject to change with 30 days notice. In the event of a cancellation before schedule completion, I understand that the rate charged will be based upon the rate for the number of insertions used.

Name (print or type)

Name (signature)

LEGAL NOTICE

Scranton/Lackawanna CoC is currently soliciting applications for Rapid Re-Housing projects for homeless individuals AND families (priority will be given to projects serving at least 50% individuals) and Permanent Supportive Housing projects for chronically homeless individuals. Funding will come from the US Department of Housing and Urban Development, Office of Community Planning and Development. Information on the CoC Program can be found at <https://www.hudexchange.info/program/coc/>. Applications are available at

<http://www.uncnepa.org/scranton-lackawanna-county-continuum-of-care/>

under PA-508 New Project Application 2018, and are due at close of business Friday, August 10th. See application for all requirements. For questions contact squinn-sheeran@uncnepa.org or 570-346-0759, ext. 108.

Renewal Project Evaluation Tool

| Question | Value |
|--|-------|
| Organization | |
| Project Name | |
| Total number of Adults (Q7) | |
| Total number of Clients (Q7) | |
| Total number of Households Served (Q9) | |
| Persons Proposed to Serve (Grant Application) | |
| Total number of leavers (Q7) | |
| Total HUD Award | |
| Total Project Budget (including all cash match) | |
| Continuum of Care Meetings | |
| HMIS Subcommittee Meetings | |
| Discharge Planning Subcommittee Meetings | |
| Education Subcommittee Meetings | |
| Chronic Homeless Subcommittee Meetings | |
| Coordinated Assessment Subcommittee Meetings | |
| Total Continuum of Care Meetings | |
| Total Program Enrollments | |
| Total Leasing amount for PSH projects only | |
| Total Households at single point in time proposed to serve | |
| Total Stayers | |

Renewal Project Eval. p.2

| Question # | Section | Data Title | Answer |
|------------|--|--|-----------|
| 6 | Data Quality | DoB # of Missing Data (Q06A) | |
| 7 | Data Quality | Residence Prior to Entry # of Missing Data (Q15) | |
| 8 | Data Quality | Substance Abuse (at Entry) # of Missing Data (Q13A) | |
| 9 | Data Quality | Domestic Violence (at Entry) # of Missing Data (Q14a) | |
| 10 | Data Quality | Destination # of Missing Data (Q6C) | |
| 11 | Housing First Principles | Average Number of Households Served (Q8b) | |
| 12 | Housing First Principles | Domestic Violence Experience (Adults) (Q14b) | |
| 13 | Housing First Principles | Persons with Physical & Mental Health Number of Conditions at Start (Adults) (Q13a2) | |
| 14 | Housing First Principles | | |
| 15 | Housing First Principles | | |
| 16 | Housing First Principles | Residence Prior to Entry - Homeless Situations (Number of Heads of Household) (Q15) | |
| 17 | Adults who are connected with mainstream benefits | | |
| 18 | Adults who are connected with non-cash benefits(excluding health insurance) | # of Non-Cash Benefit Sources - leavers & Stayers (1 + Sources) (Q20b) | |
| 19 | Adults who increased earned income | Earned income measure (Actual # of persons who accomplished this measure) (Q19a3) | |
| 20 | Adults who maintained or increased other income | Other (non-earned) income measure (Actual # of persons who accomplished this measure) (Q19a3) | |
| 21 | Clients who remained in program or exited the program to a HUD defined permanent destination | Housing stability measure - achieving sufficient enough safety level to discharge to PH (Actual # of persons who accomplished this measure) (Q23a + Q23b + Q05a) | |
| 22 | Cost Effectiveness | Amount of funds the project returned at end of most recent grant term (Q28)) | |
| 23 | Cost Effectiveness | Expenditure per Household (Total Project Funds minus Leasing)PSH for Individuals only | |
| 24 | Cost Effectiveness | Expenditure per Permanent Housing exit (not scored this year) | |
| 25 | Continuum of Care Participation | Continuum of Care Meetings Attended by Organization Personnel | |
| 26 | Continuum of Care Participation | HMIS Subcommittee Meetings Attended by Organization Personnel | |
| 27 | Continuum of Care Participation | Discharge Planning Subcommittee Meetings Attended by Organization Personnel | |
| 28 | Continuum of Care Participation | Education Subcommittee Meetings Attended by Organization Personnel | |
| 29 | Continuum of Care Participation | Chronic Homeless Subcommittee Meetings Attended by Organization Personnel | |
| 30 | Continuum of Care Participation | Coordinated Assessment Subcommittee Meetings Attended by Organization Personnel | |
| 31 | Coordinated Entry Implementation | Coordinated entry records exceeds number of agency program enrollments | |
| 32 | Coordinated Entry Implementation | All entries into the program were the highest priority(not scored this year) | |
| 33 | Client Satisfaction | Clients participating in survey | |
| 34 | | Date of Materials Submission | 5/18/2018 |

Renewal Project Evaluation Tool, p.3

| Question # | Section | Data Title | Calculation Explanation | Calculation | Points |
|--------------------------|--|---|--|-------------|---------|
| 1 & 6 | Data Quality | DoB # | Q06a Missing Data / Total Clients | #DIV/0! | #DIV/0! |
| 2 & 7 | Data Quality | Residence Prior to Entry # | Q15 Missing Data / Total Clients | #DIV/0! | #DIV/0! |
| 3 & 8 | Data Quality | Substance Abuse (at Entry) # | Q13a2 Missing Data / Total Clients | #DIV/0! | #DIV/0! |
| 4 & 9 | Data Quality | Domestic Violence (at Entry) # | Q14a Missing Data / Total Clients | #DIV/0! | #DIV/0! |
| 5 & 10 | Data Quality | Destination # of Missing (Q06c) | Q06c Missing Data / Total Clients | #DIV/0! | #DIV/0! |
| 11 | Housing First Principles | Average households served during operating year | Q08b / Households Proposed to Serve | #DIV/0! | #DIV/0! |
| 12, 13, & 14 | Housing First Principles | Domestic Violence, Physical, Mental Health Conditions | (Q14b + Q13a2) / Total Adults | #DIV/0! | #DIV/0! |
| 16 | Housing First Principles | Residence Prior to Entry - Homeless Situations (Number of Adult Clients) | Q20a1 / Total Adults | #DIV/0! | #DIV/0! |
| 17 & 18 | Adults who are connected with non-cash benefits (excluding health insurance) | # of Non-Cash Benefit Sources - Leavers & Stayers (1 + Sources) | Q20b / Total Adults | #DIV/0! | #DIV/0! |
| 19 | Adults who increased earned income | Earned income measure (Actual # of persons who accomplished this measure) (Q19a3) | Q19a3 / Total Adults | #DIV/0! | #DIV/0! |
| 20 | Adults who maintained or increased other income | Other income measure (Actual # of persons who accomplished this measure) (Q19a3) | Q19a3 / Total Adults | #DIV/0! | #DIV/0! |
| 21 | Clients who remained in program or exited the program to a HUD defined permanent destination | Housing stability measure - achieved sufficient level of safety to exit to PH (Actual # of persons who accomplished this measure) (Q23a & Q23b) | Q23a+23b+Stayers / Total Clients | #DIV/0! | #DIV/0! |
| | Leavers who exited to shelter, street or unknown | (Q23a & 23b) | Q23a+23b / Total Leavers | | |
| 22 | Cost Effectiveness | Amount of funds the project returned at end of grant term (Q28) | Q28(Total Award/Total Expenditures) | #DIV/0! | #DIV/0! |
| 23 | Cost Effectiveness | Expenditure per Household (Total Project Funds) | Total award + cash match-Leasing/avg # HH served | | |
| 24 | Cost Effectiveness | Expenditure per Permanent Housing exit | | | 0 |
| 25, 26, 27, 28, 29, & 30 | Continuum of Care Participation | Continuum of Care Meetings Total Participation | All Meetings Summed / Total Meetings | #DIV/0! | #DIV/0! |
| 32 | Coordinated Entry/Chronic Homeless Adherence | All entries into the program were taken from Chronic Homeless List | Total # entries from CH list/Total # entries during operating year | | 0 |
| | Length of Stay (RRH Only) | Q22a1 | Leavers under 12 months/Total Leavers | 0% | 0 |
| 33 | Client Satisfaction | At least 50% of clients participate in survey | Clients participating in survey / Total Adults | #DIV/0! | #DIV/0! |
| 34 | | Adherence to Project Ranking Deadline | Submission Date <= 04/25/2017 | True | 0 |

Total Ranking Score #DIV/0!

2018 Continuum of Care Program Evaluation Scoring Rubric

Data for this evaluation process will be acquired from program APRs either in SAGE or in HMIS, information from committee chairs, project applications and agency's solicited information. Scoring information will be used for rating and ranking Continuum of Care projects.

Data Quality

1 thru 5. This set of questions are Universal Data Elements or Program Specific Data Elements which are required across all pertinent programs in the Scranton / Lackawanna County Continuum of Care. All questions in this section are worth one point. Data elements are as follows: Date of Birth, Residence Prior to Entry, Substance Abuse at Entry, Domestic Violence at Entry, and Destination at Exit.

1 through 5.

| Percentage | Points |
|--------------------------|--------|
| 0 – 5% missing data | 1 |
| 6% and more missing data | 0 |

Utilization of Beds and Units

6. Occupancy rate based on quarterly unit utilization

| Percentage | Points |
|---------------|--------|
| 90% and above | 5 |
| 75% - 89% | 4 |
| 60% - 74% | 3 |
| 50% - 59% | 2 |
| 49% and below | 0 |

Housing First

7. Number of Adults with Barriers or Adult Survivors of DV

| Percentage | Points |
|--------------|--------|
| 90% or above | 5 |
| 76% – 89% | 4 |
| 61% – 75% | 3 |
| 46% - 60% | 2 |
| 30% - 45% | 1 |
| 29% or below | 0 |

8. Residence Prior to Project Entry –At Least 1 Adult from HUD-defined Literal Homelessness and/or Fleeing or attempting to flee DV/sexual assault

| Percentage | Points |
|---------------|--------|
| 90% and above | 10 |
| 85% - 89% | 9 |
| 80% - 84% | 8 |
| 75% - 79% | 7 |
| 70% - 74% | 6 |
| 65% - 69% | 5 |
| 60% - 64 | 4 |
| 59% and below | 0 |

Income and Employment

9. Adults who are connected with non-cash benefits excluding health insurance

| Percentage | Points |
|---------------|--------|
| 95% and above | 10 |
| 85% - 94% | 8 |
| 70% - 84% | 6 |
| 55% - 69% | 4 |
| 40% - 54% | 2 |
| 25% - 39% | 1 |
| 24% and below | 0 |

10. Adults who increased EARNED INCOME from entry to exit/follow-up (leavers & stayers)

HUD has granted Safe Haven projects exempt from this metric on the Annual Performance Report and will therefore not have it included in the final calculated percentage of possible available points.

| PSH Percentage | RRH Percentage | Points |
|----------------|----------------|--------|
| 25% and above | 40% and above | 10 |
| 20% - 24% | 30% - 39% | 8 |
| 15% - 19% | 25% - 29% | 6 |
| 10% - 14% | 15% - 24% | 4 |
| 5% - 9% | 10% - 14% | 2 |
| 4% and below | 9% and below | 0 |

11. Adults who maintained or increased OTHER INCOME (non-earned) from entry to exit/follow-up (leavers and stayers)

| PSH & SH Percentage | RRH Percentage | Points |
|---------------------|----------------|--------|
| 65% and above | 35% | 10 |
| 55% - 64% | | 8 |
| 45% - 54% | 25% | 7 |
| 35% - 44% | | 6 |
| 25% - 34% | 15 | 5 |
| 15% - 24% | | 4 |
| 5% - 14% | 10 | 2 |
| Below 4% | | 0 |

Housing Stability

12. Clients who remained in a program or exited the program to a HUD defined permanent destination

| Percentage | Points |
|---------------|--------|
| 90% and above | 10 |
| 75% - 89% | 8 |
| 65% - 74% | 6 |
| 60% - 64% | 4 |
| 50% - 59% | 2 |
| 49% and below | 0 |

13. Leavers who exited to shelter/streets or unknown

| Percentage | Points |
|--------------|--------|
| 10% or below | 10 |
| 11% - 20% | 8 |
| 21 - 30% | 6 |
| 31% or above | 0 |

Budget

14. Amount of funds the project returned at end of grant term

| Percentage | Points |
|--------------------------|--------|
| 0 – 2.5% return of funds | 10 |
| 2.6 – 5% return of funds | 8 |
| 6 – 7.5% return of funds | 6 |
| 7.6 – 10 return of funds | 4 |
| 11% and above | 0 |

Cost Effectiveness

15. Expenditure per Household

This year the information will be gathered but not scored. Metrics may be put in place to score programs in a way that encourages programs to be cost effective, but not so much so that they are not able to provide effective supportive services for program participants.

| Cost per Household | Points |
|--------------------|--------|
| | 5 |
| | 4 |
| | 3 |
| | 2 |
| | 0 |

16. Expenditure per PH Exit

The data for this metric will be collected and calculated, but it will not be scored this year. It is a potential new metric for next year.

| Cost per Household | Points |
|--------------------|--------|
| | 5 |
| | 4 |
| | 3 |
| | 2 |
| | 0 |

CoC Participation

17. CoC Meeting & Subcommittee Attendance Total

This metric measures engagement between grant recipient organizations with the Scranton / Lackawanna County Continuum of Care.

| Percentage | Points |
|------------------------|--------|
| Participate 91% - 100% | 5 |
| Participate 75% - 90% | 2 |
| Participate 50% - 74% | 1 |
| Participate 0 – 49% | 0 |

Coordinated Entry

19. PSH programs only: Program Entrants were taken from the Chronic Homeless Program –

| Percent | Points |
|--------------|--------|
| 90% or above | 5 |
| 76% – 89% | 4 |
| 61% – 75% | 3 |
| 46% - 60% | 2 |
| 30% - 45% | 1 |
| 29% or below | 0 |

Length of Stay

20. RRH programs only: Length of Stay for participants is 12 months or less

| Percent | Points |
|---------------|--------|
| 90% or above | 5 |
| 75% - 89% | 3 |
| 50% - 75% | 1 |
| 49% and below | 0 |

Client Satisfaction

20. Client Satisfaction Surveys Administered

| Percent | Points |
|---------|--------|
| 50-100% | 5 |
| 1-49% | 0 |

Penalties

21. Adherence to Deadline(s)

For this metric, if a deadline is missed, the 10 points are deducted from the total score.

INSTRUCTIONS

This is the application for Scranton/Lackawanna County Continuum of Care (PA-508)) permanent housing funds, including both permanent supportive housing and rapid re-housing. Projects may be funded through the permanent housing bonus. HUD has not yet announced the amount of funds that will be available.

The following types of new projects will be considered:

- New permanent supportive housing (PSH) projects that will serve 100 percent chronically homeless individuals experiencing chronic homelessness coming from places not meant for human habitation, safe havens, or emergency shelters.
- New rapid rehousing (RRH) projects that will serve homeless individuals AND families, including youth, coming directly from the streets or emergency shelters, or meeting the criteria of paragraph (4) of the HUD definition of homeless. (See Appendix for Definition of Category 4 - fleeing domestic violence, dating violence, sexual assault, stalking or other dangerous situations).

New projects to be included in the PA-508 2018 CoC Application to HUD will be selected by an independent scoring committee. Priority will be given to those projects serving 50% or more individuals. Final decisions regarding awards will be made by HUD via the national competition.

All applications will be reviewed to ensure they meet HUD's Threshold Standards. Applications that do not meet these standards will not be further reviewed.

All applications are due by August 10, 2018 and should be sent to: squinn-sheeran@uncnepa.org.

Project Requirement and Priorities:

- Eligible activities/projects for the Funds:

- All projects must be Permanent Supportive Housing or Rapid Re-Housing with TH-PH-RRH allowable for DV Bonus
- Projects can request funds for:
 - PSH: Leasing (tenant or project based only), operating funds, supportive services, admin
 - RRH: Rental assistance (tenant based only), supportive services, admin
 - TH-PH RRH for DV Bonus only
- Term – 1 year
- Eligible Supportive Services Costs are limited to the categories included in Section 17. Budget Detail.
- Operating funds or project based rental assistance may be used for units owned by the applicant organization. These must be units newly designated to serve homeless people and ready for occupancy no later than 6 months after the award of funds. Awards are anticipated to occur in approximately January 2019. Projects must provide a deed demonstrating site control for a building or units where evidence of site control exceeds the requested grant term.
- Projects applying for RRH should include at least \$4,000 per household served at a point in time for supportive services. For example, if the project will support 20 households at a given point in time, the annual supportive services budget should be at least \$80,000.
- Projects applying for PSH should include at least \$5,000 per household annually for supportive services.
- Projects cannot request rental assistance and operating funding in the same project.
- Projects must agree to enter client data into the PA-508 HMIS (with the exception of Victims Services Providers as they are prohibited from doing so by law. VSPs must enter data into a comparable data base), participate in the annual homeless count, participate in and accept referrals only from the applicable **Coordinated Assessment** and comply with all other HUD requirements and PA-508 CoC Policies.
- Applications must demonstrate:
 - A plan for **rapid implementation** of the program; the project narrative must document how the project will be ready to begin housing the first program participant within 6 months of the award (i.e., by no later than July 2019).
 - A connection to **mainstream service systems**, specifically:
 - 1) that services are in place to identify and enroll all Medicaid-eligible program participants and to connect Medicaid-enrolled participants to Medicaid-financed services, including behavioral health services, or other services important to supporting housing stability.
 - 2) that services are in place to connect participants to mainstream resources, including benefits, health insurance and employment services
 - 3) for stable PSH participants, that the project will assess participants' interest in moving on to independent affordable housing and offer assistance, to help tenants who would like to move on to explore independent housing options and apply for mainstream affordable housing opportunities.
 - Experience in operating a successful **housing first** program and a program design that meets the definition of Housing First as adopted by the PA-508 CoC and the additional housing first principles outlined in the Appendix.
 - A plan for outreach to the eligible population (see below).

- That they meet HUD’s match requirements. See Section #17, Sources of Match.
- Eligible localities:
 - Projects must be located within Lackawanna County, PA.
- Eligible populations:
 - PSH:
 - All projects must dedicate 100% of units to chronically homeless individuals.
 - Project applicants must demonstrate that they will first serve the chronically homeless and then prioritize as outlined in *Scranton/Lackawanna County Policies and Procedures: Adoption of HUD Notice CPD 16-11* (See Appendix).
 - Disabilities: All projects must serve exclusively disabled individuals as defined by HUD (See Appendix)
 - RRH: All projects must serve 100% literally homeless families and/or single adults coming directly from emergency shelters and/or unsheltered locations OR category 4: fleeing domestic violence, dating violence, sexual assault, stalking or other dangerous situations.
- Eligible applicants:
 - Eligible project applicants for the CoC Program Competition are nonprofit organizations, States, local governments, and instrumentalities of State and local governments, and public housing agencies.
 - Applications shall only be considered from project applicants in good standing with HUD, which means that the applicant does not have any open monitoring or audit findings, history of slow expenditure of grant funds, outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon, or history of serving ineligible program participants, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes.

New Project Application 2018 Scranton/Lackawanna County Continuum of Care

- Applications are due by close of business on August 10, 2018 and should be sent to: squinn-sheeran@uncnepa.org
- Please contact squinn-sheeran@uncnepa.org for questions about the form or process.
- Please save your document with the following naming convention:
 <Agency name –Program name-NEW PA508-18>.
 Example: ABC Services-Home to Stay-NEW PA508-18.doc
- The CoC reserves the right not to review late or incomplete applications or projects that do not meet the HUD threshold or Project Requirements and Priorities described above.

1. Project Applicant Information:

- Name of Organization: _____
- Organization Type
☐ Units of Local Government ☐ Non-profit 501(c)(3) ☐ PHA
☐ State Government ☐ Other: Describe _____
- DUNS Number: _____

2. Sub-Recipient Organization (if applicable):

- Name of Organization: _____
- Organization Type
☐ Units of Local Government ☐ Non-profit 501(c)(3) ☐ PHA
☐ State Government ☐ Other: Describe _____
- DUNS Number: _____

3. Contact person for this application:

- Name: _____ Title: _____
- Phone: _____
- Email: _____

4. Project Location (town(s)): _____

5. Type of Project: ☐ PSH ☐ RRH

6. Proposed Project Budget

| Activities | Total Assistance Requested |
|---|----------------------------|
| 1. Leasing | |
| 2. Rental Assistance | |
| Indicate Type of RA: <input type="checkbox"/> TBRA (required for RRH) <input type="checkbox"/> PBRA | |
| 3. Supportive Services | |
| 4. Operations | |
| 5. Administrative costs (Up to 7% of amount requested) | |
| 6. Sub-total Request (Add lines 1-5) | |
| 7. Cash Match | |
| 8. In-kind Match | |

| | |
|---|--|
| 9. Total Match (Add lines 6&7) – must equal at least 25% of line #6 for RRH projects or 25% of (line #6 minus line #1 (Leasing)) for PSH projects | |
| 10. Total Budget (Add lines 6 & 9) | |

7. Housing Type

- a. Type: ☐ Single Site ☐ Scatter Site
- b. Total Number of Units: _____
- c. Total Number of Beds: _____

8. A. Population to be Served in the Project (Point-in-Time)

| Households | HH's with At Least One Adult and One Child | Adult Households without Children | Households with Only Children | Total |
|----------------------------|--|-----------------------------------|-------------------------------|-------|
| Total Number of Households | | | | |

B. Population to be Served in the Project (Annually – over the course of a year)

(Not applicable for PSH - Applies to RRH only)

| Households | HH's with At Least One Adult and One Child | Adult Households without Children | Households with Only Children | Total |
|----------------------------|--|-----------------------------------|-------------------------------|-------|
| Total Number of Households | | | | |

9. Experience of Applicant/Sponsor

| |
|---|
| <p>A. Describe the experience of the project applicant, sub-recipients (if applicable), and partner organizations (e.g., key contractors, service providers if applicable) as it relates to providing supportive services and housing for homeless persons, and carrying out the activities of the project. Be sure to provide concrete examples that illustrate 1) experience/expertise with renting units, operating rental assistance, and providing supportive services similar to the activities proposed in the applications 2) working with and addressing the target population's identified housing and service needs. Specifically describe your experience with:</p> <ul style="list-style-type: none">• the Housing First model• delivering or securing Medicaid funded services for participants in the agency's programs• linking participants to mainstream resources, including benefits, health insurance, employments services, and mainstream affordable housing• assessing stable participants' interest in moving on to independent affordable housing and offering assistance, as indicated, to help tenants who would like to move on to explore independent housing options and apply for mainstream affordable housing opportunities (PSH ONLY) |
| <p>B. Describe experience of project applicant and partners (if applicable) relating to serving the eligible population you are proposing to serve.</p> |
| <p>C. Describe the basic organization and management structure of the applicant and subrecipients (if any). Include description of internal and external coordination, structures for managing basic organization operations, and an adequate financial accounting system that will be used to administer the grant.</p> |
| <p>D. Describe the experience of the applicant and potential subrecipients (if any), in effectively utilizing federal funds and performing the activities proposed in the application, given funding and time limitations.</p> |
| <p>E. Describe the experience of the applicant and potential subrecipients (if any) in identifying and securing matching funds and leveraging other Federal, State, local, and private sector funds. If the applicant and subrecipient have no experience, indicate "No experience leveraging other Federal, State, local or private sector funds."</p> |

| |
|---|
| <p>F. Have any of your agency's HUD funded programs (including ESG) received a HUD audit in the last 12 months? yes <input type="checkbox"/> no <input type="checkbox"/></p> <p>If yes, were there any findings from the audit? yes <input type="checkbox"/> no <input type="checkbox"/></p> <p>If there were findings, please describe the findings and your agency's corrective actions to satisfy the findings and <u>attach a copy of the corrective action plan that you submitted to HUD.</u></p> |
| <p>G. Are there any unresolved monitoring or audit findings for any HUD grants (including ESG) operated by the applicant or potential subrecipients (if any)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <ul style="list-style-type: none"> • If Yes, describe the details of unresolved monitoring or audit findings and steps that will be taken to resolve. |
| <p>H. Have you returned any funds to HUD on any existing grants in the last two years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <ul style="list-style-type: none"> • If yes, how much has been returned? • What is the reason that the funds have been returned? • What actions are you taking to ensure full spending? |
| <p>I. Do you have any outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <ul style="list-style-type: none"> • If yes, how much is owed? • What is the reason for the obligation to HUD? • What is preventing establishing a payment schedule? |
| <p>J. Have you consistently drawn down funds at least quarterly on all HUD CoC grants in the last two years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <ul style="list-style-type: none"> • What is the reason that the funds have not been drawn down? • What actions are you taking to ensure timely draw down? |
| <p>K. Have you submitted on time Annual Progress Reports (APRs) for all HUD CoC grants in the last two years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <ul style="list-style-type: none"> • What is the reason that APRs were late? • What actions are you taking to ensure timely submission? |

10. Project Description

A. Provide a description that addresses the entire scope of the proposed project. The project description should be complete and concise. It must address the entire scope of the project, including a clear picture of the community/target population(s) to be served, the plan for addressing the identified needs/issues of the CoC community/target population(s), projected outcome(s), and any coordination with other source(s)/partner(s). The description must be consistent with other parts of this application and identify the target population including the number of single adults and the number of families with children to be served when the project is at full capacity.

- Address and location of units
- Type and number of units – scatter site or single site, single or multi-family homes, etc.
- The specific services that will be provided and outreach methods to be used to serve the long-term homeless population
- Projected outcomes
- Coordination with partners
- Project timeline – when units will be developed or leased-up
- HMIS implementation
- How the project will leverage or deliver Medicaid and other mainstream services to participants

B. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.

| |
|--|
| <p>C. Will the project receive referrals only through the local Coordinated Entry Network?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If No, please explain.</p> |
| <p>D. PSH Only: Describe recipient/subrecipient capacity for assessing need, prioritizing persons with the most severe needs and outreaching to identify chronically homeless people and the specific plan for how the project will first serve the chronically homeless according to the order of priority established in HUD Notice CPD 16-11 (<i>SEE APPENDIX</i>).</p> |
| <p>E. Describe recipient/subrecipient experience with and a description of the program design for implementing Housing First.</p> |
| <p>F. Will participants be required to live in a particular structure, unit, or locality, at some point during the period of participation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will more than 16 persons reside in a structure? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please answer the following questions</p> <ul style="list-style-type: none"> • Describe local market conditions that necessitate a project of this size. • Describe how the project will be integrated into the neighborhood. |
| <p>G. If the project involves capital development, please describe the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property.</p> |

11. Supportive Services for Participants

A. For projects serving **families with dependent children and single adults 24 years old or younger**, does the applicant/sponsor have policies and practices that are consistent with, and do not restrict the exercise of rights provided by the education subtitle of the McKinney-Vento Act, as updated by the Every Student Succeeds Act, and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness?

☐ Yes

☐ No

B. For projects serving **families with dependent children and single adults 24 years old or younger**, does the applicant/sponsor have a designated staff person responsible for ensuring that children are enrolled in school and connected to the appropriate services within the community, including early childhood education programs such as Head Start, Part C of the Individuals with Disabilities Act, and McKinney-Vento education services?

☐ Yes

☐ No

C. Describe how participants will be assisted to obtain and remain in permanent housing. The description must be consistent with other parts of this application and identify:

- Plan to move eligible participants into the project
- Needs of tenants and plan for addressing those needs including but not limited to: health, behavioral health, education, employment, life skills and child care services
- How units will be identified and rent reasonableness will be determined

D. Describe how participants will be assisted to increase employment and/or income and to maximize their ability to live independently. The description must be consistent with other parts of this application and identify:

- Needs of target population and services required
- How tenants will access these services
- Coordination with other providers and mainstream systems
- How tenants will access SSI/SSDI and other mainstream benefits
- Unique needs of youth (if applicable)

- E. Describe how you will coordinate effort with and connect tenants to mainstream employment organizations. These are organizations that provide job readiness, job training, and/or employment opportunities for all individuals and not exclusively for homeless individuals (e.g. Labor Ready).
- F. Please identify whether the project will include the following activities:
- Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? ☐Yes ☐No
 - Regular follow-ups with participants to ensure mainstream benefits are received and renewed? ☐Yes ☐No
 - Will project participants have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency? ☐Yes ☐No
 - Indicate the last SOAR training date for the staff person providing the technical assistance: _____

12. Supportive Services Type and Frequency:

A. For all supportive services available to participants, indicate who will provide, how they will be accessed and how often they will be provided **regardless of the resources that will be used to pay for the services.**

For Provider, indicate: "Applicant" if the applicant will provide the service directly; "Subrecipient" if a subrecipient will provide the service directly; "Partner" if an organization that is not a subrecipient of project funds but with whom a formal agreement or memorandum of understanding (MOU) has been signed will provide the service directly; or, "Non-Partner" to if a specific organization with whom no formal agreement has been established regularly provides the service to clients.

| Supportive Services | Provider | Frequency – select one per service type | | | | |
|-------------------------------------|----------|---|--------|------------|---------|-----|
| | | Daily | Weekly | Bi-monthly | Monthly | N/A |
| Assessment of Service Needs | | | | | | |
| Assistance with Moving Costs | | | | | | |
| Case Management | | | | | | |
| Child Care | | | | | | |
| Education Services | | | | | | |
| Employment Assistance/Job Training | | | | | | |
| Food | | | | | | |
| Housing Search/ Counseling Services | | | | | | |
| Legal Services | | | | | | |
| Life Skills | | | | | | |
| Mental Health Services | | | | | | |
| Outpatient Health Services | | | | | | |
| Outreach Services | | | | | | |
| Substance Abuse Treatment Services | | | | | | |
| Transportation | | | | | | |
| Utility Deposits | | | | | | |

B. How accessible are basic community amenities (e.g. medical facilities, grocery store, recreation facilities, schools, etc.) to the proposed project?

- ☐ Yes, very accessible
- ☐ Somewhat accessible
- ☐ Not accessible

13. Population Characteristics

| Population Characteristics | Persons in HH's with At Least One Adult and One Child | Adult Persons in Households without Children | Persons in Households with Only Children | Total |
|--|---|--|--|-------|
| Disabled Adults over age 24 | | | | |
| Non-disabled Adults over age 24 | | | | |
| Disabled Adults ages 18-24 | | | | |
| Non-disabled Adults ages 18-24 | | | | |
| Accompanied Disabled Children under age 18 | | | | |
| Accompanied Non-disabled Children under age 18 | | | | |
| Unaccompanied Disabled Children under age 18 | | | | |
| Unaccompanied Non-disabled Children under 18 | | | | |

Totals from Above:

| | | | | |
|------------------------------------|--|--|--|--|
| Total Number of Adults over age 24 | | | | |
| Total Number of Adults ages 18-24 | | | | |
| Total Number of Children under 18 | | | | |
| Total Persons | | | | |

14. Subpopulations – For PSH, each person must be listed as chronically homeless and at least one adult in each household must be listed as disabled. DV is not considered a disability by HUD.

Households with At Least One Adult and One Child

| | Chron. Homlss Non- Vets | Chron. Homlss Vets | Chronic Subs. Abuse | Persons with HIV/ AIDS | Severely Mentally Ill | Dom. Violenc e | Phys. Disab | Dvlpmt Disab | Not Other-wise Represented |
|--|----------------------------------|--------------------------|---------------------------|---------------------------------|-----------------------------|----------------------|----------------|-----------------|----------------------------------|
| Disabled Adults over age 24 | | | | | | | | | |
| Non-disabled Adults over age 24 | | | | | | | | | |
| Disabled Adults ages 18-24 | | | | | | | | | |
| Non-disabled Adults ages 18-24 | | | | | | | | | |
| Disabled Children under age 18 | | | | | | | | | |
| Non-disabled Children under age 18 | | | | | | | | | |
| Total Persons | | | | | | | | | |

Adult Households without Children

| | Chron. Homlss Non- Vets | Chron. Homlss Vets | Chronic Subs. Abuse | Persons with HIV/ AIDS | Severely Mentally Ill | Victims of Dom. Viol. | Phys. Disab | Dvlpmt Disab | Not Other-wise Represented |
|---------------------------------------|----------------------------------|--------------------------|---------------------------|---------------------------------|-----------------------------|--------------------------------|----------------|-----------------|----------------------------------|
| Disabled Adults over age 24 | | | | | | | | | |
| Non-disabled Adults over age 24 | | | | | | | | | |
| Disabled Adults ages 18-24 | | | | | | | | | |
| Non-disabled Adults ages 18- 24 | | | | | | | | | |
| Total Persons | | | | | | | | | |

Households with Only Children

| | Chron. Homlss Non- Vets | Chron. Homlss Vets | Chroni c Subs. Abuse | Persons with HIV/ AIDS | Severely Mentally Ill | Victims of Dom. Viol. | Phys. Disab | Dvlpmt Disab | Not Other-wise Represented |
|--|----------------------------------|--------------------------|-------------------------------|---------------------------------|--------------------------|--------------------------------|----------------|-----------------|----------------------------------|
| Unaccom- panied Disabled Children >18 | | | | | | | | | |
| Unaccom- panied Non- Disabled Children >18 | | | | | | | | | |
| Accom- panied Disabled Children >18 | | | | | | | | | |
| Accom- panied Non- Disabled Children >18 | | | | | | | | | |
| Total Persons | | | | | | | | | |

15. Outreach for Participants

A. Enter the percentage of homeless persons who will be served by the proposed project for each of the following locations:

___ Persons who came from the street or other locations not meant for human habitation

___ Persons who came from Emergency Shelters

___ Persons who came from safe havens

___ Persons eligible under category 4 – e.g., fleeing DV, stalking, violence (see appendix for definition)

___ Total of above percentages

B. Describe the outreach plan to bring eligible homeless participants into the project.

16. HMIS Participation

a. Does your agency currently participate in HMIS? ☐ Yes ☐ No

b. Will your agency enter data into the HMIS for this proposed project? ☐ Yes ☐ No

17. Budget detail

Leased Unites Budget (enter number of units by unit type; the applicable Fair Market Rent (FMR) level, multiply units times FMR times 12 (1 year grant) and enter totals. Link for 2017 FMRs:

https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/select_Geography.odn

| Unit Size | No. of Units | FMR (Insert local FMR) | Term (12 months) | Total Costs (\$) |
|---------------|--------------|---------------------------|---------------------|------------------|
| Efficiency | | \$ | X 12 months | |
| 1 Bedroom | | \$ | X 12 months | |
| 2 Bedroom | | \$ | X 12 months | |
| 3 Bedroom | | \$ | X 12 months | |
| 4 Bedroom | | \$ | X 12 months | |
| Totals | | | | |

Rental Assistance Budget (enter number of units by unit type; the applicable Fair Market Rent (FMR) level, multiply units times FMR times 12 (1 year grant) and enter totals. Link for 2017 FMRs:

https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/select_Geography.odn

Indicate the Type of Rental Assistance: ☐ Project Based ☐ Tenant Based

| Unit Size | No. of Units | FMR (Insert local FMR) | Term (12 months) | Total Costs (\$) |
|---------------|--------------|---------------------------|---------------------|------------------|
| Efficiency | | \$ | X 12 months | |
| 1 Bedroom | | \$ | X 12 months | |
| 2 Bedroom | | \$ | X 12 months | |
| 3 Bedroom | | \$ | X 12 months | |
| 4 Bedroom | | \$ | X 12 months | |
| Totals | | | | |

Operating Costs

Enter the quantity and total budget request for each operating cost. The request entered should be equivalent to the cost of one year of the relevant operating costs. When including staff costs, please include title, salary and FTE.

| Operating Costs | Quantity Description (max 400 characters) | Annual Budget Request |
|--------------------------------|--|--------------------------|
| Maintenance and repair | | |
| Electricity, Gas and Water | | |
| Property Tax and Insurance | | |
| Furniture | | |
| Replacement Reserve | | |
| Equipment | | |
| Building Security | | |
| Total Operating Request | | |

Supportive Services: Enter the quantity and total budget request for each supportive services cost. The request entered should be equivalent to the cost of one year of the relevant supportive service. When including staff costs, please include title, salary and FTE.

| Eligible Costs | Quantity Description (max 400 characters) | Annual Budget Request |
|--|--|-----------------------|
| Assessment of Service Needs | | |
| Assistance with Moving Costs | | |
| Case Management | | |
| Employment Services | | |
| Food | | |
| Housing Search/Counseling | | |
| Legal Services | | |
| Life Skills | | |
| Outreach Services | | |
| Transportation | | |
| Utility Deposits (only if not included in lease agreement) | | |
| Total Annual Assistance Requested for Supportive Services | | |

Sources of Match – Please complete the match table below.

Match is actual cash or in-kind resources contributed to the grant. All costs paid for with matching funds must be for activities that are eligible under the CoC Program, even if the recipient is not receiving CoC Program grant funds for that activity. All grant funds must be matched with an amount no less than 25% of the awarded grant amount (with cash or in-kind resources). Match resources may be from public or private resources.

| Identify Type of Contribution: Cash or In kind | Name the Source of Contribution | Identify Source as: (G) Government or (P) Private | Date of Written Commitment | Value of Written Commitment |
|---|---------------------------------|--|----------------------------|-----------------------------|
| <i>Example: Cash</i> | DMHAS | G | 7/15/18 | \$10,000 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | TOTAL: | \$ |

APPENDIX

PA-508 Adopted Definition of Housing First

Housing First is an approach in which housing is offered to people experiencing homelessness without preconditions (such as sobriety, mental health treatment, or a minimum income threshold) or service participation requirements and in which rapid placement and stabilization in permanent housing are primary goals. PSH projects that use a Housing First approach promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services. HUD encourages all recipients of CoC Program-funded PSH to follow a Housing First approach to the maximum extent practicable.

Housing First Principles

Housing First is a programmatic and systems approach that centers on providing homeless people with housing quickly and *then* providing services as needed using a low barrier approach that emphasizes community integration, stable tenancy, recovery and individual choice.

Low barrier approach to entry:

- Housing First offers individuals and families experiencing homelessness immediate access to permanent supportive housing without unnecessary prerequisites. For example:
 - a. Admission/tenant screening and selection practices do not require abstinence from substances, completion of or compliance with treatment, or participation in services.
 - b. Applicants are not rejected on the basis of poor or lack of credit or income, poor or lack of rental history, minor criminal convictions, or other factors that might indicate a lack of “housing readiness.”
 - c. Blanket exclusionary criteria based on more serious criminal convictions are not applied, though programs may consider such convictions on a case by case basis as necessary to ensure the safety of other residents and staff.
 - d. Generally, only those admission criteria that are required by funders are applied, though programs may also consider additional criteria on a case by case basis as necessary to ensure the safety of tenants and staff. Application of such additional criteria should be rare, and may include, for example, denial of an applicant who is a high risk registered sex offender by a project serving children, or denial of an applicant who has a history of domestic violence involving a current participant.

Community integration and recovery:

- Housing is integrated into the community and tenants have ample opportunity and are supported to form connections outside of the project.
- Housing is located in neighborhoods that are accessible to community resources and services such as schools, libraries, houses of worship, grocery stores, laundromats, doctors, dentists, parks, and other recreation facilities.

- Efforts are made to make the housing look and feel similar to other types of housing in the community and to avoid distinguishing the housing as a program that serves people with special needs.
- Services are designed to help tenants build supportive relationships, engage in personally meaningful activities, and regain or develop new roles in their families and communities.
- Services are recovery-based and designed to help tenants gain control of their own lives, define their personal values, preferences, and visions for the future, establish meaningful individual short and long-term goals, and build hope that the things they want out of life are attainable. Services are focused on helping tenants achieve the things that are important to them and goals are not driven by staff priorities or selected from a pre-determined menu of options.

PA-508 Policy - Adoption of HUD Notice CPD 16-11

This CoC will base prioritization for permanent supportive housing on the Notices CPD-14-012 and CPD-16-11. Households meeting the definition of chronic homelessness will be prioritized for all Permanent Supportive Housing vacancies upon turnover.

All CoC Program-funded PSH must take new participants from the single prioritized Chronic Homeless list for individuals or for families as appropriate, which is created using the Coordinated Entry process along with the criteria outlined below.

Requirement to dedicate or prioritize PSH beds to people experiencing chronic homelessness:

All Scranton/Lackawanna County CoC-funded PSH beds are required to dedicate or prioritize 100% of their beds to people experiencing chronic homelessness. When filling vacant beds, CoC-funded PSH projects must seek referrals only through the Chronic Homeless List maintained in HMIS and should be filtered for prioritization decisions.

This by-name lists use the order of priority established in HUD Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing. Relevant guidance from the Notice appears below, and the full Notice is available at:

<https://www.hudexchange.info/resources/documents/notice-cpd-16-11-prioritizing-persons-experiencing-chronic-homelessness-and-other-vulnerable-homeless-persons-in-psh.pdf>

The notice defines which chronically homeless people get priority access to PSH beds and how to prioritize PSH beds when no chronically homeless persons exist within the geographic area.

Accepting Referrals through a Single Prioritized List for PSH

All CoC-funded PSH projects are required to accept referrals ONLY from the *Chronic Homeless List* that is maintained in HMIS and monitored by the Chronic Homeless Committee, and should be

filtered for prioritization decisions. The single prioritized list is updated frequently to reflect the most up-to-date and real-time data as possible.

Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Dedicated or Prioritized for Occupancy by Persons Experiencing Chronic Homelessness (excerpt from PA-508 Policies and Procedures):

- I. The CoC hereby adopts the provisions and requirements set out in HUD Notice CPD-14-012 and updated Notice CPD-16-11 which are to be applicable to all CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness (which includes all PA-508 CoC Program-funded PSH):

(a) First Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
- ii. The CoC or CoC Program recipient has identified the chronically homeless individual or head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs

(b) Second Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness. A chronically homeless individual or head of household, as defined in 24 CFR 578.3, for which both of the following are true:

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,
- ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs.

(c) Third Priority—Chronically Homeless Individuals and Families with the Most Severe Service Needs. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

- i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an

emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and

ii. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs.

(d) Fourth Priority—All Other Chronically Homeless Individuals and Families. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is less than 12 months; and

ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (2) of the definition for chronically homeless, of the family as having severe service needs.

**Please see full CoC Policies and Procedures for the full text of the prioritization policy:
<http://www.uncnepa.org/scranton-lackawanna-county-continuum-of-care/>

DEFINITIONS OF KEY TERMS:

Category 4 – HUD Homeless Definition. HUD defines four categories under which individuals and families may qualify as homeless. Category four is individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

Chronically Homeless. The definition of “chronically homeless” currently in effect for the CoC Program is that which is defined in the CoC Program interim rule at 24 CFR 578.3, which states that a chronically homeless person is:

Chronically Homeless. The definition of “chronically homeless”, as stated in Definition of Chronically Homeless final rule is:

1. **(a)** A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), 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 described in paragraph (a) (i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the

individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;

(b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;

(c) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.

Disabling Condition:

Disabling Condition is defined by HUD as a condition that: (i) Is expected to be long-continuing or of indefinite duration; (ii) Substantially impedes the individual's ability to live independently; (iii) Could be improved by the provision of more suitable housing conditions; and (iv) Is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury; (2) A developmental disability, as defined in this section; or (3) The disease of acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome, including infection with the human immunodeficiency virus (HIV).

2018 Scranton/Lackawanna County (PA-508) Continuum of Care
Scoring Sheet for NEW Supportive Housing Bonus Project Applications

Applicant Organization Name: _____

Proposed Project Name: _____

Project Location (town(s)): _____

Type of Project: ☐ PSH ☐ RRH ☐ RRH

Reviewer's Name (please print): _____

SECTION I: SCORES *(Calculated only for applicants meeting threshold criteria as determined in Section II; enter scores below as indicated in Section III)*

1. Applicant Experience: _____ of 5

2. Project Quality:

a. Prioritizing Need _____ of 15

b. Housing First _____ of 15

c. Mainstream Services _____ of 15

FINAL TOTAL SCORE: _____ of 50

Bonus Points for meeting PA-508 Priority * _____ 10 Points

*PA-508 set this year's housing priority as Rapid ReHousing or Permanent Supportive Housing with at least 50% of funding/beds for individuals. DV Bonus can include TH-RRH.

SECTION II. Threshold Review:

Purpose: to determine whether applicant meets basic eligibility requirements for funding.

| Threshold Review Criteria <i>Projects that do not meet all of the threshold review criteria outlined below will not be further reviewed by the CoC except as noted.</i> | Meets Criteria? Yes or No |
|--|--|
| All projects must operate in the CoCs covered geography. This includes all the cities and towns in Lackawanna County. | |
| All projects must provide either Permanent Supportive Housing or Rapid Re-housing. The DV Bonus can include TH-RRH | |
| <p>The population served must meet program eligibility requirements, including:</p> <ul style="list-style-type: none"> • PSH: <ul style="list-style-type: none"> ○ All projects must dedicate 100% of units to chronically homeless individuals and/or families, as defined by HUD. ○ Project applicants must demonstrate that they will first serve the chronically homeless according to the order of priority established in PA-508 policy per HUD Notice CPD-16-11: <i>Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons</i>. ○ All projects must serve exclusively disabled individuals as defined by HUD • RRH: All projects must serve 100% literally homeless families and/or single adults coming from emergency shelters and/or unsheltered locations or fleeing violence/stalking. <ul style="list-style-type: none"> ○ Persons in transitional housing are not eligible for either project type, even if they met the criteria described above prior to entering the TH program. | |
| <p>Projects can request only these funds for a term of one year:</p> <ul style="list-style-type: none"> ▪ PSH: Leasing, Rental assistance (tenant or project based only) or operating funds ▪ RRH: Rental assistance (tenant based only) ▪ Supportive services | |
| Projects cannot request rental assistance/operating funding in the same project, except in TH-RRH. | |
| Applicant must clearly describe a viable plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant within 6 months of the award. | |
| Project applicants must meet eligibility requirements as described in the CoC program interim rule (i.e., only nonprofit organizations, States, local governments, and instrumentalities of State or local governments are eligible to apply) and be able to provide evidence of eligibility (e.g., nonprofit documentation). | |
| Project applicants must demonstrate the financial and management capacity and experience to carry out the project and administer federal funds (e.g., by demonstrating experience with similar projects and with successful administration of other federal funds.) | |
| Project applicants must be in good standing with HUD, which means that the applicant does not have any open monitoring or audit findings, history of slow expenditure of grant funds-outstanding obligation to HUD that is in arrears or for which a payment schedule has not | |

| Threshold Review Criteria <i>Projects that do not meet all of the threshold review criteria outlined below will not be further reviewed by the CoC except as noted.</i> | Meets Criteria? Yes or No |
|---|--------------------------------------|
| been agreed upon, or history of serving ineligible program participants, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes. | |
| Projects must administer their programs in the most integrated setting appropriate to the needs of qualified homeless people with disabilities (i.e., enabling participants to interact with others without disabilities to the fullest extent possible). | |
| Amenities (e.g., grocery stores, pharmacies, etc.) must be accessible in the community. | |
| Applications must meet HUD's cash match requirements as defined in the CoC Program Interim Rule (i.e., the recipient or subrecipient must match all grant funds with no less than 25% of funds or in-kind contributions from other sources. For PSH projects, the requirement is 25% of the total amount of the grant minus Leasing). | |
| Projects must agree to participate in HMIS (unless a DV program), the annual Homeless PIT count, the relevant Coordinated Entry process and comply with all CoC P+P. | |

Other threshold criteria that the CoC will review prior to submission to HUD:

- Projects must be cost effective (i.e., not deviating substantially from the norm in that locale for the type of structure or kind of activity).

Project meets threshold eligibility criteria?

- ☐ Yes
☐ No

Comments: _____

SECTION III: SCORED SECTIONS**Applicant/Sponsor History and Subrecipient Experience (5 Points) – See “Experience of Applicant/Sponsor” Section in Application**

- Applicant and subrecipient(s)’ prior experience in serving homeless people and in providing housing similar to that proposed in the application. **(2.5 points)**
- Satisfactory experience with prior HUD grants and other public contracts, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of APRs on existing grants. **(2.5 points)**

Score: _____

Comments:

Assessment of Project Quality - See “Project Description” Section in Application**A. PSH: Prioritizing Highest Need (15 points)**

Extent to which the applicant:

- ✓ Demonstrates that they will first serve the chronically homeless according to the order of priority established in *Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons*. **(9 points)**
- ✓ Clearly describes the system it currently uses to determine severity of need for the chronically homeless. **(2 points)**
- ✓ Clearly describes its process for prioritizing persons with the most severe needs. **(2 points)**
- ✓ Clearly describes the outreach process used to engage chronically homeless persons living on the streets and in shelter. **(2 points)**

Questions to consider:

- Does the applicant demonstrate a clear understanding of the order of priority established in *Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons*?
- Does the applicant describe a specific plan for how the project will participate in the CoC’s coordinated assessment system?
- Does the applicant describe a plan for an outreach process to engage those persons that is adequate and consistent with the Notice?
- Does the applicant identify specific and appropriate programs (street outreach, shelters, and safe havens) from which it obtains referrals of potential eligible program participants that will ensure the project operates at full capacity and that eligible persons are with the most severe needs are served?

PSH Score: _____

Comments:

B. RRH: Effective outreach system (15 points) - See "Project Description" & "Outreach for Participants" in Application

Extent to which the applicant:

- ✓ Clearly describes a specific plan for how the project will participate in the CoC's coordinated assessment system **(5 points)**
- ✓ Clearly describes the outreach process used to engage homeless persons living on the streets, in shelter, and fleeing or attempting to flee domestic violence. **(5 points)**
- ✓ Clearly describes a plan for obtaining referrals that will ensure the project operates at full capacity and serves only eligible people **(5 points)**

Questions to consider:

- Does the applicant describe a specific and viable plan for how the project will participate in the CoC's coordinated assessment system?
- Does the applicant describe a plan for an outreach process to engage eligible persons that is adequate and, if a PSH program, consistent with Notice CPD=16-011?
- Does the applicant identify specific and appropriate programs (street outreach, shelters) from which it obtains referrals of potential eligible program participants that will ensure the project operates at full capacity and that only eligible persons are served?

RRH Score: _____

Comments:

C. Housing First (15 points). See "Project Experience" & "Project Description" in Application

Extent to which the applicant:

- ✓ Demonstrates significant and long-standing experience in operating a housing first program. **(3 points)**
- ✓ Demonstrates success of the existing housing first program(s) it operates. **(3 points)**
- ✓ Clearly describe a program design that is consistent with a Housing First approach (i.e., A model of housing assistance that is offered without preconditions, such as sobriety or a minimum income threshold, or service participation requirements, and rapid placement and stabilization in permanent housing are primary goals) **(9 points)**

Questions to consider:

- Does the applicant clearly demonstrate a model that offers initial access to housing without preconditions, such as sobriety, income requirements and service participation?
- Does the applicant clearly demonstrate a model in which continuation of housing is not contingent on service participation requirements or compliance?
- Does the applicant clearly demonstrate that rapid placement and stabilization in permanent housing are primary goals of the project?
- Does the applicant clearly describe a project design that is adequate to accomplish those goals?

- Does the applicant clearly demonstrate a model in which participants are expected to comply with a lease agreement and are provided with services and supports to help maintain housing and prevent eviction?
- Does the type, scale, and location of the housing fit the needs of the participants?
- Does the type, scale, and location of the supportive services and mode of transportation to those services fit the needs of the program participants?
- Does the application indicate that program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs?

Housing First Score: _____

Comments:

D. Mainstream Services (15 points). See “Supportive Services” for Participants in Application

Extent to which the applicant:

- ✓ Clearly describes specific activities to identify and enroll all Medicaid-eligible program participants, regardless of whether the project applicant’s state is participating in Medicaid expansion under the Affordable Care Act; **(5 points) AND**
- ✓ Clearly and specifically demonstrates that the project includes Medicaid-financed services, including care management, behavioral health services, or other services important to supporting housing stability. Project applicants may include Medicaid-financed services either by the recipient receiving Medicaid coverage payments for services provided to project participants or through partnerships with one or more Medicaid billable providers (e.g., Federally Qualified Health Centers). No points will be awarded for Medicaid-financed health services provided in a hospital setting **OR**
- ✓ Clearly and specifically demonstrates that there are barriers to including Medicaid-financed services in all or some of the project AND clearly demonstrates that the project leveraged non-Medicaid resources available in the CoC’s geographic area, including mainstream behavioral health system resources such as mental health or substance abuse prevention, Centers of Excellence or state behavioral health system funding, education, vocational training and job-readiness services, TANF, food stamps and mainstream parenting resources to the maximum extent appropriate. **(10 Points)**

Questions to consider:

- Does the specific plan for ensuring program participants will be individually assisted to obtain benefits of the mainstream health, social, and employment programs for which they are eligible meet the needs of the program participants?

Score: _____

Comments:

Scranton/Lackawanna County CoC Reallocation Process FY2018

The CoC arrived at decisions regarding reallocation based on 1) data from the Point in Time and Housing Inventory Counts, Coordinated Entry since its inception in HMIS February 2016, the Annual Homeless Assessment Report (AHAR), the Chronic Homeless by-name-list and 2) the priorities and perspectives of HUD and the CoC and 3) capacity, performance and financial information from potential new and renewal grants. All of the above help the CoC Board to determine areas where performance is strong and community needs are being met, versus areas where more resources or increased capacity is needed in order to improve outcomes and end homelessness for the various populations experiencing it.

Renewal Project Applicants were encouraged to look critically at all of their projects to assess whether they align with CoC priorities and provide the most effective use of HUD funding for Scranton/Lackawanna County. Project budgets were evaluated to determine if supportive services budgets were in line with the majority of CoC projects and what is considered adequate funding nationwide, or if that budget line item may be reduced and reallocated to better serve existing projects in need of additional funds to increase capacity or to provide additional beds/units increasing system-wide capacity. Projects with supportive services budgets greater than the normal range were approached and encouraged to consider reallocation with technical assistance available. Further, those projects which scored below 75% on the renewal project evaluation as well as projects which returned funds were requested to either reallocate to a more effective project or to submit a plan for corrective action on strategies to be taken within the next year to improve project performance and/or spending. Two providers are considering reallocating from 3 projects during the next CoC competition.

The CoC Board decided that households meeting the definition of homeless, but not chronic homeless, would be prioritized via the following process: The majority of households presenting for homeless services do not meet the chronic homeless definition, but are in need of some assistance to gain permanent housing. The CoC's 2 PSH for families projects often have trouble finding a family which meets the chronic homeless definition when they have openings, however, there is no dearth of families experiencing homelessness. National research shows that RRH is an effective and efficient way to house individuals and families experiencing a housing crisis and support them on their path to permanent housing. Based on the CoC Board's analysis, mindful of HUD priorities, relevant research and the needs identified in the community, one of the CoC's PSH for families projects voluntarily reallocated a portion of its beds to RRH.

One project was developed for submission through reallocation with this NOFA, bringing the CoC's total reallocated funds to \$467,145 since 2014, which is 19% of the ARD. The 2014 reallocated amount is indicated in the consolidated application as \$211,337, 2016 amount is \$195,214, and 2017 amount is \$60,594. This process of reallocation demonstrates the CoCs commitment to funding programs which are most effective in ending homelessness.



FILE MESSAGE



Tue 8/28/2018 1:55 PM

Shannon Quinn-Sheeran

Renewal CoC Projects Accepted and Ranked

To: Nocilla, Stephen; tmarques@catherinemcauleycenter.org; Sr. Susan Hadzima (hadzis@SistersofHM.org); Kim Cadugan (cadugank2@gmail.com); Michael Hanley; Peg Ruddy (pegr@wrcnepa.org)
 Cc: Shannon Quinn-Sheeran

[Bing Maps](#)

Greetings All,

This e-mail will serve as notice to the agencies listed under "Applicant Name" of acceptance and ranking of your project(s) through the following directors:

Stephen Nocilla
 Diocesan Director of Housing
 Catholic Social Services of the Diocese of Scranton, Inc.

Michael Hanley
 Chief Executive Officer
 United Neighborhood Centers of Northeastern PA

Sr. Therese Marques
 Executive Director
 Catherine McAuley Center

Peg Ruddy
 Executive Director
 Women's Resource Center

Kimberly Cadugan
 Executive Director
 Community Intervention Center

On Tuesday, August 21st, the CoC Board approved the following projects and amounts to be accepted and ranked in this year's CoC Competition:

| New/Rene | Applicant Name | Project Name | Grant Cor | Total ARA |
|----------|---|--|-----------|---------------|
| Renewal | United Neighborhood Centers of Northeastern Pennsylvania | Permanent Supportive Housing for Families #1 | PH | \$ 410,743.00 |
| Renewal | The Community Intervention Center of Lackawanna County | CIC Permanent Supportive Housing #1 | PH | \$ 159,046.00 |
| Renewal | Women's Resource Center | WRC Rapid Re-housing for Domestic & Sexual Violence Su | PH | \$ 201,896.00 |
| Renewal | Catholic Social Services of the Diocese of Scranton, Inc. | Permanent Supportive Housing 2 | PH | \$ 95,379.00 |
| Renewal | Catherine McAuley Center | Permanent Supportive Housing #2 | PH | \$ 184,512.00 |
| Renewal | United Neighborhood Centers of Northeastern Pennsylvania | UNC Permanent Supportive Housing #1 | PH | \$ 329,706.00 |
| Renewal | Catherine McAuley Center | Permanent Supportive Housing | PH | \$ 150,135.00 |
| Renewal | Catholic Social Services of the Diocese of Scranton, Inc. | CSS PSHP #1 | PH | \$ 127,567.00 |
| Renewal | The Community Intervention Center of Lackawanna County | Shelter Me Safe Haven | SH | \$ 146,031.00 |
| Renewal | The Community Intervention Center of Lackawanna County | CIC Permanent Supportive Housing #2 | PH | \$ 118,705.00 |
| Renewal | Catherine McAuley Center | Rapid ReHousing | PH | \$ 118,420.00 |
| Renewal | The Community Intervention Center of Lackawanna County | CIC Permanent Supportive Housing #3 | PH | \$ 209,380.00 |
| Renewal | Catholic Social Services of the Diocese of Scranton, Inc. | VA-PSHP Lackawanna | PH | \$ 96,948.00 |
| Renewal | United Neighborhood Centers of Northeastern Pennsylvania | Homeless Management Information Systems (HMIS) | HMIS | \$ 59,556.00 |
| Renewal | Catherine McAuley Center | Rapid Rehousing #2 | PH | \$ 32,676.00 |
| Renewal | United Neighborhood Centers of Northeastern Pennsylvania | UNC Rapid Rehousing #2 | PH | \$ 64,806.00 |
| Renewal | United Neighborhood Centers of Northeastern Pennsylvania | UNC Rapid Re-Housing for Families | PH | \$ 178,246.00 |

Please contact me with any questions.

Best,

Shannon

Shannon Quinn-Sheeran
 Continuum of Care Director
 United Neighborhood Centers
 777 Keystone Industrial Park Rd.
 Throop, PA 18512
 (570)346-0759 ext. 108



FILE MESSAGE



Wed 8/29/2018 8:50 AM

Shannon Quinn-Sheeran

CoC DV Bonus Application acceptance - Scranton/Lackawanna County CoC

To Peg Ruddy (pegr@wrcnepa.org)

Cc Nancy Perri; Carol Shoener (carols@wrcnepa.org)

Dear Peg,

The CoC Board voted to accept and rank Women's Resource Center's DV Bonus Project, Community Collaborative to Transitionally and Rapidly Re-house Youth, Families and Incarcerated Survivors of Domestic and Sexual Violence as submitted for \$175,523.

Thank you for Women's Resource Center's continued work to end homelessness for those fleeing/attempting to flee domestic and sexual violence in Lackawanna County.

Best,

Shannon

Shannon Quinn-Sheeran
Continuum of Care Director
United Neighborhood Centers
777 Keystone Industrial Park Rd.
Throop, PA 18512
(570)346-0759 ext. 108
Uncnepa.org



Thursday, August 30, 2018





Tue 8/28/2018 2:08 PM -sent August 28, 2018

Shannon Quinn-Sheeran

Acceptance and Ranking of New Project for Scranton/Lackawanna County CoC

To Kathi Krablin

Cc: Marcie Walker PhD (mwalker@valleyyouthhouse.org)

Hi Kathi,

Hope all is well. The Scranton/Lackawanna County Continuum of Care is happy to share the information with Valley Youth House Committee, Inc., through you, that your project application for RRH for Lackawanna County Young Adults has been accepted and ranked for the 2018 Continuum of Care Competition. Due to the amount of funding available and in order to increase the CoC's chances of receiving additional bonus funding given HUD's scoring formula, your total project amount was reduced to \$80,501. We are pleased to have VYH join our system of homeless services and look forward to working more closely in the future.

Please contact me with any questions.

Best,

Shannon

Shannon Quinn-Sheeran
Continuum of Care Director
United Neighborhood Centers
777 Keystone Industrial Park Rd.
Throop, PA 18512
(570)346-0759 ext. 108
Uncnepa.org



FILE MESSAGE



Tue 8/28/2018 2:16 PM

-sent August 28, 2018

Shannon Quinn-Sheeran

Scranton/Lackawanna County CoC Acceptance and Ranking Notice

To: Nocilla, Stephen

Cc: Michael Kendra (mkendra@csswb.org)

Hi Steve,

Please accept this as notice that Catholic Social Services of the Diocese of Scranton, Inc.'s project, St. Anthony's Haven PSHP has been accepted and will be ranked among all projects submitted to HUD as a part of the 2018 Continuum of Care Competition. Due to the amount of funding available and in order to increase the CoC's chances of receiving additional bonus funding given HUD's scoring formula, your total project amount was reduced to \$80,501.

Thank you for your continued service to those experiencing homelessness in Lackawanna County. Please contact me with any questions.

Best,

Shannon

Shannon Quinn-Sheeran
Continuum of Care Director
United Neighborhood Centers
777 Keystone Industrial Park Rd.
Throop, PA 18512
(570)346-0759 ext. 108
Uncnepa.org



Thursday, August 30, 2018





FILE MESSAGE



Wed 8/29/2018 8:50 AM

Shannon Quinn-Sheeran

CoC DV Bonus Application acceptance - Scranton/Lackawanna County CoC

To Peg Ruddy (pegr@wrcnepa.org)

Cc Nancy Perri; Carol Shoener (carols@wrcnepa.org)

Dear Peg,

The CoC Board voted to accept and rank Women's Resource Center's DV Bonus Project, Community Collaborative to Transitionally and Rapidly Re-house Youth, Families and Incarcerated Survivors of Domestic and Sexual Violence as submitted for \$175,523.

Thank you for Women's Resource Center's continued work to end homelessness for those fleeing/attempting to flee domestic and sexual violence in Lackawanna County.

Best,

Shannon

Shannon Quinn-Sheeran
Continuum of Care Director
United Neighborhood Centers
777 Keystone Industrial Park Rd.
Throop, PA 18512
(570)346-0759 ext. 108
Uncnepa.org



Thursday, August 30, 2018



The Scranton Times (Under act P.L. 877 No 160. July 9,1976)
Commonwealth of Pennsylvania, County of Lackawanna

UNITED NEIGHBORHOOD CENTERS
777 KEYSTONE INDUSTRIAL PARK R
THROOP PA 18512

Account # 65748
Order # 82231747
Ad Price: 146.50

LEGAL NOTICE SCRANTON/LAC

Ann Marie Fortese

Being duly sworn according to law deposes and says that (s)he is Billing clerk for The Scranton Times, owner and publisher of The Scranton Times, a newspaper of general circulation, established in 1870, published in the city of Scranton, county and state aforesaid, and that the printed notice or publication hereto attached is exactly as printed in the regular editions of the said newspaper on the following dates:

07/13/2018

Affiant further deposes and says that neither the affiant nor The Scranton Times is interested in the subject matter of the aforesaid notice or advertisement and that all allegations in the foregoing statement as time, place and character or publication are true.

Sworn and subscribed to before me
this 13th day of July A.D., 2018

Sharon Venturi
(Notary Public)

Commonwealth of Pennsylvania - Notary Seal
Sharon Venturi, Notary Public
Lackawanna County
My commission expires February 12, 2022
Commission number 1254228
Member, Pennsylvania Association of Notaries

Deadline listed as August 10, 2018

LEGAL NOTICE

Scranton/Lackawanna CoC is currently soliciting applications for Rapid Re-Housing projects for homeless individuals AND families (priority will be given to projects serving at least 50% individuals) and Permanent Supportive Housing projects for chronically homeless individuals. Funding will come from the US Department of Housing and Urban Development, Office of Community Planning and Development. Information on the CoC Program can be found at <https://www.hudexchange.info/program/coc/>. Applications are available at <http://www.uncnepa.org/scranton-lackawanna-county-continuum-of-care/> under PA-508 New Project Application 2018, and are due at close of business Friday, August 10th. See application for all requirements. For questions contact squinn-sheeran@uncnepa.org or 570-346-0759, ext. 108.

THE SCRANTON TIMES
DBA THE TIMES TRIBUNE
PO BOX 3478
SCRANTON PA 18505-0478
(570)348-9183
Fax (570)348-9149

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777 KEYSTONE INDUSTRIAL PARK ROAD Times Ord: 1 Times Run: ***
THROOP PA 18512 TSLEG 1.00 X 30.00 Words: 103
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STTT CL 3 S 07/13
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AUTHORIZATION

Under this agreement rates are subject to change with 30 days notice. In the event of a cancellation before schedule completion, I understand that the rate charged will be based upon the rate for the number of insertions used.

Name (print or type)

Name (signature)

LEGAL NOTICE

Scranton/Lackawanna CoC is currently soliciting applications for Rapid Re-Housing projects for homeless individuals AND families (priority will be given to projects serving at least 50% individuals) and Permanent Supportive Housing projects for chronically homeless individuals. Funding will come from the US Department of Housing and Urban Development, Office of Community Planning and Development. Information on the CoC Program can be found at <https://www.hudexchange.info/program/coc/>. Applications are available at

<http://www.uncnepa.org/scranton-lackawanna-county-continuum-of-care/>

under PA-508 New Project Application 2018, and are due at close of business Friday, August 10th. See application for all requirements. For questions contact squinn-sheeran@uncnepa.org or 570-346-0759, ext. 108.

HMIS Memorandum of Understanding
Scranton/Lackawanna County CoC and United Neighborhood Centers
Effective November 2015

United Neighborhood Centers (UNC) will:

- Oversee and coordinate all aspects of Scranton/Lackawanna County CoC's HMIS Project implementation and development;
- Serve as the primary contact with the SLCCoC's HMIS vendor (ClientTrack);
- Monitor ClientTrack's performance under their contract with UNC;
- Provide ongoing training and technical support on the use of ClientTrack;
- Oversee system administration, especially as it relates to external security protocols;
- Review data quality and report to CoC and HMIS governance committee;
- Provide ongoing support, training, technical assistance to and function as a resource to the local Security Officers and ClientTrack users.
- Provide CoC with information needed from HMIS for the completion of the HUD NOFA. In addition, UNC will provide CoC with information needed for their Housing Inventory Charts.

The Continuum of Care will:

- Ensure active membership of HMIS governance committee.
- Review reporting
- Monitor UNC as HMIS lead agency and contributing HMIS organizations (CHOs) for compliance.
- Ensure CHOs are collecting all necessary data in the correct format
- Ensure accuracy of AHAR
- Ensure accuracy of CoC NOFA data

Contributing HMIS Organizations (CHOs) will:

- Regularly attend HMIS Governance Committee meetings.
- Review and correct data quality issues found on monthly report.
- Follow Data Quality Plan
- Work with CHO users to develop action plans to get to acceptable levels of data quality, and to make HMIS a useful tool for their community.

HMIS Governance Committee will:

- Make final decisions on: planning, participation, policies & procedures, determination of software company, and growth of HMIS
- Monitor Data Quality
- Direct the HMIS administrator

HMIS Memorandum of Understanding
Scranton/Lackawanna County CoC and United Neighborhood Centers
Effective November 2015

By signing below I agree to the stipulations of this Memorandum of Understanding.

Chief Executive Officer of United Neighborhood Centers

Signature  Date 11-16-15

Print Name Michael Hanley

CoC Chair

CoC Chair Signature S. Susan Hadzima Date 11/16/15

Print Name and Title SR. Susan Hadzima, Dir. of Programs

Name of Agency Catherine McAuley Center

Mailing Address 430 Bittston Ave., Scranton PA 18505

Email hadzis@sistersofihm.org

HMIS System Administrator

Signature  Date 11/16/15

Print Name Shannon Quint Sheeran

**Scranton/Lackawanna County Continuum of Care
Homeless Management Information Systems
Policies and Standard Operating Procedures
Version 1.0**

Effective Date
January 19, 2017

**Scranton/Lackawanna County Homeless Management Information Systems
Policies and Standard Operating Procedures
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**Scranton/Lackawanna Continuum of Care
Homeless Management Information Systems
Policies and Standard Operating Procedures**

This document details the policies and standard operating procedures that govern the operation of the Scranton/Lackawanna County Continuum of Care Homeless Management Information System (SLCCoC HMIS). It defines the roles and responsibilities of the HMIS Lead, agencies and individuals accessing SLCCoC HMIS data. It includes important information on the way the SLCCoC HMIS data is secured and protected. All individuals accessing SLCCoC HMIS must read and understand these Standard Operating Procedures.

INTRODUCTION

This document details the policies and standard operating procedures that govern the operation of the Scranton/Lackawanna County Continuum of Care Homeless Management Information System (SLCCoC HMIS). It defines the roles and responsibilities of the HMIS Lead, agencies and individuals accessing SLCCoC HMIS data. It includes important information on the way the SLCCoC HMIS data is secured and protected. All individuals accessing the SLCCoC HMIS must read and understand these Standard Operating Procedures.

SLCCoC HMIS is administered by the United Neighborhood Centers of Northeastern Pennsylvania (UNC), a non-profit corporation acting in the behalf of the SLCCoC Board. The SLCCoC Board is comprised of six regional providers that are under contract with the U.S Department of Housing and Urban Development (HUD) to provide homeless services as well as other community stakeholders. The central server is administered by the contracted HMIS software vendor, and UNC administers licensing, training, and compliance.

The primary purpose of the SLCCoC HMIS is to provide a client and service data management tool to aid the Continuum of Care to end homelessness in Scranton/Lackawanna County and meet HUD requirements for CoCs to provide an unduplicated demographic report of the number and characteristics of clients served as well as program outcomes. This tool is Internet-based technology to assist homeless service organizations across Lackawanna County in capturing information about the clients that they serve.

SLCCoC HMIS provides a standardized assessment of consumer needs creates individualized service plans and records the use of housing and services which communities can use to determine the utilization of services of participating agencies, identify gaps in the local service continuum, and develop outcome measurements.

Benefits of SLCCoC HMIS

SLCCoC HMIS benefits homeless men, women, and children:

Improvements in service delivery for clients as case managers assess the client's needs, inform the client about available services on site or through referral, help the client find and keep permanent housing, and improve service coordination when information is shared between programs within one agency that are serving the same client.

SLCCoC HMIS benefits agencies, program managers and case managers:

Aggregate program-level and agency-level information and reports should be accessible to agencies and program managers to provide a more complete understanding of clients' needs and outcomes, advocate for additional resources, complete grant applications, conduct evaluations of program services and staff performance, and report to funders. Minimally, the software should be able to generate the program portions of the HUD CoC Annual Progress Report (APR) and HUD ESG Consolidated Annual Performance and Evaluation Report (CAPER).

SLCCoC HMIS benefits the regional Continuum of Care:

Unduplicated, de-identified, system-wide information should be readily accessible to provide a more complete understanding of homelessness, clients' needs and outcomes, and program and system-level performance to inform policy decisions aimed at addressing and ending homelessness at local, state and federal levels. The software should also be able to generate data and/or reports to fulfill Federal Annual Homeless Assessment Report (AHAR), System Performance Measures, Continuum application requirements, and city-wide and system-level funding reports.

Definitions

Many of the terms used in this Policies and Standard Operating Procedures

Manual may be new to many users. Definitions of some of these terms are as follows:

Agency Administrator: The person responsible for system administration at the agency level. This person is responsible for adding and deleting users, basic troubleshooting, and organizational contact with the SLCCOC HMIS System Administrator.

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

Authorized Agency: Any agency, organization or group who has an SLCCOC HMIS Agency Agreement with the SLCCOC HMIS System Administrator and that is allowed access to the SLCCOC HMIS database.

Eccovia Solutions: The company that wrote the software used for the SLCCoC HMIS. Eccovia Solutions, also houses and maintains the server which houses our HMIS database.

Client: Any recipient of services offered by a Provider or Authorized Agency.

Client-level Data: Data collected or maintained about a specific person. This type of data can be de-identified for purposes of data analysis, which means that personally identifying information is removed from the record.

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

De-identified Data: Data that has been stripped of personally identifying information.

Encryption: Translation of data from plain text to a coded format. Only those with the “key” have the ability to correctly read the data. Encryption is used to protect data as it moves over the internet and at the database level through the use of special software.

Fiscal Agency: The agency chosen by the SLCCoC governing board to manage the financial aspects of the corporation, including the general ledger, accounts payable, and accounts receivable. The Agency shall follow fiscal policies established by general accounting principles.

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.

HMIS: Homeless Management Information System. This is a generic term for any system used to manage data about homelessness and housing.

HUD HMIS Data and Technical Standards (the Standards): The most recent HUD Standards published for Continuum of Care to systematically collect and report data for projects funded under Title IV of the McKinney-Vento Homeless Assistance Act. The current Standards were published in the July 30, 2004 Federal Register, Vol. 69, No. 146, pp. 45888 through 45934, with revisions released by HUD in March 2010. These standards fall into three categories: a) data elements required to be collected by HMIS users including “universal” and “program specific” data elements; b) Privacy and Security Standards for data confidentiality; and c) Technical Standards for the creation of HMIS data systems. Whenever the Standards are revised, this definition will reflect the most recently adopted revisions, and a change to the SLCCoC HMIS policies is not required.

Identifying Information: Information that is unique to an individual and that may be used to identify a specific person. Examples of identifying information are name and social security number.

SLCCoC HMIS: The software system as well as the information input, generated or acquired in print or machine readable format.

Provider: ANY organization providing outreach, shelter, housing, employment and/or social services.

SLCCoC HMIS Lead Agency: Manages the SLCCoC HMIS for the Continuum of Care

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.

***ClientTrack*:** A web-based software package developed by Eccovia Solutions which tracks data about people in housing crisis in order to determine individual needs and provide aggregate data for reporting and planning.

HMIS Lead: The job title of the person who is responsible for the coordination and administration of SLCCoC HMIS. This person has the highest level of user access in *ClientTrack* and has full access to all user and administrative functions across the County. This person provides technical support and training to Users.

User: An individual who uses a particular software package; in the case of the SLCCOC HMIS, the *ClientTrack* software.

User License: An agreement with a software company that allows an individual to use the product. In the case of *ClientTrack*, user licenses are agreements between the Fiscal Agency and Eccovia Solutions that govern the distribution of regional licenses for individual connections to SLCCoC HMIS. User licenses cannot be shared.

Policy 1.0 Organization and Management of the SLCCoC HMIS System

Responsible: SLCCoC Board
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements for the SLCCoC Board regarding access and usage of SLCCoC HMIS as well as the responsibilities for stewardship of SLCCoC HMIS.

Policy Statement

The SLCCoC Board is comprised of HMIS participating agencies and other homeless stakeholders in the Scranton/Lackawanna County Continuum of Care that are under contract with the U.S Department of Housing and Urban Development (HUD) and shall establish guidelines and operating policies for the SLCCoC HMIS to comply with federal regulation and guidance provided through the Department of Housing and Urban Development. These Policies and Standard Operating Procedures will be made available to all participating agencies, and a system of review will be established to ensure ongoing viability and responsiveness of policies to the project's environment.

Policy 1.1 SLCCoC Board

Responsible: SLCCoC Board
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements for the SLCCoC Board regarding access and usage of SLCCoC HMIS as well as the responsibilities for stewardship of SLCCoC HMIS.

Policy Statement

The SLCCoC Board is the governing body in control of the county-wide HMIS system and has sole responsibility for the following programmatic areas: ensuring active membership in the HMIS Committee; monitoring the Lead Agency and Participating Agencies for compliance; and quality assurance/accountability. The Board meets at least quarterly. The Board is the final decision making authority of SLCCoC HMIS.

Membership of the SLCCoC Board will be established according to the guidelines outlined in the SLCCoC By-Laws. Roles and responsibilities of the Board include, but are not limited to:

- Determining the guiding principles that should underlie the implementation activities of SLCCoC HMIS, participating organizations and service programs;
- Adopting the Data Quality Plan for ensuring participation compliance;
- Defining criteria, standards, and parameters for the release of aggregate data;
- Ensuring adequate privacy protection provisions in project implementation; and
- Selecting and contracting with an HMIS software vendor

Policy 1.2 Fiscal Management

Responsible: United Neighborhood Centers
Authorized: United Neighborhood Centers

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements for the United Neighborhood Centers regarding financial management of the corporation.

Policy Statement

United Neighborhood Centers has fiduciary responsibility for the HMIS grant. All financial activities will be documented through General Accounting Principles and comply with financial

regulatory requirements as applicable. In relation to fiscal management, United Neighborhood Centers is the final decision making authority of the HMIS grant.

United Neighborhood Centers shall adopt a budget; continuously review the operation of that budget and recommend appropriate changes therein during the fiscal year; and supervise the financial operations of the grant.

United Neighborhood Centers has the authority to contract with a fiscal agency to perform the day to day financial activities of the corporation. The Fiscal Agency will be required to follow the equivalent financial guidelines as the corporation and must be audited annually by an independent public accountant.

Policy 1.3 HMIS Lead

Responsible: United Neighborhood Centers

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements for the HMIS Lead Agency regarding access and usage of the HMIS System as well as the responsibilities for stewardship of the HMIS System.

Policy Statement

The CoC Board designates the HMIS Lead Agency as United Neighborhood Centers. United Neighborhood Centers will provide for SLCCoC HMIS services. United Neighborhood Centers will designate a staff member as the HMIS Lead. The HMIS Lead will be responsible for the management and supervision of the SLCCoC HMIS. In the absence of the HMIS Lead, UNC will designate a back-up staff person, until a new HMIS Lead is determined. The HMIS Lead has access to all agency records within the Continuum. The HMIS Lead is governed by these Policies and Standard Operating Procedures.

The HMIS Lead is responsible for the following:

- Manage the day-to-day operations of the SLCCoC System.
- Respond to all system-wide questions and issues;
- Provide quality assurance reports to the HMIS Committee;
- Issue User Licenses;
- Provide support to HMIS users upon request;
- Manage version controls;
- Monitor data quality and report data quality issues to Participating Agencies to ensure timely correction and support;
- Convene Community User Meetings and group trainings upon request.
- Train and support Participating Agencies in the use of SLCCoC HMIS.
- Attend System Administration User Meetings to share and benefit from the lessons learned across the Commonwealth and region.
- Report database problems to Software Provider.
- Manage notification of upgrades and updates to CHOs.
- Mine the database to respond to authorized requests for information.
- Prepare formal reports for the local Continuum of Care
- Sign Participating Agency Agreements as requested
- Sign and understand EndUser Agreement

- Complete required trainings with regard to Privacy and System Use.
- Manage password recovery.
- Respond to questions from the assigned Agency Administrators and provide on-site help as needed.
- Guide the HMIS process locally.

Policy 1.4 Participating Agency

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCOC HMIS Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements for the Participating Agency regarding access and usage of HMIS as well as the responsibilities for stewardship of HMIS.

Policy Statement

The Continuum of Care shall identify and solicit the participation of human service providers who are necessary contributors to the HMIS system. These are to include: emergency shelters, transitional housing programs, rapid rehousing programs, homeless outreach programs, permanent supportive housing providers, and homeless prevention programs.

In addition, each region may discretionally identify other service providers that could benefit from inclusion in SLCCoC HMIS. Each Participating Agency will be accountable for adherence to the minimum data collection and technical standards set by the HMIS Committee and HMIS Lead, where applicable, as detailed in the Standard Operating Procedures.

Before an agency can join SLCCoC HMIS, a Partnership Agreement must be signed and all policies and accompanying documentation must be adopted. The Participating Agency will be responsible for oversight of its own related confidentiality requirements and bears primary responsibility for oversight for all sharing of data it has collected via HMIS.

Policy 1.5 Agency Administrator

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements for the Agency Administrator regarding access and usage of HMIS as well as the responsibilities for stewardship of HMIS.

Policy Statement

Each Participating Agency must identify a staff member to be the HMIS Agency Administrator. The HMIS Agency Administrator is the single point of contact for communication purposes and is responsible for enforcing the data and security requirements under the Policy and Procedures. The Executive Director must submit in writing the name and contact information of the HMIS Agency Administrator to the HMIS Lead. The Executive Director must notify the HMIS Lead of changes in personnel in writing within one business day. If the HMIS Agency Administrator does not have the capacity to fulfill the technical obligations of this role, arrangement can be made with the HMIS Lead prior to executing an Agency Agreement to ensure the Participating Agency is compliant with the data and security requirements of the HMIS.

The Agency Administrator is responsible for the following:

- Primary contact between the Participating Agency and the HMIS Lead
- Must have email, internet access, and an HMIS User License

- Manages agency user licenses; requesting addition and removal of licensed users for their agency, at the discretion of the HMIS Lead
- HMIS access must be revoked immediately upon termination from agency, placement on disciplinary probation, or upon any change in duties not necessitating access to HMIS System information. All changes must be relayed in writing to the HMIS Lead.
- Ensures the stability of the agency connection to the Internet and *ClientTrack*, either directly or in communication with other technical professionals
- Provides support for the generation of agency reports
- Monitors and enforces compliance with standards of client confidentiality and ethical data collection, entry, and retrieval at the agency level

Policy 1.6 HMIS User

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements for the HMIS User regarding access and usage of the system as well as the responsibilities for stewardship of HMIS.

Policy Statement

All HMIS Users will have access to data that is appropriate to the duties of their position so that client and service information can be recorded and accessed on a “need to know” basis. Each User will complete a training course and sign the User Agreement prior to gaining access to HMIS through the issuance of a license.

The User is responsible for the following:

- Adhering to all SLCCoC HMIS policies as detailed in the User Agreement
- Securing his/her log-in information so that it will not be shared with another, including administrators or other staff
- Disclosing HMIS participation and data usage to all clients prior to collection and entry
- Entering and updating client data in a “timely” manner

Policy 1.7 System Availability

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements for providing availability of database server and notification in advance of any disruption of server availability.

Policy Statement

All SLCCoC HMIS Users will retain uninterrupted access to SLCCoC HMIS, with the exception of scheduled system maintenance. Notification of database unavailability will be posted to the “Organization News” section of ClientTrack on the User Dashboard and sent to all users via e-mail no less than forty-eight hours prior to the disruption.

Policy 1.8 Ethical Data Usage

Responsible: Participating Agency

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes the baseline ethics for HMIS data usage by anyone accessing the System.

Policy Statement

Data contained in HMIS is intended to be used to support or report on the delivery of homeless and housing services in the Scranton/Lackawanna County. Each User will affirm the principles of ethical data use and client confidentiality contained in the Policies and Standard Operating Procedures Manual and the User Agreement. Each Authorized Agency must have a written privacy policy that includes policies related to employee misconduct or violation of client confidentiality. All Users must understand their Agency's privacy policy, and an HMIS User Agreement must be held at the agency level for each User.

The data collected in HMIS is primarily the personal information of people in Scranton/Lackawanna County who are experiencing a housing crisis. It is the user's responsibility as the guardian of that data to ensure that it is only used to the ends to which it was collected and in and the manner to which the individual client has given consent.

All users will sign an HMIS User Agreement before being given access to HMIS. Any individual or Authorized Agency misusing, or attempting to misuse HMIS data will be denied access to the database, and his/her/its relationship to HMIS may be terminated.

Policy 1.9 Inter-Agency Data Sharing

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements for any client data sharing from the Participating Agency inputting and releasing data to any other Participating Agency accessing HMIS.

Policy Statement

Electronic data sharing varies between agencies. The need for client confidentiality and the benefit of integrated case management should be balanced when discussing inter-agency data sharing. During the development of the regional HMIS, Scranton/Lackawanna County CoC favored electronic data sharing within HMIS for the benefit of interagency case management. Since then, additional agencies, not receiving CoC/ESG funds, have been added to the system. The inter-agency data sharing policy is as follows:

CoC/ESG-fund recipients share all information that is entered into the system with exception to domestic violence service agency and clients that explicitly refuse to share data in SLCCoC HMIS.

Additional participating agencies will be set up as deemed appropriate by the CoC Board with consideration to client privacy as well as service facilitation.

Policy 1.10 Support

Responsible: HMIS Lead
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements of technical support for the HMIS software application.

Policy Statement

The HMIS Lead shall provide ongoing support to the Participating Agency through training on the system and ongoing telephone Help Desk functions. The HMIS Lead acknowledge the receipt of inquiries in a timely manner. The HMIS Lead will provide electronic access to documentation and manuals regarding the use of HMIS. The HMIS System also contains an on-line Help function for user support.

Support will include the HMIS Lead verification that the network server and the HMIS System are functioning correctly. Participating agencies are responsible for maintenance of their computer hardware and internet connectivity. The HMIS Lead will assist agency staff with questions that arise during the use of the System. Participating agencies should contact the Lead with questions or problems that appear to be related to errors in the System. The HMIS Lead may pass a description of the problem and an agency contact name to Eccovia Solutions Technical Support. The HMIS Lead will assist in the consolidation and deletion of duplicate client records.

Policy 2.0 Requirements for Agency Participation

Responsible: HMIS Lead
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements for the Participating Agency and User to obtain authorization to access and use HMIS.

Policy Statement

The HMIS Lead will ensure that anyone accessing HMIS has met the following standards:

- The agency requesting to participate in SLCCoC HMIS has signed a Partnership Agreement and the agreement will be on file at the HMIS Lead agency. The agency accessing the system shall ensure that measures have been taken to secure the physical location used for data entry. A computer that has HMIS “open and running” shall never be arranged so that unauthorized individuals may see the information on the screen.
- The User requesting access to the system has been given written permission from the Agency Administrator to access the system.
- The User given access to the system will have read, understood, and provided a signed acknowledgment of receipt of Policies and Standard Operating Procedures Manual.
- The User will be assigned a user name and password once they have successfully participated in HMIS Training.

Policy 2.1 Participating Agency Agreement

Responsible: HMIS Lead
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements for the Participating Agency Agreement.

Policy Statement

Only authorized Participating Agencies will be granted licenses to gain access to HMIS. The HMIS Lead will make the sole determination to identify Participating Agencies. Participating Agencies ensure that all aspects of the Participating Agency Agreement are followed as specified.

- The agency requesting to participate in HMIS has signed a Participating Agency Agreement and the agreement will be on file at the HMIS Lead agency.
- The Participating Agency Agreement outlines responsibilities and duties of the HMIS Lead and the Participating Agency including requirements for all aspects of system access and use.
- The Participating Agency Agreements will include terms and duration of access, an acknowledgement of receipt of the Policies and Standard Operating Procedures Manual, and an agreement to abide by all provisions contained therein.

Policy 2.2 User Licenses

Responsible: HMIS Lead
Authorized: SLCCoC Board

Effective Date:
Last Revision:

Scope

This policy establishes requirements for the Participating Agency and end user to obtain and utilize user licenses to gain access and use the SLCCoC HMIS.

Policy Statement

1. Fifteen licenses are available for each Participating CoC Agency. If necessary, the Participating Agency may incur any additional costs for licenses through the HMIS Lead Agency based upon the current quote from the system provider.
2. User licenses for agencies that do not receive CoC funds will be negotiated between the HMIS Lead Agency and relevant participating agency based upon the current quote from the system provider.
3. In order to obtain a license, a User must successfully complete an approved training program by the HMIS Lead.
4. Sharing of licenses, User IDs or passwords is strictly prohibited.

Policy 2.3 User Cost

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date:
Last Revision:

Scope

This policy establishes cost requirements by Participating Agencies to gain access and use HMIS.

Policy Statement

1. Should it become necessary to incur shared costs by participating agencies, the HMIS Lead shall determine the per agency cost, in consultation with and after advance approval of the Scranton/Lackawanna County Continuum of Care and participating agencies.
2. Costs shall be documented and itemized with an invoice sent to the Participating Agency directly from the HMIS Lead Agency.
3. Payments shall be made payable to the United Neighborhood Centers and due *–insert payment schedule–*.
4. Costs shall be designated as follows: _____ per month totaling _____ per year.

Policy 2.4 User Activation

Responsible: HMIS Lead
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements for the User activation to access and use HMIS.

Policy Statement

1. The User requesting access to the system has been given written permission from the Agency Administrator to access the system through written request to the HMIS Lead.
2. The User given access to the system will have read, understood, and provided a signed acknowledgment of receipt of Policies and Standard Operating Procedures Manual.

3. The User will be assigned a user name and password once they have successfully participated in HMIS Training.
4. The HMIS Lead, will distribute User licenses, adding and deleting Users as necessary.
5. The HMIS lead will be responsible for training all new Users.

Policy 2.5 User Agreement

Responsible: Participating Agency and User
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements for the User to obtain authorization to access and use HMIS.

Policy Statement

Users must sign a User Agreement with the HMIS Lead Agency acknowledging full understanding and acceptance of the responsibilities and the proper use of the User ID and password of SLCCoC HMIS. Only individuals who can view information in SLCCoC HMIS are authorized users along with the Client to whom the information pertains.

Failure to uphold the standards set forth in the User Agreement items listed below are grounds for immediate termination of User privileges.

1. User ID and Passwords must be physically secure and cannot be shared with anyone, including other staff members, supervisors or Executive Director.
2. Access to HMIS is limited to User designated work and their location must meet all HUD HMIS Data and Technical Standards.
3. Users of HMIS, whatever their work role, position, or location, may view, obtain, disclose, or use client data from SLCCoC HMIS only as is necessary to perform their specific job.
4. Failure to log off HMIS appropriately may result in a breach in client confidentiality and system security. Users must log-off of HMIS before leaving the work area for any reason.
5. A computer that has the SLCCoC HMIS System "open and running" shall never be arranged so that unauthorized individuals may see the information on the screen.
6. Users must not change the closed security on any Client's signed HMIS Client Release of Information. The HMIS security settings must always reflect the Client's expressed wishes as documented through the HMIS Client Release of Information.
7. User access is revoked immediately upon employment termination
8. Users are responsible to immediately notify the HMIS Lead at 570-346-0759 in the event that any breach of confidentiality is witnessed.

Policy 2.6 Hardware and Software Requirements and Maintenance

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes hardware and software requirements for the Participating Agency to access and use SLCCoC HMIS.

Policy Statement

The Participating Agency shall maintain and secure the minimum required hardware, software and internet connectivity required in the Data Standards released by the Department of Housing and Urban Development. These minimum requirements include the following:

- Microsoft Operating System: Windows XP Professional

- Virus Protection Software: must automatically update and upgrade
- Anti-spy ware Software: must automatically update and upgrade
- Firewall: Can be software or hardware
- Internet Connectivity: must be DSL or higher
- PC: Pentium IV or higher
- PC Access: PC must be password protected with each user having a unique Login ID and Password

Bandwidth Recommendations:

The average user will need to sustain a 30-50 Kilobytes/Sec of download throughput to comfortably browse SLCCoC HMIS. Internet Bandwidth Comparisons

- 56K Modem – Most users will achieve a connection between 26.4K – 46K depending upon the phone line quality. This will provide at least a 5.0 KB/S transfer rate which is low and not recommended for a single user.
- SDSL – 512Kbps/62.5KB/s. Allows eight users to concurrently browse SLCCoC HMIS or use the Internet.
- ADSL – 1.5-8Mbps/187.5KB/s-1MB/s. Allows 23 – 125 users concurrently to use SLCCoC HMIS System or use the Internet. Distance limited to 18,000 feet.
- Cable – 1Mbps/122.1KB/s. Allows 15 users to concurrently use SLCCoC HMIS or the Internet.
- T1 – 1.544Mbps/188.5KB/s. Allows 23 users to concurrently use SLCCoC HMIS or the Internet.
- T3 – 44.763Mbps/5.461MB/s. Allows 682 users to concurrently use SLCCoC HMIS or the Internet.

Other System Requirements:

- Use with a modern browser such as Microsoft Internet Explorer 7+, Google Chrome, and Firefox 9.0+.
- Set video display to 1024 x 768 or higher.

Policy 2.7 Training

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements to train all authorized personnel gaining access and use of SLCCoC HMIS.

Policy Statement

1. The HMIS Lead shall provide training to authorized Participating Agency personnel on use of SLCCoC HMIS.
2. The HMIS Lead shall utilize standardized training materials and curriculum in order to ensure that training is consistent.
3. Upon completion of training, the Participating Agency personnel should reasonably understand how the system works.
4. Tests and certifications may be required by the HMIS Lead.

Policy 2.8 Contract Termination

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements for the HMIS Lead Agency to terminate a Participating Agency Agreement.

Policy Statement

The HMIS Lead Agency may terminate the Participating Agency Agreement for non-compliance with the terms of the agreement or with the SLCCoC HMIS Policies and Standard Operating Procedures with written notice to the Participating Agency. The HMIS Lead Agency may also terminate the Participating Agency Agreement with or without cause with 15 days written notice to the Participating Agency and according to the terms specified in the Participating Agency Agreement. The termination of the Participating Agency Agreement may affect other contractual relationships with the local Continuum of Care or with funding agencies (HUD).

While the HMIS Lead Agency may terminate the Participating Agency Agreement with the Participating Agency, all data entered into the SLCCoC HMIS will remain a part of the SLCCoC HMIS. 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 Scranton/Lackawanna County. The termination of the Participating Agency Agreement may affect other contractual relationships with Continuum of Care or with funding agencies (HUD).

Many Participating Agencies are required to participate in HMIS as a condition of specific funding. When terminating the Agency Agreement, the Board Chair of the Continuum of Care will notify the person from the Participating Agency who signed the Agency Agreement (or a person in the same position within the agency) 15 days or more prior the date of termination of contract, unless the termination is due to non-compliance with the SLCCoC HMIS Policies and Standard Operating Procedures. Willful neglect or disregard of the SLCCoC HMIS Policies and Standard Operating Procedures may result in immediate termination of a Participating Agency from SLCCoC HMIS. In all cases of termination of Participating Agency Agreements, the HMIS Lead will inactivate all users from that Participating Agency on the date of termination of contract.

Policy 3.0 Security and Access

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements for implementing and maintaining security and access to the SLCCoC HMIS.

Policy Statement

The HMIS Lead and Participating Agencies will apply the user access privilege conventions set forth in the SLCCoC HMIS Policies and Standard Operating Procedures, Policy 2.5 Users Agreement and 3.8 User ID and Password.

Policy 3.1 Security of Data on File Server

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements to secure access to data on SLCCoC HMIS.

Policy Statement

The SLCCoC HMIS Lead Agency along with the HMIS Committee shall establish and maintain controls to keep secure all client data in SLCCoC HMIS. This shall prohibit access by

individuals who are not registered with the HMIS Lead Agency, and therefore, are unauthorized to receive Participating Agency and client data information through any and all means, including telephone, mail, and computer. All registration and addition of Participating Agency staff to SLCCoC HMIS will be handled solely through the HMIS Lead. The HMIS Lead is responsible for assigning initial passwords and providing accessibility to SLCCoC HMIS to only those authorized individuals designated by the Executive Director or his/her designee of the Participating Agency. The HMIS Lead shall not be held liable for any breach in security related to any changes in authorized Participating Agency personnel if the Participating Agency has not notified the HMIS Lead; notification must be documented through e-mail, or postmarked through postal mail, within one business day of the personnel changes.

Policy 3.2 Back Up of Data on File Server.

Responsible: HMIS Lead
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements to back up data to ensure continuity of access to data.

Policy Statement

The HMIS Lead Agency shall contract with the software vendor to provide for the back-up of all information housed within SLCCoC HMIS. Eccovia Solutions' ClientTrack include the following features:

- Incremental database backups are performed every 4 hours
- Each night a full backup is taken
- Each week all nightly backups are consolidated
- Backups are encrypted with 256-bit AES encryption
- Backups are sent offsite to a secure store facility daily.

Policy 3.3 Updates/Upgrades to SLCCoC HMIS

Responsible: HMIS Lead
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements to update/upgrade the SLCCoC HMIS System.

Policy Statement

The HMIS Lead shall notify the Participating Agency of all updates and/or upgrades to SLCCoC HMIS through email to the Agency Administrator and posting notice in the "Organization News" of the SLCCoC HMIS User dashboard. All updates and/or upgrades to will occur no sooner than one business day after the notice.

Policy 3.4 Data on File Server

Responsible: HMIS Lead
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements of data access upon termination of the Participating Agency entering data into SLCCoC HMIS.

Policy Statement

Upon termination of the Agency Partner Agreement, and at the Participating Agency's request, the HMIS Lead may assist the Participating Agency with generating a final global report of their data within a reasonable time frame. Notwithstanding anything in the agreement to the contrary, the HMIS Lead Agency and agencies using the SLCCoC HMIS shall have the continuing right after the termination of this agreement to retain and use a copy of the

Participating Agency's data which was shared during the course of this agreement in furtherance of the SLCCoC HMIS programs and subject to any restrictions on use imposed by the clients to whom such data pertains and/or set forth in the provision hereof which, by their terms, survive termination of the agreement.

Policy 3.5 Data Collection

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes the SLCCoC HMIS adherence to data collection and data integrity requirements.

Policy Statement

The Participating Agency shall enforce with their staff the importance, quality, and accuracy of entering all data into the SLCCoC HMIS, as required in the Department of Housing and Urban Development Data Standards. After training of agency staff by the HMIS Lead, the Participating Agency has the responsibility to implement and manage a system for entering client data; the HMIS Lead will provide assistance with project management if requested by the Participating Agency. The Participating Agency must ensure that all selected personnel are trained on these procedures and adhere to the regulations as stated in the Data Quality Plan, Appendix B.

Policy 3.6 User Access

Responsible: HMIS Lead
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements to appropriately add users of SLCCoC HMIS as well as designate system use restrictions.

Policy Statement

The HMIS Lead will generate usernames and initial passwords within the administrative function of SLCCoC HMIS. User ID and Passwords are to be assigned to individuals who have received the SLCCoC HMIS System training and who have understood and signed all appropriate user agreements and related documents.

Access to the software system will only be allowed from computers and networks meeting HUD Technical Standards and specifically identified by the Executive Director and Agency Administrator of the Participating Agency. Access to SLCCoC HMIS from unauthorized locations will be grounds for termination of user rights.

Policy 3.7 User Changes

Responsible: Participating Site Administrator
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes requirements to appropriately modify or delete users of SLCCoC HMIS.

Policy Statement

The Agency Administrator, or the employee's immediate supervisor, must notify the HMIS Lead of a user's termination from the agency, placement on disciplinary probation, or upon any change in duties not necessitating access to SLCCoC HMIS information within one business day of the occurrence. If a staff person is to go on leave for a period of longer than 30 days, their password should be inactivated within 24 hours of the start of their leave.

Policy 3.8 User ID and Passwords

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements to create and disseminate User IDs and passwords.

Policy Statement

Authorized users will be granted a unique user ID and password. Each user will be required to enter a User ID with a Password in order to logon to the system. User ID and Passwords are to be assigned to individuals. The User ID will be the work e-mail address of the user.

The initial, temporary password will be generated by the HMIS Lead and will be issued to the User by same. These passwords may be communicated in written or verbal form only. After logging in to the system for the first time with the temporary password, the new password the User selects must follow the specifications outlined on the ClientTrack screen. Passwords are case sensitive.

Forced Password Change will occur every year once a user account is issued. Passwords will expire and users will be prompted to enter a new password. Users may not use the same password consecutively, but may use the same password more than once.

Policy 3.9 Password Recovery

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCoC

Last Revision: January 19, 2017

Scope

This policy establishes requirements to reset create and communicate a new user password.

Policy Statement

If a User unsuccessfully attempts to log onto the system five times, the User ID will be "locked out," access permission will be revoked, and the User will be unable to gain access until their password is reset or their account is reactivated by the HMIS Lead.

The password will be reset by the HMIS Lead and communicated in written or verbal form to the user. The user will login with the given password and then set it to one of their own choosing.

Policy 3.10 Use and Disposal of Exported Data

Responsible: Participating Agency

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes requirements for the exported and disposal of exported SLCCoC HMIS data.

Policy Statement

Users have the ability to download and save client level data onto their local computer. Once this information has been downloaded in raw format to an agency's computer, the data then become the responsibility of the agency. A participating Agency must develop a protocol regarding the handling of data downloaded from SLCCoC HMIS.

The Participating Agencies shall establish internal extracted data protocols. Issues to be addressed include storage, transmission and disposal of the data.

Policy 4.0 Data Collection, Quality Assurance and Reporting

Responsible: Participating Agency

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes Participating Agency requirements for data collection, quality assurance and reporting in SLCCoC HMIS.

Policy Statement

The HMIS Lead and SLCCoC HMIS Participating Agencies will apply the data collection, quality assurance and reporting standards set forth in the SLCCoC Data Quality Standards.

Policy 4.1 Appropriate Data Collection

Responsible: Participating Agency
Authorized: SLCCoC HMIS Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes Participating Agency requirements for inputting data into the SLCCoC System.

Policy Statement

The purpose of the SLCCoC is to support the delivery of homeless and housing services in Scranton/Lackawanna County. The database should only be used to collect or track information related to meeting the client's needs, the delivery of services and for policy development and planning purposes.

SLCCoC users will only collect client data that is

- relevant to the delivery of services,
- required by funders, or
- mandated by law.

Procedure

Agency Administrator will ask the HMIS Lead for any necessary clarification of appropriate data collection. The HMIS Lead, in consultation with the HMIS Committee and the CoC Board of Directors, will make decisions about the appropriateness of data being entered into the database. SLCCoC HMIS will periodically audit data quality to ensure the database is being used appropriately. This concern targets data elements that can be consistently tracked and reported, and does not specifically target the contents of case management notes or other fields not to be aggregated.

Policy 4.2 Client Grievances

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes Participating Agency requirements for managing client grievances related to the SLCCoC HMIS.

Policy Statement

Clients shall have the right to an independent, impartial review of any complaints they may have regarding SLCCoC data collection, explanations offered for that collection, and policies surrounding the collection. They also have a right to know about this opportunity.

Agencies must make every good faith effort to assure that homeless clients are apprised of our obligation and their right. To that end each agency must adhere to the process for filing a formal grievance with the HMIS Lead should a client determine his or her SLCCoC HMIS data privacy rights have been compromised by the Participating Agency.

Procedure

Each Agency shall inform their clients of their SLCCoC HMIS data privacy rights by prominently displaying the SLCCoC HMIS Public Notice of Privacy wherever SLCCoC HMIS data is

collected, as well as making the SLCCoC HMIS Privacy Notice available. In the event a client believes his or her SLCCoC HMIS data privacy rights have been compromised by the Participating Agency, (s)he should file a formal complaint by submitting a completed SLCCoC HMIS Grievance Form with the HMIS Lead. It is the responsibility of the Agency to ensure that the grievance form is readily accessible to clients. The HMIS Lead will research the written grievance and determine if there was a violation of SLCCoC HMIS data privacy rights. Should the HMIS Lead conclude that a breach has been made, she shall provide the Participating Agency with a timely plan of action for any correction that is necessary and addressing the issue with the staff involved. This may involve termination of user licenses and/or additional training.

Policy 4.3 Required Data Collection

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes Participating Agency data collection requirements to be entered into the SLCCoC System.

Policy Statement

Providers funded by HUD are required to participate in the SLCCoC HMIS system to meet the HUD HMIS Data and Technical Standards. Other providers may choose to participate in the SLCCoC HMIS. All Authorized Agencies that participate in the SLCCoC HMIS are required to comply with HUD's HMIS Data and Technical Standards unless those standards are in conflict with local laws. This includes the collection of required data elements.

If client refuses or is unable to provide basic information, providers shall, at a minimum, enter each client as an Anonymous entry into the SLCCoC HMIS. Authorized Agencies may choose to collect more client information for their own case management and planning purposes.

Timeliness of Data Entry: Quality assurance of timeliness is described in the SLCCoC Data Quality Plan, Appendix B. All HMIS Participating programs will ensure entry/exits, services, and Universal Data Elements are completed within 5** business days of program entry/exits, with exceptions for emergency shelters, outreach programs, and legacy data. SLCCoC HMIS timeliness of data entry policy will not supersede more stringent CoC timeliness of data entry policies. Exceptions to these data collection policies are in place for organizations serving persons fleeing domestic violence; these organizations should request additional instruction from the HMIS Lead.

In order for the data contained within the SLCCoC HMIS to be useful for data analysis and reporting to funders, certain minimum data must be consistently collected throughout the system. In addition to the HUD required Data Elements, client level data is expected as well.

Procedure

All parties are subject to the SLCCoC HMIS Data Quality Plan, Appendix B, for determining procedural applications of the data collection policies and monitoring practices.

Policy 4.4 Client Informed Consent

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes Participating Agency requirement to obtain client informed consent prior to inputting data into the SLCCoC HMIS.

Policy Statement

Each agency must post a sign at each intake or comparable location and on its web site (if applicable) explaining the reasons for data collection for those seeking services. Consent for entering of data into SLCCoC HMIS may be inferred when the proper privacy notice is posted and if the client accepts the services offered. The client has the option to opt out of allowing his or her identifying information to be added to the database. In that case, the client's data should be added to SLCCoC HMIS without identifiers as described above, although the record should be tracked internally by the agency to minimize the number of duplicate records for one client. Electronic client data will be shared between agencies in accordance to the policies adopted by the SLCCoC Board of Directors. Client data may be shared through other means with written client consent or according to the privacy policy developed by the agency.

Privacy Policies should be in effect for each agency to both inform clients about the uses and disclosures of their personal data and to protect the agency by establishing standard practices for the use and disclosure of data. Each client must give permission for the disclosure and/or use of any client data outside of the privacy policy developed and posted by the agency. Client consent notices must contain enough detail so that the client may make an informed decision. Clients may withdraw permission to have their personal protected information shared in the SLCCoC HMIS, or may make a request to see copies of his or her client record.

Procedure

The HMIS Lead shall assume responsibility for monitoring Participating Agencies' compliance. The results and the means of determining them will be shared with the HMIS Committee.

Policy 4.5 Client Release of Information to Share Data

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes Participating Agency requirement to obtain client informed consent to share data in the SLCCoC HMIS.

Policy Statement

Each agency should include in its privacy policy that data collected by the agency is included in the SLCCoC HMIS as part of its administrative responsibility to its Continuum of Care and that aggregate, de-identified data may be used for analysis and reporting purposes. SLCCoC HMIS will only report aggregate and/or de-identified data as part of its responsibilities, and agrees to maintain the data with the highest level of confidentiality and within the security guidelines set forth in this document.

If a client declines data sharing permission, the user must take steps to restrict access to client data to the entering organization, immediately upon creation of the record.

Policy 4.6 Data Ownership

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes the requirement and responsibilities connected to data ownership of data within the SLCCoC HMIS.

Policy Statement

The SLCCoC HMIS, and any and all data stored in the system, is the property of the HMIS Lead Agency. The HMIS Lead Agency has authority over the creation, maintenance, and security of the SLCCoC HMIS. Violations of the SLCCoC HMIS Agency Agreement, the SLCCoC HMIS

Policies and Standard Operating Procedures, the Privacy Policies, or other applicable laws may subject the Authorized Agency to discipline and/or termination of access to the SLCCoC HMIS.

In order to ensure the integrity and security of sensitive client confidential information and other data maintained in the database, the HMIS Lead Agency will be responsible for data ownership.

Policy 4.7 Data Entry Shared Information

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes the requirement and responsibilities connected to sharing client profile information within the SLCCoC HMIS.

Policy Statement

From CoC to CoC, there are different policies about sharing information maintained in client records. The SLCCoC HMIS has a policy to allow First Name, Last Name, Race, Gender and Date of Birth fields to be shared across providers. A Client Consent - Release of Information form, signed by the client, must be kept on file.

In order to continue building our SLCCoC HMIS and the collaboration between Participating Agencies, the Board is open to the differing needs and sensitivities of each Agency; however, we are supporting an OPEN system.

Policy 4.8 Data Integrity

Responsible: Participating Agency
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes the requirement to ensure data integrity of SLCCoC HMIS.

Policy Statement

SLCCoC HMIS users will be responsible for the accuracy of their data entry. Authorized Agency leadership will be responsible for ensuring that data entry by users is being conducted in a timely manner and will also develop procedures to evaluate and increase the accuracy of the data entered.

The quality of SLCCoC data is dependent on individual users to take responsibility for the accuracy and quality of their own data entry. The HMIS Lead shall work with Agency Executive Directors and/or Agency Administrators in assuming responsibility for and in the monitoring of data quality for their own agency. It is in the interest of agencies and the CoC that all data collected have integrity since that data may be used for evaluation, reporting, monitoring, or funding purposes. In particular the data will impact funding opportunities during competitive SHP process. SLCCoC HMIS emphasizes, analyzes, and reports on data quality as a service to member agencies. All parties are subject to standards as determined in the SLCCoC HMIS Data Quality Plan, Appendix B.

Procedure

In order to test the integrity of the data contained in SLCCoC HMIS, the HMIS Lead will devise regular data integrity checks for the SLCCoC.

Policy 4.9 Monitoring and Evaluation

Responsible: SLCCoC HMIS Lead
Authorized: SLCCoC Board

Effective Date: January 19, 2017
Last Revision: January 19, 2017

Scope

This policy establishes the requirement for monitoring and evaluating the SLCCoC HMIS.

Policy Statement

Accurate and consistent data entry is essential to ensuring the usefulness of the SLCCoC HMIS. Agencies will provide acceptable levels of timeliness and accuracy. Agencies without acceptable levels of data quality or timeliness may incur any sanctions negotiated by the Board until problems are addressed.

Data quality is an important aspect of SLCCoC HMIS, and must be maintained at the agency level and by users of the system. The HMIS Lead will monitor data quality as part of management functions.

Procedure

The HMIS Lead will develop and perform regular data integrity checks and will report on a regular basis.

Policy 4.10 On-Site Review

Responsible: HMIS Lead

Effective Date: January 19, 2017

Authorized: SLCCoC Board

Last Revision: January 19, 2017

Scope

This policy establishes the requirement for an on-site review of SLCCoC HMIS.

Policy Statement

Annual review of each contracted agency will be the responsibility of the HMIS Lead.

Regular reviews enable the SLCCoC HMIS to monitor compliance with the Standard Operating Procedures Manual and the SLCCoC HMIS Agency Agreements.

Procedure

The exact procedures for on-site reviews will be determined by the SLCCoC HMIS Committee on an annual basis.

Policy 4.11 Client Request for Data

Responsible: Participating Agency

Effective Date: January 19, 2017

Authorized: SLCCoC HMIS

Last Revision: January 19, 2017

Scope

This policy establishes the requirement for managing a client's request for their SLCCoC HMIS data.

Policy Statement

Any client may request to view, or obtain a printed copy of his or her own records contained in SLCCoC HMIS. The client will also have access to a logged audit trail of changes to those records. No client shall have access to another client's records in SLCCoC HMIS.

The data in SLCCoC HMIS is the personal information of the individual client. Each client has a right to know what information about him or her exists in the database, and to know who has added, changed or viewed this information, and when these events have occurred. This information should be made available to clients within a reasonable time frame of the request.

Procedure

A client may ask his/her case manager or other agency staff to see his or her own record. The case manager, or any available staff person with SLCCoC HMIS access, will verify the client's identity and print all requested information. The case manager can also request a logged audit trail of the client's record from the HMIS Lead. The HMIS Lead will print this audit trail; give it to the case manager, who will give it to the client. The client may request changes to the record, although the agency can follow applicable law regarding whether to change information based

on the client's request. A log of all such requests and their outcomes should be kept on file in the client's record.

Policy 4.12 Release of Data for Public Use

Responsible: Participating Agency

Effective Date: January 19, 2017

Authorized: SLCCoC HMIS

Last Revision: January 19, 2017

Scope

This policy establishes the requirement for managing public requests for SLCCoC HMIS data.

Policy Statement

Any requests for information from an individual or group who has not been explicitly granted access to SLCCoC HMIS will be directed to the HMIS Committee. Requests for data at the Continuum of Care level will be directed to the HMIS Lead. No individual client data will be provided to any group or individual that is neither the Authorized Agency that entered the data or the client him or herself without proper authorization or consent.

The HMIS Lead will release routine aggregate reports for the larger community, which will address, but are not limited to, descriptive and demographical statistics. In instances where SLCCoC HMIS is mandated contractually to provide HMIS data, reports will be provided for purposes of monitoring services delivery and/or program evaluation. The content of these reports will reflect a commitment to client confidentiality and ethical data use. No individual client data will be provided to meet these requests without proper authorization or consent.

Procedure

As part of the mission to end homelessness in Lackawanna County, it is SLCCoC HMIS's policy to provide aggregate data on homelessness and housing issues in this area. SLCCoC HMIS will also issue periodic routine public reports. No individually identifiable client data will be reported in any of these documents. Wherein the SLCCoC HMIS is contractually obligated to provide de-identified data to funders for program monitoring and evaluation, the HMIS Lead shall prepare and submit reports to the appropriate bodies.

All requests for data from anyone other than an Agency or a client, which cannot be satisfied by either of the aforementioned conditions, will be directed to the SLCCoC HMIS Committee for a recommendation to the Board. The Executive Committee may act on behalf of the Board to expedite urgent requests.

Appendix A

Scranton/Lackawanna County Continuum of Care Board Membership

Sr. Therese Marques, RSM
Executive Director
Catherine McAuley Center
430 Pittston Avenue
Scranton, PA 18505
570-342-1342
Tara Finnerty
Executive Director
Community Intervention Center
445 N. 6th Avenue
Scranton, PA 18503
570-342-4298
Tricia Thomas
Executive Director
Boys and Girls Club of NEPA
609 Ash Street
Scranton, PA 18509
570-342-8709

Ruma Marshall
Family and Maternity Director
St. Joseph's Center
320 S. Blakely Street
Dunmore, PA 18512
570-496-4200
Crystal Arcarese
Housing for the Homeless Veteran Coordinator
Veteran's Administration Medical Center
1111 East End Blvd.
Wilkes Barre, PA 18711
570-824-3521 x 7742

Mr. Stephen Nocilla
Diocesan Director of Housing
Catholic Social Services
504 Penn Avenue
Scranton, PA 18509
570-955-5517
Craig Hoenie
Staff Attorney
North Penn Legal Services
33 North Main Street
Pittston, PA 18640
570-299-4100
Joseph Hollander
Executive Director
Scranton Primary Health Care Center
959 Wyoming Avenue
Scranton, PA 18509
570-344-9684

Michael Hanley
Chief Executive Officer
United Neighborhood Centers
777 Keystone Industrial Park Rd.
Scranton, PA 18509
570-346-0759
Peg Ruddy
Executive Director
Women's Resource Center
P.O. Box 975
Scranton, PA 18501
570-346-4460

Scranton/Lackawanna County Continuum of Care Data Quality Plan

December 1, 2016

Developed by:
SLCCoC HMIS Committee

The Scranton/Lackawanna County Continuum of Care has developed a written policy and procedure for entering data into the local Homeless Management Information System. The purpose of this plan is to ensure accurate and complete information to report on the homeless population being served by the PA-508 Continuum. All SLCCoC participating agencies will adhere to the protocol described to meet data quality requirements. This plan describes the timeliness, completeness, accuracy, monitoring, incentives and enforcement policies to be followed.

1. Timeliness: The timeliness component of the data quality plan is documented to ensure that data is accessible when needed and also to avoid any incorrect data due to postponement of entering universal and program specific elements.

CoC Programs:

Transitional and Rapid Re-Housing Programs

- * Entering Data: All Universal and Program Specific Data Elements will be entered into HMIS within one week of intake
- * Exiting Data: Clients will be exited from HMIS within three working days after the client(s) exited the program.
- * All HUD Assessments will be updated annually within 30 days of the anniversary date for program entry.

Permanent Supportive Housing Programs

- * Entering Data: All Universal and Program Specific Data Elements will be entered into HMIS within one week of intake.
- * Exiting Data: Clients will be exited from HMIS within three working days after the client(s) exited the program.
- * All HUD Assessments will be updated annually within 30 days of the anniversary date for program entry.

ESG Programs:

Emergency Shelters - Including Night-by-Night's (NBN's):

- * Entering Data: All Universal and Program Specific Data Elements, including Universal Data, Barriers and Domestic Violence Assessments as well as "Contact" & "Date of Engagement" information, will be entered into HMIS within two days of intake.
- * Exiting Data: NBN's leaving without an exit interview will record "Exit Destination" as "No exit interview completed". All other shelters will exit clients within three working days after the client has exited the program.
- * An annual assessment will be conducted for all persons in a project for one year or more.

Prevention:

- * Entering Data: All Universal and Program Specific Data Elements, Including "Housing Assessment at Exit" will be entered within 24 hours of receiving assistance.
- Re-evaluations/updates will be performed on prevention clients once every three months.

Rapid Re-housing:

- * Entering Data: All Universal and Program Specific Data, including "Residential Move-In Date" will be entered at project entry.
- * Exiting Data: Client will be exited from HMIS within three working days after exiting the program.
- * All assessments will be updated annually.

Outreach:

- * Entering Data: Outreach projects will record every contact made with client in HMIS. All Universal and Program Specific Data, including "Contact" & "Date of Engagement" will be entered into HMIS at the point when the client has been engaged by the outreach worker.
- * Exiting Data: Client will be exited from HMIS after three months of no contact.
Support Services Only
- * Entering Data: All Universal and Program Specific Data Elements will be entered into HMIS within one week of intake
- * Exiting Data: Client(s) will be exited from HMIS quarterly.

2. Completeness:

The Continuum's goal is to collect 100% accurate data. Comprehensive data supplies the CoC with a clear picture of the clientele they are serving, fulfills funding/compliance requirements and plays a vital role with future planning. However, the CoC understands that collecting 100% of all data elements may not be possible in all cases and scenarios. The CoC has established an acceptable range of unknown/don't know/refused responses between 1 and 5% for each data element. The CoC has agreed to establish a 0% allowable null/missing data for universal elements because all elements are a requirement in HMIS. (Please refer to data quality monitoring tool for details on specific elements)

All data is completely and accurately entered into HMIS. The HMIS staff administrator runs monthly data quality reports which are reviewed monthly. If corrections need to be made, staff and agencies will have 10 working days to complete. If compliance has been achieved no changes should be necessary.

Example: If the data element for veteran status is unknown for emergency shelters is 1% or less, the data is complete and no changes need to be made. If veteran status is unknown for emergency shelters is greater than 1%, the data is incomplete and needs to be corrected.

2.1 Completeness: All Clients Served – The PA-508 CoC must ensure that all clients being served are entered into HMIS. If a program only enters some clients and not all clients, the data is not representing our homeless population accurately. Therefore, 100% of all homeless residential clients are to be entered into HMIS detailing the clients' specific situations. 100% of all homeless program participants will have the services data entered into HMIS.

2.2 Completeness: Bed Utilization Rates- Staff enters a client into HMIS and they are assigned to a program until they are exited. Once a client is exited, the bed or unit becomes free. The bed utilization rate is the # of beds occupied divided by the # of total beds. If a program has a low rate it could mean that the facility was not full or it could mean that the clients were not entered properly. High rates could mean that a program was over capacity on a given night or it could mean that clients are not being exited. Programs are assigned a maximum bed/unit capacity and should abide by those rules unless there are unusual circumstances that can be explained. Staff must ensure that the number of clients they are serving in any given program, matches the number of clients for that program in HMIS.

3. Accuracy – Information entered into HMIS needs to accurately reflect any/ all of the people that enter any of the homeless programs. Inaccurate or false data/information is worse than having missing data. Agencies and staff should understand that it is better to enter nothing (or preferable don't know or refused) than to enter false information. To ensure correctness, data entry errors/mistakes should be edited on a monthly basis. Data in HMIS must also match the

client file. Example: The date a client physically left the program should be the same in HMIS and on client paperwork.

4. Consistency- All data should be collected and entered on a consistent basis across all programs. If data is not collected and entered on a consistent basis, information may be lost or inaccurate. All intake and data entry workers will complete an initial training before entering any information into the live database. Definitions of specific data elements will also be available so as to ensure staff is collecting the exact information that funders are looking for. New agencies that join the CoC as well as new staff will review this document as part of the HMIS Agency Agreement.

5. Monitoring-Monitoring will be conducted to ensure that HMIS data quality is valid. All HMIS agencies are expected to meet the data quality benchmarks described on the monitoring tool. HMIS data will be monitored on a monthly basis to quickly identify any issues. To ensure that users understand the process of the data quality plan, the following protocol will be used from month to month.

- a. HMIS end users should have all data entered into the system within one week of the intake.
- b. Data quality reports will be run by the 2nd Thursday of every month by the HMIS staff.
- c. Data quality reports will be reviewed by the HMIS sub-committee on a monthly basis, either at an HMIS meeting or via e-mail.
- d. Providers will have 10 working days from the time the sub-committee's Data Quality Report is distributed to correct the data.
- e. Brief overview of the progress of the data quality will be discussed at the following CoC meeting after corrections have been made.
- f. If agencies fail to meet the data quality benchmarks even after the corrective period, agencies will have to explain why they have not met these requirements and the CoC shall take necessary actions as the members see fit.

6. Incentives and Enforcement-

* Incentives: The Continuum of Care proposed that some incentives for timeliness, completeness, accuracy, consistency of data are as follows:

- o Agencies will have recognition at CoC Meetings
- o Data Quality may be used as a program performance metric
- o Each Agency within the Continuum of Care is encouraged to come up with their own incentives for their respective agencies.
- Enforcements: The Continuum of Care proposed that if agencies do not comply with this data quality plan, the future funding of projects operated by that agency will be in jeopardy, or, if agency participation is optional, agency may be prohibited from using HMIS.

Domestic Violence Provider

Data Quality Plan

* The Lackawanna County Continuum of Care's Domestic Violence provider, in accordance with the protocol and procedures set in place by the Lackawanna County CoC will adhere to the following components of the Data Quality Plan:

o Timeliness –

- * Emergency Shelter Programs: The DV provider will enter data into an HMIS comparable database within 24 hours of intake
- * Transitional Housing Programs: The DV provider will enter data into an HMIS comparable database within one week of intake

o Completeness –

- * The DV provider will collect 100% of data elements unless an individual being served reports an unknown, don't know or refusal element. In that instance, the DV provider will stay within the 1 and 5% compliance.
- * 100% of all homeless participants served through the DV provider will be entered into the HMIS comparable database.
- * The DV Provider will ensure that the number of participants they are serving in a program match the number of participants for that specific program in Housing Index as reported to the CoC.
- o Accuracy -
 - * Information entered into the DV providers HMIS comparable database will reflect any/all of the individuals that enter any of the homeless programs. Data in the HMIS comparable database will be the same as the data in the participants file.
- o Consistency –
 - * The DV provider will collect and enter all data on a consistent basis across all programs. The provider will ensure that all data entry workers complete training on the HMIS comparable database prior to entering any information into the database. A document that outlines basic information needed for the accurate collection of information will match intake forms.
- o Monitoring –
 - * The DV provider will strive to meet the data quality benchmarks as described on the monitoring tool and will follow the protocol as outlined in the Data Quality Plan. The DV provider will monitor their own data quality at least quarterly and correct any missing or don't know/don't have data values that are above the benchmarks for said values.

Standard (percentage no greater than)

| Universal Data Element | ES | | | TH | | | PH | | | SSO | | | Outreach | | | Prevention | | | Rpd Re-hsg | | |
|---|------------|--------------------|--|------------|--------------------|--|------------|--------------------|--|------------|--------------------|--|------------|--------------------|--|------------|--------------------|--|------------|--------------------|--|
| | Null/ Miss | Unkn/ Dn't Kw/ Ref | | Null/ Miss | Unkn/ Dn't Kw/ Ref | | Null/ Miss | Unkn/ Dn't Kw/ Ref | | Null/ Miss | Unkn/ Dn't Kw/ Ref | | Null/ Miss | Unkn/ Dn't Kw/ Ref | | Null/ Miss | Unkn/ Dn't Kw/ Ref | | Null/ Miss | Unkn/ Dn't Kw/ Ref | |
| 1.Name | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | |
| 2.Social Security Number (SSN) | 0% | 2% | | 0% | 1% | | 0% | 0% | | 0% | 2% | | 0% | 2% | | 0% | 2% | | 0% | 1% | |
| 3.Date of Birth | 0% | 1% | | 0% | 0% | | 0% | 0% | | 0% | 1% | | 0% | 0% | | 0% | 0% | | 0% | 0% | |
| 4.Race | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | |
| 5.Ethnicity | 0% | 1% | | 0% | 1% | | 0% | 1% | | 0% | 1% | | 0% | 1% | | 0% | 1% | | 0% | 1% | |
| 6.Gender | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | |
| 7.Veteran Status | 0% | 1% | | 0% | 1% | | 0% | 1% | | 0% | 1% | | 0% | 2% | | 0% | 1% | | 0% | 1% | |
| 8.Disabling Condition | 0% | 2% | | 0% | 2% | | 0% | 0% | | 0% | 2% | | 0% | 2% | | 0% | 2% | | 0% | 2% | |
| 9.Residence Prior to Program Entrance | 0% | 3% | | 0% | 1% | | 0% | 1% | | 0% | 1% | | 0% | 3% | | 0% | 1% | | 0% | 1% | |
| 10.Zip Code of Last Permanent Residence | 0% | 3% | | 0% | 3% | | 0% | 3% | | 0% | 3% | | 0% | 3% | | 0% | 3% | | 0% | 3% | |
| 11.Homeless Status | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | |
| 12.Program Entry Date | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | |
| 13.Program Exit Date | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | |
| 14.Personal Identifier (Unique ID) | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | |
| 15.Household Identifier | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | | 0% | 0% | |

2018 HDX Competition Report

PIT Count Data for PA-508 - Scranton/Lackawanna County CoC

Total Population PIT Count Data

| | 2016 PIT | 2017 PIT | 2018 PIT |
|---------------------------------------|----------|----------|----------|
| Total Sheltered and Unsheltered Count | 242 | 197 | 159 |
| Emergency Shelter Total | 80 | 56 | 76 |
| Safe Haven Total | 4 | 4 | 8 |
| Transitional Housing Total | 147 | 123 | 70 |
| Total Sheltered Count | 231 | 183 | 154 |
| Total Unsheltered Count | 11 | 14 | 5 |

Chronically Homeless PIT Counts

| | 2016 PIT | 2017 PIT | 2018 PIT |
|---|----------|----------|----------|
| Total Sheltered and Unsheltered Count of Chronically Homeless Persons | 13 | 13 | 12 |
| Sheltered Count of Chronically Homeless Persons | 8 | 7 | 11 |
| Unsheltered Count of Chronically Homeless Persons | 5 | 6 | 1 |

2018 HDX Competition Report

PIT Count Data for PA-508 - Scranton/Lackawanna 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 | 42 | 32 | 19 |
| Sheltered Count of Homeless Households with Children | 42 | 32 | 19 |
| Unsheltered Count of Homeless Households with Children | 0 | 0 | 0 |

Homeless Veteran PIT Counts

| | 2011 | 2016 | 2017 | 2018 |
|--|------|------|------|------|
| Total Sheltered and Unsheltered Count of the Number of Homeless Veterans | 35 | 36 | 26 | 33 |
| Sheltered Count of Homeless Veterans | 35 | 36 | 26 | 33 |
| Unsheltered Count of Homeless Veterans | 0 | 0 | 0 | 0 |

2018 HDX Competition Report

HIC Data for PA-508 - Scranton/Lackawanna 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 | 56 | 6 | 50 | 100.00% |
| Safe Haven (SH) Beds | 11 | 0 | 11 | 100.00% |
| Transitional Housing (TH) Beds | 76 | 9 | 67 | 100.00% |
| Rapid Re-Housing (RRH) Beds | 93 | 40 | 53 | 100.00% |
| Permanent Supportive Housing (PSH) Beds | 219 | 0 | 164 | 74.89% |
| Other Permanent Housing (OPH) Beds | 0 | 0 | 0 | NA |
| Total Beds | 455 | 55 | 345 | 86.25% |

2018 HDX Competition Report

HIC Data for PA-508 - Scranton/Lackawanna 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 | 153 | 165 | 164 |

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 | 11 | 25 | 24 |

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 | 30 | 76 | 93 |

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Summary Report for PA-508 - Scranton/Lackawanna County CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

| | Universe (Persons) | | Average LOT Homeless (bed nights) | | | Median LOT Homeless (bed nights) | | |
|-------------------------------|-----------------------|---------|--------------------------------------|---------|------------|-------------------------------------|---------|------------|
| | Submitted FY 2016 | FY 2017 | Submitted FY 2016 | FY 2017 | Difference | Submitted FY 2016 | FY 2017 | Difference |
| 1.1 Persons in ES and SH | 574 | 605 | 26 | 27 | 1 | 11 | 12 | 1 |
| 1.2 Persons in ES, SH, and TH | 793 | 803 | 107 | 101 | -6 | 30 | 23 | -7 |

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.

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FY2017 - Performance Measurement Module (Sys PM)

| | Universe (Persons) | | Average LOT Homeless (bed nights) | | | Median LOT Homeless (bed nights) | | |
|--|-----------------------|---------|--------------------------------------|---------|------------|-------------------------------------|---------|------------|
| | Submitted FY 2016 | FY 2017 | Submitted FY 2016 | FY 2017 | Difference | Submitted FY 2016 | FY 2017 | Difference |
| 1.1 Persons in ES, SH, and PH (prior to "housing move in") | 574 | 626 | 41 | 72 | 31 | 19 | 19 | 0 |
| 1.2 Persons in ES, SH, TH, and PH (prior to "housing move in") | 793 | 824 | 131 | 148 | 17 | 40 | 31 | -9 |

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 | |
|-------------------------------|--|---|--------------|---|--------------|--|--------------|------------------------------|--------------|
| | | FY 2017 | % of Returns | FY 2017 | % of Returns | FY 2017 | % of Returns | FY 2017 | % of Returns |
| Exit was from SO | 16 | 2 | 13% | 2 | 13% | 3 | 19% | 7 | 44% |
| Exit was from ES | 115 | 3 | 3% | 2 | 2% | 9 | 8% | 14 | 12% |
| Exit was from TH | 91 | 11 | 12% | 2 | 2% | 1 | 1% | 14 | 15% |
| Exit was from SH | 5 | 0 | 0% | 1 | 20% | 1 | 20% | 2 | 40% |
| Exit was from PH | 18 | 2 | 11% | 3 | 17% | 1 | 6% | 6 | 33% |
| TOTAL Returns to Homelessness | 245 | 18 | 7% | 10 | 4% | 15 | 6% | 43 | 18% |

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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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 | 242 | 197 | -45 |
| Emergency Shelter Total | 80 | 56 | -24 |
| Safe Haven Total | 4 | 4 | 0 |
| Transitional Housing Total | 147 | 123 | -24 |
| Total Sheltered Count | 231 | 183 | -48 |
| Unsheltered Count | 11 | 14 | 3 |

Metric 3.2 – Change in Annual Counts

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

| | Submitted FY 2016 | FY 2017 | Difference |
|---|----------------------|---------|------------|
| Universe: Unduplicated Total sheltered homeless persons | 796 | 803 | 7 |
| Emergency Shelter Total | 572 | 613 | 41 |
| Safe Haven Total | 9 | 7 | -2 |
| Transitional Housing Total | 254 | 200 | -54 |

2018 HDX 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 | FY 2017 | Difference |
|--|----------------------|---------|------------|
| Universe: Number of adults (system stayers) | 79 | 86 | 7 |
| Number of adults with increased earned income | 17 | 19 | 2 |
| Percentage of adults who increased earned income | 22% | 22% | 0% |

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

| | Submitted FY 2016 | FY 2017 | Difference |
|---|----------------------|---------|------------|
| Universe: Number of adults (system stayers) | 79 | 86 | 7 |
| Number of adults with increased non-employment cash income | 30 | 26 | -4 |
| Percentage of adults who increased non-employment cash income | 38% | 30% | -8% |

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

| | Submitted FY 2016 | FY 2017 | Difference |
|---|----------------------|---------|------------|
| Universe: Number of adults (system stayers) | 79 | 86 | 7 |
| Number of adults with increased total income | 42 | 39 | -3 |
| Percentage of adults who increased total income | 53% | 45% | -8% |

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

| | Submitted FY 2016 | FY 2017 | Difference |
|--|----------------------|---------|------------|
| Universe: Number of adults who exited (system leavers) | 109 | 34 | -75 |
| Number of adults who exited with increased earned income | 24 | 10 | -14 |
| Percentage of adults who increased earned income | 22% | 29% | 7% |

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

| | Submitted FY 2016 | FY 2017 | Difference |
|---|----------------------|---------|------------|
| Universe: Number of adults who exited (system leavers) | 109 | 34 | -75 |
| Number of adults who exited with increased non-employment cash income | 28 | 9 | -19 |
| Percentage of adults who increased non-employment cash income | 26% | 26% | 0% |

Metric 4.6 – Change in total income for adult system leavers

| | Submitted FY 2016 | FY 2017 | Difference |
|---|----------------------|---------|------------|
| Universe: Number of adults who exited (system leavers) | 109 | 34 | -75 |
| Number of adults who exited with increased total income | 48 | 16 | -32 |
| Percentage of adults who increased total income | 44% | 47% | 3% |

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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 | FY 2017 | Difference |
|---|----------------------|---------|------------|
| Universe: Person with entries into ES, SH or TH during the reporting period. | 687 | 635 | -52 |
| 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. | 173 | 121 | -52 |
| 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) | 514 | 514 | 0 |

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 | FY 2017 | Difference |
|--|----------------------|---------|------------|
| Universe: Person with entries into ES, SH, TH or PH during the reporting period. | 732 | 685 | -47 |
| 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. | 183 | 141 | -42 |
| 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.) | 549 | 544 | -5 |

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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 | FY 2017 | Difference |
|---|----------------------|---------|------------|
| Universe: Persons who exit Street Outreach | 16 | 42 | 26 |
| Of persons above, those who exited to temporary & some institutional destinations | 12 | 1 | -11 |
| Of the persons above, those who exited to permanent housing destinations | 4 | 19 | 15 |
| % Successful exits | 100% | 48% | -52% |

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

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

| | Submitted 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 | 672 | 668 | -4 |
| Of the persons above, those who exited to permanent housing destinations | 477 | 262 | -215 |
| % Successful exits | 71% | 39% | -32% |

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

| | Submitted FY 2016 | FY 2017 | Difference |
|---|----------------------|---------|------------|
| Universe: Persons in all PH projects except PH-RRH | 184 | 178 | -6 |
| Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations | 178 | 174 | -4 |
| % Successful exits/retention | 97% | 98% | 1% |

2018 HDX Competition Report

FY2017 - SysPM Data Quality

PA-508 - Scranton/Lackawanna 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 | 48 | 46 | 54 | 48 | 169 | 148 | 125 | 106 | 83 | 125 | 226 | 220 | 5 | | 29 | 45 | | | | |
| 2. Number of HMIS Beds | 48 | 46 | 54 | 48 | 169 | 148 | 125 | 106 | 83 | 125 | 153 | 165 | 5 | | 29 | 45 | | | | |
| 3. HMIS Participation Rate from HIC (%) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 67.70 | 75.00 | 100.00 | | 100.00 | 100.00 | | | | |
| 4. Unduplicated Persons Served (HMIS) | 525 | 567 | 579 | 621 | 265 | 242 | 254 | 201 | 130 | 136 | 187 | 182 | 31 | 68 | 88 | 55 | 29 | 18 | 6 | 42 |
| 5. Total Leavers (HMIS) | 500 | 404 | 502 | 575 | 164 | 124 | 144 | 119 | 17 | 15 | 42 | 18 | 31 | 32 | 66 | 28 | 11 | 17 | 3 | 35 |
| 6. Destination of Don't Know, Refused, or Missing (HMIS) | 359 | 166 | 24 | 330 | 10 | 27 | 4 | 1 | 5 | 0 | 0 | 0 | 0 | 7 | 0 | 0 | 10 | 0 | 2 | 17 |
| 7. Destination Error Rate (%) | 71.80 | 41.09 | 4.78 | 57.39 | 6.10 | 21.77 | 2.78 | 0.84 | 29.41 | 0.00 | 0.00 | 0.00 | 0.00 | 21.88 | 0.00 | 0.00 | 90.91 | 0.00 | 66.67 | 48.57 |

2018 HDX Competition Report

Submission and Count Dates for PA-508 - Scranton/Lackawanna 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 | 4/10/2018 | Yes |
| 2018 HIC Count Submittal Date | 4/11/2018 | Yes |
| 2017 System PM Submittal Date | 5/31/2018 | Yes |

Scranton/Lackawanna County Continuum of Care Policies and Procedures

In accordance with HUD regulations (24CFR Part 578), representatives from relevant organizations that serve homeless and formerly homeless individuals and other interested, relevant organizations within the following geographic areas, Scranton and Lackawanna County have established a Continuum of Care to carry out the duties assigned in the aforementioned regulations. That Continuum of Care is named the Scranton/Lackawanna County Continuum of Care (SLCCoC) and has established a Board, in accordance with the process described in the bylaws.

SLCCoC is a united coalition of community systems that assist homeless and near homeless residents in the area to obtain housing, economic stability, and an enhanced quality of life through comprehensive services. SLCCoC addresses critical issues related to homelessness through a coordinated community-based process of identifying and addressing needs utilizing not only HUD dollars, but also mainstream resources and other sources of funding. This is often achieved through the work of the CoC Board and sub-committees that help comprise the SLCCoC.

The SLCCoC Board has adopted the policies contained herein to ensure compliance with HUD regulations and to support efforts to assist homeless and near homeless residents in the region to obtain housing, economic stability and enhanced quality of life. These policies were developed over time by the SLCCoC Board. The policies were adopted in full by the SLCCoC Board in November 2015 and may be amended by a majority vote at any meeting of the Steering Committee, with a quorum present. Amendments made by the Steering Committee subsequent to November 2015 have been incorporated accordingly.

ARTICLE I: PROCESS FOR MONITORING OUTCOMES OF ESG RECIPIENTS

ESG Recipients will notify the CoC of all ESG sub recipients at the same time the sub recipients are notified that their contracts will be awarded in order to maintain an accurate inventory of assistance available for the Coordinated Assessment System and set up of ESG program and reporting tools in the HMIS system.

The HMIS Lead will cooperate with ESG Recipients in providing needed performance or client HMIS information. The CoC Collaborative Applicant will conduct at least a bimonthly monitoring of ESG sub-recipients via HMIS to ensure data quality and quarterly monitoring to evaluate program outcomes. This quarterly monitoring will be shared with the ESG recipient.

The CoC Collaborative applicant will provide ESG Recipients with required Consolidated Action Plan and CAPER data.

ARTICLE II: RATING AND RANKING CRITERIA

The CoC has developed a *Rating and Ranking Policy*. Please refer to this document for the process whereby projects are evaluated and ranked for the annual NOFA process.

ARTICLE III: Prioritization Policy for Permanent Supportive Housing

This CoC will base prioritization for permanent supportive housing on [Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing](#). Households meeting the definition of chronic homelessness will be prioritized for all Permanent Supportive Housing vacancies upon turnover.

All CoC Program-funded PSH must take new participants from the single prioritized Chronic Homeless list for individuals or for families as appropriate, which is created using the Coordinated Entry process along with the criteria outlined in the above referenced notice.

ARTICLE IV: WRITTEN STANDARDS FOR ADMINISTERING ASSISTANCE

CoC Program Rapid Rehousing Rental Assistance

Rapid Rehousing Permanent Housing Projects are designed to provide flexible programming that will expedite a household's ability to become self-sufficient through time-limited rental subsidy programs. Per 24 CFR part 578.37(a)(1)(ii), the CoC will establish annually priority populations to receive Rapid Rehousing assistance consistent with HUD Continuum of Care Program NOFA requirements and in response to analysis of point in time count and housing inventory and unmet needs reports.

RRH Participant Eligibility

- To be eligible RRH assistance, at initial evaluation households must:
 - 1) Demonstrate literal homelessness (i.e., HUD Category One) or that household is fleeing/attempting to flee DV (HUD Category Four); and
 - 2) Have completed a VI-SPDAT during their current episode of homelessness; or
 - 3) Have been deemed appropriate for RRH via DV provider staff evaluation.
- There is no income requirement for RRH assistance.
- In order to be eligible for RRH assistance, households must be referred to the RRH program through the Coordinated Entry system, or been evaluated by DV provider staff and deemed appropriate for RRH.
- Households are not required to enter shelter to be eligible for RRH assistance.
- As indicated by HUD, households who are eligible for Permanent Supportive Housing (PSH) and awaiting PSH placement are also eligible to receive RRH assistance and will retain their homeless status and, if applicable, chronically homeless status.

Determining the type of assistance & amount or percentage of rent each program participant must pay

- RRH programs are required to use a housing first model for the provision of assistance, i.e. providing permanent housing assistance to homeless households without clinical pre-requisites, such the completion of a treatment program, evidence of sobriety, or other programmatic pre-requisites outside of the standards set forth in this document.
- RRH participants may receive eligible supportive services alone or a combination of eligible supportive services and rental assistance. At a minimum, all participants must attend monthly case management meetings in accordance with HUD regulations 24 CFR Part 578
- Tenant rent contribution may be adjusted at any time. There is no minimum dollar amount rent requirement; tenant rent contribution may be zero for households with no income.
- In addition to rental assistance, eligible program costs are defined in 24 CFR Part 578 and include:
- **Financial assistance** (eligible under rental assistance): security deposits, first and last month's rent, property damage; CoC RRH assistance **may not** be used for payment of rent in arrears. Total property damage payments during a single enrollment in the RRH program may not exceed an amount equal to one month of the participant household's rent.
- **Supportive services:** Case management, child care, education services, employment assistance and job training, food, housing search and counseling services, including mediation, credit repair, and payment of rental application fee, legal services, life skills training, mental health services, moving costs, outpatient health services, outreach services, substance abuse treatment services, transportation, utility deposits

Limitations on amount, frequency and duration of assistance

- In accordance with HUD regulations 24 CFR Part 578, participants may receive eligible supportive services for no longer than 6 months after rental assistance stops.
- Participants may also receive eligible supportive services and/or short-term (up to 3 months) and/or medium-term (for 4 to 24 months) tenant-based rental assistance.
- Participants must be re-evaluated at least every 90 days to determine the need for continued assistance. This requirement applies to both supportive services and rental assistance. Through each re-evaluation the recipient or sub recipient must determine that the continuation of assistance is necessary to avoid literal homelessness.
- Under no circumstances may assistance be provided for more than the maximum period or dollar amount authorized by HUD regulations 24 CFR Part 578. Accordingly, rental assistance shall be calculated using current Fair Market Rent amounts for Scranton/Lackawanna County.
- Participants may be eligible for rapid re-housing assistance for multiple episodes of literal homelessness based on their need. If participants present for RRH assistance after initial assistance has been provided, Coordinated Entry or other designated entity will facilitate a case review to determine how to best assist the participant household to establish housing stability and will consider other methods and resources to stabilize in housing.

Vacancies

If a unit assisted under this section is vacated before the expiration of the lease, the assistance for the unit may continue for a maximum of 30 days from the end of the month in which the unit was vacated, unless occupied by another eligible person. No additional assistance will be paid until the unit is occupied by another eligible person. Brief periods of stays in institutions, not to exceed 90 days for each occurrence, are not considered vacancies.

According to the Interim Rule: The recipient or sub recipient must provide leasing assistance funds as set forth in §578.49. Occupancy agreements and subleases are required as specified in § 578.77(a).

Coordinated Assessment

The CoC has chosen to use the No Wrong Door Approach in regards to the Coordinated Assessment System whereby a client could come to any of the CoC's six participating agencies and receive the same needs assessment for the purpose of identifying potential diversion resources and/or the level of housing need for the individual or family. This system eliminates the need for households to go from agency to agency telling the same story, and will lead to the appropriate referral for services or housing program. Please see the CoC document, [Coordinated Assessment Policy and Procedures](#) for more detail.

The CoC shall adopt the provisions and requirements set out in HUD Notice CPD-164-11 for Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless status as the baseline written standards for operations of the CoC Coordinated Assessment System. The CoC shall use the VI-SPDAT and the SPDAT as the standardized assessment tool to verify severity of service needs.

Housing First

Housing First is an approach in which housing is offered to people experiencing homelessness without preconditions (such as sobriety, mental health treatment, or a minimum income threshold) or service participation requirements and in which rapid placement and stabilization in permanent housing are primary goals. PSH projects that use a Housing First approach promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services. HUD encourages all recipients of CoC Program-funded PSH to follow a Housing First approach to the maximum extent practicable.

Notice CPD 14-012 states that Projects that claimed to be Housing First in the 2013 NOFA must practice Housing First for both the FY 2013 and FY 2014 operating years. As follows, if a project has identified as practicing housing first for the FY 2015 operating year, it must practice that policy for the FY 2015 operating year and so on.

Article V: Miscellaneous Policies and Procedures

Educational Services for Children

Background

Federal law ensures educational rights and protections for children and young adults 18 - 24 experiencing homelessness. Protections apply to children and youth who are living with a parent or guardian and those who are not. Every school district and public charter school in PA is required to designate a homeless liaison who is responsible for ensuring the identification, school enrollment and stability, attendance and opportunities for academic success of students in homeless situations using a child centered, best interest framework for decision-making. In addition, HUD establishes requirements for CoCs and project applicants through the annual CoC competition, and the Scranton/Lackawanna County Continuum of Care (SLCCoC) has established related requirements. This document summarizes basic information about the responsibilities of CoCs and recipients of CoC and ESG funds. For more information or to find contact information for the regional and local homeless liaisons please visit:

<http://www.liu18.org/index.php/ecyeh>

Information is also available at the National Center for Homeless Education:

<http://center.serve.org/nche/briefs.php>

Responsibility of CoC

SLCCoC is responsible for coordinating with local school districts, charter schools, and Early Education providers in the following ways:

- Helping to identify children and young adults who are eligible for educational services. If a child or young adult does not have a fixed, regular, and adequate place to sleep at night, he or she is eligible. This includes those living in places not meant for human habitation, emergency shelters, transitional housing, motels/hotels, campgrounds, in doubled-up situations, or in housing that lacks utilities, is infested or has other dangerous conditions.
- Helping to ensure that all families with children and young adults who qualify are informed about their educational rights and their eligibility for educational services and they receive those services.
- Attending relevant meetings and planning events held by local school districts.
- Ensuring that the local school districts' homeless liaisons are aware of the Coordinated Entry process for connecting homeless families and young adults to ESG & CoC resources and helping to resolve any issues that might arise in linking eligible households to those resources.
- Helping to ensure that when placing families in emergency, transitional or permanent housing, consideration is given to the educational needs of children, including placing children as close as possible to schools of origin and early childhood education programs.

Responsibilities of Recipients/Sub-Recipients and Sample Policy

Recipients and sub-recipients of CoC and ESG funds serving families with children and/or young adults 18-24 are responsible for the things outlined in the sample policy below, which is intended to help providers comply with requirements established under federal law, by HUD through the annual CoC project application, and by SLCCoC. All projects receiving CoC funds that are serving families with children and/or young adults 18-24 are required to have similar policies. Projects may opt to adapt this sample policy or to adopt a different policy that fulfills the requirements.

Purpose: To ensure that participants in Scranton/Lackawanna County Continuum of Care are assisted in understanding their educational rights established under Subtitle VII-B of the McKinney-Vento Homeless Assistance Act and most recently reauthorized by the Every Student Succeeds Act; To ensure that children and young adults are immediately enrolled in school, as required by federal and State law, & to ensure that they are connected to transportation and educational services to help them succeed in school.

Policy:

1. All housing, whether temporary or permanent, provided by the CoC project shall be located in neighborhoods that are accessible to community resources and services, including schools, libraries, and other educational services.
2. The Program Director and/or his/her designee is responsible for:
 - a. Ensuring that all families with children and young adults participating in this project are informed about their educational rights and their eligibility for educational services at intake and as necessary thereafter.
 - b. Ensuring that no matter where they live, how long they have lived there, or how long they plan to stay, all children and young adults participating in the project are enrolled in school immediately, even if they lack the paperwork normally required (e.g., school records, records of immunization, and other required health records, proof of residency, guardianship, and other documents), are unable to pay fines or fees, or have missed application or enrollment deadlines. Students have the right to enroll in school and attend classes while the school gathers needed documents. Enrollment shall occur as quickly as possible and within no more than 48 hours of project entry. Children and young adults who are not required by State law to enroll in school shall be encouraged and assisted but not required to enroll. Families shall be encouraged and assisted to enroll children in early childhood education programs. Enrollment includes attending classes and participating fully in school activities and applies to youth without a parent or guardian.
3. Assist unaccompanied youth to choose and enroll in a school, giving priority to his/her wishes and assisting to exercise his/her right to appeal.
4. Advocating as necessary to ensure that homeless students are able to continue to attend their school of origin (i.e., where they went before becoming homeless or the school in which they were last enrolled) the entire time they are homeless and until the end of the academic year during which they find permanent housing. This includes pre-schools and the designated receiving school at the next grade level when a student completes the final grade level served by the school of origin. Remaining in the school of origin should be presumed to be in the best

interest of the student unless contrary to the request of the parent, guardian or unaccompanied youth.

5. Assisting, as necessary, to ensure that the parent, guardian, or unaccompanied youth is provided with the required written explanation of decisions made by school districts/charter schools and how to appeal them and that they are referred to the local school district's homeless liaison who must carry out the dispute resolution process as expeditiously as possible. f. Assisting, as necessary, to appeal any decision by the local school district or charter school that it is not in the student's best interest to attend the school of origin or the school where they currently live if requested by the parent, guardian or unaccompanied youth.

6. Advocating, as necessary, to ensure that if a dispute arises over eligibility, school selection, or enrollment, the student is immediately enrolled in the school in which enrollment is sought, pending resolution of all available appeals.

7. Advocating, as necessary, to secure the transportation services to which students are entitled (i.e., to and from the school or preschool of origin, including until the end of the year when the student obtains permanent housing).

8. Assisting, as necessary, to secure temporary transportation services through other means, if possible, when school districts/charter schools are unable to immediately provide such required services.

9. Advocating on behalf of homeless students as necessary to ensure that they receive the services for which they are eligible according to their needs and comparable to those provided to other students, including assistance from the local school district's homeless liaison, Early Intervention Program for Infants and Toddlers with Disabilities, Head Start, other preschool programs, services for disabled students, free school meals, services for English language learners, gifted and talented services, before and after school care, career and technical education, summer learning, online learning, and referrals to health, mental health, dental and other services.

10. Advocating as necessary to ensure that homeless students who meet the relevant eligibility criteria do not face barriers to accessing academic and extracurricular activities, including magnet and charter schools, summer school, career and technical education, advanced placement, online learning, and athletic programs.

11. Advocating, as necessary, to ensure that students receive appropriate full or partial credit for coursework, including consulting with the prior school about partial coursework completed, evaluating students' mastery of partly completed courses, and offering credit recovery.

12. Advocating as necessary to ensure that all homeless youth receive information and individualized counseling regarding college readiness, college selection, the application process, financial aid, and the availability of on-campus supports; and that unaccompanied homeless youths are informed of their status as independent students for the purposes of Federal financial aid for postsecondary education and assisted in receiving verification of such status.

13. Advocating as necessary to ensure that records, including information about a student's living situation, are kept private.

14. Helping homeless students to succeed in school and to get help from the local homeless education liaison, as necessary.

15. Developing relationships with colleges to access higher education services specifically for homeless young adults.

16. Designating a staff person who is responsible for:

- § Helping participants to understand their educational rights

- § Ensuring that children and young adults are enrolled in school and early childhood education

- § Ensuring that students get access to all services, programs, and extracurricular activities for which they are eligible

- § Ensuring that children and young adults receive the transportation services to which they are entitled

These need not be the only responsibilities of the designated staff person.

16. Ensuring that the designated staff person is involved in the development of participants' service plans where there are extensive or significant unmet educational needs.

17. Ensuring that no policies, procedures, or practices that are inconsistent or interfere with the educational rights established under federal law are adopted by the project.

Non-Discrimination Policy

CoC programs do not discriminate based on race, color, religion, national origin, ancestry or place of birth, sex, gender identity, sexual orientation, disability, marital status or age. CoC and ESG programs will grant equal access to programs or facilities consistent with gender identity, and provide families with equal access.

Preventing Family Separation

Families experiencing homelessness should not be separated when receiving services unless the health and well-being of children are at immediate risk. The age and gender of a child under the age of 18 shall not be used as a basis for denying a family's admission to any housing services. In addition, a broad definition of family must be used that allows for single parent households of any gender identity, two parent households including same sex parents and LGBT parents, and extended families to be served together with their children.

Persons with Limited English Proficiency

The CoC and partner agencies will take reasonable steps to ensure meaningful access to their programs and activities for persons who are limited in their English proficiency, regardless of national origin. Such steps may include translating marketing materials and documents essential to providing services into languages prevalent in the community, as well as providing language assistance while providing services, including oral and written translation where appropriate.

| Area Census Demographics | | | | | | | | | |
|--|------------------|---------|-----------------------------------|---|---------------|--|---------------------|----------------------|------------------------------|
| Area | Total | White % | Black or African American alone % | American Indian and Alaska Native alone % | Asian alone % | Native Hawaiian and Other Pacific Islander alone % | Two or More Races % | Hispanic or Latino % | White alone (non-hispanic) % |
| Scranton | 77,605 | 85% | 6.80% | 0.20% | 4.30% | 0% | 2.70% | 12.60% | 75.10% |
| Lackawanna County | 210,761 | 91.30% | 3.60% | 0.30% | 3.00% | 0.10% | 1.70% | 7.50% | 85.30% |
| All Time All Enrollments Demographics | | | | | | | | | |
| Exit vs % | Total Population | White | Black or African American alone% | American Indian and Alaska Native alone | Asian alone | Native Hawaiian and Other Pacific Islander alone | Two or More Races | Hispanic or Latino | White alone (non-hispanic) |
| All Enrollments All Time | 7069 | 5022 | 1654 | 13 | 21 | 24 | 335 | 1095 | 4120 |
| % All Enrollments All Time | - | 71.04% | 23.40% | 0.18% | 0.30% | 0.34% | 4.74% | 15.49% | 58.28% |
| All Time Exit Demographics | | | | | | | | | |
| Exit vs % | Total | White | Black or African American alone% | American Indian and Alaska Native alone | Asian alone | Native Hawaiian and Other Pacific Islander alone | Two or More Races | Hispanic or Latino | White alone (non-hispanic) |
| Exits All Time | 12,681 | 9447 | 2626 | 24 | 71 | 38 | 475 | 1834 | 7900 |
| % of Exits All Time | - | 74.50% | 20.71% | 0.19% | 0.56% | 0.30% | 3.75% | 14.46% | 62.30% |
| Exits to Permanent Housing Demographics | | | | | | | | | |
| Exit vs % | Total | White | Black or African American alone% | American Indian and Alaska Native alone | Asian alone | Native Hawaiian and Other Pacific Islander alone | Two or More Races | Hispanic or Latino | White alone (non-hispanic) |
| Exits to Permanent Housing | 5889 | 4185 | 1377 | 10 | 16 | 15 | 286 | 906 | 3433 |
| % Exits to Permanent Housing | - | 71.06% | 23.38% | 0.17% | 0.27% | 0.25% | 4.86% | 15.38% | 58.30% |
| Exits to Homelessness Demographics | | | | | | | | | |
| Exit vs % | Total | White | Black or African American alone% | American Indian and Alaska Native alone | Asian alone | Native Hawaiian and Other Pacific Islander alone | Two or More Races | Hispanic or Latino | White alone (non-hispanic) |
| Exits to Homelessness | 317 | 242 | 64 | 2 | 1 | 1 | 7 | 23 | 223 |
| % Exits to Homelessness | - | 76.34% | 20.19% | 0.63% | 0.32% | 0.32% | 2.21% | 7.26% | 70.35% |
| Exits to Temporary Situations Demographics | | | | | | | | | |
| Exit vs % | Total | White | Black or African American alone% | American Indian and Alaska Native alone | Asian alone | Native Hawaiian and Other Pacific Islander alone | Two or More Races | Hispanic or Latino | White alone (non-hispanic) |
| Temporary Situations | 1456 | 1053 | 288 | 2 | 1 | 2 | 110 | 158 | 938 |
| % Exits to Temporary Situations | - | 72.32% | 19.78% | 0.14% | 0.07% | 0.14% | 7.55% | 10.85% | 64.42% |

Census information retrieved from:

<https://www.census.gov/quickfacts/fact/table/scrantoncitypennsylvania/PST045217>

<https://www.census.gov/quickfacts/fact/table/lackawannacountypennsylvania/PST045217>

| Racial Equity Analysis Grouping Exit Destination | |
|--|---|
| Exit Outcome | HMIS Exit Destination |
| Actively Enrolled | (NULL) |
| Bad Data | Client doesn't know |
| | Client refused |
| | Data not collected |
| | No exit interview completed |
| | Other |
| | Other Early Childhood Program |
| Negative | Emergency Shelter, including hotel or motel paid for with shelter voucher |
| | Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside) |
| Positive | Long-term care facility or nursing home |
| | Owned by client, no ongoing housing subsidy |
| | Owned by client, with ongoing housing subsidy |
| | Permanent housing (other than RRH) for formerly homeless persons |
| | Rental by client with RRH or equivalent subsidy |
| | Rental by client, no ongoing housing subsidy |
| | Rental by client, other (non-VASH) ongoing housing subsidy |
| | Rental by client, VASH Subsidy |
| | Rental by client, with GPD TIP housing subsidy |
| | Residential project or halfway house with no homeless criteria |
| | Staying or living with family, permanent tenure |
| | Staying or living with friends, permanent tenure |
| Temporary | Foster Care Home or Foster Care Group Home |
| | Hospital or other residential non-psychiatric medical facility |
| | Hotel or Motel paid for without Emergency Shelter Voucher |
| | Jail, Prison, Juvenile Detention Facility |
| | Psychiatric Hospital or Other Psychiatric Facility |
| | Safe Haven |
| | Staying or living with family, temporary tenure (e.g., room, apartment or house) |
| | Staying or living with friends, temporary tenure (e.g., room, apartment or house) |
| | Substance Abuse Treatment or Detox Center |
| | Transitional Housing for homeless persons (including homeless youth) |