Before Starting the CoC Application

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

The Collaborative Applicant is responsible for reviewing the following:

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

1A. Continuum of Care (CoC) Identification

Instructions:

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

Resources: The FY 2019 CoC Application Detailed Instruction can be found at: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources
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1A-1. CoC Name and Number: IA-500 - Sioux City/Dakota, Woodbury Counties

CoC

1A-2. Collaborative Applicant Name: City of Sioux City

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Institute for Community Alliances

1B. Continuum of Care (CoC) Engagement

Instructions:

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

1B-1. CoC Meeting Participants.

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

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

Organization/Person	Participates in CoC Meetings	Votes, including selecting CoC Board Members	Participates in Coordinated Entry System
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
Law Enforcement	Yes	No	Yes
Local Jail(s)	No	No	No
Hospital(s)	No	No	Yes
EMS/Crisis Response Team(s)	Yes	Yes	Yes
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes	No
Disability Service Organizations	Yes	Yes	Yes
Disability Advocates	Yes	Yes	Yes
Public Housing Authorities	Yes	Yes	No
CoC Funded Youth Homeless Organizations	Not Applicable	No	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes

FY2019 CoC Application Page 3 09/25/2019		FY2019 CoC Application	Page 3	09/23/2019
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Youth Advocates	Yes	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Domestic Violence Advocates	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes	No
LGBT Service Organizations	Not Applicable	No	No
Agencies that serve survivors of human trafficking	Yes	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Mental Illness Advocates	Yes	Yes	Yes
Substance Abuse Advocates	Yes	Yes	Yes
ther:(limit 50 characters)			
Legal Aid	Yes	Yes	No
Community Action/Social Service/Tribal Agencies	Yes	Yes	Yes
Non-funded and/or Faith-based Emergency Shelters	Yes	Yes	Yes
	•		

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

Applicants must describe how the CoC:

- 1. solicits and considers opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
- 2. communicates information during public meetings or other forums the CoC uses to solicit public information;
- 3. takes into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness; and
- 4. ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats, e.g., PDF. (limit 2,000 characters)

The CoC holds open meetings bi-monthly and encourages current members to invite new individuals, businesses, and agencies to participate in the CoC. All participating individuals and organizations are invited and expected to share their opinions and expertise with the group. We spotlight several agencies, benefits and health care providers, and employment agencies at each meeting and provide time for all to share agency news and events. We have regular open discussions regarding the many facets of homelessness and the issues facing our homeless populations. We use these discussions as a sounding board to brainstorm possible solutions, options, and opportunities to assist our homeless and near homeless. Most CoC Member Agencies also participate in the Siouxland Street Project, a collaboration of downtown businesses, law enforcement, education, and social service agencies working to address the issue of homelessness in downtown Sioux City, and Street Project committees whose work is focused on developing a 24/7/365 Super Shelter and a Detox

FY2019 CoC Application	Page 4	09/25/2019
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Center. In an effort to reach those that are not aware of our CoC, we have a Facebook page Twitter account, and a website where we have posted an ongoing, open invitation to join the CoC, and we help promote and share events and information regarding homelessness and available services. On our Facebook page, Twitter, and website anyone with an interest in preventing and ending homelessness in Siouxland can find meeting minutes and agendas, data regarding homelessness in Siouxland, information about funded projects, and our by-laws and policies. We are often contacted by citizens, who have heard about our group through one of our member agencies, and are interested in homelessness and offering their opinions, advice, and volunteerism. We ensure effective communication with individuals with disabilities by utilizing PDF's in written communication and on our website. We have Language Line for non-English speaking members and clients.

1B-2. Open Invitation for New Members.

Applicants must describe:

- 1. the invitation process;
- 2. how the CoC communicates the invitation process to solicit new members;
- 3. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats;
- 4. how often the CoC solicits new members; and
- 5. any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC. (limit 2,000 characters)

CoC Member Agencies participate in a variety of community meetings and collaborate with many agencies, businesses, and entities throughout the community. As they share information about their agencies and the work they do to prevent or end homelessness, they also share information about the CoC and its member agencies. Through this community involvement, others interested in helping us further our causes are invited to participate in the CoC. The CoC also partners with Growing Community Connections which has 400 members that engage on a monthly basis on community outreach, concerns, ideas, and how to work in collaboration with each other. The CoC has an ongoing, open invitation on our Facebook page, website, and meeting agendas and minutes. We are always looking for new members from agencies, churches, businesses, local government, and the general public to join the CoC, attend our meetings, participate in our committees, serve on our board, and help us end homelessness in Siouxland. Board members have a responsibility to invite other community members and key partners to the CoC meetings and encourage them to become an active member. The CoC encourages member agencies to recommend and/or solicit homeless or formerly homeless persons to join the CoC as they could provide valuable insight into current programs/services and what's working well or what could be improved as well as community needs and programs and services that should be added in our CoC. We ensure effective communication with individuals with disabilities by utilizing PDF's in written communication and on our website. We have Language Line for non-English speaking members and clients. At various provider meetings the CoC asks if anyone knows of any currently homeless or formerly homeless individuals interested in joining the CoC. Following one such

FY2019 CoC Application	Page 5	09/25/2019
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request, a formerly homeless school district employee contacted the CoC, expressed an interest in joining us, and was recently elected to the CoC board.

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

Applicants must describe:

- 1. how the CoC notifies the public that it is accepting project application proposals, and that it is open to and will consider applications from organizations that have not previously received CoC Program funding, as well as the method in which proposals should be submitted;
- 2. the process the CoC uses to determine whether the project application will be included in the FY 2019 CoC Program Competition process;
- 3. the date(s) the CoC publicly announced it was open to proposal;
- 4. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats; and 5. if the CoC does not accept proposals from organizations that have not previously received CoC Program funding or did not announce it was open to proposals from non-CoC Program funded organizations, the applicant must state this fact in the response and provide the reason the CoC does not accept proposals from organizations that have not previously received CoC Program funding. (limit 2,000 characters)

The CoC is fully open to and encourages proposals from entities that have not previously received funds in prior competitions. Even before the NOFA drops, the CoC Board Chair announces the impending NOFA/CoC Program Competition at CoC meetings and sends at least 2 e-mails to CoC Member agencies to let them know that the NOFA is nearing and encourage them to consider applying for a new project, especially PSH and RRH projects which are a priority for our CoC. Member agencies are also encouraged to start researching the different project types and the many resources available on HUD Exchange. Once the NOFA drops, the CoC Chair puts out an RFP for new and renewal projects. The RFP is publicly distributed to CoC member agencies via e-mail, the media via a press release, and on the CoC's website. The RFP provides background information on the CoC Program, the local CoC, and the current competition, including eligible new project types and funding amounts. The CoC Chair, who also serves as the Grant Committee Chair, and the Project Monitoring and Development Committee Members are readily available to assist new applicants with developing projects, understanding program regs, and the eSnaps online application. Once the application deadline has passed, the CoC Project Monitoring Committee reviews all applications and scores and ranks them according to the CoC's approved scoring, review, and ranking policy. In an effort to encourage ongoing participation in the CoC by new applicants, the Project Monitoring and Development Committee reaches out to low scoring new applicants to discuss opportunities to reapply for funding in the coming year and offer suggestions that may help the project score higher. The FY 2019 CoC Program Competition RFP was made public on July 16, 2019. We ensure effective communication with individuals with disabilities by utilizing PDF's in written communication and on our website. We have Language Line for non-English speaking members and clients.

1C. Continuum of Care (CoC) Coordination

Instructions:

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

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

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Not Applicable
Head Start Program	Yes
Funding Collaboratives	Yes
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	
	Not Applicable

FY2019 CoC Application	Page 7	09/25/2019
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Not Applicable

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

Applicants must describe how the CoC:

- 1. consulted with ESG Program recipients in planning and allocating ESG funds:
- 2. participated in the evaluating and reporting performance of ESG Program recipients and subrecipients; and
- 3. ensured local homelessness information is communicated and addressed in the Consolidated Plan updates. (limit 2,000 characters)

The CoC Lead Agency is also the recipient of ESG funds from HUD. As such, the CoC Lead Agency is responsible for completing the five year Consolidated Plan as well as Annual Action Plans as part of receiving ESG funds from HUD. The CoC Lead Agency understands the importance of obtaining input from many different stakeholders, but particularly understands the value of input from CoC and ESG funded agencies. Therefore, each spring, the CoC Lead Agency sends out surveys to CoC and ESG funded agencies seeking input in how best to manage all Federal funds, including ESG funds. Public meetings and hearings are also held as part of this process and most, if not all, CoC and ESG funded agencies complete the survey and attend at least one of the public meetings/hearings. Once the CoC Lead Agency knows the amount of ESG funding HUD will provide, CoC and ESG representatives work together to determine priority areas and the application process. At the State level, the CoC Board Chair serves on the Policy and Planning Committee which is responsible for assisting in the development of the State ESG application and determining maximum funding amounts for eligible activities. The CoC Lead Agency and Board Chair have both served as ESG/SAF application reviewers when they weren't applicants. All ESG recipients are active in the CoC and participate in community discussions regarding available and needed ESG-funded homeless services. Additionally, CoC and ESG recipients and the CoC Lead Agency are members of the CoC's Project Monitoring and Development Committee and worked with non-funded agencies/committee members to develop common performance standards and a reporting tool to evaluate ESG And CoC program performance. All CoC and ESG funded projects submit quarterly program performance reports along with a brief explanation for measures where the project fell short of the CoC/ESG standard and action steps the agency will implement in order to meet CoC/ESG standards in the future.

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

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

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

FY2019 CoC Application	Page 8	09/25/2019
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Plan Jurisdictions.

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

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

Applicants must describe:

- 1. the CoC's protocols, including protocols for coordinated entry and the CoC's emergency transfer plan, that prioritize safety and incorporate trauma-informed, victim-centered services; and
- 2. how the CoC, through its coordinated entry, maximizes client choice for housing and services while ensuring safety and confidentiality. (limit 2,000 characters)

The CoC has a large membership of victim and non-victim service providers who work together to ensure DV survivors are provided housing and services without barriers while maintaining safety and confidentiality. The safety planning protocols in our Coordinated Entry Policies and Procedures include the use of a separate but integrated DVHMIS system and a pre-screen tool to immediately refer those currently fleeing DV to the DV shelters/crisis line. All CoC and ESGfunded programs are required to comply with VAWA and have written policies to meet the safety and confidentiality needs of victims of domestic violence, dating violence, sexual assault, and stalking. All DV and non-DV shelter staff as well as other frontline agency staff have received training in trauma-informed care and victim-centered services. Mental health and substance abuse services are available to survivors without going through their health insurance for risk of exposure to their partner. Crisis response team is available 24/7 at no cost to the survivor as well. Keeping them safe and secure is the number one priority. All of our shelters have secured entrances and a written emergency transfer plan to ensure safety. The case managers are well-versed in available services and ensure DV clients are able to safely access them as necessary, including providing safe transportation to school, work, and appointments and safe access to educational opportunities, health/mental health care, and child care options as needed. Both while working with the DV shelters and after the clients enter other TH, PSH, or RRH programs, the client is always made aware of his/her options and staff recommendations, but ultimately, the final decisions regarding housing and services are up to the client.

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

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

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

FY2019 CoC Application	Page 9	09/25/2019
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Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence. (limit 2,000 characters)

The CoC keeps agencies and agency staff informed of trainings offered locally as well as through HUD Exchange, the IA/NE HUD Symposium, and the annual Housinglowa Conference. The DV providers' staff are trained in trauma informed care and certified domestic abuse advocates through the state of lowa. Over the past year, CoC project staff, agency front line staff, and Coordinated Entry staff have participated in trainings provided by the Coalition for Family and Children's Services, local school district, Family Wellness, Seasons Center, and other local counseling/mental health and social service providers. The topics of these trainings included: Adverse Childhood ExperienceS (ACES), a five part Trauma-Informed Care, Mental Health First Aid for Adults and Youth, Psychological First Aid, Human Trafficking, DOVE, and Child Abuse and Family Support: recognizing and responding to high risk offenders of intimate partner violence, hotel/motel training to help identify and stop human trafficking, De-escalating Hostile Clients, QPR – Questions, Persuade, Refer, Mystery of Risk, and Protective Factor Framework. Service agencies are trained in evidence-based practices for serving survivors. These services include, Trauma Focused-Cognitive Behavioral Therapy (TF-CBT) Parent Child Interactive Therapy (PCIT), Certified Adoption Therapist, Seeking Safety, and Cognitive Based Interventions for Trauma Strategies (CBITS). Our Coordinated Entry System policies and procedures contains a list of recommended training topics. HUD TA and Field Office staff provide webinars and trainings on HUD's Equal Access Rule and Housing First. The CoC will develop a training schedule to ensure that agency staff receive appropriate trainings including trauma-informed care; best practices for survivors of domestic violence, dating violence, sexual assault, and stalking; etc. The training provided by HUD TA/webinars, CoC Agencies, local providers, Department of Health, IA Attorney General's Office, etc.

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

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

The data used by the CoC to assess the scope of community needs related to domestic violence, etc. comes from the CoC's comparable database, the DV-HMIS system. The system is integrated but separate from the HMIS system and provides for client safety by assigning each client a unique ID number rather than using their name, SSN, or other identifying information. Every DV client in emergency shelter completes a needs assessment to see if they have their necessary documents to apply for benefits such as Medicaid, food stamps, childcare assistance, employment, etc. Their demographics are captured in the assessment and that data is used to ensure provision of culturally-appropriate services that may be available such as tribal services or immigration services which have VAWA protections for those affected by domestic violence. The DV service providers will assist in helping clients become document ready so they are able to begin the application processes for community services/benefits. The DV providers report their data to the CoC and collectively we use the data to determine trainings needed (i.e. trauma-informed care, victim-centered care,

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FY2019 CoC Application	Page 10	09/25/2019

cultural sensitivity, etc.). We also use client-level exit destination information to determine the types of housing services and programs needed in our community. Through this analysis, we determined the need for a DV-specific RRH program and assisted the local DV provider with their application for a new RRH project in the FY 2016 competition. The hope is that we will be able to assist more DV clients with successful exits to their own permanent housing destinations directly from shelter.

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

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On
Sioux City Public Housing Authority	5.25%	Yes-HCV	Yes-HCV
South Sioux City Housing Agency	0.00%	Yes-HCV	Yes-HCV

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

Applicants must:

- 1. provide the steps the CoC has taken, with the two largest PHAs within the CoC's geographic area or the two PHAs the CoC has working relationships with, to adopt a homeless admission preference—if the CoC only has one PHA within its geographic area, applicants may respond for one; or
- 2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)

The City of Sioux City Housing Authority adopted a homeless admission preference and Move On strategy for persons in PSH several years ago after the CoC Chair contacted the PHA to discuss the idea. The PHA and the CoC brought together other homeless providers to discuss the idea and work out the details. We also worked together to create an MOU for participating providers. For years the other PHA's in our CoC have maintained that they do not need a homeless admission preference or Move On strategy because they have short waiting lists and could serve a homeless family without a preference. The CoC Lead Agency took the lead and started contacting and having the conversation with the South Sioux City Housing Agency following the FY2018 competition. After several months of discussing the idea and educating them about a homeless preference/move on strategy, the South Sioux City Housing Agency has adopted a homeless preference/move on strategy and will begin tracking homeless admissions.

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

FY2019 CoC Application	Page 11	09/25/2019
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Applicants must indicate whether the CoC has a Moving On Strategy with affordable housing providers in its jurisdiction.

Yes

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

Both the Sioux City PHA and the South Sioux City Housing Agency have adopted a Moving On Strategy. Additionally, the CoC has a Moving On Strategy with local low-income housing programs. PSH project staff provide case management to their clients and work with them on a regular basis while they are in the program. When the case manager and the client determine that the client no longer needs the intensive case management and assistance to maintain their permanent housing, they begin to have the discussion about Moving On. Moving On is completely voluntary, and if the client agrees to Move On, the case manager works with the client, the PHA, and the landlord to obtain subsidized housing assistance and successfully transition the client from PSH to their own permanent housing.

1C-5. Protecting Against Discrimination.

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

The CoC adopted a CoC-wide anti-discrimination policy several years ago and works with agencies, programs, and clients to ensure that all funded agencies and CoC member agencies are not discriminating based on any protected classes under the Fair Housing Act and HUD's Equal Access to HUD-Assisted Housing. The CoC has participated in trainings provided by HUD/HUD TA, both in person and via webinars/conference call regarding HUD's Equal Access and Gender Identity Final Rules. For the past 3 funding phases, the CoC has lead the EFSP Local Board and been involved with setting priorities and awarding funding. This year, the Local Board prioritized and approved funding to be used for other shelter. This will help alleviate the absence of emergency shelter for families with children over the age of 12, single fathers with children, and persons in protected classes who are sometimes discriminated against and not always welcome or allowed to stay at the faith-based emergency shelters. CoC providers regularly conduct discussions, especially during the bi-monthly Coordinated Entry Case Conferencing meetings, to problem solve and find alternatives for persons in protected classes and family that may be discriminated against. They also refer clients to the Human Rights Commission and Iowa Legal Aid for assistance with discrimination and fair housing issues, and recently Iowa Legal Aid held a clinic to help clients get legal issues that are barriers to obtaining their own permanent housing expunged from their record. Each funded agency also has their own Anti-Discrimination and Grievance Policies which they review annually and train their employees on.

FY2019 CoC Application	Page 12	09/25/2019

Applicant: Sioux City/Dakota, Woodbury Counties CoC

Project: IA-500 CoC Registration FY2019 COC_REG_2019_170570

IA-500

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

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

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

*1C-6. Criminalization of Homelessness.

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

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

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

Applicants must:

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

2. demonstrate the coordinated entry system reaches people who are least likely to apply for homelessness assistance in the absence of special outreach; and

3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner.

FY2019 CoC Application	Page 13	09/25/2019
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(limit 2,000 characters)

As of December 1, 2018, we transitioned our Coordinated Entry System from a decentralized approach to a centralized approach with a single Access Point. The former Access Points included both CoC- and ESG-funded agencies who are required to participate in the CES and non-funded agencies/service providers within Sioux City, IA and South Sioux City, NE. These agencies continue to participate in the CES by referring clients to the centralized access point and accepting referrals to openings in their programs from the CES. CES staff have also worked to inform providers in the rural areas about the CES and have provided information for accessing the CES and completing the intake assessment via telephone. In addition to having a fixed Access Point and access for clients in rural areas, the City of Sioux City started a Street Outreach program in January 2019 along with staff from several agencies conduct street outreach and meet clients in known locations such as under bridges, in parks, and at the library, Soup Kitchen, and the seasonal Day Shelter in order to ensure that people sleeping on the streets are prioritized for assistance in the same manner as any other person assessed through CE. The CES utilizes a standardized assessment tool, the VI-SPDAT, VI-F-FPDAT, or the TAY-VI-SPDAT, depending on the situation of the individual or family seeking assistance. When a client presents at the Access Point, trained agency staff complete both the HMIS Iowa Basic Assessment and the appropriate SPDAT assessment, enter the information into the HMIS, and place the client on the CE Prioritization List. Clients are prioritized by SPDAT score and literal homelessness combined with additional tiebreakers (chronic status, length of time homeless or on the streets, DV, veterans, and youth) as needed. To the extent possible, persons who are the most vulnerable and/or have been homeless the longest will be prioritized for housing first.

Applicant: Sioux City/Dakota, Woodbury Counties CoC

Project: IA-500 CoC Registration FY2019

IA-500 COC_REG_2019_170570

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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

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

1D-1. Discharge Planning Coordination.

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

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

FY2019 CoC Application	Page 15	09/25/2019
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1E. Local CoC Competition

Instructions

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

Resources:

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

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

Applicants must indicate whether the CoC:

1. informed project applicants in its local competition announcement about point values or other ranking criteria the CoC would use to rank projects on the CoC Project Listings for submission to HUD for the FY 2019 CoC Program Competition;	
2. established a local competition deadline, and posted publicly, for project applications that was no later than 30 days before the FY 2019 CoC Program Competition Application submission deadline;	Yes
3. notified applicants that their project application(s) were being rejected or reduced, in writing along with the reason for the decision, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline; and	Yes
4. notified applicants that their project applications were accepted and ranked on the CoC Priority Listing in writing, outside of esnaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline.	Yes

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

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

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

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

FY2019 CoC Application	Page 16	09/25/2019
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Applicants must describe:

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

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

When reviewing, ranking, and rating projects, the CoC considered our CoC's need to increase and provide more PH-PSH housing to serve the chronically homeless in Siouxland. Additionally, the CoC considers the target population/subpopulations to be served by the projects as well as the project design and how it addresses HUD's priorities for ending chronic homelessness. ending homelessness among households with children, and reducing the amount of time a person spends homeless by rapidly rehousing clients. The CoC also considered the extent to which the projects reduce or eliminate barriers to project entry and/or follow a Housing First approach to better address the needs of those who have: low or no income, current or past substance use, a significant criminal history, and/or those who are victims of domestic violence, service resistant, and severely mentally ill. The CoC's scoring tool awards points for projects that adhere to a Housing First approach. are 100% dedicated to serving the chronically homeless, and dedicated to serving households with children. The CoC is committed to assisting the most vulnerable and hardest to house through our Coordinated Entry System and HUD-funded CoC and ESG programs and has worked with all programs to reduce or eliminate barriers to program entry.

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

Applicants must:

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

Public Posting of Objective Review and Ranking Process		Public Posting of CoC Consolidated Application including: CoC Application, CoC Priority Listing, Project Listings	
1. Email	X	1. Email	X
2. Mail		2. Mail	

	•	
FY2019 CoC Application	Page 17	09/25/2019

3. Advertising in Local Newspaper(s)		3. Advertising in Local Newspaper(s)	
4. Advertising on Radio or Television		4. Advertising on Radio or Television	
5. Social Media (Twitter, Facebook, etc.)	X	5. Social Media (Twitter, Facebook, etc.)	X
6. Did Not Publicly Post Review and Ranking Process		6. Did Not Publicly Post CoC Consolidated Application	

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

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

Reallocation: 20%

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

Applicants must:

- 1. describe the CoC written process for reallocation;
- 2. indicate whether the CoC approved the reallocation process;
- 3. describe how the CoC communicated to all applicants the reallocation process;
- 4. describe how the CoC identified projects that were low performing or for which there is less need; and
- 5. describe how the CoC determined whether projects that were deemed low performing would be reallocated. (limit 2,000 characters)

The Coc's written process for reallocation involves both voluntary reallocation where an applicant chooses to reallocate all or part of their renewal funds to create a new project(s), and involuntary reallocation where the CoC may reallocate funds from low-scoring or low-performing projects to create one or more new projects without decreasing the CoC's ARD. Low performing projects are those who aren't meeting CoC performance standards. Projects that have had funds recaptured are subject to having the amount of recaptured funds reallocated. If there are no new project applications, the funds remain available for the original renewal project(s). the reallocation process was approved by the CoC. The reallocation process is communicated to all applicants via e-mail when the local competition is announced. The reallocation process is also posted on the CoC's website. The CoC Project Monitoring and Development Committee has developed a quarterly reporting requirement for all CoC and ESG funded projects. The reporting includes system performance measures (housing stability/exits to permanent housing or maintaining PSH, earned or cash income, maintaining or increasing cash income, data quality and completeness and data entry timeliness), shelter utilization, and financial management. All projects submit quarterly reports along with an explanation and a plan for improving measures where they may have fallen short of the CoC's standards. Projects that are not performing at an acceptable level, have

FY2019 CoC Application	Page 18	09/25/2019
------------------------	---------	------------

not submitted timely quarterly reports or APR's, or score low in the competition are considered for reallocation, especially for much needed PH-RRH or PH-PSH projects. However, in years where we do not have any new project applications, we do not reallocate any of our ARD and we rank the low performing projects because we don't want to lose any ARD. Low scoring projects are ranked at least partially in Tier 2 and risk having their funding reduced.

Applicant: Sioux City/Dakota, Woodbury Counties CoC

Project: IA-500 CoC Registration FY2019

IA-500 COC_REG_2019_170570

DV Bonus

Instructions

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

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1F-1 DV Bonus Projects.

Applicants must indicate whether the CoC is No requesting DV Bonus projects which are included on the CoC Priority Listing:

Applicant Name	DUNS Number
This list cont	ains no items

Project: IA-500 CoC Registration FY2019

2A. Homeless Management Information System (HMIS) Implementation

IA-500

Intructions:

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

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2A-1. HMIS Vendor Identification. MediWare

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

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

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

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	152	28	2	1.61%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	119	0	87	73.11%
Rapid Re-Housing (RRH) beds	50	46	4	100.00%
Permanent Supportive Housing (PSH) beds	37	0	7	18.92%
Other Permanent Housing (OPH) beds	0	0	0	

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

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

FY2019 CoC Application	Page 21	09/25/2019
------------------------	---------	------------

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

Currently emergency shelter, transitional housing, and permanent supportive housing project types fall below 84.99%. Steps to increase bed coverage within the CoC in these project types will include continuing to build relationships with privately funded and faith-based organizations within the community. It will also be important to educate community leaders and local providers about the benefit of HMIS participation and its ability to provide a full picture of homelessness and the homeless response system in the CoC if all beds are included in data collection. Without full HMIS participation we do not have true pictures of important data points such as first time homeless and returns to homelessness.

Currently within the CoC there are two privately funded agencies operating the three largest emergency shelters in the CoC. The HMIS lead agency continues to meet with these projects individually to answer questions, demonstrate the capabilities of HMIS and encourage HMIS use. The 116-bed seasonal shelter is interested in data collection and the HMIS lead agency is working to develop workflow proposals to accommodate the barriers to data collection. The other agency is a privately funded faith-based organization with two emergency shelters and a transitional housing project. The HMIS Lead Agency is encouraging this project to incorporate HMIS data collection in their small transitional housing project first with the hopes that TH participation will encourage further HMIS participation in their emergency shelters. If these agencies were to participate in HMIS, our TH and ES coverage would increase to 100%. The HMIS Lead Agency has been working to add the HUD-VASH voucher beds to the HMIS, and the VASH staff will begin entering client data in the HMIS in early September 2019 bringing the PSH coverage up to 100%.

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

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

*2A-4. HIC HDX Submission Date.

Applicants must enter the date the CoC 04/09/2019 submitted the 2019 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy)

FY2019 CoC Application	Page 22	09/25/2019

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

Instructions:

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

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2B-1. PIT Count Date. 02/06/2019 Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).

2B-2. PIT Count Data-HDX Submission Date. 04/09/2019
Applicants must enter the date the CoC
submitted its PIT count data in HDX
(mm/dd/yyyy).

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

Applicants must describe:

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

Not Applicable – The CoC utilized the online shelter portal for sheltered HIC and PIT data that was used for the 2018 counts.

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

Applicants must select whether the CoC No

FY2019 CoC Application	Page 23	09/25/2019
------------------------	---------	------------

added or removed 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 2019 sheltered PIT count.

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

Applicants must describe:

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

Not Applicable – The CoC utilized the online portal for unsheltered data that was used for the 2018 count.

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

Applicants must:

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

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

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

- 1. plan the 2019 PIT count;
- 2. select locations where youth experiencing homelessness are most likely to be identified; and
- 3. involve youth in counting during the 2019 PIT count. (limit 2,000 characters)

Although we don't typically have a large homeless youth population, especially unaccompanied youth under the age of 18, we do take measures to identify and count homeless youth. Many youth-serving agencies including Crittenton Center, Boys and Girls Home and Family Services, Sioux City Community Schools, Siouxland Community Health Center, and the Human Rights Commission, who works closely with the LGBTQ community, participate in the CoC and are encouraged to inform the CoC of any known locations of unsheltered homeless youth. Crittenton Center's Youth Shelter also provides shelter for homeless or runaway youth brought to the shelter by the police or referred by the schools until Child Protective Services can be contacted and a safe, appropriate placement can be found. Additionally, the knowledge gained through Coordinated Entry assessments is used to identify known locations of homeless youth.

FY2019 CoC Application	Page 24	09/25/2019
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2B-7. PIT Count-Improvements to Implementation.

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

- 1. individuals and families experiencing chronic homelessness;
- 2. families with children experiencing homelessness; and
- 3. Veterans experiencing homelessness. (limit 2,000 characters)

Training for both the sheltered and unsheltered counts included a review of the definition of chronic homelessness as well as how to figure the number of episodes/breaks in homelessness. Training also included the specific method for counting and reporting households with children. Through the use of the portal with its conditional logic programming we were able to calculate chronic status more accurately and quickly for individuals and families experiencing homelessness. The portal was specifically designed to more easily report households with children by electronically linking members together for easier counting and inclusion in subpopulations. To best identify veterans, the CoC works with the VA Staff to identify known locations where homeless veterans stay. The portal used for the unsheltered count also generated the veteran supplement form for persons who self-identified as veterans which helped us connect them to VA staff who worked to identify veterans eligible for VA services and connect them to VA services.

3A. Continuum of Care (CoC) System Performance

Instructions

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

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

Applicants must:

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

269

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

Applicants must:

- describe the process the CoC developed to identify risk factors the
 CoC uses to identify persons becoming homeless for the first time;
 describe the CoC's strategy to address individuals and families at risk
- 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)

In the past year our Coordinated Entry System (CES) has transitioned from a decentralized CES to a centralized CES. In addition to conducting the CE Intake Assessment on the literally homeless, CE Staff also visit with many who are at risk of homelessness in an effort to prevent them from becoming homeless. Many of those at risk of becoming homeless are facing eviction. Others are doubled up with friends or family. Still others have lost their housing and are living in a hotel. CE Staff work with them to problem solve and try to come to a resolution that will prevent them from entering the homeless system. That may have resulted, in part, in our CoC experiencing a decrease of 109 for persons with entries into ES, SH, or TH and 85 for persons with entries into ES, SH, TH,

FY2019 CoC Application	Page 26	09/25/2019
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or PH who became homeless for the first time. The CoC found that mental health and substance abuse; unemployment; and lack of education/skills, childcare, transportation, and/or life skills like budgeting are among the leading causes of homelessness. Through the CES, the CoC not only prioritizes clients by their VI-SPDAT score, but we also consider tie-breakers including domestic violence, chronically homeless, length of time homeless, and veteran status. Coordinated Entry employs a shelter diversion tool/Prevention-SPDAT to try to divert and prevent persons from becoming homeless. Due to a lack of ES beds for households with dependent children, a portion of the ESG RRH/HP funds are approved for homeless prevention so families are assisted before they become literally homeless. Our service providers are also very well-versed in available resources and can often make appropriate referrals to employment, education, subsidized housing, DHS, Consumer Credit Counseling, etc. to obtain assistance and prevent them from becoming homeless. CoC/ESGfunded agencies and The CoC Project Monitoring and Development Committee oversee this strategy.

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

Applicants must:

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

113

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

Applicants must:

- 1. describe the CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
- 2. describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
- 3. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless. (limit 2,000 characters)

Our CoC is reporting an increase in the average LOT homeless of 15 days for persons in ES and SH, and 15 days for persons in ES, SH, and TH. As reported in Question 3A-1, we are reporting a decrease in the number of persons who become homeless for the first time, and although we are reporting a slight increase in the length of time persons remain homeless, the average is still only 42 days for persons in ES and 113 days for persons in ES and TH. Our quarterly project monitoring continues to stress the importance of entering their program exit data accurately and in a timely manner. Additionally, most programs have adopted a Housing First model. Despite a lack of PSH projects, providers work to quickly move the clients to permanent housing either through RRH or by helping them complete applications for other permanent housing, both subsidized and unsubsidized. Our CoC holds CE Case Conferencing meetings twice a month where CE staff and providers discuss client situations, and recognizing our community's limited resources, we brainstorm and discuss potential solutions that may help the client self-resolve. CE Staff engage clients in diversion conversations each time they touch the system. The conversations

guides the client through strength-based problem solving to identify places they may be able to stay until permanent housing can be identified. Case managers work closely with clients to help them overcome barriers preventing them from obtaining housing assistance and ensure they have filled out their applications correctly and completely so that those who are in TH are able to exit as quickly as possible to their own permanent housing. Those with the longest length of time homeless are identified through the Coordinated Entry intake and that information is used in placement on the prioritization list and referral to housing opportunities. CoC/ESG-funded agencies and the CoC Project Monitoring and Development Committee oversee this strategy.

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

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	74%
2. Report the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	100%

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

Applicants must:

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

(limit 2,000 characters)

All CoC housing providers strive to move clients through their programs to their own permanent housing as quickly as possible. While in a program the clients work on action steps to address and overcome the complex barriers and hardships preventing them from being eligible for housing such as poor credit or rental history, criminal history, past due debt with the housing authority or utility companies, and/or persistent substance abuse and mental health issues. Program staff also work with clients who are denied housing to help them write

FY2019 CoC Application	Page 28	09/25/2019
------------------------	---------	------------

an appeal explaining how they have improved their situation. CoC/ESG-funded agencies oversee this strategy. While the PSH projects have all adopted a housing first approach and the clients are not required to participate in supportive services or case management, the case managers maintain regular contact with PSH program participants, and the participants appreciate the support and assistance, information, and education given. Through this contact, the case managers work to ensure the clients are successful in the program and are maintaining their permanent housing. They ask them about their needs and any struggles they may be facing and offer assistance or suggestions to help the client live more independently. Services such as applying for SSI/SSDI, mental health counseling, substance abuse counseling, crisis response team, day rehabilitation, psychiatry, medical and dental services, and community support that includes teaching them life skills, such as cleaning, cooking, and hygiene are offered to the clients to improve their housing stability. Additionally, case mangers complete a formal Self-Sufficiency Matrix quarterly to help determine life domains the client needs assistance with to remain permanently housed. Even those clients who were resistant at first have begun accepting the assistance and advice the case manager has to offer. CoC/ESG-funded agencies oversee this strategy.

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

Applicants must:

	Percentage	
1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX.	4%	
2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX.	0%	

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

Applicants must:

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

Through Coordinated Entry and the sharing agreement among providers we can fully utilize system-level HMIS reports to identify common factors and monitor the individuals and families who return to homelessness. Of the 136 persons who exited to a permanent housing destination, only 5 persons (4%) returned to homelessness. One person had exited from ES and 4 had exited from TH. Once clients enter our homeless programs, program staff provide intensive case management to determine the root cause of their homelessness and to provide education and supportive services to prevent a reoccurrence of homelessness. Often, through that intensive case management, various

FY2019 CoC Application	Page 29	09/25/2019
------------------------	---------	------------

assessments and questions are asked to determine what barriers exist, what needs are unmet and what struggles are present. Case management also provides guidance and accountability as the case manager and client work together to set and achieve goals, access various community resources, work toward and/or maintain a healthy and positive lifestyle, etc. An ESG-funded RRH program will begin soon, and it is anticipated that many of these clients will participate in the program for approximately 1 year, allowing them time to address mental health and substance abuse issues, obtain income, etc. to avoid returns to homelessness. Knowing when someone is returning to homelessness and knowing which other programs the client has been in allows us to better assess their situation and work with the client to set goals and connect to community resources (substance abuse treatment, mental health care, life skills – budgeting/money management, etc.) that will help them overcome their barriers to maintaining permanent housing and self-sufficiency and break the cycle and prevent future returns to homelessness. CoC/ESGfunded agencies and the CoC Project Monitoring and Development Committee oversee this strategy.

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

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	36%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	15%

3A-5a. Increasing Employment Income.

Applicants must:

- 1. describe the CoC's strategy to increase employment income;
- 2. describe the CoC's strategy to increase access to employment;
- 3. describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
- 4. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase jobs and income from employment. (limit 2,000 characters)

Through regular case management, the clients set education and/or employment goals designed to help them increase access to employment and employment cash sources. While setting goals, the case manager often discovers that the client has a specific skill set but is unable to work in the desired field because they have an expired license/certification or need to finish classes/credits in order to earn the certification. The case manager then assists the client with accessing resources to pay for re-certification, classes, etc. All CoC-funded projects refer clients to mainstream employment organizations such as IowaWorks, Goodwill, Nebraska Vocational Rehab, Western Iowa Tech

FY2019 CoC Application	Page 30	09/25/2019
------------------------	---------	------------

Community College, and Boost for classes to help them develop skills (application/resume writing, interviewing, job-related) and find/maintain employment. In addition, there are several local short-term staffing agencies that help connect people with employment through various employers. Case managers and specialized classes through lowaWorks assist the clients with overcoming the barriers (criminal history, transportation, childcare, etc.) preventing them from obtaining/maintaining employment. IowaWorks tracks employment services, provides workshops, and completes skill assessments. lowaWorks also works with local mental health agencies on how to work with clients struggling with chronic mental illness leading to unemployment or difficulty obtaining/maintain employment. Case managers assist clients with accessing mainstream benefits for which they qualify, such as Medicaid and food, transportation, and childcare assistance. Case managers also help clients apply for local assistance/programs such as The Micah Project, The Gospel Mission, and the Salvation Army that give people in need furniture, clothing, and other household items. CoC/ESG-funded agencies and the CoC Project Monitoring and Development Committee oversee this strategy.

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

Applicants must:

- 1. describe the CoC's strategy to increase non-employment cash income;
- 2. describe the CoC's strategy to increase access to non-employment cash sources:
- 3. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase non-employment cash income.

All agencies recognize the need for clients to have a source of cash income in order to pay their rent and other bills. The CoC is working to increase nonemployment income by inviting non-cash benefits providers to present information about their benefits at our CoC meetings. The information provided includes more specific information about available benefits, eligibility requirements, and the application process. Agencies also collaborate to problem solve and determine non-employment cash income sources for which clients may be eligible. Regular case management is an important strategy to help clients access non-employment cash income. For clients who are fleeing domestic violence, often they either were not working or they left/lost their job when the fled. While in shelter, shelter staff assist them with applying for FIP/TANF so that they have a source of cash income until their housing can be stabilized and they can return to work. For clients who are unable to work due to a disability, staff help them apply for SSDI/SSI benefits. This is a long process that many clients could not and would not complete without assistance. Among our agencies there is one staff who has completed SOAR training and assist clients with obtaining the required information and applying for SSDI/SSI benefits. The CoC is encouraging all projects, especially street outreach, coordinated entry, and permanent supportive housing to have at least one staff complete and stay current on SOAR training. Once a client is approved for SSI/SSDI, the case manager continues to assist them with budgeting or requesting a payee to assist them with budgeting and money management. CoC/ESG-funded agencies and the CoC Project Monitoring and Development Committee oversee this strategy.

FY2019 CoC Application	Page 31	09/25/2019
------------------------	---------	------------

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

Applicants must describe how the CoC:

- 1. promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and
- 2. is working with public and private organizations to provide meaningful, education and training, on-the-job training, internship, and employment opportunities for residents of permanent supportive housing that further their recovery and well-being. (limit 2,000 characters)

CoC agencies partner with numerous private employers and private employment organizations that provide outreach to case managers and clients when jobs are available. The Project Help PSH program director also sits on a committee at Dismas Charities, a federal halfway house for prisoners reentering the community. These committee meetings include employers in the community who will hire non-traditional workers who may need a little more patience and assistance when entering or re-entering the work force. Many large employers also hold job fairs and on-the-spot interviews several times per year and widely promote them in local television, radio, and print media in order to attract employees. Many CoC -funded agencies also have booths at these job fairs to promote community resources to all potential employees. CoC Agencies partner with local community colleges and universities to assist clients with furthering their education whether that be completing the GED/Hi-Set, taking college courses to complete a certification course or degree, or enrolling in trade school to learn or improve a skill that will lead to future employment. Clients are also assisted with accessing training and employment through IowaWorks, Social Security's Ticket to Work program, Goodwill and Voc. Rehab. These connections not only help clients with developing and improving skills, but also help them with documenting their skill base and applying for jobs.

Education and employment organizations that CoC agencies partner with include: Western Iowa Tech Community College, The College Center/Northeast Community College, Morningside College, IowaWorks, and staffing agencies including Short Staffed, IMKO, Aventure Staffing, J&L Staffing, and People Ready.

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

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

FY2019 CoC Application	Page 32	09/25/2019
------------------------	---------	------------

5. The CoC works with organizations to create volunteer opportunities for program participants.	
6. The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	
7. Provider organizations within the CoC have incentives for employment.	
8. The CoC trains provider organization staff on helping program participants budget and maximize their income to maintain stability in permanent housing.	

3A-6. System Performance Measures 05/30/2019 **Data–HDX Submission Date**

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

Applicant: Sioux City/Dakota, Woodbury Counties CoC

Project: IA-500 CoC Registration FY2019

IA-500 COC_REG_2019_170570

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

Instructions

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

Resources:

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The FY 2019 CoC Program Competition Notice of Funding Availability at: https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices

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

3B-1. Prioritizing Households with Children.

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

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

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

Applicants must:

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

FY2019 CoC Application	Page 34	09/25/2019
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assistance ends; and

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

We utilize ESG and CoC funding for rapid rehousing. Families who present at a Coordinated Entry Access Point are assessed for their housing needs. If they are at imminent risk of becoming homeless, they are first assessed for possible diversion from homelessness. Clients who cannot be diverted complete the CE Intake Assessment/VI-SPDAT and are placed on the prioritization list. Persons fleeing DV are referred to the appropriate DV agency to complete the assessment and receive shelter and advocacy services. If the client is involved with other agencies, those case managers will also assist in the RRH process by ensuring the client makes it to appointments, ensuring they have the necessary documentation, working with the client to break down barriers to housing, and helping educate the client about the program and the process all of which can help the process move quicker. Once an RRH referral has been made, the RRH case manager attempts to contact the client and schedule an appointment. The case manager assesses their situation and begins the process of getting them stably housed. This includes assessing and resolving their barriers to housing, including past due utility bills or multiple evictions. Based on housing availability and landlord relationships, we are often able to resolve the issues and get the family rehoused within 30-45 days. Due to the lack of ES beds available for families, we find many clients are staying short term with family members or in hotels until they are able to secure a permanent housing situation. Therefore, many potential ESG-RRH clients are assisted through ESG-HP. CoC/ESG-funded agencies and the CoC Project Monitoring and Development Committee oversee this strategy.

3B-1b. Antidiscrimination Policies.

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

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

FY2019 CoC Application	Page 35	09/25/2019

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

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

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

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

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

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

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

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

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

In the absence of youth-focused projects, our current projects have made modifications to their existing programs to be more youth-inclusive. The case managers are taking a more hands-on approach with the youth who are

FY2019 CoC Application	Page 36	09/25/2019	
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Applicant: Sioux City/Dakota, Woodbury Counties CoC

Project: IA-500 CoC Registration FY2019

entering our projects. They do this by taking additional time as needed to teach or connect the youth to life skills (parenting, budgeting, property care and how to be a good renter, etc.) that they may not have developed yet due to their age and lack of real-life experiences. They also take a more hands-on approach when assisting youth with applying for jobs, school, and housing to ensure they are filling out applications correctly and following up on opportunities. One of our transitional housing programs is assisting the teenage youth in the families it serves by providing opportunities for the teens to prepare for adulthood. They participate in case management, set education and employment goals, and participate in Consumer Credit Counseling to learn budgeting and money management skills. Crittenton Center operates a youth shelter for DHS/foster system children and 2 state-funded Supervised Apartment Living (SAL) programs - a cluster site for youth in the foster care system ages 16.5 – 19 years who are at risk of homelessness, and a scattered site SAL program for youth ages 17-21 years. At the cluster site SAL youth to live together in a 24/7 supervised environment. Once they demonstrate skills needed to live independently, they are assisted in finding their own apartment. Both programs teach youth life and job seeking/retention skills, ensure enrollment in high school or Hi-Set programs, and provide a monthly stipend to help them pay rent and bills. Crittenton Center also has a Child Welfare and Emergency Services program with a Crisis intervention Specialist. This Specialist finds safe housing options for homeless or abused/neglected youth. This program collaborates with The Department of Human Services, the school district, and law enforcement for the safety and housing of youth. We feel these programs contribute to our unsheltered homeless youth PIT count being 0 year after year.

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

Applicants must:

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

All of our funded programs record data such as age, income, employment, non-cash benefits, and exit destination in the HMIS system for both adults and youth. This data is compiled and reported quarterly to the local CoC. The CoC Project Monitoring Committee reviews the data with all funded agencies which then sparks conversation about client success and ways to improve our success rates. Additionally, in order to maintain their funding for the youth programs mentioned in 3B-1d, Crittenton Center tracks and reports quarterly on state-mandated performance measures for the Emergency Youth Shelter including: 1) Number of youth diverted from shelter care (number in which the Crisis Intervention Specialist found family or other safe placement for a youth), and 2) Number of youth discharged from shelter to family or a family-like setting, which is the best outcome for youth. Crittenton Center tracks and reports quarterly on state-mandated performance measures for Supervised Apartment Living including: 1) Number of youth who age out at age 18 or older

FY2019 CoC Application	Page 37	09/25/2019
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who are discharged from SAL to their family, family-like setting, or other positive support system placement; 2) Number of youth who engage in aftercare services; and 3) Number of youth who show improvement in the Casey Life Skills Assessment. Crittenton's Resource Center tracks housing statistics in the DAISEY database on the families and youth served through the resource center. Crittenton's Resource Center also utilizes the Protective Factors Survey, which tracks pre/post 1) Family Functioning and Resiliency; 2) Social Supports; 3) Concrete Supports; 4) Nurturing and Attachment; and 5) Knowledge of parenting and child development. The CoC uses the above data and percentages as evidence to demonstrate the continued effectiveness of the programming for youth and families. The CoC believes these measures are appropriate to determine the effectiveness of the strategies because these implemented strategies and collaborations work as demonstrated by the lack of homeless youth.

3B-1e. Collaboration-Education Services.

Applicants must describe:

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

(limit 2,000 characters)

While the CoC does not have written MOU's with youth education providers, the CoC has a policy that requires all homeless assistance providers to ensure that all children are enrolled in school and connected to appropriate education services within the community. Per CoC policy, homeless assistance providers are aware of McKinney-Vento Education definitions and responsibilities and State of Iowa and the State of Nebraska Administrative Code requirements. They educate the parents on their rights, maintain regular contact with local education liaisons regarding the homeless children in their programs, and ensure access to fair and equal education. Additionally, the school districts' equity education offices publish and distribute fliers to social service agencies and homeless providers to ensure parents know their rights and works closely with the service providers to identify and serve the homeless children in the districts. Our Early/Head Start programs prioritize homeless families and children and partner with homeless service agencies as outlined in the Community Action Agency performance standards.

The CoC collaborates with youth education providers to ensure that the children are enrolled in school and receiving the access to education, technology, and activities as non-homeless children, including being transported to and attending their home school during their stay in shelter. One school district provides tutors weekly on-site at the shelter and ensures the children can attend summer education programs to reduce summer learning loss. The AEA and ESU provide ancillary services, such as speech, OT, PT, Early childhood, school psychologists, behavior analysts, and teachers at Boys and Girls Home

FY2019 CoC Application	Page 38	09/25/2019
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and Family Services. One CoC Agency has partnerships with the ESU in Nebraska to provide mental health services to kids and South Sioux City schools to provide two full time therapists in the schools as well as therapy and family wraparound in homes.

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

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

The CoC's HEARTH Act/McKinney-Vento Education for Homeless Children and Youths Program Policy states that the CoC shall: 1) provide Homeless Assistance Providers with a copy of the McKinney-Vento Education for Homeless Children and Youths Program guidelines and the respective state's (Iowa and Nebraska) Administrative Code regarding educating the homeless; 2) review key principles of the McKinney-Vento Education Program and the State Administrative Code as needed to keep Homeless Assistance Providers apprised of the requirements; and 3) assist Homeless Assistance Providers with implementing the McKinney-Vento Education for Homeless Children and Youths Program as needed. The policy requires that Homeless Assistance Providers ensure all children are enrolled in school and connected to appropriate services as well as: 1) be aware of the requirements of the McKinney-Vento Education for Homeless Children and Youths Program and the respective state's (Iowa and Nebraska) Administrative Code regarding educating the homeless; 2) maintain contact with local school districts' Homeless Liaison or Student Services Office to keep them apprised of the homeless children they are serving; and 3) maintain contact with local school districts' Homeless Liaison or Student Services Office to keep informed of the services available to homeless children and how to help their parents access these services.

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

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

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	Yes
Head Start	No	Yes
Early Head Start	No	Yes
Child Care and Development Fund	No	No
Federal Home Visiting Program	No	Yes
Healthy Start	No	No
Public Pre-K	No	Yes

FY2019 CoC Application	Page 39	09/25/2019

Applicant: Sioux City/Dakota, Woodbury Counties CoC

IA-500

Resident IA 500 CoC Registration FY0040

Project: IA-500 CoC Registration FY2019	COC_REG_2019_170570

Birth to 3 years	No	Yes
Tribal Home Visting Program	No	No
Other: (limit 50 characters)		
	No	No
	No	No

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

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

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

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

3B-2b. Housing First for Veterans.

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

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

Applicants must:

- 1. select all that apply to indicate the findings from the CoC's Racial Disparity Assessment; or
- 2. select 7 if the CoC did not conduct a Racial Disparity Assessment.

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

1 12010 000 Application 1 ago 10 00/20/2010		FY2019 CoC Application	Page 40	09/25/2019
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3B-3a. Addressing Racial Disparities.

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

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

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

Instructions:

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

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

4A-1. Healthcare-Enrollment/Effective Utilization

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

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

4A-1a. Mainstream Benefits.

Applicants must:

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

FY2019 CoC Application	Page 42	09/25/2019
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health insurance;

4. describe how the CoC provides assistance with the effective utilization of Medicaid and other benefits; and

5. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy for mainstream benefits. (limit 2,000 characters)

The CoC systematically keeps agency staff up to date regarding mainstream resources by providing a platform at each bimonthly CoC meeting for benefits providers to present program and resource information. Information is also shared in a more informal manner during the biweekly Coordinated Care meetings and other community/agency meetings, benefits fairs, and events such as National Night Out, as well as through email and social media, in order to ensure the agencies and their clients are well-informed about programs and benefits and accessing them. The CoC encourages program staff to participate in trainings or informational sessions to get the most up-to-date information about programs and services. The CoC emails members and posts to social media the date, time, and location of the trainings/informational sessions. Program staff have a close working relationship with mainstream benefit providers, and benefit providers are available via phone to answer questions and brainstorm specific client situations. CoC funded projects supplement their funding and help homeless clients apply for and receive mainstream benefits by utilizing medical transportation services to/from medical appointments; collaborating with the school districts' Education Equity Offices to provide school transportation; accessing sliding scale medical/mental health and substance use care; applying for Medicaid, FIP, food stamps, state-funded daycare and other TANF services; referring clients to food pantries and thrift stores for vouchers to meet their needs, etc. We also have a volunteer Street Medicine program that provides basic medical care and well-checks (blood sugar, blood pressure, wound care, etc.) to persons living on the street and helps them sign up for health care and educates them about the importance of obtaining a primary care provider instead of the ER. All funded projects and the CoC's Board Chair are responsible for overseeing the CoC's strategy for mainstream benefits.

4A-2. Lowering Barriers to Entry Data:

Applicants must report:

1. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition.	5
2. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	5
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	

4A-3. Street Outreach.

Applicants must:

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

FY2019 CoC Application Page 43 09/25/2019

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

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

Street outreach is conducted by various agencies/programs in the CoC, including the City of Sioux City's Street Outreach program, Coordinated Entry System staff, permanent supportive housing staff, Siouxland Mental Health Center Project Restore staff, Heartland Counseling Crisis Response staff, and Sunnybrook Church Stephen's Ministry street medicine volunteers. Street outreach occurs throughout the whole CoC region, with frequency and activity varying by community. In larger cities and the metropolitan area outreach workers canvas neighborhoods, shelters, food pantries/the Soup Kitchen, parks, the library, and other known locations daily to identify, engage, and screen people for housing/services. In smaller communities and rural areas, outreach workers provide information to local service agencies and partners such as law enforcement and respond to specific outreach needs when requested. To reduce barriers to assistance, outreach workers and agency staff meet the clients where they are and are present weekly at Siouxland Community Health Center and daily at the seasonal Day/Warming Shelter to visit with potential homeless clients. They also distribute fliers to social service organizations, laundromats, gas stations, and local grocery stores and on social media to create a presence in the community. Workers are trained in trauma-informed care, person-centered care, motivational interviewing, and unique strategies for youth, veterans, persons with serious mental illness, and other unsheltered homeless persons. In order to reach those least likely to request assistance, agencies employ Spanish-speaking staff and collaborate with a local agency dedicated to helping non-English speaking clients, or outreach workers will read and explain program information. Most agencies have access to applications for the free phone and can help clients access transportation through their Medicaid MCO.

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

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

	2018	2019	Difference
RRH beds available to serve all populations in the HIC	3	50	47

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

Applicants must indicate whether any new project application the CoC ranked and submitted in its CoC Priority Listing in the FY

FY2019 CoC Application Page 44 09/25/2
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2019 CoC Program Competition is requesting \$200,000 or more in funding for housing rehabilitation or new construction.

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

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

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached	
_FY 2019 CoC Competition Report (HDX Report)	Yes	IA 500 FY2019 CoC	09/03/2019	
1C-4.PHA Administration Plan–Moving On Multifamily Assisted Housing Owners' Preference.	No	PHA Administratio	09/17/2019	
1C-4. PHA Administrative Plan Homeless Preference.	No	PHA Administratio	09/17/2019	
1C-7. Centralized or Coordinated Assessment System.	Yes	CE Assessment Sys	09/16/2019	
1E-1.Public Posting–15-Day Notification Outside e- snaps–Projects Accepted.	Yes	IA 500 1E-1 Publi	09/03/2019	
1E-1. Public Posting–15-Day Notification Outside e- snaps–Projects Rejected or Reduced.	Yes	IA 500 1E-1 Publi	09/03/2019	
1E-1.Public Posting–30-Day Local Competition Deadline.	Yes	1E-1. Public Post	09/03/2019	
1E-1. Public Posting–Local Competition Announcement.	Yes	IA 500 1E-1 Publi	09/03/2019	
1E-4.Public Posting–CoC- Approved Consolidated Application	Yes			
3A. Written Agreement with Local Education or Training Organization.	No			
3A. Written Agreement with State or Local Workforce Development Board.	No			
3B-3. Summary of Racial Disparity Assessment.	Yes	IA 500 Racial Dis	09/18/2019	
4A-7a. Project List-Homeless under Other Federal Statutes.	No			
Other	No			
Other	No			

FY2019 CoC Application	Page 46	09/25/2019
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Othor	No	1
Other	No	

Attachment Details

Document Description: IA 500 FY2019 CoC Competition Report

Attachment Details

Document Description: PHA Administration Plan_Move On Preference

Attachment Details

Document Description: PHA Administration Plan - Homeless Preference

Attachment Details

Document Description: CE Assessment System, Tool

Attachment Details

Document Description: IA 500 1E-1 Public Posting 15 Day Notice

Projects Accepted

Attachment Details

FY2019 CoC Application	Page 48	09/25/2019
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Document Description: IA 500 1E-1 Public Posting 15 Day Notice

Projects Reduced

Attachment Details

Document Description: 1E-1. Public Posting 30 day Local Competition

Deadline

Attachment Details

Document Description: IA 500 1E-1 Public Posting Local Competition

Announcement

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

FY2019 CoC Application	Page 49	09/25/2019
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Attachment Details

Document Description: IA 500 Racial Disparity Assessment

Attachment Details

Document Description:

FYZUT9 COC Application Page 50 U9/25/2019	FY2019 CoC Application	Page 50	09/25/2019
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Submission Summary

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

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

FY2019 CoC Application	Page 51	09/25/2019
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Submission Summary

No Input Required

Summary Report for IA-500 - Sioux City/Dakota, Woodbury Counties 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.

	_	erse sons)		ge LOT Hor bed nights			n LOT Hon bed nights	
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference
1.1 Persons in ES and SH	62	13	27	42	15	15	36	21
1.2 Persons in ES, SH, and TH	398	292	98	113	15	65	75	10

b. This measure is based on data element 3.17.

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

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

	Universe (Persons)			Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference	
1.1 Persons in ES, SH, and PH (prior to "housing move in")	62	15	86	127	41	30	82	52	
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	397	290	129	170	41	82	93	11	

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	Homelessr	Returns to Homelessness in Less than 6 Months		in Less Homelessness from 6		Homelessness from 6 Homelessness from			of Returns Years
	Destination (2 Years Prior)	FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns	
Exit was from SO	0	0		0		0		0		
Exit was from ES	6	1	17%	0	0%	0	0%	1	17%	
Exit was from TH	124	4	3%	0	0%	0	0%	4	3%	
Exit was from SH	0	0		0		0		0		
Exit was from PH	6	0	0%	0	0%	0	0%	0	0%	
TOTAL Returns to Homelessness	136	5	4%	0	0%	0	0%	5	4%	

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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

	January 2017 PIT Count	January 2018 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	288	264	-24
Emergency Shelter Total	171	189	18
Safe Haven Total	0	0	0
Transitional Housing Total	115	69	-46
Total Sheltered Count	286	258	-28
Unsheltered Count	2	6	4

Metric 3.2 - Change in Annual Counts

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

	Submitted FY 2017	FY 2018	Difference
Universe: Unduplicated Total sheltered homeless persons	401	292	-109
Emergency Shelter Total	61	12	-49
Safe Haven Total	0	0	0
Transitional Housing Total	347	282	-65

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

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	4	4	0
Number of adults with increased earned income	0	1	1
Percentage of adults who increased earned income	0%	25%	25%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	4	4	0
Number of adults with increased non-employment cash income	1	0	-1
Percentage of adults who increased non-employment cash income	25%	0%	-25%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	4	4	0
Number of adults with increased total income	1	1	0
Percentage of adults who increased total income	25%	25%	0%

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	92	80	-12
Number of adults who exited with increased earned income	31	29	-2
Percentage of adults who increased earned income	34%	36%	2%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	92	80	-12
Number of adults who exited with increased non-employment cash income	11	12	1
Percentage of adults who increased non-employment cash income	12%	15%	3%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	92	80	-12
Number of adults who exited with increased total income	40	39	-1
Percentage of adults who increased total income	43%	49%	6%

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

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

	Submitted FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	327	223	-104
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.	5	10	5
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)	322	213	-109

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

	Submitted FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	360	287	-73
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.	6	18	12
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.)	354	269	-85

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

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

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

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

	Submitted FY 2017	FY 2018	Difference
Universe: Persons who exit Street Outreach	0	0	0
Of persons above, those who exited to temporary & some institutional destinations	0	0	0
Of the persons above, those who exited to permanent housing destinations	0	0	0
% Successful exits			

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

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	346	253	-93
Of the persons above, those who exited to permanent housing destinations	185	187	2
% Successful exits	53%	74%	21%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in all PH projects except PH-RRH	15	6	-9
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	7	6	-1
% Successful exits/retention	47%	100%	53%

FY2018 - SysPM Data Quality

IA-500 - Sioux City/Dakota, Woodbury Counties 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.

FY2018 - SysPM Data Quality

	All ES, SH					All TH				All PSH, OPH				All RRH				All Street Outreach		
	2014- 2015	2015- 2016	2016- 2017	2017- 2018	2014- 2015	2015- 2016	2016- 2017	2017- 2018												
1. Number of non- DV Beds on HIC	123	115	147	146	125	95	93	88	83	64	54	30		2	11	3				
2. Number of HMIS Beds	4	3	3	86	120	95	93	88	58	39	24	0		2	11	3				
3. HMIS Participation Rate from HIC (%)	3.25	2.61	2.04	58.90	96.00	100.00	100.00	100.00	69.88	60.94	44.44	0.00		100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	15	28	61	12	338	295	347	282	47	35	23	9	46	60	54	77			0	0
5. Total Leavers (HMIS)	5	24	47	10	254	217	279	228	22	10	22	1	0	0	43	41			0	0
6. Destination of Don't Know, Refused, or Missing (HMIS)	0	2	29	1	33	27	17	7			2	0	0	0	11	6			0	0
7. Destination Error Rate (%)	0.00	8.33	61.70	10.00	12.99	12.44	6.09	3.07			9.09	0.00			25.58	14.63				

Excerpt from the Sioux City PHA Administration Plan:

Family Unification Program, Mainstream for Persons with Disabilities, VASH

Regular HCV Funding

Regular HCV funding may be used to assist any eligible family on the waiting list. Families are selected from the waiting list according to the policies provided in Section 4-III.C.

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

PHA Policy

The PHA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding.

The PHA will use local preference to select families from the waiting list.

The PHA has selected the following system to apply local preferences:

Local preferences will be aggregated using the following system:

Each preference will receive an allocation of points. The more preference points an applicant has, the higher the applicant's place on the waiting list:

3 points – involuntary displacement

3 points – a family can only be eligible for ONE of these two preferences:

Moving up Preference – limited to 50 per year on a rolling basis

OR

<u>Homeless Student</u> – limited to 100 per year on a rolling basis

1 point – working preference/elderly (62 years old or older)/disabled

Among applicants with equal preference status, the waiting list will be organized by date and time of completed application.

At the time of application, an applicant's entitlement to a local preference will be verified before they are placed on the waiting list. The PHA may verify all preference claims at the time they are approaching the top of the waiting list when the full application is processed if a change in circumstances seems to have occurred.

If the preference verification indicates that an applicant does not qualify for the preference, the applicant will be returned to the waiting list without the local preference. If at the time the family applied, the preference claim was the only reason for placement of the family on the list and the family cannot verify their eligibility for the preference, the family will be removed from the list.

Definition of Local Preferences

Moving Up Preference: Siouxland Coalition to End Homelessness (CoC) partners will identify persons or families in Permanent Supportive Housing (PSH) and Transitional Housing (TH) that meet criteria: were previously homeless prior to entry in to the PSH or TH program but who no longer need that level of supportive services. The Moving Up Preference will be limited to 50 admission preferences per year on a rolling basis, and will contribute significantly to the to the community's overall efforts to end homelessness by freeing up units for currently homeless families and individuals with disabilities who need housing combined with services. To qualify:

- · Voluntary Tenant Participation
- · Permanent Supportive Housing Residency for at least 2 years, OR
- · Transitional Housing Residency for at least 3 months
- · Tenant in good standing
- · Referrals are restricted to service providers only; Continuum of Care (CoC) Providers with an Memorandum of Understanding (MOU)

Homeless Families with School Aged Children: This preference will identify homeless school aged children in the Sioux City Community School District that meet the criteria: meet HUD's definition of homelessness and are identified and referred by Sioux City Community Schools and other private Sioux City schools under MOUs. The Homeless Families with School Aged Children Preference will be limited to 100 admission preferences per year on a rolling basis. PHAs and schools can collaborate to identify and assist children whose families are experiencing homelessness and to support housing stability. By working together to end homelessness for families, schools and PHAs can strengthen communities and improve educational outcomes for students.

To qualify:

- Voluntary Tenant Participation
- Meet HUD's definition of homelessness: Category 1
- Referrals are restricted to Sioux City Community Schools, both public and private, who will identify and make referrals with an Memorandum of Understanding (MOU)

The students and their families must meet the definition of homelessness:

Category 1: An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- a) An individual or family with a nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or
- b) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local governments for low-income individuals); *or*

c) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Working Preference: Families with at least one adult who is:

- 1) Employed an average of at least twenty hours per week for at least 6 months.
- 2) Is receiving unemployment benefits
- 3) Is an active, full time participant in an accredited education and/or training program designed to prepare the individual for the job market.
- 4) Is involved in a combination of education and employment to equal at least twenty hours per week for at least 6 months.
- 5) This preference is automatically extended to elderly families or families whose head or spouse is receiving income based on their inability to work or to which a doctor or other professional certifies his/her disability.

Involuntary Displacement

Involuntarily Displaced applicants are applicants who have been involuntarily displaced and are not living in standard, permanent replacement housing, or will be involuntarily displaced within no more than six months from the date of verification by the PHA.

Families are considered to be involuntarily displaced if they are required to vacate housing as a result of:

- 1. A disaster (fire, flood, earthquake, etc.) that has caused the unit to be uninhabitable.
- 2. Federal, state or local government action related to code enforcement, public improvement or development, as long as the action is unrelated to the actions of the tenant.
 - If the owner is an immediate family relative and there has been no previous rental agreement and the applicant has been part of the owner's family immediately prior to application, the applicant will not be considered involuntarily displaced.
- 3. To avoid reprisals because the family provided information on criminal activities to a law enforcement agency and, after a threat assessment, the law enforcement agency recommends rehousing the family to avoid or reduce risk of violence against the family.
 - The family must be part of a Witness Protection Program, or the HUD Office or law enforcement agency must have informed the PHA that the family is part of a similar program. The PHA will take precautions to ensure that the new location of the family is concealed in cases of witness protection.
- 4. By hate crimes if a member of the family has been the victim of one or more hate crimes, and the applicant has vacated the unit because of the crime or the fear of such a crime has destroyed the applicant's peaceful enjoyment of the unit.

Excerpt from South Sioux City Housing Agency Administration Plan:

4-III.C. SELECTION METHOD

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PHA Policy

<u>Domestic (first priority):</u> Victims of Domestic Violence. (See qualifications for preference)

<u>Work, Disabled (second priority)</u>: Head, Spouse or Sole Member maintains employment or persons over the age of 62 or receiving Social Security Disability or Supplemental Security Income or verified as disabled.

Residential (Third priority): Family/Individual maintains a permanent place of residence in the HA's jurisdiction. This preference applies to a Family/Individual who currently maintains a residence in the South Sioux City Housing Agencies jurisdiction for a minimum of 6 months prior to the application date. (This preference requires Applicant to provide a current active Lease with their name on it or a current local electric bill with their name & address, to prove permanent residency.)

Homeless Families with School Aged Children Preference

This preference will identify homeless school aged children in the South Sioux City Community School District that meet this criteria: meet HUD's definition of homelessness and are identified and referred by South Sioux City Community Schools or other private South Sioux City schools. (The applicant must have referring agency submit documentation verifying from South Sioux City Schools. Siouxland Coalition to End Homelessness (CoC) partners will identify persons or families in Permanent Supportive Housing (PSH) and Transitional Housing (TH) that meet criteria: were previously homeless prior to entry in to the PSH or TH program but who no longer need that level of supportive services.)

The PHA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding.

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 75% of the families admitted to the HCV program during the PHA's fiscal year. ELI families are those with annual incomes at or below 30% of the area median income. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

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Category 1: An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- a) An individual or family with a nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or
- b) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local governments for low-income individuals); *or*

c) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

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- 3) Is an active, full time participant in an accredited education and/or training program designed to prepare the individual for the job market.
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- 3. To avoid reprisals because the family provided information on criminal activities to a law enforcement agency and, after a threat assessment, the law enforcement agency recommends rehousing the family to avoid or reduce risk of violence against the family.
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- 4. By hate crimes if a member of the family has been the victim of one or more hate crimes, and the applicant has vacated the unit because of the crime or the fear of such a crime has destroyed the applicant's peaceful enjoyment of the unit.

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The PHA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding.

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 75% of the families admitted to the HCV program during the PHA's fiscal year. ELI families are those with annual incomes at or below 30% of the area median income. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

Iowa Balance of State Coordinated Entry Diversion/Prevention Screening Tool

Date o	f the Screening Interview//
PRE-SC	CREEN QUESTIONS
1.	Are you homeless or do you believe you will become homeless in the next 72 hours? Yes No HUD definition of homeless: living in a place not meant for human habitation, in emergency shelter (including domestic violence shelter), in transitional housing, or exiting an institution where they temporarily resided for up to 90 days and were in shelter or a place not meant for human habitation immediately prior to entering that institution.
2.	Are you currently residing with, or trying to leave, an intimate partner who threatens you or makes you fearful? Yes No If yes to Question 2, clients are referred to DV resources and DO NOT PROCEED WITH THIS ASSESSMENT or any part of the Coordinated Entry Process. (Iowa Domestic Violence Hotline 1.800.770.1650)
3.	Where did you sleep last night?
	Was it a safe location? Yes No If no, ask "What made the location unsafe?" "Is there another place you can think of where you feel safe and could stay for a couple of nights?" If unsafe due to domestic violence, refer to DV services.
<u>PREVE</u>	NTION/DIVERSION QUESTIONS
5.	Why did you have to leave the place you stayed last night?
6.	Could you stay tonight at the same location? Yes No If no, skip to Question 9
7.	What would you need to help you stay where you stayed last night again? Examples: (Landlord mediation, Conflict resolution, Rental assistance, Utility assistance, etc.)
8.	Would it help if I contacted the person you stayed with? What is the best way to contact that person? Name Phone
9.	Is there anyone else you (and your family) could stay with? Friends, family, co-workers? Yes No If no, skip to Question 12
10.	What would you need to help you stay there? Examples: (Landlord mediation, Conflict resolution, Rental assistance, Utility assistance, etc.)
11.	Would it help if I contacted that person you can stay with? What is the best way to contact that person? Name Phone
12.	Were you able to successfully divert this person(s) via homeless prevention or other community resources? Yes No
	If no, continue with Coordinated Entry Assessment and/or Project Entry.

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

Prescreen Triage Tool for Families

AMERICAN VERSION 2.0

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Welcome to the SPDAT Line of Products

The Service Prioritization Decision Assistance Tool (SPDAT) has been around in various incarnations for over a decade, before being released to the public in 2010. Since its initial release, the use of the SPDAT has been expanding exponentially and is now used in over one thousand communities across the United States, Canada, and Australia.

More communities using the tool means there is an unprecedented demand for versions of the SPDAT, customized for specific client groups or types of users. With the release of SPDAT V4, there have been more current versions of SPDAT products than ever before.

VI-SPDAT Series

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) was developed as a pre-screening tool for communities that are very busy and do not have the resources to conduct a full SPDAT assessment for every client. It was made in collaboration with Community Solutions, creators of the Vulnerability Index, as a brief survey that can be conducted to quickly determine whether a client has high, moderate, or low acuity. The use of this survey can help prioritize which clients should be given a full SPDAT assessment first. Because it is a self-reported survey, no special training is required to use the VI-SPDAT.

Current versions available:

- VI-SPDAT V 2.0 for Individuals
- VI-SPDAT V 2.0 for Families
- VI-SPDAT V 1.0 for Youth

All versions are available online at

www.orgcode.com/products/vi-spdat/

SPDAT Series

The Service Prioritization Decision Assistance Tool (SPDAT) was developed as an assessment tool for front-line workers at agencies that work with homeless clients to prioritize which of those clients should receive assistance first. The SPDAT tools are also designed to help guide case management and improve housing stability outcomes. They provide an in-depth assessment that relies on the assessor's ability to interpret responses and corroborate those with evidence. As a result, this tool may only be used by those who have received proper, up-to-date training provided by OrgCode Consulting, Inc. or an OrgCode certified trainer.

Current versions available:

- SPDAT V 4.0 for Individuals
- SPDAT V 2.0 for Families
- SPDAT V 1.0 for Youth

Information about all versions is available online at

www.orgcode.com/products/spdat/

SPDAT Training Series

To use the SPDAT, training by OrgCode or an OrgCode certified trainer is required. We provide training on a wide variety of topics over a variety of mediums.

The full-day in-person SPDAT Level 1 training provides you the opportunity to bring together as many people as you want to be trained for one low fee. The webinar training allows for a maximum of 15 different computers to be logged into the training at one time. We also offer online courses for individuals that you can do at your own speed.

The training gives you the manual, case studies, application to current practice, a review of each component of the tool, conversation guidance with prospective clients – and more!

Current SPDAT training available:

- Level O SPDAT Training: VI-SPDAT for Frontline Workers
- Level 1 SPDAT Training: SPDAT for Frontline Workers
- · Level 2 SPDAT Training: SPDAT for Supervisors
- Level 3 SPDAT Training: SPDAT for Trainers

Other related training available:

- Excellence in Housing-Based Case Management
- · Coordinated Access & Common Assessment
- Motivational Interviewing
- Objective-Based Interactions

More information about SPDAT training, including pricing, is available online at

http://www.orgcode.com/product-category/training/spdat/

Administration

Interviewer's Name	Agency	□ Team □ Staff □ Volunteer		
Survey Date	Survey Time	Survey Location		
DD/MM/YYYY//	: AM/PM			

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- · that any question can be skipped or refused
- · where the information is going to be stored
- · that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

	First Name	Nicknan	ne	Last Name	
PARENT 1	In what language do you feel best	able to	express yourself?		
PAI	Date of Birth	Age	Social Security Number	Consent to pa	rticipate
-	DD/MM/YYYY/			□Yes	□No
☐ No second parent currently part of the household					
T 2	First Name	Nicknan	ne	Last Name	
PARENT	In what language do you feel best	able to	express yourself?		
	Date of Birth	Age	Social Security Number	Consent to pa	rticipate
	DD/MM/YYYY//			□Yes	□No
SCORE:					
TIFE	ITHER HEAD OF HOUSEHOLD IS 60	YEARS U	FAGE OR OLDER, THEN SO	LURE I.	

ŀ	nildren					
1.	How many children under the ag	e of 18 are currently with you?			☐ Refused	
2.	How many children under the ag your family, but you have reason you when you get housed?			☐ Refused		
3.	IF HOUSEHOLD INCLUDES A FEMA family currently pregnant?	□ Y	□N	☐ Refused		
4.	Please provide a list of children's	s names and ages:				
	First Name	Last Name	Age		Date of Birth	
	THERE IS A SINGLE PARENT WITH) AGE	D 11 OF	YOUNGER,	SCORE:
ΙF	ND/OR A CURRENT PREGNANCY, T THERE ARE TWO PARENTS WITH 3 ND/OR A CURRENT PREGNANCY, T	+ CHILDREN, AND/OR A CHILD	AGED	6 OR Y	OUNGER,	
۱.	History of Housing a	nd Homelessness				
5.	Where do you and your family sloone)	eep most frequently? (check	□ Tra □ Sa □ O t	fe Hav Itdoor		
			□ Re	fused		
	THE PERSON ANSWERS ANYTHING R "SAFE HAVEN", THEN SCORE 1.	G OTHER THAN "SHELTER", "TRA	NSITI	ONAL	HOUSING",	SCORE:
6.	How long has it been since you a permanent stable housing?	nd your family lived in			□ Refused	
7.	In the last three years, how many family been homeless?	y times have you and your	-		□ Refused	
ıF	THE FAMILY HAS EXPERIENCED 1					SCORE:

B. Risks

THE TO ANT OF THE ABOVE, THEN SCOKE IT ON RISK OF LAF COTTAIN			
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATIO	DN.		SCORE:
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? □ Y	□N	□ Refused	
12. Does anybody force or trick you or anyone in your family to do			
IF "YES," THEN SCORE 1 FOR LEGAL ISSUES .			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?	⊔N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.		Dof:	SCORE:
10. Have you or anyone in your family threatened to or tried to harm themself or anyone else in the last year? □ Y	□N	□ Refused	
9. Have you or anyone in your family been attacked or beaten up ☐ Y since they've become homeless?	□N	☐ Refused	
IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCOEMERGENCY SERVICE USE.	RE 1 F	OR	SCORE:
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	
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	
d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?		□ Refused	
c) Been hospitalized as an inpatient?		☐ Refused	
b) Taken an ambulance to the hospital?		☐ Refused	
a) Received health care at an emergency department/room?	amily	□ Refused	

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?	□ Y	□N	□ 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?	ПΥ		□ Refused	
IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 MANAGEMENT.	FOR N	MONEY	•	SCORE:
16.Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled?	ПΥ		□ 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?	ПΥ		□ 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?	□ Y	□N	□ 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?	□ Y	□N	□ Refused	
20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart?	□ Y	□N	☐ 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?	□ Y	□N	□ 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?	□ Y	□N	□ Refused	
23. When someone in your family is sick or not feeling well, does your family avoid getting medical help?	□ Y	□N	☐ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEA	LTH.			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?	□Y	□N	□ Refused	
25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing?	□ Y	□N	☐ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE US	SE SE			SCORE:
TES TO ANT OF THE ABOVE, THEN SCORE FROR SOBSTANCE OF	JE.			
26. Has your family ever had trouble maintaining your housing, or apartment, shelter program or other place you were staying, be			out of an	
a) A mental health issue or concern?	\square Y	\square N	☐ Refused	
b) A past head injury?	\square Y	\square N	☐ Refused	
c) A learning disability, developmental disability, or other impairment?	□ Y	□N	☐ 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?	□ Y	□N	□ Refused	
IF "VEC" TO ANY OF THE ABOVE THEN COOPE 1 FOR MENTAL HEALT				SCORE:
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALT	н.			
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 us		□N	□ N/A or Refused	
IF "YES", SCORE 1 FOR TRI-MORBIDITY .				SCORE:
TES, SCOKE FIOR TRI-MORDIOTT.				
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?	□ Y	□N	□ 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?	□ Y	□N	□ Refused	
IF "VES" TO ANY OF THE ABOVE SCORE 1 FOR MEDICATIONS				SCORE:
IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.				
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?	□Y	□N	□ 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?	□ Y	□N	☐ 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?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY LEGAL ISSUES	S.			SCORE:
34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation?	□ Y	□N	☐ Refused	
35. Has any child in the family experienced abuse or trauma in the last 180 days?	□ Y	□N	☐ Refused	
36. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week?	ПΥ	□N	□ N/A or Refused	
IF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 3 OF CHILDREN.	6, SCC	RE 1 F	OR NEEDS	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?	□ Y	□N	□ Refused	
38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed?	□ Y	□N	☐ 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?	ПΥ	□N	□ Refused	
40.After school, or on weekends or days when there isn't school, is spend each day where there is no interaction with you or anoth				
a) 3 or more hours per day for children aged 13 or older?	\square Y	\square N	☐ Refused	
b) 2 or more hours per day for children aged 12 or younger?	\square Y	\square N	□ 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?	□ Y	□N	□ N/A or Refused	
IF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 4	1, SCO	RE 1 F	OR	SCORE:

PARENTAL ENGAGEMENT.

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS				
PRE-SURVEY	/2					
A. HISTORY OF HOUSING & HOMELESSNESS	/2	Score:	Recommendation:			
B. RISKS	/4	0-3	no housing intervention			
C. SOCIALIZATION & DAILY FUNCTIONS	/4	4-8	an assessment for Rapid			
D. WELLNESS	/6		Re-Housing			
E. FAMILY UNIT	/4	9+	an assessment for Permanent Supportive Housing/Housing First			
GRAND TOTAL:	/22					

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place::	or Morning/Afterno	oon/Evening/Night
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: () _ email:		
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	□Yes	□No	□ Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- · ageing out of care
- · mobility issues
- legal status in country
- · income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

Appendix A: About the VI-SPDAT

The HEARTH Act and federal regulations require communities to have an assessment tool for coordinated entry - and the VI-SPDAT and SPDAT meet these requirements. Many communities have struggled to comply with this requirement, which demands an investment of considerable time, resources and expertise. Others are making it up as they go along, using "gut instincts" in lieu of solid evidence. Communities need a practical, evidence-informed way to satisfy federal regulations while quickly implementing an effective approach to access and assessment. The VI-SPDAT is a first-of-its-kind tool designed to fill this need, helping communities end homelessness in a quick, strategic fashion.

The VI-SPDAT

The VI-SPDAT was initially created by combining the elements of the Vulnerability Index which was created and implemented by Community Solutions broadly in the 100,000 Homes Campaign, and the SPDAT Prescreen Instrument that was part of the Service Prioritization Decision Assistance Tool. The combination of these two instruments was performed through extensive research and development, and testing. The development process included the direct voice of hundreds of persons with lived experience.

The VI-SPDAT examines factors of current vulnerability and future housing stability. It follows the structure of the SPDAT assessment tool, and is informed by the same research backbone that supports the SPDAT - almost 300 peer reviewed published journal articles, government reports, clinical and quasi-clinical assessment tools, and large data sets. The SPDAT has been independently tested, as well as internally reviewed. The data overwhelmingly shows that when the SPDAT is used properly, housing outcomes are better than when no assessment tool is used.

The VI-SPDAT is a triage tool. It highlights areas of higher acuity, thereby helping to inform the type of support and housing intervention that may be most beneficial to improve long term housing outcomes. It also helps inform the order - or priority - in which people should be served. The VI-SPDAT does not make decisions; it informs decisions. The VI-SPDAT provides data that communities, service providers, and people experiencing homelessness can use to help determine the best course of action next.

Version 2

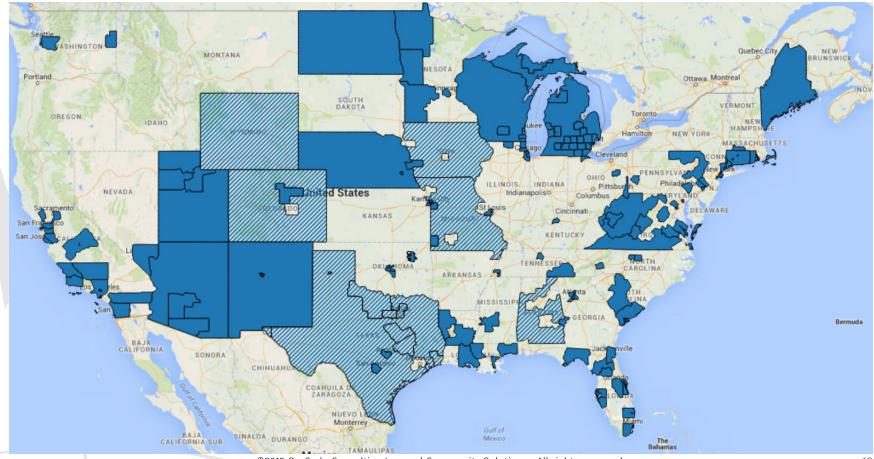
Version 2 builds upon the success of Version 1 of the VI-SPDAT with some refinements. Starting in August 2014, a survey was launched of existing VI-SPDAT users to get their input on what should be amended, improved, or maintained in the tool. Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.

You will notice some differences in Version 2 compared to Version 1. Namely:

- it is shorter, usually taking less than 7 minutes to complete;
- subjective elements through observation are now gone, which means the exact same instrument can be used over the phone or in-person;
- medical, substance use, and mental health questions are all refined;
- you can now explicitly see which component of the full SPDAT each VI-SPDAT question links to; and,
- the scoring range is slightly different (Don't worry, we can provide instructions on how these relate to results from Version 1).

Appendix B: Where the VI-SPDAT is being used in the United States

Since the VI-SPDAT is provided completely free of charge, and no training is required, any community is able to use the VI-SPDAT without the explicit permission of Community Solutions or OrgCode Consulting, Inc. As a result, the VI-SPDAT is being used in more communities than we know of. It is also being used in Canada and Australia.



A partial list of continua of care (CoCs) in the US where we know the VI-SPDAT is being used includes:

Alabama

· Parts of Alabama Balance of State

Arizona

· Statewide

California

- San Jose/Santa Clara City & County
- · San Francisco
- · Oakland/Alameda County
- Sacramento City & County
- Richmond/Contra Costa County
- Watsonville/Santa Cruz City & County
- Fresno/Madera County
- Napa City & County
- · Los Angeles City & County
- · San Diego
- Santa Maria/Santa Barbara County
- Bakersfield/Kern County
- Pasadena
- Riverside City & County
- Glendale
- San Luis Obispo County

Colorado

- Metropolitan Denver Homeless Initiative
- · Parts of Colorado Balance of State

Connecticut

- Hartford
- · Bridgeport/Stratford/Fairfield
- · Connecticut Balance of State
- Norwalk/Fairfield County
- Stamford/Greenwich
- City of Waterbury

District of Columbia

· District of Columbia

Florida

- Sarasota/Bradenton/ Manatee. Sarasota Counties
- Tampa/Hillsborough County
- St. Petersburg/Clearwater/ Largo/Pinellas County
- Tallahassee/Leon County
- · Orlando/Orange, Osceola, Seminole Counties
- Gainesville/Alachua, Putnam Counties
- Jacksonville-Duval, Clay Counties
- Palm Bay/Melbourne/Brevard County
- Ocala/Marion County
- Miami/Dade County
- West Palm Beach/Palm Beach County

Georgia

- Atlanta County
- **Fulton County**
- · Columbus-Muscogee/Russell County
- Marietta/Cobb County
- DeKalb County

Hawaii

Honolulu

Illinois

- · Rockford/Winnebago, Boone Counties
- Waukegan/North Chicago/ Lake County
- Chicago
- Cook County

Iowa

Parts of Iowa Balance of State

Kansas

· Kansas City/Wyandotte County

Kentucky

· Louisville/Jefferson County

Louisiana

- Lafavette/Acadiana
- Shreveport/Bossier/ Northwest
- New Orleans/Jefferson Parish
- · Baton Rouge
- Alexandria/Central Louisiana CoC

Massachusetts

- Cape Cod Islands
- Springfield/Holvoke/ Chicopee/Westfield/Hampden County

Maryland

- Baltimore City
- · Montgomery County

Maine

Statewide

Michigan

· Statewide

Minnesota

- · Minneapolis/Hennepin County
- · Northwest Minnesota
- Moorhead/West Central Minnesota
- · Southwest Minnesota

Missouri

- St. Louis County
- · St. Louis City
- · Joplin/Jasper, Newton Counties
- Kansas City/Independence/ Lee's Summit/Jackson County
- · Parts of Missouri Balance of State

Mississippi

- Jackson/Rankin, Madison Counties
- · Gulf Port/Gulf Coast Regional

North Carolina

- Winston Salem/Forsyth County
- Asheville/Buncombe County
- · Greensboro/High Point

North Dakota

· Statewide

Nebraska

Statewide

New Mexico

· Statewide

Nevada

Las Vegas/Clark County

New York

- New York City
- Yonkers/Mount Vernon/New Rochelle/Westchester County

Ohio

- Toledo/Lucas County
- Canton/Massillon/Alliance/ Stark County

Oklahoma

- Tulsa City & County/Broken Arrow
- Oklahoma City
- Norman/Cleveland County

Pennsylvania

- Philadelphia
- Lower Marion/Norristown/ Abington/Montgomery County
- Allentown/Northeast Pennsylvania
- Lancaster City & County
- Bristol/Bensalem/Bucks County
- Pittsburgh/McKeesport/Penn Hills/Alleghenv County

Rhode Island

Statewide

South Carolina

- Charleston/Low Country
- Columbia/Midlands

Tennessee

- Chattanooga/Southeast Tennessee
- · Memphis/Shelby County
- Nashville/Davidson County

Texas

- San Antonio/Bexar County
- Austin/Travis County
- Dallas City & County/Irving
- Fort Worth/Arlington/Tarrant County
- El Paso City and County
- Waco/McLennan County
- Texas Balance of State
- Amarillo
- · Wichita Falls/Wise. Palo Pinto. Wichita. Archer Counties
- Bryan/College Station/Brazos Valley
- Beaumont/Port Arthur/South Fast Texas

Utah

Statewide

Virginia

- · Richmond/Henrico, Chesterfield, Hanover Counties
- Roanoke City & County/Salem
- · Virginia Beach
- Portsmouth
- Virginia Balance of State Arlington County

Washington

- · Seattle/King County
- Spokane City & County

Wisconsin

· Statewide

West Virginia Statewide

Wyoming · Wyoming Statewide is in the process of implementing

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

Prescreen Triage Tool for Single Adults

AMERICAN VERSION 2.0

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- VI-SPDAT V 1.0 for Youth

All versions are available online at

www.orgcode.com/products/vi-spdat/

SPDAT Series

The Service Prioritization Decision Assistance Tool (SPDAT) was developed as an assessment tool for front-line workers at agencies that work with homeless clients to prioritize which of those clients should receive assistance first. The SPDAT tools are also designed to help guide case management and improve housing stability outcomes. They provide an in-depth assessment that relies on the assessor's ability to interpret responses and corroborate those with evidence. As a result, this tool may only be used by those who have received proper, up-to-date training provided by OrgCode Consulting, Inc. or an OrgCode certified trainer.

Current versions available:

- SPDAT V 4.0 for Individuals
- SPDAT V 2.0 for Families
- SPDAT V 1.0 for Youth

Information about all versions is available online at

www.orgcode.com/products/spdat/

SPDAT Training Series

To use the SPDAT, training by OrgCode or an OrgCode certified trainer is required. We provide training on a wide variety of topics over a variety of mediums.

The full-day in-person SPDAT Level 1 training provides you the opportunity to bring together as many people as you want to be trained for one low fee. The webinar training allows for a maximum of 15 different computers to be logged into the training at one time. We also offer online courses for individuals that you can do at your own speed.

The training gives you the manual, case studies, application to current practice, a review of each component of the tool, conversation guidance with prospective clients – and more!

Current SPDAT training available:

- Level O SPDAT Training: VI-SPDAT for Frontline Workers
- Level 1 SPDAT Training: SPDAT for Frontline Workers
- · Level 2 SPDAT Training: SPDAT for Supervisors
- Level 3 SPDAT Training: SPDAT for Trainers

Other related training available:

- Excellence in Housing-Based Case Management
- · Coordinated Access & Common Assessment
- Motivational Interviewing
- Objective-Based Interactions

More information about SPDAT training, including pricing, is available online at

http://www.orgcode.com/product-category/training/spdat/

Administration

Interviewer's Name	Agency	□ Team □ Staff □ Volunteer		
Survey Date	Survey Time	Survey Location		
DD/MM/YYYY//	: AM/PM			

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- · that any question can be skipped or refused
- · where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

First Name	Nickname		Last Name		
In what language do you feel best		express yourself?			
	Age	•	•	_	
DD/MM/YYYY//			☐ Yes	□ No	
					SCORE:
IF THE PERSON IS 60 YEARS OF AG	GE OR OL	DER, THEN SCORE 1.			SCORL.

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A. History of Housing and Homelessness				
	☐ Saf	nsition e Have tdoors		
	□ Ref	fused		
IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRAI OR "SAFE HAVEN", THEN SCORE 1.	NSITIO	ONAL I	HOUSING",	SCORE:
2. How long has it been since you lived in permanent stable housing?			□ Refused	
3. In the last three years, how many times have you been homeless?			□ Refused	
IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.	OF H	OMELI	ESSNESS,	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?			☐ 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 you witnessed a crime, were the vict of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along?			□ Refused	
f) Stayed one or more nights in a holding cell, jail or prison, whe that was a short-term stay like the drunk tank, a longer stay for more serious offence, or anything in between?		—	□ Refused	
IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN EMERGENCY SERVICE USE.	N SCOI	RE 1 F0	OR	SCORE:
5. Have you been attacked or beaten up since you've become homeless?	□ Y	□N	□ Refused	
6. Have you threatened to or tried to harm yourself or anyone else in the last year?	□ Y	□N	□ 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?	□Y	□N	□ 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?	□ Y	□N	□ 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?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLO	OITATIO	ON.		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?	□ Y	□N	□ Refused	
M. D				
11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?	ЦΥ	⊔N	□ Refused	
an inheritance, working under the table, a regular job, or				SCORE:
an inheritance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1	FOR N	MONEY		SCORE:
 an inheritance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 MANAGEMENT. 12.Do you have planned activities, other than just surviving, that 	FOR N	MONEY		SCORE:
 an inheritance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 MANAGEMENT. 12.Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? 	FOR N	MONEY □ N		
 an inheritance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 MANAGEMENT. 12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY. 13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean 	FOR N	MONEY □ N	□ Refused	
an inheritance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 MANAGEMENT. 12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY. 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?	FOR A	MONEY □ N	□ Refused	SCORE:

D	W	ام	IIn	ACC
	vv	CI		

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?	□ Y	□N	□ Refused			
16.Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?	□ Y	□N	□ 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?	□ Y	□N	□ 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?	□ Y	□N	□ Refused			
19.When you are sick or not feeling well, do you avoid getting help?	□ Y	□N	□ Refused			
20. FOR FEMALE RESPONDENTS ONLY: Are you currently pregnant?	□ Y	□N	□ N/A or Refused			
				SCORE:		
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEA	LTH.					
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?	□ Y	□N	☐ Refused			
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?	□ Y	□N	□ Refused			
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE US	E.			SCORE:		
23. Have you ever had trouble maintaining your housing, or been k apartment, shelter program or other place you were staying, be			an			
a) A mental health issue or concern?	\square Y	\square N	☐ Refused			
b) A past head injury?	\square Y	\square N	☐ Refused			
c) A learning disability, developmental disability, or other impairment?	□ Y	□N	☐ 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?	□ Y	□N	□ Refused			
IF WAREST TO ANNA OF THE ABOVE THEN SCORE 4 FOR MENTAL MANAGEMENT				SCORE:		
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALT	H.					
IF THE DECOMENT SCORED 1 FOR DUVELCAL HEALTH AND 1 FOR CL	IDCTA	NCE LE	T AND 4	SCORE:		
IF THE RESPONENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH SCORE 1 FOR TRI-MORBIDITY						

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?	□ Y	□N	☐ Refused	
26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?	□ Y	□N	□ Refused	
IF "VES" TO ANY OF THE ABOVE SCORE 1 FOR MEDICATIONS				SCORE:
IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS .				
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?	□ Y	□N	□ Refused	
IF "VES" SCORE 1 FOR ARRISE AND TRAILING				SCORE:
IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.				

Scoring Summary

DOMAIN	SUBTOTAL		RESULTS
PRE-SURVEY	/1	Score:	Recommendation:
A. HISTORY OF HOUSING & HOMELESSNESS	/2		no housing intervention
B. RISKS	/4		an assessment for Rapid
C. SOCIALIZATION & DAILY FUNCTIONS	/4		Re-Housing
D. WELLNESS	/6	8+:	an assessment for Permanent
GRAND TOTAL:	/17		Supportive Housing/Housing First

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place: or Morning/Afternoon	on/Evening/Night
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: () email:	
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	□ Yes □ No	□ Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of legal status in country discharge
- ageing out of care
- mobility issues

- income and source of it
- current restrictions on where a person can legally reside
- · children that may reside with the adult at some point in the future
- safety planning

Appendix A: About the VI-SPDAT

The HEARTH Act and federal regulations require communities to have an assessment tool for coordinated entry - and the VI-SPDAT and SPDAT meet these requirements. Many communities have struggled to comply with this requirement, which demands an investment of considerable time, resources and expertise. Others are making it up as they go along, using "gut instincts" in lieu of solid evidence. Communities need practical, evidence-informed tools that enhance their ability to to satisfy federal regulations and quickly implement an effective approach to access and assessment. The VI-SPDAT is a first-of-its-kind tool designed to fill this need, helping communities end homelessness in a quick, strategic fashion.

The VI-SPDAT

The VI-SPDAT was initially created by combining the elements of the Vulnerability Index which was created and implemented by Community Solutions broadly in the 100,000 Homes Campaign, and the SPDAT Prescreen Instrument that was part of the Service Prioritization Decision Assistance Tool. The combination of these two instruments was performed through extensive research and development, and testing. The development process included the direct voice of hundreds of persons with lived experience.

The VI-SPDAT examines factors of current vulnerability and future housing stability. It follows the structure of the SPDAT assessment tool, and is informed by the same research backbone that supports the SPDAT - almost 300 peer reviewed published journal articles, government reports, clinical and quasi-clinical assessment tools, and large data sets. The SPDAT has been independently tested, as well as internally reviewed. The data overwhelmingly shows that when the SPDAT is used properly, housing outcomes are better than when no assessment tool is used.

The VI-SPDAT is a triage tool. It highlights areas of higher acuity, thereby helping to inform the type of support and housing intervention that may be most beneficial to improve long term housing outcomes. It also helps inform the order - or priority - in which people should be served. The VI-SPDAT does not make decisions; it informs decisions. The VI-SPDAT provides data that communities, service providers, and people experiencing homelessness can use to help determine the best course of action next.

Version 2

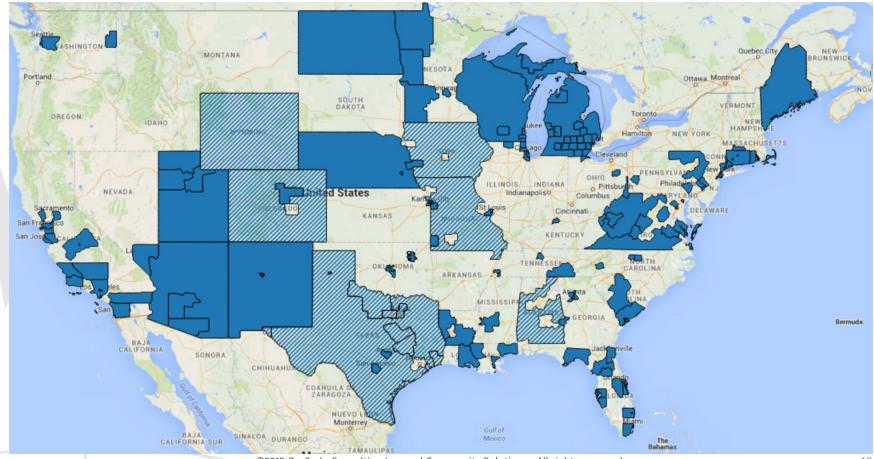
Version 2 builds upon the success of Version 1 of the VI-SPDAT with some refinements. Starting in August 2014, a survey was launched of existing VI-SPDAT users to get their input on what should be amended, improved, or maintained in the tool. Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.

You will notice some differences in Version 2 compared to Version 1. Namely:

- it is shorter, usually taking less than 7 minutes to complete;
- subjective elements through observation are now gone, which means the exact same instrument can be used over the phone or in-person;
- medical, substance use, and mental health questions are all refined;
- you can now explicitly see which component of the full SPDAT each VI-SPDAT question links to; and,
- the scoring range is slightly different (Don't worry, we can provide instructions on how these relate to results from Version 1).

Appendix B: Where the VI-SPDAT is being used in the United States

Since the VI-SPDAT is provided completely free of charge, and no training is required, any community is able to use the VI-SPDAT without the explicit permission of Community Solutions or OrgCode Consulting, Inc. As a result, the VI-SPDAT is being used in more communities than we know of. It is also being used in Canada and Australia.



A partial list of continua of care (CoCs) in the US where we know the VI-SPDAT is being used includes:

Alabama

· Parts of Alabama Balance of State

Arizona

· Statewide

California

- San Jose/Santa Clara City & County
- · San Francisco
- · Oakland/Alameda County
- Sacramento City & County
- Richmond/Contra Costa County
- Watsonville/Santa Cruz City & County
- Fresno/Madera County
- Napa City & County
- · Los Angeles City & County
- · San Diego
- Santa Maria/Santa Barbara County
- Bakersfield/Kern County
- Pasadena
- Riverside City & County
- Glendale
- San Luis Obispo County

Colorado

- Metropolitan Denver Homeless Initiative
- · Parts of Colorado Balance of State

Connecticut

- Hartford
- · Bridgeport/Stratford/Fairfield
- · Connecticut Balance of State
- Norwalk/Fairfield County
- Stamford/Greenwich
- City of Waterbury

District of Columbia

· District of Columbia

Florida

- Sarasota/Bradenton/ Manatee. Sarasota Counties
- Tampa/Hillsborough County
- St. Petersburg/Clearwater/ Largo/Pinellas County
- Tallahassee/Leon County
- · Orlando/Orange, Osceola, Seminole Counties
- Gainesville/Alachua, Putnam Counties
- Jacksonville-Duval, Clay Counties
- Palm Bay/Melbourne/Brevard County
- Ocala/Marion County
- Miami/Dade County
- West Palm Beach/Palm Beach County

Georgia

- Atlanta County
- **Fulton County**
- · Columbus-Muscogee/Russell County
- Marietta/Cobb County
- DeKalb County

Hawaii

Honolulu

Illinois

- · Rockford/Winnebago, Boone Counties
- Waukegan/North Chicago/ Lake County
- Chicago
- Cook County

Iowa

Parts of Iowa Balance of State

Kansas

· Kansas City/Wyandotte County

Kentucky

· Louisville/Jefferson County

Louisiana

- Lafavette/Acadiana
- Shreveport/Bossier/ Northwest
- New Orleans/Jefferson Parish
- · Baton Rouge
- Alexandria/Central Louisiana CoC

Massachusetts

- Cape Cod Islands
- Springfield/Holvoke/ Chicopee/Westfield/Hampden County

Maryland

- Baltimore City
- · Montgomery County

Maine

Statewide

Michigan

· Statewide

Minnesota

- · Minneapolis/Hennepin County
- · Northwest Minnesota
- Moorhead/West Central Minnesota
- · Southwest Minnesota

Missouri

- St. Louis County
- · St. Louis City
- · Joplin/Jasper, Newton Counties
- Kansas City/Independence/ Lee's Summit/Jackson County
- · Parts of Missouri Balance of State

Mississippi

- Jackson/Rankin, Madison Counties
- · Gulf Port/Gulf Coast Regional

North Carolina

- Winston Salem/Forsyth County
- Asheville/Buncombe County
- Greensboro/High Point

North Dakota

· Statewide

Nebraska

Statewide

New Mexico · Statewide

Nevada Las Vegas/Clark County

New York

- New York City
- Yonkers/Mount Vernon/New Rochelle/Westchester County

Ohio

- Toledo/Lucas County
- Canton/Massillon/Alliance/ Stark County

Oklahoma

- Tulsa City & County/Broken Arrow
- Oklahoma City
- Norman/Cleveland County

Pennsylvania

- Philadelphia
- Lower Marion/Norristown/ Abington/Montgomery County
- Allentown/Northeast Pennsylvania
- Lancaster City & County
- Bristol/Bensalem/Bucks County
- Pittsburgh/McKeesport/Penn Hills/Alleghenv County

Rhode Island

Statewide

- South Carolina
- Charleston/Low Country Columbia/Midlands

Tennessee

- Chattanooga/Southeast Tennessee
- · Memphis/Shelby County
- Nashville/Davidson County

Texas

- San Antonio/Bexar County
- Austin/Travis County
- Dallas City & County/Irving
- Fort Worth/Arlington/Tarrant County
- El Paso City and County
- Waco/McLennan County
- Texas Balance of State
- Amarillo
- · Wichita Falls/Wise. Palo Pinto. Wichita. Archer Counties
- Bryan/College Station/Brazos Valley
- Beaumont/Port Arthur/South Fast Texas

Utah

Statewide

Virginia

- · Richmond/Henrico, Chesterfield, Hanover Counties
- Roanoke City & County/Salem
- · Virginia Beach
- Portsmouth • Virginia Balance of State
- Arlington County

Washington

- Seattle/King County
- Spokane City & County

Wisconsin

· Statewide

West Virginia · Statewide

Wyoming · Wyoming Statewide is in the process of implementing

Transition Age Youth Vulnerability Index Service Prioritization Decision Assistance Tool (TAY-VI-SPDAT)

"Next Step Tool for Homeless Youth"

AMERICAN VERSION 1.0

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Welcome to the SPDAT Line of Products

The Service Prioritization Decision Assistance Tool (SPDAT) has been around in various incarnations for over a decade, before being released to the public in 2010. Since its initial release, the use of the SPDAT has been expanding exponentially and is now used in over one thousand communities across the United States, Canada, and Australia.

More communities using the tool means there is an unprecedented demand for versions of the SPDAT, customized for specific client groups or types of users. With the release of SPDAT V4, there have been more current versions of SPDAT products than ever before.

VI-SPDAT Series

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) was developed as a pre-screening tool for communities that are very busy and do not have the resources to conduct a full SPDAT assessment for every client. It was made in collaboration with Community Solutions, creators of the Vulnerability Index, as a brief survey that can be conducted to quickly determine whether a client has high, moderate, or low acuity. The use of this survey can help prioritize which clients should be given a full SPDAT assessment first. Because it is a self-reported survey, no special training is required to use the VI-SPDAT.

Current versions available:

- VI-SPDAT V 2.0
- Family VI-SPDAT V 2.0
- Next Step Tool for Homeless Youth V 1.0

All versions are available online at

www.orgcode.com/products/vi-spdat/

SPDAT Series

The Service Prioritization Decision Assistance Tool (SPDAT) was developed as an assessment tool for front-line workers at agencies that work with homeless clients to prioritize which of those clients should receive assistance first. The SPDAT tools are also designed to help guide case management and improve housing stability outcomes. They provide an in-depth assessment that relies on the assessor's ability to interpret responses and corroborate those with evidence. As a result, this tool may only be used by those who have received proper, up-to-date training provided by OrgCode Consulting, Inc. or an OrgCode certified trainer.

Current versions available:

- SPDAT V 4.0 for Individuals
- F-SPDAT V 2.0 for Families
- Y-SPDAT V 1.0 for Youth

Information about all versions is available online at

www.orgcode.com/products/spdat/

SPDAT Training Series

To use the SPDAT assessment product, training by OrgCode or an OrgCode certified trainer is required. We provide training on a wide variety of topics over a variety of mediums.

The full-day in-person SPDAT Level 1 training provides you the opportunity to bring together as many people as you want to be trained for one low fee. The webinar training allows for a maximum of 15 different computers to be logged into the training at one time. We also offer online courses for individuals that you can do at your own speed.

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- Objective-Based Interactions

More information about SPDAT training, including pricing, is available online at

http://www.orgcode.com/product-category/training/spdat/

The TAY-VI-SPDAT – The Next Step Tool for Homeless Youth

OrgCode Consulting, Inc. and Community Solutions joined forces with the Corporation for Supportive Housing (CSH) to combine the best parts of products and expertise to create one streamlined triage tool designed specifically for youth aged 24 or younger.

Administration

Interviewer's Name	Agency	□ Team □ Staff □ Volunteer
Survey Date	Survey Time	Survey Location
DD/MM/YYYY//	: AM/PM	

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- · that any question can be skipped or refused
- · where the information is going to be stored
- · that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

First Name	Nicknaı	те	Last Name	
In what language do you feel bes	t able to	express yourself?		
Date of Birth	Age	Social Security Number	Consent to parti	cipate
DD/MM/YYYY/			□Yes	□No

IF THE PERSON IS 17 YEARS OF AGE OR LESS, THEN SCORE 1.

SCORE:

A. History of Housing and Homelessness

1. Where do you sleep most freque	ntly? (check one)				
□ Shelters □ Transitional Ho □ Safe Haven	□ Couch surfing using □ Outdoors □ Refused	□ O t	her (sp	ecify):	
IF THE PERSON ANSWERS ANYTHING OR "SAFE HAVEN", THEN SCORE 1.	G OTHER THAN "SHELTER", "T	RANSITI	ONALI	HOUSING",	SCORE:
2. How long has it been since you li housing?	ved in permanent stable			□ Refused	
3. In the last three years, how many homeless?	y times have you been			□ Refused	
IF THE PERSON HAS EXPERIENCED 1 AND/OR 4+ EPISODES OF HOMELES		RS OF H	OMELI	ESSNESS,	SCORE:
B. Risks					
4. In the past six months, how many	y times have you				
a) Received health care at an em	ergency department/room?			☐ Refused	
b) Taken an ambulance to the ho	spital?			☐ Refused	
c) Been hospitalized as an inpati	ient?			☐ Refused	
 d) Used a crisis service, including health crisis, family/intimate v suicide prevention hotlines? 				□ Refused	
 e) Talked to police because you won for a crime, or the alleged perpolice told you that you must 	etrator of a crime or because			□ Refused	
f) Stayed one or more nights in a detention, whether it was a sh longer stay for a more serious	ort-term stay like the drunk	tank, a		□ Refused	
IF THE TOTAL NUMBER OF INTERACT EMERGENCY SERVICE USE.	TIONS EQUALS 4 OR MORE, TH	HEN SCO	RE 1 F	OR	SCORE:
5. Have you been attacked or beate homeless?	en up since you've become	□Y	□N	☐ Refused	
6. Have you threatened to or tried t else in the last year?	to harm yourself or anyone	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THE	EN SCORE 1 FOR RISK OF HAR	М.			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?	□ Y	□N	□ Refused	
8. Were you ever incarcerated when younger than age 18?	□ Y	□N	☐ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR LEGAL ISSUES.				SCORE:
9. Does anybody force or trick you to do things that you do not want to do?	□ Y	□N	□ Refused	
10. Do you ever do things that may be considered to be risky like exchange sex for money, food, drugs, or a place to stay, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLO	ITATIC	N		SCORE:
TES TO ANT OF THE ABOVE, THEN SCORE FROR RISK OF EAFEO	TIATIC			
C Socialization & Daily Eunctioning				
C. Socialization & Daily Functioning				
C. Socialization & Daily Functioning 11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?	□Y	□N	□ Refused	
11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them	□ Y		□ Refused □ Refused	
11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?12. Do you get any money from the government, an inheritance, an allowance, working under the table, a regular job, or	ΠY	□N	□ Refused	SCORE:
 11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? 12. Do you get any money from the government, an inheritance, an allowance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 11 OR "NO" TO QUESTION 12, THEN SCORE 1 	ΠY	□ N IONEY	□ Refused	SCORE:
 11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? 12. Do you get any money from the government, an inheritance, an allowance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 11 OR "NO" TO QUESTION 12, THEN SCORE 1 MANAGEMENT. 13. Do you have planned activities, other than just surviving, that 	□ Y FOR M	□ N IONEY	□ Refused	SCORE:
 11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? 12. Do you get any money from the government, an inheritance, an allowance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 11 OR "NO" TO QUESTION 12, THEN SCORE 1 MANAGEMENT. 13. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? 	□ Y FOR M □ Y	□ N IONEY	☐ Refused☐ Refused☐ Refused	
 11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? 12. Do you get any money from the government, an inheritance, an allowance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 11 OR "NO" TO QUESTION 12, THEN SCORE 1 MANAGEMENT. 13. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY. 14. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean 	□ Y FOR M □ Y	□ N IONEY	☐ Refused☐ Refused☐ Refused	

15.Is your current lack of stable housing				
 a) Because you ran away from your family home, a group home or a foster home? 	□ Y	□N	☐ Refused	
b) Because of a difference in religious or cultural beliefs from your parents, guardians or caregivers?	□ Y	□N	☐ Refused	
c) Because your family or friends caused you to become homeless?	□ Y	□N	☐ Refused	
d) Because of conflicts around gender identity or sexual orientation?	□ Y	□N	☐ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SOCIAL RELATI	ONSH	IPS.		SCORE:
TES TO ANY OF THE ABOVE, THEN SCORE THOR SOCIAL RELATION	0.1.5			
e) Because of violence at home between family members?	□ Y	\square N	☐ Refused	
f) Because of an unhealthy or abusive relationship, either at home or elsewhere?	□ Y	□N	☐ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR ABUSE/TRAUN	ΙΔ.			SCORE:
D. Wellness				
16. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?	□ Y	□N	☐ Refused	
17. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?	□ Y	□N	☐ Refused	
18. 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?	□ Y	□N	□ Refused	
19. 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?	□ Y	□N	□ Refused	
20. When you are sick or not feeling well, do you avoid getting medical help?	□ Y	□N	☐ Refused	
21. Are you currently pregnant, have you ever been pregnant, or have you ever gotten someone pregnant?	□ Y	□N	☐ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEA	ITU			SCORE:
TI TES TO ANT OF THE ABOVE, THEN SCORE I FOR PHYSICAL HEA	-1111-			

22. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?	□ Y	□N	□ Refused	
23. Will drinking or drug use make it difficult for you to stay housed or afford your housing?	□ Y	□N	☐ Refused	
24. If you've ever used marijuana, did you ever try it at age 12 or younger?	□ Y	□N	□ Refused	
TE WARRY TO ANNUAL THE ARRIVE THEN SCORE 4 FOR CHROTHAGE IN	_			SCORE:
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE US	oŁ.			
25. Have you ever had trouble maintaining your housing, or been k apartment, shelter program or other place you were staying, be			an	
a) A mental health issue or concern?	\square Y	\square N	□ Refused	
b) A past head injury?	\square Y	\square N	□ Refused	
c) A learning disability, developmental disability, or other impairment?	□ Y	□N	☐ Refused	
26. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?	□ Y	□N	□ Refused	
IF WEST TO ANY OF THE ABOVE THEN SCORE 4 FOR MENTAL HEALT				SCORE:
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALT	н.			
IF THE DECOMENT SCORED 1 FOR DUVELCAL MEALTH AND 1 FOR S L	IDCTAI	NCT H	T AND 1	SCORF:
IF THE RESPONENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SU FOR MENTAL HEALTH , SCORE 1 FOR TRI-MORBIDITY .	JBSTAI	NCE US	SE AND 1	SCORE:
		NCE US	E AND 1 ☐ Refused	SCORE:
FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY. 27. Are there any medications that a doctor said you should be			-	SCORE:
 FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY. 27. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? 28. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the 	□Y	□N	☐ Refused	SCORE:

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS		
PRE-SURVEY	/1	Score:	Recommendation:	
A. HISTORY OF HOUSING & HOMELESSNESS	/2	0-3:	no moderate or high intensity	
B. RISKS	/4		services be provided at this time	
C. SOCIALIZATION & DAILY FUNCTIONS	/5	4-7:	assessment for time-limited sup-	
D. WELLNESS	/5	_	ports with moderate intensity	
GRAND TOTAL:	/17	8+:	assessment for long-term hous- ing with high service intensity	

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place::	or Morning/Afterno	oon/Evening/Night
Is there a phone number and/or email where someone can get in touch with you or leave you a message?	phone: () _ email:		
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	□Yes	□No	Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- · military service and nature of discharge
- · ageing out of care
- · mobility issues
- legal status in country
- · income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the youth at some point in the future
- safety planning

Appendix A: About the TAY-VI-SPDAT

The HEARTH Act and federal regulations require communities to have an assessment tool for coordinated entry - and the VI-SPDAT and SPDAT meet these requirements. Many communities have struggled to comply with this requirement, which demands an investment of considerable time, resources and expertise. Others are making it up as they go along, using "gut instincts" in lieu of solid evidence. Communities need practical, evidence-informed tools that enhance their ability to to satisfy federal regulations and quickly implement an effective approach to access and assessment. The VI-SPDAT is a first-of-its-kind tool designed to fill this need, helping communities end homelessness in a quick, strategic fashion.

The VI-SPDAT

The VI-SPDAT was initially created by combining the elements of the Vulnerability Index which was created and implemented by Community Solutions broadly in the 100,000 Homes Campaign, and the SPDAT Prescreen Instrument that was part of the Service Prioritization Decision Assistance Tool. The combination of these two instruments was performed through extensive research and development, and testing. The development process included the direct voice of hundreds of persons with lived experience.

The VI-SPDAT examines factors of current vulnerability and future housing stability. It follows the structure of the SPDAT assessment tool, and is informed by the same research backbone that supports the SPDAT - almost 300 peer reviewed published journal articles, government reports, clinical and quasi-clinical assessment tools, and large data sets. The SPDAT has been independently tested, as well as internally reviewed. The data overwhelmingly shows that when the SPDAT is used properly, housing outcomes are better than when no assessment tool is used.

The VI-SPDAT is a triage tool. It highlights areas of higher acuity, thereby helping to inform the type of support and housing intervention that may be most beneficial to improve long term housing outcomes. It also helps inform the order - or priority - in which people should be served. The VI-SPDAT does not make decisions; it informs decisions. The VI-SPDAT provides data that communities, service providers, and people experiencing homelessness can use to help determine the best course of action next.

The Youth - Transition Age Youth Tool from CSH

Released in May 2013, the Corporation for Supportive Housing (CSH) partnered with Dr. Eric Rice, Assistant Professor at the University of Southern California (USC) School of Social Work, to develop a triage tool that targets homeless Transition Age Youth (TAY) for permanent supportive housing. It consists of six items associated with long-term homelessness (five or more years) among transition-aged youth (age 18-24).

Version 2 of the VI-SPDAT

Version 2 builds upon the success of Version 1 of the VI-SPDAT with some refinements. Starting in August 2014, a survey was launched of existing VI-SPDAT users to get their input on what should be amended, improved, or maintained in the tool.

Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.

The TAY-VI-SPDAT - The Next Step Tool for Homeless Youth

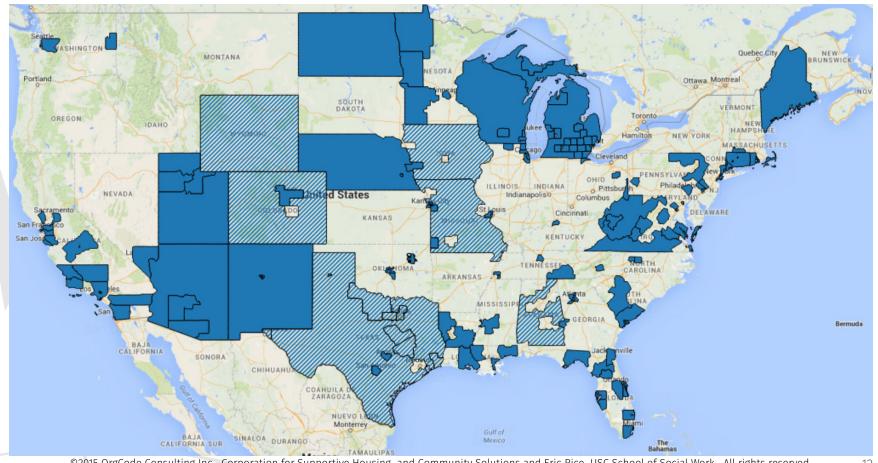
One piece of feedback was the growing concern that youth tended to score lower on the VI-SPDAT, since the Vulnerability Index assesses risk of mortality which is less prevalent among younger populations. So, in version 2 of the VI-SPDAT, OrgCode Consulting, Inc. and Community Solutions joined forces with CSH to combine the best parts of the TAY, the VI, and the SPDAT to create one streamlined triage tool designed specifically for youth aged 24 or younger.

If you are familiar with the VI-SPDAT, you will notice some differences in the TAY-VI-SPDAT compared to VI-SPDAT version 1. Namely:

- it is shorter, usually taking less than 7 minutes to complete;
- subjective elements through observation are now gone, which means the exact same instrument can be used over the phone or in-person;
- medical, substance use, and mental health questions are all refined;
- you can now explicitly see which component of the full SPDAT each VI-SPDAT question links to; and,
- the scoring range is slightly different (Don't worry, we can provide instructions on how these relate to results from Version 1).

Appendix B: Where the VI-SPDAT is being used in the United States

Since the VI-SPDAT is provided completely free of charge, and no training is required, any community is able to use the VI-SPDAT without the explicit permission of Community Solutions or OrgCode Consulting, Inc. As a result, the VI-SPDAT is being used in more communities than we know of. It is also being used in Canada and Australia.



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SINGLE YOUTH AMERICAN VERSION 1.0

A partial list of continua of care (CoCs) in the US where we know the VI-SPDAT is being used includes:

Alabama

· Parts of Alabama Balance of State

Arizona

· Statewide

California

- San Jose/Santa Clara City & County
- · San Francisco
- Oakland/Alameda County
- Sacramento City & County
- Richmond/Contra Costa County
- Watsonville/Santa Cruz City & County
- Fresno/Madera County
- Napa City & County
- · Los Angeles City & County
- · San Diego
- Santa Maria/Santa Barbara County
- Bakersfield/Kern County
- Pasadena
- Riverside City & County
- Glendale
- San Luis Obispo County

Colorado

- Metropolitan Denver Homeless Initiative
- · Parts of Colorado Balance of State

Connecticut

- Hartford
- · Bridgeport/Stratford/Fairfield
- · Connecticut Balance of State
- Norwalk/Fairfield County
- Stamford/Greenwich
- · City of Waterbury

District of Columbia

· District of Columbia

Florida

- Sarasota/Bradenton/ Manatee. Sarasota Counties
- Tampa/Hillsborough County
- St. Petersburg/Clearwater/ Largo/Pinellas County
- Tallahassee/Leon County
- · Orlando/Orange, Osceola, Seminole Counties
- Gainesville/Alachua, Putnam Counties
- Jacksonville-Duval, Clay Counties
- Palm Bay/Melbourne/Brevard County
- Ocala/Marion County
- Miami/Dade County
- West Palm Beach/Palm Beach County

Georgia

- Atlanta County
- **Fulton County**
- · Columbus-Muscogee/Russell County
- Marietta/Cobb County
- DeKalb County

Hawaii

Honolulu

Illinois

- · Rockford/Winnebago, Boone Counties
- Waukegan/North Chicago/ Lake County
- Chicago
- Cook County

Iowa

Parts of Iowa Balance of State

Kansas

· Kansas City/Wyandotte County

Kentucky

Louisville/Jefferson County

Louisiana

- Lafavette/Acadiana
- Shreveport/Bossier/ Northwest
- New Orleans/Jefferson Parish
- · Baton Rouge
- Alexandria/Central Louisiana CoC

Massachusetts

- Cape Cod Islands
- Springfield/Holvoke/ Chicopee/Westfield/Hampden County

Maryland

- Baltimore City
- · Montgomery County

Maine

Statewide

Michigan

· Statewide

Minnesota

- · Minneapolis/Hennepin County
- · Northwest Minnesota
- Moorhead/West Central Minnesota
- · Southwest Minnesota

Missouri

- St. Louis County
- · St. Louis City
- · Joplin/Jasper, Newton Counties
- Kansas City/Independence/ Lee's Summit/Jackson County
- · Parts of Missouri Balance of State

Mississippi

- Jackson/Rankin, Madison Counties
- Gulf Port/Gulf Coast Regional

North Carolina

- Winston Salem/Forsyth County
- Asheville/Buncombe County
- Greensboro/High Point

North Dakota

· Statewide

Nebraska

Statewide

New Mexico

· Statewide

Nevada

Las Vegas/Clark County

New York

- New York City
- Yonkers/Mount Vernon/New Rochelle/Westchester County

Ohio

- Toledo/Lucas County
- Canton/Massillon/Alliance/ Stark County

Oklahoma

- Tulsa City & County/Broken Arrow
- Oklahoma City
- Norman/Cleveland County

Pennsylvania

- Philadelphia
- Lower Marion/Norristown/ Abington/Montgomery County
- Allentown/Northeast Pennsylvania
- Lancaster City & County
- Bristol/Bensalem/Bucks County
- Pittsburgh/McKeesport/Penn Hills/Alleghenv County

Rhode Island

Statewide

South Carolina

- · Charleston/Low Country
- Columbia/Midlands

Tennessee

- Chattanooga/Southeast Tennessee
- · Memphis/Shelby County
- Nashville/Davidson County

Texas

- San Antonio/Bexar County
- Austin/Travis County
- Dallas City & County/Irving
- Fort Worth/Arlington/Tarrant County
- El Paso City and County
- Waco/McLennan County
- Texas Balance of State
- Amarillo
- · Wichita Falls/Wise. Palo Pinto. Wichita. Archer Counties
- Bryan/College Station/Brazos Valley
- Beaumont/Port Arthur/South Fast Texas

Utah

Statewide

Virginia

- · Richmond/Henrico, Chesterfield, Hanover Counties
- Roanoke City & County/Salem
- · Virginia Beach
- Portsmouth
- · Virginia Balance of State · Arlington County

Washington

- · Seattle/King County
- Spokane City & County

Wisconsin

· Statewide

West Virginia Statewide

Wyoming · Wyoming Statewide is in the process of implementing

Prevention / Re-Housing Vulnerability Index Service Prioritization Decision Assistance Tool (PR-VI-SPDAT)

Prevention/Re-Housing Prescreen Tool for Single Adults

To be used ONLY with people that are currently housed and feel they are at imminent risk of losing their housing. "Imminent risk" is determined by the program participant. Types of dwellings that count as "housed" for this tool are:

- An apartment that is in their name (legally permitted to stay there)
- · A home that they own
- The home of a parent, other relative or friend where they believe they have been staying permanently (not feeling there was a time limit on how long they were permitted to stay)

VERSION 1.0

AMERICAN EDITION

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SINGLE ADULTS AMERICAN VERSION 1.0

Administration

Interviewer's Name	Agency	□ Team □ Staff □ Volunteer
Survey Date	Survey Time	Survey Location
DD/MM/YYYY//	: AM/PM	

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- · where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

First Name	Nickna	ame	Last Name			
In what language do you feel best able to express yourself?						
Date of Birth	Age	Social Insurance Number	Cor			
DD/MM/YYYY//_		_	Y	'es	□No	
						SCOR
IF 60 YEARS OF AGE OR OLD	ER, SCORE 1.					
Safety						
want to start by asking ocation.	you some	questions about your	safet	y in y	our current	t
1. Are you currently being hanother person, such as		9	□ Y	□N	☐ Refused	
2. Have you experienced vi- last six months, that has you live?			□ Y	□N	□ Refused	

SINGLE ADULTS AMERICAN VERSION 1.0

IF "YES" TO EITHER OF THE ABOVE, THEN SCORE 1.				SCORE:
3. Is your current situation 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?	□Y	□N	☐ Refused	
4. I do not need any details, just a YES or NO: is your current risk of eviction being caused by emotional, physical, psychological, sexual, or any other type of abuse, or by any other trauma you have experienced?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1.				SCORE:
Long Term Housing Stability				
Now, let's examine some of the other life areas that migh stability.	ıt imp	act lo	ong term ho	ousing
5. Do you 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 stay housed?	□ Y	□N	□ Refused	
IF "YES," THEN SCORE 1.				SCORE:
6. Do you 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?	□Y	□N	□ Refused	
IF "YES," THEN SCORE 1.				SCORE:
7. Have you harmed yourself or anyone else in the last 6 months?	□Ү	□N	□ Refused	
IF "YES," THEN SCORE 1.				SCORE:
8. Is anyone currently forcing you to do something you don't want to do?	□Y	□N	☐ Refused	
IF "YES," THEN SCORE 1.				SCORE:
9. If female, are you currently pregnant?	□ Y	□N	□ Refused	SCORE:
IF "YES," THEN SCORE 1.				

History of Housing and Homelessness

PREVENTION / RE-HOUSING VI-SPDAT

SINGLE ADULTS			AMERICAN V	ERSION 1.0
10. At any point in the last three years have you stayed in a shelter, in your car, on the street, outdoors, or any other place not fit for people to live?	ПΥ	□N	□ Refused	
a) IF YES: How many times has that occurred in the last three ye	ars?		☐ Refused	
b) IF YES: What is the total length of time that has happened if y add all of the different times together in the last three years?			☐ Refused	
IF "YES" AND 4+ TIMES AND/OR 12+ MONTHS, THEN SCORE 3.				SCORE:
11. In the last six months, have you accessed supports from any churches, other faith groups, or a non-profit organization to get supports to stay housed such as financial assistance, help working things out with a landlord, re-locating from one apartment or home to another because where you had been staying was unsafe, or anything like that?	□Υ	□N	□ Refused	
IF "YES," THEN SCORE 1.				SCORE:
			,	
12.Within the last six months in your current housing, how many complaints have there been about you from neighbours, the landlord or tenant/owner, or, the police?			□ Refused	
				SCORE:
IF 4+ COMPLAINTS, THEN SCORE 1.				SCORE.
IF 4+ COMPLAINTS, THEN SCORE 1.				SCORE.
13.Do any of the following issues make it hard for you to find or sta housing or connect with other resources that can help you do the		ermar	ient	SCORE.
13.Do any of the following issues make it hard for you to find or sta		ermar	ent □ Refused	SCORE.
13.Do any of the following issues make it hard for you to find or state housing or connect with other resources that can help you do the a) Accessible housing because you have a disability that requires a special type of housing?b) A poor credit history?	nat:			SCORE.
13.Do any of the following issues make it hard for you to find or state housing or connect with other resources that can help you do the a) Accessible housing because you have a disability that requires a special type of housing?	nat:	□N	□ Refused	SCORE.
13.Do any of the following issues make it hard for you to find or state housing or connect with other resources that can help you do the a) Accessible housing because you have a disability that requires a special type of housing?b) A poor credit history?	nat:	□ N	☐ Refused☐ Refused☐	SCORE.
 13.Do any of the following issues make it hard for you to find or state housing or connect with other resources that can help you do the a) Accessible housing because you have a disability that requires a special type of housing? b) A poor credit history? c) Restrictions on where you can live because of legal stuff? d) No references for your housing or poor references on your 	nat:	□ N □ N □ N	☐ Refused ☐ Refused ☐ Refused	SCORE.
 13.Do any of the following issues make it hard for you to find or state housing or connect with other resources that can help you do the a) Accessible housing because you have a disability that requires a special type of housing? b) A poor credit history? c) Restrictions on where you can live because of legal stuff? d) No references for your housing or poor references on your housing history? 	Y	□ N □ N □ N □ N	☐ Refused ☐ Refused ☐ Refused ☐ Refused	SCORE.
 13.Do any of the following issues make it hard for you to find or state housing or connect with other resources that can help you do the a) Accessible housing because you have a disability that requires a special type of housing? b) A poor credit history? c) Restrictions on where you can live because of legal stuff? d) No references for your housing or poor references on your housing history? e) Difficulties understanding or communicating in English? f) Difficulties with math that make it hard to budget or take 	Y	□ N □ N □ N □ N □ N □ N	☐ Refused ☐ Refused ☐ Refused ☐ Refused ☐ Refused	SCORE.
 13.Do any of the following issues make it hard for you to find or state housing or connect with other resources that can help you do the a) Accessible housing because you have a disability that requires a special type of housing? b) A poor credit history? c) Restrictions on where you can live because of legal stuff? d) No references for your housing or poor references on your housing history? e) Difficulties understanding or communicating in English? f) Difficulties with math that make it hard to budget or take care of your finances? g) Safety issues which may include keeping where you live 	Y	□ N □ N □ N □ N □ N □ N	☐ Refused ☐ Refused ☐ Refused ☐ Refused ☐ Refused ☐ Refused	SCORE:
 13.Do any of the following issues make it hard for you to find or state housing or connect with other resources that can help you do the a) Accessible housing because you have a disability that requires a special type of housing? b) A poor credit history? c) Restrictions on where you can live because of legal stuff? d) No references for your housing or poor references on your housing history? e) Difficulties understanding or communicating in English? f) Difficulties with math that make it hard to budget or take care of your finances? g) Safety issues which may include keeping where you live unknown to a past abuser? 	Y	□ N □ N □ N □ N □ N □ N	☐ Refused ☐ Refused ☐ Refused ☐ Refused ☐ Refused ☐ Refused	

PREVENTION / RE-HOUSING VI-SPDAT

SINGLE ADULTS AMERICAN VERSION 1.0 15.If your current housing was saved, do you plan on remaining \square Y \square **N** \square Refused in that place for at least the next 6 months, if that is legally possible? **SCORE:** IF "NO," THEN SCORE 1. **Personal Administration & Money Management** 16. Is there any person, landlord, business, utility company, □Y □N □ Refused bookie, dealer, or government group like the IRS that thinks you owe them money? a) IF YES: What is the total amount of money that others think ☐ Refused is owed? **SCORE:** IF THE TOTAL VALUE IS \$1,000+, THEN SCORE 1. 17. Do you get any money or assistance from the government like □ **Y** □ N □ Refused SSI, SSDI, TANF or Food Stamps, or do you have a pension, inheritance, get money from a regular job or working under the table, or anything like that? a) IF YES: What is the next date you **know** you will receive ☐ Refused money? b) IF YES: What is the total amount you will expect to receive? **SCORE:** IF THE DATE IS MORE THAN 14 DAYS AWAY AND/OR THE VALUE IS LESS THAN HALF THE VALUE OF 16A, THEN SCORE 1. 18. What is the total amount of money you currently have. ☐ Refused including any money in the bank or investments? **SCORE:** IF THE AMOUNT IS LESS THAN HALF THE VALUE OF 16A. THEN SCORE 1. 19.Is there anyone currently helping you manage your finances, □Y □N □ Refused like a payee, guardianship, or trustee, because a judge or the government said you have to? **SCORE:** IF "YES," THEN SCORE 1. 20. In the last year, how many times have you received a cash advance ☐ Refused or loan from a business, bank, or person, where you have not repaid the full amount and the interest owed is 15% or more? **SCORE:** IF 3+ TIMES, THEN SCORE 1. 21. Have other members of your family or friends provided □Y □N □ Refused emergency financial assistance to you in the last three years to help you stay housed like helping you with rent, paying off arrears, paying a utility company to keep your lights on or anything like that, where they still expect you to pay them back but you have not been able to?

SINGLE ADULTS AMERICAN VERSION 1.0

IF "YES," THEN SCORE 1.				SCORE:
Meaningful Daily Activity 22. Do you have planned activities, other than just surviving, that makes them feel happy and fulfilled?	ПΥ	□ N	□ Refused	
IF "NO," THEN SCORE 1.				SCORE:
Self Care and Daily Living Skills 23. 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?	ПΥ	□N	□ Refused	
IF "NO," THEN SCORE 1.				SCORE:
Interactions with Emergency Services 24. 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?			☐ Refused	
d) Used a crisis service, including sexual assault crisis, mental he crisis, family/intimate violence, distress centers and suicide prevention hotlines?	ealth		□ Refused	
e) Talked to police because they witnessed a crime, were the victor 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, whe that was a short-term stay like the drunk tank, a longer stay for more serious offence, or anything in between?			□ Refused	
IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4+, THEN SCORE 1.	•			SCORE:
Wellness				
25. Have you ever had to leave an apartment, residential program, or other place you were staying because of your physical health?	□ Y	□N	□ Refused	
26. Do you have any chronic health issue where you are not accessing appropriate care or that is making it difficult to stay housed?	□ Y	□N	□ Refused	
27. Do you have any physical disabilities that limit the type of housing you can access, or make it hard to live independently because help is needed?	□ Y	□N	□ Refused	
28. When you are sick, do you avoid getting medical help?	□ Y	\square N	☐ Refused	

SINGLE ADULTS AMERICAN VERSION 1.0

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEAL	тн.			SCORE:
29. Has your drinking or drug use caused you to be kicked out of an apartment or residential program or other place in the past?	□Y	□N	□ Refused	
30. Does drinking or drug use make it difficult to stay housed or afford your housing?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE US	E.			SCORE:
31.Have you ever had trouble maintaining your housing, or been ki apartment, residential program or other place you were staying				
a) A mental health issue or concern?	\square Y	\square N	□ Refused	
b) A past head injury?	\square Y	\square N	☐ Refused	
c) A learning disability, developmental disability, or other impairment?	□ Y	□N	☐ Refused	
32. Do you have any mental health or brain issues that make it hard for you to live independently because help is needed?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTI	н.			SCORE:
33. DID THE INDIVIDUAL SCORE 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH?	□ Y	□N	□ N/A or Refused	
IF "YES", SCORE 1.				SCORE:
34. Are there any medications that a doctor said you should be taking that, for whatever reason, they are not taking?	□ Y	□N	□ Refused	
35. Are there any medications like painkillers that you do not take the way the doctor prescribed or where the medication is sold?	□Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, SCORE 1.				SCORE:
TIP TES TO ANT OF THE ABOVE, SCOKE I.				

Scoring Summary

TOTAL	SCORE	RECOMMENDATION
	22+:	STRONG RECOMMENDATION FOR FINANCIAL AND CASE MANAGEMENT SUPPORTS
	16-21:	RECOMMENDATION FOR FINANCIAL AND/OR CASE MANAGEMENT SUPPORTS
	11-15:	AS RESOURCES ALLOW, CONSIDER FINANCIAL AND/OR CASE MANAGEMENT SUPPORTS
	0-10:	NO ASSISTANCE PROVIDED; MAY, HOWEVER, PROVIDE REFERRAL TO MAINSTREAM RESOURCES

Prevention / Re-Housing Vulnerability Index Service Prioritization Decision Assistance Tool (PR-VI-SPDAT)

Prevention/Re-Housing Prescreen Tool for Families

To be used ONLY with people that are currently housed and feel they are at imminent risk of losing their housing. "Imminent risk" is determined by the program participant. Types of dwellings that count as "housed" for this tool are:

- An apartment that is in their name (legally permitted to stay there)
- · A home that they own
- The home of a parent, other relative or friend where they believe they have been staying permanently (not feeling there was a time limit on how long they were permitted to stay)

VERSION 1.0

AMERICAN EDITION

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Administration

Interviewer's Name	Agency	□ Team □ Staff □ Volunteer
Survey Date	Survey Time	Survey Location
DD/MM/YYYY//	:AM/PM	

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- \cdot the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- · where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

First Name	Nickna	me	Last Name	•
In what language do yo Date of Birth	u feel best able to	express yourself?		
Date of Birth	Age	Social Security Number	Consent to	participate
DD/MM/YYYY/_	_/		□ Yes	□No
☐ No second parent cui	rently part of the	household		
First Name	Nickna	me	Last Name	2
	u feel best able to	express yourself?		
	u feel best able to Age	express yourself?		participate

40	ousehold Composition				
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 your family, 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?	□ Y	□N	☐ Refused	
4.	Please provide a list of children's names and ages:				
	First Name Last Name	Age		Date of Birth	
					,
		,			
AN IF	THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD ND/OR A CURRENT PREGNANCY, THEN SCORE 1. THERE ARE TWO PARENTS WITH 3+ CHILDREN, AND/OR A CHILD AND/OR A CURRENT PREGNANCY, THEN SCORE 1.				SCORE:
Sa	nfety	'		,	
W	ant to start by asking you some questions about your ation.	safet	y in y	our curren	ţ
5.	Are you currently being harmed or at risk of being harmed by another person, such as a spouse, relative, parent or friend?	□ Y	□N	☐ Refused	
6.	Have you or any member of your family experienced violence or threats of violence in the last six months, that has had an impact on feeling safe where you live?	□Y	□N	□ Refused	
IF	"YES" TO ANY OF THE ABOVE, THEN SCORE 1.				SCORE:
7.	Is your current situation 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?	ΠY	□N	□ Refused	
8.	I do not need any details, just a YES or NO: is your current risk of eviction being caused by emotional, physical, psychological, sexual, or any other type of abuse, or by any other trauma you or anyone in your family has experienced?	□ Y	□N	□ Refused	
IF	"YES" TO ANY OF THE ABOVE, THEN SCORE 1.				SCORE:

Long Term Housing Stability

Now, let's examine some of the other life areas that might impact long term housing stability.

9. Does 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 stay housed?	□ Y	□N	□ Refused	
IF "YES," THEN SCORE 1.				SCORE:
10. Does anyone in your family 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?	□ Y	□N	□ Refused	
IF "YES," THEN SCORE 1.				SCORE:
11. Have you or any member of your family harmed yourself or anyone else in the last six months?	□ Y	□N	□ Refused	
IF "YES," THEN SCORE 1.				SCORE:
12.Is anyone currently forcing you or any member of your family to do something they don't want to do?	□ Y	□N	□ Refused	
				SCORE:
IF "YES," THEN SCORE 1.				
IF "YES," THEN SCORE 1. History of Housing and Homelessness				
History of Housing and Homelessness	ΠY	□N	□ Refused	
History of Housing and Homelessness 13.At any point in the last three years have you stayed in a shelter, in your car, on the street, outdoors, or any other place		□ N	□ Refused	
History of Housing and Homelessness 13.At any point in the last three years have you stayed in a shelter, in your car, on the street, outdoors, or any other place not fit for people to live?	ars?	□ N		
History of Housing and Homelessness 13.At any point in the last three years have you stayed in a shelter, in your car, on the street, outdoors, or any other place not fit for people to live? a) IF YES: How many times has that occurred in the last three years b) IF YES: What is the total length of time that has happened if years.	ars?	□ N	□ Refused	SCORE:
History of Housing and Homelessness 13.At any point in the last three years have you stayed in a shelter, in your car, on the street, outdoors, or any other place not fit for people to live? a) IF YES: How many times has that occurred in the last three years b) IF YES: What is the total length of time that has happened if you add all of the different times together in the last three years? IF "YES" AND 3+ TIMES AND/OR 6+ MONTHS, THEN SCORE 3.	ars? ou		□ Refused	SCORE:

PREVENTION / RE-HOUSING VI-SPDAT

FAMILIES VERSION 1.0 15. Within the last six months in your current housing, how many ☐ Refused complaints have there been about you from neighbours, the landlord or tenant/owner, or, the police? **SCORE:** IF 4+ COMPLAINTS, THEN SCORE 1. 16. Do any of the following issues make it hard for you to find or stay in permanent housing or connect with other resources that can help you do that: a) Accessible housing because you or another member of □Y □N □ Refused your family has a disability that requires a special type of housing? b) A poor credit history? \square N ☐ Refused c) Restrictions on where you can live because of legal stuff in \square Y \square N ☐ Refused the life of any family member? d) Special school programming required for any of the □ N □ Refused \square Y children? e) No references for your housing or poor references on your \square Y \square N ☐ Refused housing history? f) Difficulties understanding or communicating in English? \square N ☐ Refused g) Difficulties with math that make it hard to budget or take ☐ Refused \square Y \square N care of your finances? h) Safety issues which may include keeping where you live □Y □N □ Refused unknown to a past abuser? **SCORE:** IF "YES" TO ANY 2 OF THE ABOVE, THEN SCORE 1. 17. Are you and your family currently overcrowded (which means □Y □N □ Refused there are too many people living in the home for the amount of space you have), and where there are arguments or conflicts because of the overcrowding? **SCORE:** IF "YES," THEN SCORE 1. 18. If your current housing was saved, do you plan on remaining □Y □N □ Refused in that place for at least the next 6 months if that is legally possible? **SCORE:** IF "NO," THEN SCORE 1.

Personal Administration & Money Management				
19.Is there any person, landlord, business, utility company, bookie, dealer, or government group like the CRA that thinks you or anyone in your family owes them money?	□ Y	□N	□ Refused	
a) IF YES: What is the total amount of money that others think is owed?		,	☐ Refused	
IF THE TOTAL VALUE IS \$1,000+, THEN SCORE 1.				SCORE:
20. Do you get any money or assistance from the government like Income Support/Welfare, Disability Benefits, or do you have a pension (CPP), inheritance, get money from a regular job or working under the table, or anything like that?	□ Y	□N	□ Refused	
a) IF YES: What is the next date you know you will receive money?			☐ Refused	
b) IF YES: What is the total amount you will expect to receive?			□ Refused	
IF THE DATE IS MORE THAN 14 DAYS AWAY AND/OR THE VALUE IS LEVALUE OF 19A, THEN SCORE 1.	ESS TH	AN HAI	LF THE	SCORE:
21.What is the total amount of money you and your family currently has, including any money in the bank or investments?			□ Refused	
IF THE VALUE IS LESS THAN HALF THE VALUE OF 19A, THEN SCORE 1	1.			SCORE:
22. Is there anyone currently helping you manage your finances, like a payee, guardianship, or trustee, because a judge or the government said you have to?	□ Y	□N	□ Refused	
IF "YES," THEN SCORE 1.				SCORE:
23. In the last year, how many times have you received a cash adva or loan from a business, bank, or person, where you have not re the full amount and the interest owed is 15% or more?			□ Refused	
IF 3+ TIMES, THEN SCORE 1.				SCORE:
24. Have other members of your family or friends provided emergency financial assistance to you in the last three years to help you stay housed like helping you with rent, paying off arrears, paying a utility company to keep your lights on or anything like that, where they still expect you to pay them back but you have not been able to?	□ Y	□N	□ Refused	
IF "YES," THEN SCORE 1.				SCORE:

Meaningful Daily Activity				
25. Does everyone in your family have planned activities, other			□ Refused	
IF "NO," THEN SCORE 1.				SCORE:
Self Care and Daily Living Skills				
26. 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?	ПΥ	□N	□ Refused	
IF "NO," THEN SCORE 1.	,			SCORE:
Interactions with Emergency Services				
27. In the past six months, how many times have you or anyone in you	our fa	mily		
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 he crisis, family/intimate violence, distress centers and suicide prevention hotlines?	ealth		□ Refused	
e) Talked to police because they witnessed a crime, were the vico 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, whe that was a short-term stay like the drunk tank, a longer stay for more serious offence, or anything in between?			□ Refused	
IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4+, THEN SCORE 1.				SCORE:
Wellness				
28. Have you or your family ever had to leave an apartment, residential program, or other place you were staying because of your physical health?	□ Y	□N	☐ Refused	
29. Do you or any member of your family have any chronic health issue where you are not accessing appropriate care or that is making it difficult to stay housed?	□ Y	□N	□ Refused	
30. Do you have any physical disabilities that limit the type of housing you can access, or make it hard to live independently because help is needed?	□ Y	□N	□ Refused	
31.When you or a family member is sick, do you avoid getting medical help?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEAL 1	rH.			SCORE:

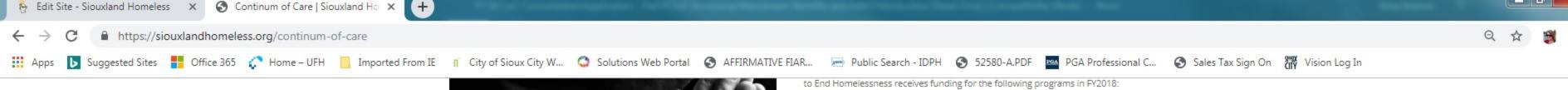
PREVENTION / RE-HOUSING VI-SPDAT

FAMILIES VERSION 1.0 32. Has the drinking or drug use of anyone in your family caused □ Y □ N □ Refused you to being kicked out of an apartment or residential program or other place in the past? 33. Does drinking or drug use make it difficult to stay housed or □Y □N □ Refused afford your housing? **SCORE:** IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE. 34. Have you or anyone in your family ever had trouble maintaining your housing, or been kicked out of an apartment, residential program or other place you were staying, because of: a) A mental health issue or concern? ☐ Refused b) A past head injury? □Y □N □ Refused c) A learning disability, developmental disability, or other □Y □N □ Refused impairment? 35. Do you or anyone in your family have any mental health or □ Y □ N □ Refused brain issues that make it hard for you to live independently because help is needed? **SCORE:** IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH. 36. IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, $\square Y \square N \square N/A \text{ or }$ SUBSTANCE USE, AND MENTAL HEALTH: Is it the same person Refused in your family that has a medical condition, mental health concern or brain injury, and has experience with problematic substance use? **SCORE:** IF "YES", SCORE 1. 37. Are there any medications that a doctor said you or anyone □ Y □ N □ Refused in your family should be taking that, for whatever reason, they are not taking? 38. Are there any medications like painkillers that you or anyone □ Y □ N □ Refused in your family does not take the way the doctor prescribed or where the medication is sold? **SCORE:** IF "YES" TO ANY OF THE ABOVE, SCORE 1. **Family Unit Considerations** □**Y** □N □ Refused 39. Are there any children that have been removed from the family by a child protection service within the last 6 months? 40. Do you have any family legal issues that are being resolved in ☐ Y ☐ N ☐ Refused court or need to be resolved in court that would impact your housing or who may live within your housing? **SCORE:** IF "YES" TO ANY OF THE ABOVE, SCORE 1.

41. In the last 6 months have any children lived with family or friends because of your homelessness or housing situation?	□Y	□N	□ Refused	
IF "YES," SCORE 1.				SCORE:
42. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week?	ПΥ	□ N	□ N/A or Refused	
43. Have the members of your family changed in the last 6 months, 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?	□ Y	□N	□ Refused	
44.Do you anticipate any other adults or children coming to live with you within the next 6 months?	□Ү	□N	☐ Refused	
IF "NO" TO 42 OR "YES" TO 43 OR 44, SCORE 1.				SCORE:
45. 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?	ПΥ	□N	□ Refused	
46.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?	□Υ	□N	□ N/A or Refused	
47. After school, or on weekends or days when there isn't school, is spend each day where there is no interaction with you or anoth				
a) 3 or more hours per day for children aged 13 or older?	\square Y	\square N	□ Refused	
b) 2 or more hours per day for children aged 12 or younger?	□ Y	□N	□ Refused	
IF "NO" TO 45, OR "YES" TO 46 OR 47, SCORE 1.				SCORE:

Scoring Summary

TOTA	L SCORE	RECOMMENDATION
	22+:	STRONG RECOMMENDATION FOR FINANCIAL AND CASE MANAGEMENT SUPPORTS
	16-21:	RECOMMENDATION FOR FINANCIAL AND/OR CASE MANAGEMENT SUPPORTS
	11-15:	AS RESOURCES ALLOW, CONSIDER FINANCIAL AND/OR CASE MANAGEMENT SUPPORTS
	0-10:	NO ASSISTANCE PROVIDED; MAY, HOWEVER, PROVIDE REFERRAL TO MAINSTREAM RESOURCES





- Bridges West Transitional Housing, \$130,609
- Siouxland HMIS, \$43,159
- Project Help PSH, \$53,553
- Rapid Rehousing, \$156,884
- Siouxland Coordinated Entry, \$186,608
- Heartland PSH, \$170,658
- SCEH Planning Project, \$21,675

Below are slides from HUD's training regarding CoC Start-Up 2019. There is a lot of valuable information in these slides. If your agency receives CoC funding, please refer to these slides to ensure your program is in compliance.

CoC Start-Up 2019 Part 1 (pdf)	♣ Download
CoC Start-Up 2019 Part 2 (pdf)	
CoC Start-Up 2019 Part 3 (pdf)	≜ Download
CoC Start-Up 2019 Part 4 (pdf)	± Download

2019 COC NOTICE OF FUNDING AVAILABILITY (NOFA)

The FY 2019 Notice of Funding Availability (NOFA) has been released by HUD. The Siouxland Coalition to End Homelessness will be working diligently over the next few months and will submit an application for funding prior to September 30, 2019. The items below will be updated with 2019 grant information as soon as it is available. To find out more about the FY 2019 NOFA, click here.

2019 RFP Funding Notice - New/Renewal Applications due 8/19/19 (pdf)	≜ Download
2019 Notice of Funding Availability published 07/03/19 (pdf)	± Download
2019 Rating and Ranking Procedure Scoring Charts (pdf)	± Download
2019 Process for Reallocation (pdf)	≜ Download
2019 Ranking of Applications (pdf)	± Download

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Siouxland Coalition to End Homelessness Ranking of Applications for Renewal Projects and New Projects August 29, 2019

The Siouxland Coalition to End Homelessness assigned the task of reviewing and ranking Continuum of Care Applications for renewal and new projects to the Project Monitoring and Development Committee. Those present: Kristine Bornholtz, Erica Carter, Wendy Jackson, Amy Keairns, Allison Larson and Katie Roberts. The Committee approved the following project ranking/priority listing. A motion was made by Wendy Jackson and seconded by Kristine Bornholtz to recommend to the SCEH Board approval of the SCEH Ranking of applications as follows. Those voting aye: Kristine Bornholtz, Wendy Jackson, Amy Keairns and Katie Roberts. Those abstaining: Erica Carter and Allison Larson.

				Amount
			Amount	Recommended
Ranking	Project	Agency	Requested	for Funding
Tier 1-1	Siouxland HMIS – Renewal	Institute for Community Alliances	\$43,156.00	\$43,156.00
Tier 1-2	Siouxland Coordinated Entry – Renewal	Institute for Community Alliances	\$186,608.00	\$186,608.00
Tier 1-3	Heartland Counseling PSH – Renewal	Heartland Counseling	\$170,658.00	\$170,658.00
Tier 1-4	Bridges West – Renewal	Center For Siouxland	\$130,609.00	\$130,609.00
Tier 1-5	Crittenton Center Project Help – Renewal	Crittenton Center	\$53,553.00	\$53,553.00
Tier 1-6	CSADV RRH – Renewal	Council on Sexual Assault & Dom Vio	\$156,884.00	\$122,635.00
Tier 2-1	CSADV RRH – Renewal	Council on Sexual Assault & Dom Vio		\$34,249.00
Total			\$741,468.00	\$741,468.00

The total amount of funding available was \$987,679.00, and the breakdown is as follows:

Tier 1	\$707,219.00	
Tier 2	<u>\$34,249.00</u>	
Subtotal	\$741,468.00	
PH Bonus	\$68,392.00	No agency applied for this funding
Subtotal	\$809,860.00	
DV Bonus	\$136,784.00	No agency applied for this funding
Subtotal	\$946,644.00	
Planning Project	\$41,035.00	CoC did not apply for funding
Total	\$987,679.00	

The applications for funding received did not total the funding amount available, as you can see in the tables above, due to no agencies applying for the PH Bonus, DV Bonus, or CoC Planning Project Funds.

The Committee ranked the projects from highest to lowest in scoring per the CoC's approved Review and Ranking Policy/Procedure. Since it was not possible to score Heartland Counseling PSH – Renewal due to the project being in their first year and not yet fully operational or having enough data to score and rank, the Committee ranked that project based upon their initial new application score and rank in the FY2018 competition, again per the CoC's approved Review and Ranking Policy/Procedure.

The SCEH Project Monitoring and Development Committee Project Priority Ranking recommendation was put to a vote by the SCEH Board of Directors on August 29, 2019. The Project Priority Ranking recommendation was approved by the SCEH Board on August 30, 2019. The vote was recorded as follows:

Frank Tenuta – yes

Amy Keairns – yes

Denise Holst - yes

Wendy Jackson – yes

Katie Roberts – yes

Allison Larson – abstain

Kristine Bornholtz – yes

Debbie Goettsch – yes

Jennifer Jackson – abstain

Lindsay Landrum – yes

Cate Combs – yes

Denise Holst - yes

Allison Larson – absent, did not vote

Monica Rosenthal – abstain

Jennifer Jackson – abstain

Susan McGuire/Alison Justice – abstain



Center For Siouxland Jonette Spurlock jspurlock@centerforsiouxland.org

Congratulations! Your renewal project application, Center For Siouxland Bridges West Transitional Housing, has been accepted in Tier 1 by the Project Monitoring and Development Committee in the amount of \$130,609.00. The Siouxland Coalition to End Homelessness Board has approved this decision and your project will be included in the Consolidated Application to HUD for FY19 CoC Program funding.

If you have any questions, please contact me at 712-279-6255.

Sincerely,

Project Monitoring and Development Committee

Committee Member

FAX 712-224-5200

NEIGHBORHOOD SERVICES



Crittenton Center Monica Rosenthal mrosenth@crittentoncenter.org

Congratulations! Your renewal project application, Project Help PSH, has been accepted in Tier 1 by the Project Monitoring and Development Committee in the amount of \$53,553.00. The Siouxland Coalition to End Homelessness Board has approved this decision and your project will be included in the Consolidated Application to HUD for FY19 CoC Program funding.

If you have any questions, please contact me at 712-279-6255.

Sincerely,

Amy Keairns

Project Monitoring and Development Committee

nyllouris

Committee Member

NEIGHBORHOOD SERVICES



Heartland Counseling Services Jennifer Jackson jennifer@heartlandcounselingservices.com

Congratulations! Your renewal project application, Heartland Counseling Permanent Supportive Housing, has been accepted in Tier 1 by the Project Monitoring and Development Committee in the amount of \$170,658.00. The Siouxland Coalition to End Homelessness Board has approved this decision and your project will be included in the Consolidated Application to HUD for FY19 CoC Program funding.

If you have any questions, please me at 712-279-6255.

Sincerely,

Amy Keairns

Project Monitoring and Development Committee

Iny Kearns

Committee Member

FAX 712-224-5200

FAX 712-224-5218



Institute for Community Alliances
Julie Eberbach
Julie.eberbach@icalliances.org

Congratulations! Your renewal project application, Siouxland Coordinated Entry, has been accepted in Tier 1 by the Project Monitoring and Development Committee in the amount of \$186,608.00. The Siouxland Coalition to End Homelessness Board has approved this decision and your project will be included in the Consolidated Application to HUD for FY19 CoC Program funding.

If you have any questions, please contact me at 712-279-6255.

Sincerely,

Amy Keairns

Project Monitoring and Development Committee

Committee Member

FAX 712-224-5200

NEIGHBORHOOD SERVICES



Institute for Community Alliances Julie Eberbach Julie.eberbach@icalliances.org

Congratulations! Your renewal project application, Siouxland HMIS, has been accepted in Tier 1 by the Project Monitoring and Development Committee in the amount of \$43,156.00. The Siouxland Coalition to End Homelessness Board has approved this decision and your project will be included in the Consolidated Application to HUD for FY19 CoC Program funding.

If you have any questions, please contact me at 712-279-6255.

Sincerely,

Project Monitoring and Development Committee

My Kearns

Committee Member

NEIGHBORHOOD SERVICES



Council on Sexual Assault and Domestic Violence Robin McGinty robin@csadv.org

Congratulations! Your renewal project application, Rapid Rehousing Project, has been accepted in Tier 1 by the Project Monitoring and Development Committee in the amount of \$122,635.00. The Siouxland Coalition to End Homelessness Board has approved this decision and your project will be included in the Consolidated Application to HUD for FY19 CoC Program funding.

The remaining dollar amount, \$34,249.00, is in Tier 2 and may be funded based on availability of HUD funding for Tier 2 projects and the CoC Consolidated Application score.

If you have any questions, please contact me at 712-279-6255.

Sincerely,

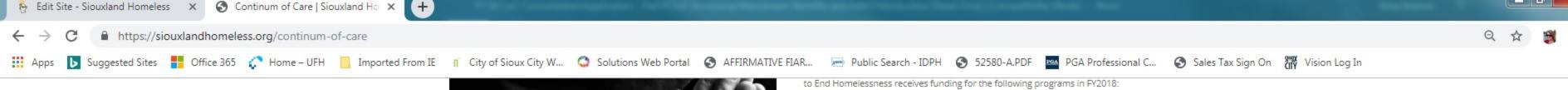
Amy Keairns

Project Monitoring and Development Committee

lny Learns

Committee Member

FAX 712-224-5218 WEB www.sioux-city.org FAX 712-224-5200





- Bridges West Transitional Housing, \$130,609
- Siouxland HMIS, \$43,159
- Project Help PSH, \$53,553
- Rapid Rehousing, \$156,884
- Siouxland Coordinated Entry, \$186,608
- Heartland PSH, \$170,658
- SCEH Planning Project, \$21,675

Below are slides from HUD's training regarding CoC Start-Up 2019. There is a lot of valuable information in these slides. If your agency receives CoC funding, please refer to these slides to ensure your program is in compliance.

CoC Start-Up 2019 Part 1 (pdf)	♣ Download
CoC Start-Up 2019 Part 2 (pdf)	
CoC Start-Up 2019 Part 3 (pdf)	≜ Download
CoC Start-Up 2019 Part 4 (pdf)	± Download

2019 COC NOTICE OF FUNDING AVAILABILITY (NOFA)

The FY 2019 Notice of Funding Availability (NOFA) has been released by HUD. The Siouxland Coalition to End Homelessness will be working diligently over the next few months and will submit an application for funding prior to September 30, 2019. The items below will be updated with 2019 grant information as soon as it is available. To find out more about the FY 2019 NOFA, click here.

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2019 Ranking of Applications (pdf)	± Download

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Siouxland Coalition to End Homelessness Ranking of Applications for Renewal Projects and New Projects August 29, 2019

The Siouxland Coalition to End Homelessness assigned the task of reviewing and ranking Continuum of Care Applications for renewal and new projects to the Project Monitoring and Development Committee. Those present: Kristine Bornholtz, Erica Carter, Wendy Jackson, Amy Keairns, Allison Larson and Katie Roberts. The Committee approved the following project ranking/priority listing. A motion was made by Wendy Jackson and seconded by Kristine Bornholtz to recommend to the SCEH Board approval of the SCEH Ranking of applications as follows. Those voting aye: Kristine Bornholtz, Wendy Jackson, Amy Keairns and Katie Roberts. Those abstaining: Erica Carter and Allison Larson.

				Amount
			Amount	Recommended
Ranking	Project	Agency	Requested	for Funding
Tier 1-1	Siouxland HMIS – Renewal	Institute for Community Alliances	\$43,156.00	\$43,156.00
Tier 1-2	Siouxland Coordinated Entry – Renewal	Institute for Community Alliances	\$186,608.00	\$186,608.00
Tier 1-3	Heartland Counseling PSH – Renewal	Heartland Counseling	\$170,658.00	\$170,658.00
Tier 1-4	Bridges West – Renewal	Center For Siouxland	\$130,609.00	\$130,609.00
Tier 1-5	Crittenton Center Project Help – Renewal	Crittenton Center	\$53,553.00	\$53,553.00
Tier 1-6	CSADV RRH – Renewal	Council on Sexual Assault & Dom Vio	\$156,884.00	\$122,635.00
Tier 2-1	CSADV RRH – Renewal	Council on Sexual Assault & Dom Vio		\$34,249.00
Total			\$741,468.00	\$741,468.00

The total amount of funding available was \$987,679.00, and the breakdown is as follows:

Tier 1	\$707,219.00	
Tier 2	<u>\$34,249.00</u>	
Subtotal	\$741,468.00	
PH Bonus	\$68,392.00	No agency applied for this funding
Subtotal	\$809,860.00	
DV Bonus	\$136,784.00	No agency applied for this funding
Subtotal	\$946,644.00	
Planning Project	\$41,035.00	CoC did not apply for funding
Total	\$987,679.00	

The applications for funding received did not total the funding amount available, as you can see in the tables above, due to no agencies applying for the PH Bonus, DV Bonus, or CoC Planning Project Funds.

The Committee ranked the projects from highest to lowest in scoring per the CoC's approved Review and Ranking Policy/Procedure. Since it was not possible to score Heartland Counseling PSH – Renewal due to the project being in their first year and not yet fully operational or having enough data to score and rank, the Committee ranked that project based upon their initial new application score and rank in the FY2018 competition, again per the CoC's approved Review and Ranking Policy/Procedure.

The SCEH Project Monitoring and Development Committee Project Priority Ranking recommendation was put to a vote by the SCEH Board of Directors on August 29, 2019. The Project Priority Ranking recommendation was approved by the SCEH Board on August 30, 2019. The vote was recorded as follows:

Frank Tenuta – yes

Amy Keairns – yes

Denise Holst - yes

Wendy Jackson – yes

Katie Roberts – yes

Allison Larson – abstain

Kristine Bornholtz – yes

Debbie Goettsch – yes

Jennifer Jackson – abstain

Lindsay Landrum – yes

Cate Combs – yes

Denise Holst - yes

Allison Larson – absent, did not vote

Monica Rosenthal – abstain

Jennifer Jackson – abstain

Susan McGuire/Alison Justice – abstain



Council on Sexual Assault and Domestic Violence Robin McGinty robin@csadv.org

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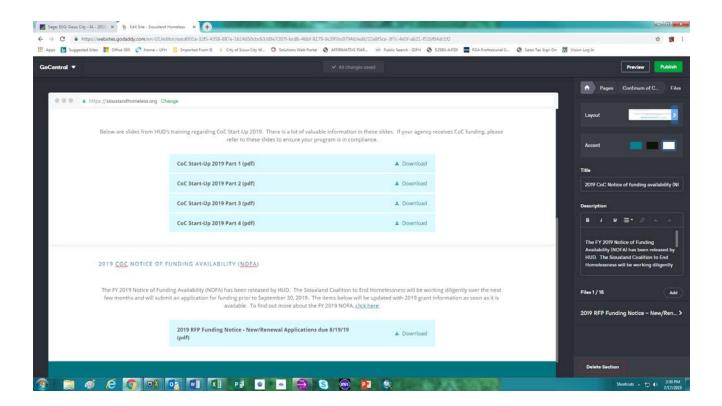
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Project Monitoring and Development Committee

lny Learns

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For SCEH New and Renewal CoC Program Funding Applicants:

This message is to provide information and a timeline for any agencies interested in submitting a new or renewal application for CoC Program funding through the Siouxland Coalition to End Homelessness Continuum of Care program for homeless services.

New and Renewal CoC Project Applications Due in eSnaps by 5:00 p.m. Monday, August 19, 2019

The Continuum of Care (CoC) program is a program of the U.S. Department of Housing and Urban Development (HUD). HUD released new interim regulations on the program in the summer of 2012; the new regulations combine the old Supportive Housing Program and Shelter Plus Care program into the new CoC program. The regulations can be found at www.hudexchange.info and search for CoC Program Interim Rule.

The Siouxland Coalition to End Homelessness CoC includes Sioux City, Woodbury County, Iowa, and Dakota County, Nebraska. Any agency or unit of local government within the SCEH that is interested in receiving CoC Program funding must submit an application for review by the SCEH Project Development and Monitoring Committee.

The CoC Consolidated Application to be submitted to HUD consists of the FY2019 CoC application (the Co C plan with all charts and narratives completed as applicable), the Priority Project Listing, the FY2019 New and Renewal Project Applications, as well as any required forms and attachments. The SCEH Grant Committee provides support for this process, and eventually our CoC Collaborative Applicant, the City of Sioux City, submits the application that is recommended by the SCEH Project Monitoring and Development Committee and approved by the SCEH Board of Directors.

HUD has released the Notice of Funding Availability for this competition, which can be found at https://www.hud.gov/sites/dfiles/SPM/documents/6300 25 FY19 CoC.pdf. All potential applicants are encouraged to read the NOFA in its entirety. The NOFA lists eligible applicants and activities as well as information regarding the CoC ranking process and HUD scoring. Pay special attention to HUD's priority to serve the chronically homeless and to provide rapid rehousing for families coming from the street or an emergency shelter. HUD also provides a number of resources to assist applicants with their application and navigating the system. They can be found on the Continuum of Care (CoC) Program page of HUD Exchange which can be found at https://www.hudexchange.info/programs/coc/.

New Projects may be created through reallocation, bonus, or a combination of reallocation and bonus, new DV Bonus projects, and CoC Planning Project.

New Projects created through the reallocation or bonus are limited to the following types of projects:

- PH-PSH projects that meet the requirements of Dedicated PLUS or where 100% of the beds are dedicated to CH individuals and families.
- PH-RRH projects for homeless individuals and families, including unaccompanied youth.
- Joint TH and PH-RRH component projects to better serve homeless individuals and families, including those
 fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking who meet the
 following criteria:
 - o Residing in a place not meant for human habitation;
 - Residing in an emergency shelter;
 - o persons who meet the criteria of paragraph (4) of the homeless definition, including persons fleeing or attempting to flee DV, dating violence, sexual assault, or stalking;
 - Residing in a TH program that is being eliminated;
 - o Residing in TH funded by a Joint TH and PH-RRH component project; OR
 - Receiving services form a VA-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

- Dedicated Homeless Management Information System (HMIS) project for the costs that can only be carried
 out by the HMIS Lead, which is the recipient or subrecipient of an HMIS grant, and that is listed on the
 HMIS Lead form in the CoC Applicant profile in e-snaps.
- SSO-CE project to develop or operate centralized or coordinated assessment system.

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- SSO Coordinated Entry project to implement policies, procedures, and practices that equip the CoC's
 coordinated entry to better meet the needs of survivors of domestic violence, dating violence, sexual assault,
 or stalking.

Expansion Project - see pp. 30-31 of NOFA

- A new expansion project created under the DV Bonus, reallocation, or CoC bonus processes to expand existing
 projects that will increase the number of units, persons served, services provided to existing program
 participants, or to add additional activities to HMIS and SSO-CE projects.
- If applying for an expansion grant, project applicants must submit separate renewal and new project applications AND a renewal application that includes the information from the renewal new project application that combines the activities and budgets into one renewal project application.

Outside of reallocation, bonus, DV Bonus, and CoC Planning Projects, there are no new funds available for new projects.

While HUD's final CoC Program Application deadline is Monday, September 30, 2019, the internal deadline for all new and renewal Project Applications and required attachments and supplemental documentation is <u>5:00 p.m., Monday, August 19, 2019.</u> This will ensure the Project Monitoring and Development Committee has enough time to review, prioritize, and rank the project applications before submitting the entire CoC Program Application to HUD by the September 30, 2019 deadline.

Funding amounts*:

SCEH's Preliminary Pro Rata Need (PPRN) = \$1,367,847

SCEH's Annual Renewal Demand (ARD) = \$741,468 (amount needed for all current projects to renew for an additional year, pending any ineligible renewal projects)

Tier 1 project ranking amount = \$707,219 [100% of 1st time renewal projects (\$170,658) + 94% of ARD for remaining renewal projects (\$536,561)]

Tier 2 project ranking amount = \$34,249 (Remaining ARD)

SCEH's Planning Funds = \$41,035 (3% of PPRN)

SCEH's DV Bonus = \$136,784 (10% of PPRN)

SCEH's CoC Bonus Project = \$68,392 (5% of FPRN)

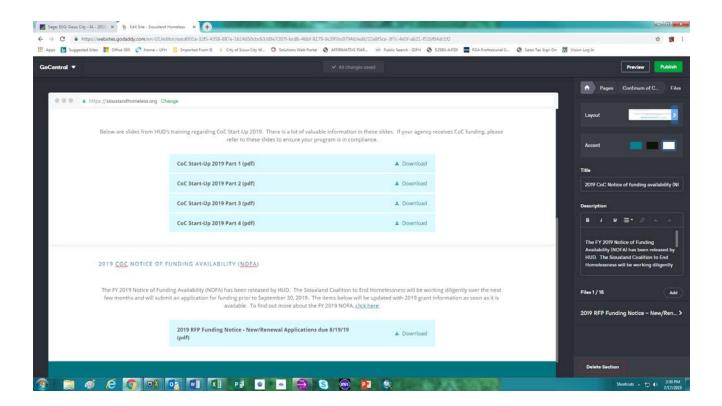
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Anticipated timeline:

- Wednesday, July 3, 2019: FY2019 CoC Program Competition opens.
- Thursday, July 11, 2019: New and Renewal Applications are available in eSnaps.
- Monday, August 19, 2019: New and Renewal Applications due to the SCEH in eSnaps; The remaining required reports and documents as outlined below must be e-mailed to Susan McGuire
 (<u>susan.mcguire@centerforsiouxland.org</u>). Late applications and/or required documents will not be accepted. Incomplete applications and/or documents will not be scored and will be rejected by the CoC.
- Friday, September 13, 2019: Project applicants are notified whether their project applications were accepted or rejected for inclusion in the SCEH CoC Application.
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- Tuesday, September 24, 2019 (likely date): SCEH Board votes on and approves SCEH CoC Application
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Tips to help ensure a smooth application process:

- 1) Review the CoC Interim Regulations and the CoC NOFA to understand the program, the changes from past years, and how your project may fit. Pay special attention to the following sections of the NOFA:
 - a. pp 5-6 HUD's Homeless Policy and Program Priorities
 - b. pp 13-21 CoC Program Requirements/Definitions/Concepts as well as outside resources and references
 - c. pp 33-40 Threshold Requirements and Project Scoring
 - d. p 45 FY 2019 Project Application Requirements/Forms
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- 2) The HUD eSnaps training materials and tutorials can be found at: https://www.hudexchange.info/programs/e-snaps/ under the CoC Program Competition Resources heading. Project applicants will be most interested in the "Submitting Applications for Project Funding" resources.
- 3) Refer to page 45 of the NOFA for a list of Project Application requirements. All required forms must be dated between May 1, 2019 and September 30, 2019, 2019. Many of the required forms are part of eSnaps and found in the Applicant Profile and/or in the Project Application. They are filled in and signed electronically when completed in eSnaps. Required forms not in eSnaps will have to be uploaded in the Applicant Profile.
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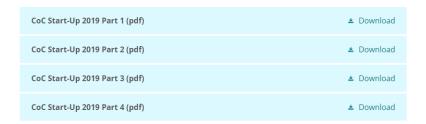
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2019 Notice of Funding Availability published 07/03/19 (pdf)	± Download
2019 Rating and Ranking Procedure Scoring Charts (pdf)	≛ Download



Siouxland Coalition To End Homelessness New and Renewal Project Scoring/Ranking Policy

Policy: to determine the process by which new and renewal applications will be scored and ranked within HUD's CoC Program Competition.

Renewal HMIS, Coordinated Entry, PH, TH, and SSO Projects

In order to be considered for scoring and ranking, all renewal project applications must submit:

- a complete renewal project application to the CoC through the eSnaps online system by the announced deadline
- a complete set of other required reports and documents by the announced deadline

Incomplete or late applications and materials will not be accepted, and the project application will be rejected by the CoC.

All renewal HMIS projects will be scored using the developed Performance Scoring Charts for HMIS Projects. Scoring criteria for renewal projects will include:

- PIT/HIC
 - Completeness and Accuracy of PIT count, especially special populations
 - o Increases in HMIS bed coverage/efforts to increase HMIS participation among non-funded agencies
 - Data reporting to SCEH
 - o Timely submission of PIT/HIC data in HUD HDX
- System Performance Measures
 - o CoC-wide improvements in SPM's over the previous year(s)/efforts to improve CoC-wide SPM's
 - o Data reporting to SCEH
 - o Timely submission of PIT/HIC data in HUD HDX

All renewal Coordinated Entry (CE) projects will be scored using the developed Performance Scoring Chart for CE Projects. Scoring criteria for renewal projects will include:

- Participation in CE by both CoC and ESG funded agencies and non-funded agencies/efforts to increase CE participation by both funded and non-funded agencies.
- System outcomes including the rate of exits to permanent housing, reducing the average length of stay in programs, and reducing the number of persons who become homeless for the first time.

All renewal PH, TH, and SSO (excluding Coordinated Entry) projects will be scored using the developed Performance Scoring Charts for PH, TH, and SSO Projects. Scoring criteria for renewal projects will include:

- Performance Measures
 - o increasing housing stability
 - o sources of cash income
 - o gained or increased income
 - o sources of non-cash benefits
- data quality/completeness and data entry timeliness
- grant funding expenditures/drawdown

Accepted projects will be ranked by score, from highest to lowest. In the event that 1st year renewal projects (new projects awarded during the previous federal FY funding cycle) are not under contract and have not begun operating at the time of the competition, they will be exempt from the scoring criteria for renewal projects. They will instead be automatically ranked in the order they were initially ranked in the Priority Rankings submitted to HUD in the previous year.

New PH Projects

In order to be considered for scoring and ranking, all new project applications must submit a complete new project application to the CoC through the eSnaps online system by the announced deadline. Incomplete or late project applications will not be accepted, and the project application will be rejected by the CoC.

All new PH projects will be scored using the developed Performance Scoring Charts. Scoring for New Projects will include:

- Program and Housing type/capacity
 - o CH dedicated focus
 - Housing First focus
- Proposed Performance Measures
 - increasing housing stability
 - o sources of cash income
 - o gained or increased income
 - o sources of non-cash benefits
- Agency Experience

Accepted projects will be ranked by score, from highest to lowest.

Coordinated Entry Renewal Application Evaluation

Persor	n(s) com	pleting evaluation:
Date: _		
For thi	s evalua	tion, use data from the time period of October 1, 2018 – June 30, 2019.
1.		nated Entry Agency Participation: (9 pts.) Number of ESG and/or CoC-funded organizations participating in CE (e.g. Case Conferencing, accepting referrals, etc): CAAS, CFS, CSADV, Crittenton Center, Shesler, City of Sioux City
	b.	Number of non-funded organizations participating in CE (e.g. Case Conferencing, accepting referrals, etc): Haven House, Heartland Counseling (funded agency but program not up and running yet)

c. Explain any efforts being made to increase the number of non-funded organizations participating in CE.

2. Program Participation: (10 pts.)

Type of Organization	Number of	Number of Referrals	Number/Percentage	Rate/percentage of
	Organizations/Programs	Made to each	of Referrals	Exits from the listed
	Actively Participating in	program type	Accepted	organization types to
	CE – intake, accepting			PH Destinations*
	referrals, etc.			
Emergency Shelter		47		61.5%
Transitional Housing		61		78.5%
Rapid Re-Housing		38		75%
Permanent Supportive Housing		6		100%
Homeless Prevention		59		94%
Other Permanent Destinations				37%
Other Temporary Destinations				5%
Institutional Destinations				4%
Self-Resolved				32%
Disappeared/Unknown				46%
CE Referral Totals:		217	159 (94%)	132/335 (40%)

^{*}ES, TH, RRH, PSH, and HP exits are based on program exits agencies reported on their 3rd Quarter SCEH reports. All other exits are based on exits from CE Prioritization List by CE Staff.

2a. Explain variances in the number of referrals made and referrals accepted. What are the top 5 reasons for denying a referral? Explain your agency's efforts to work with the various organizations to increase the number of accepted referrals.

**Of 169 referrals made: 159 (94%) were accepted by the agency/program; 7 (4%) were denied by the agency/program; 3 (2%) were denied by the client.

2b. The SCEH has a standard of 80% of PSH, RRH, and TH clients and 30% of ES clients remaining in/exiting to permanent housing destinations. Explain your agency's efforts to work with funded and non-funded agencies to improve the rate of exits to permanent housing.

3.	System	Outcor	nes: (8 pts.)		
	a.	Averag	e Length of Stay in Emergency Shelt	ter Programs	
	Singles:	<u> </u>	Families:	Youth:	
	b.	Averag	e Length of Stay in Transitional Hou	sing Programs	
	Singles:	:	Families:	Youth:	
	c.	New er	ntries into homelessness (per year)		
	Singles:		Families:	Youth:	
	d.	Explain	your agency's efforts to divert pers	sons from becoming homeless.	
4.	Progran	m Mana	gement/Application Timeliness: (7	pts.)	
	a.	Curren	t Project Operating Year-End Date: _		
	b.	Grant A	Amount:		
		i.	Grant Funds Expended to Date:		
		ii.	Grant Funds Remaining (unexpend	ded) to Date:	
		iii.	Unexpended Funds % (Unexpende	ed Funds/Grant Amount):	

HMIS Renewal Application Performance Evaluation

Person((s) Completing Eva	luation:			
Date:					
1.				he January 2019 PIT Count? Comple	te the
ype of T		Presenter(s)	Date of Training	Participating Agencies	
·· webinar,	, in-person)	. ,			
3.4.	to count total hou What efforts were HUD's definitions What measures di children, veterans	seholds and total persemade to ensure that a	ons in households? all agencies, especially numbers in the complete and t	confunded agencies, clearly understone on funded agencies, clearly understone order to accurately complete the Placcurate PIT count of households with	ood T count?
		he CoC's beds are cove	ered in HMIS?		
	for ES? <u>2%</u>	For TH? <u>73%</u>	For PSH? <u>19%</u>	For RRH? <u>100%</u>	
	Which agencies' b for ES? For TH? For PSH? For RRH?	eds are NOT currently	covered in HMIS?		

3.	If the bed coverage is less than 85%, explain your agency's efforts to increase bed coverage over the next 12
	months?

4. How many tables were accepted and used by HUD in the last AHAR?

System Performance Measures (SPM) (7 pts.)

- 1. Briefly explain how the CoC-wide System Performance Measures submitted to HUD in May 2019 compare to the SPM's submitted in previous years.
- 2. Is CoC performance improving? If not, explain your agency's efforts to improve CoC-wide SPM's/work with funded/non-funded agencies to improve SPM's.

Non-Funded Agency Data (5 pts.)

- 1. Is non-funded agency data currently being entered into ServicePoint?
 - a. If yes, which non-funded agencies are participating? Who is responsible for entering non-funded agency data?
 - b. If no, briefly explain why they have ceased participation.
- 2. Briefly explain the advantages and/or disadvantages of entering non-funded agency data into ServicePoint.
- 3. Briefly explain your agency's efforts to increase non-funded agency participation in ServicePoint and how you would ensure non-funded agency data quality, completeness and timeliness should any of them choose to participate.

Program Management/Application Submission Timeliness (7 pts.)

Ι.	Current Project	Operating rear-chu Date.
2.	Grant Amount:	
	a.	Grant Funds Expended to Date:
	b.	Grant Funds Remaining (Unexpended) to Date:
	C.	Unexpended Funds % (Unexpended Funds/Grant Amount):

All Projects

Project Scoring Summary

Performance/Scoring Measure (Max. Pts.)	Crittenton Center - Project Help PSH	Heartland Counseling - PSH	CSADV - RRH	Center For Siouxland - Bridges West TH
Housing Stability (4pts.)				
Earned Income (2 pts.)				
Other Cash Income Source (2 pts.)				
Gained or Increased Income (2 pts.)				
Non-Cash Benefits (2 pts.)				
Data Quality/Completeness (4 pts.)				
Data Entry Timeliness (4 pts.)				
Recaptured Funds (2 pts.)				
Shelter Capacity/Utilization (2 pts.)				
Quarterly Report Submission Timeliness (5 pts.)				
Application/Report Submission Timeliness (5 pts.)				

TOTAL COMBINED SCORE (34 pts.) TOTAL COMBINED SCORE - PERCENTAGE

0	0	0	0
0.00	0.00	0.00	0.00

Performance/Scoring Measure (Max. Pts.)	Institute for Community Alliances - HMIS
Point In Timt Count (10 pts.)	
PIT Training	
Complete/Accurate PIT Count	
HIC/AHAR (5 pts.)	
HMIS bed coverage %	
Increase HMIS bed coverage %	
AHAR tables	

System Performance Measures (7 pts.)	
Non-Funded Agency Data Quality (5 pts.)	
Program Management/Spending (2 pts.)	
Application/Report Submission Timeliness (5 pts.)	

TOTAL COMBINED SCORE (34 pts.)	0
TOTAL COMBINED SCORE - PERCENTAGE	0.00

Performance/Scoring Measure (Max. Pts.)	Institute for Community Alliances - Coordinated Entry
CE Agency Participation (9 pts.)	
Organizations completing intake/assessment	
Organizations trained by not active	
Program Participation/Referrals (10 pts.)	
# of referrals made/accepted	
Rate of exits to PH	
System Outcomes (8 pts.)	
Reducing length of time homeless	
Decreasing # of 1st time homeless	
Program Management/Spending (2 pts.)	
Application/Report Submission Timeliness (5 pts.)	

TOTAL COMBINED SCORE (34 pts.)	0
TOTAL COMBINED SCORE - PERCENTAGE	0.00

Transitional and Permanent Housing Projects

Increase Housing Stability. (Goal: 80% + remaining in PH or exiting to PH)

Note: Calculations based on most recent SCEH Quarterly Reporting Data

For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

PH - PSH/RRH Scoring:

80% or higher = 4 pts.

less than 80% = 0 pts.

Permanent Housing Projects	Total participants	Stayers	Other PH (Q23A, 23B)	Total stayers and PH exits	Percentage of participants who either remained in PH or exited to PH.	Score
Crittenton Center - Project Help PSH					#DIV/0!	
Heartland Counseling - PSH					#DIV/0!	
CSADV - RRH					#DIV/0!	
Totals	0	0	0	0	#DIV/0!	

TH Scoring

80% or higher = 4 pts.

65% - 79% = 3 pts.

Below 65% = 0 pts.

Transitional Housing Projects	Total participants	Stayers	Exits to Other PH (Q23A, 23B)	Total stayers and PH exits	Percentage of participants who exited to PH.	Score
Center For Siouxland - Bridges West					#DIV/0!	
Totals	0	0	0	0	#DIV/0!	

All Projects (Excluding HMIS)

Sources of cash income. (PSH Goals: 15%+ obtain employment/earned income; 50%+ obtain other cash income;

RRH/TH Goals: 50%+ obtain employment/earned income; 30%+ obtain other cash income)

Note: Calculations based on most recent SCEH Quarterly Reporting Data For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Earned Income Scoring: PSH Projects

15% or higher = 2 pts.

10% - 14% - 1 pt.

less than 10% = 0 pts.

Other Cash Income Scoring: PSH Projects

Score

50% or higher = 2 pts.

30% - 49% = 1 pt.

less than 30% = 0 pts.

Project	Cash Income Sources	# of Adult Leavers w/ income source (18)	Total Adult Leavers (5a)	% of Adults w/ earned income	% of Adults w/ other cash income		% of Adults w/ no cash income
Crittenton	Earned Income			#DIV/0!			
Center - Project	Other Cash Income Sources:				#DIV/0!		
Help PSH	Both Earned and Other Income Sources:			Т		#DIV/0!	#DIV/0!
	No Cash Income Sources:			# D D #/61			#DIV/0!
Heartland	Earned Income			#DIV/0!			
Counseling -	Other Cash Income Sources:				#DIV/0!		
PSH	Both Earned and Other Income Sources:					#DIV/0!	"DIV ((a)
	No Cash Income Sources:						#DIV/0!

Earned Income Scoring: RRH/TH Projects

50% or higher = 2 pts.

30% - 49% = 1 pt.

less than 30% = 0 pts.

Other Cash Income Scoring: RRH/TH Projects

30% or higher = 2 pts.

10% - 29% = 1 pt.

less than 10% = 0 pts.

Project	Cash Income Sources	# of Adult Leavers w/ income source (18)	Total Adult Leavers (5a)	% of Adults w/ earned income	% of Adults w/ other cash income		% of Adults w/ no cash income	Score
	Earned Income			#DIV/0!				
CSADV - RRH	Other Cash Income Sources:				#DIV/0!			
	Both Earned and Other Income Sources:					#DIV/0!		
	No Cash Income Sources:						#DIV/0!	
CEC Bridges	Earned Income			#DIV/0!				
CFS - Bridges West	Other Cash Income Sources:				#DIV/0!			
AAGSI	Both Earned and Other Income Sources:					#DIV/0!		
	No Cash Income Sources:						#DIV/0!	

All Projects (Excluding HMIS)

Obtain or increase project participants income (from employment and from other sources).

(Goal: PSH/RRH/TH - 40% + obtain or increase income from employment and other sources)

Note: Calculations based on most recent SCEH Quarterly Reporting Data

For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Gained or Increased Income Scoring:

40% or higher = 2 pts.

20% - 39% - 1 pt.

less than 20% = 0 pts.

Applicant/Project	Total Adult Leavers (5a6)	Adult Leavers who maintained income (19a2, row 6, column 4)	Percentage of Total Adults who maintained income (C/B)	Adult Leavers who gained or increased income (19a2; row 6, columns 5+6)	Percentage of Adult Leavers who gained or increased income (E/B)	Score
Crittenton Center - Project Help PSH					#DIV/0!	
Heartland Counseling - PSH					#DIV/0!	
CSADV - RRH					#DIV/0!	
Center For Siouxland - Bridges West					#DIV/0!	

0	0	0	0	#DIV/0!

All Projects (Excluding HMIS)

Sources of Mainstream Benefits

(Goal: PSH - 85%+ obtain mainstream benefits;

TH/RRH - 80%+ obtain mainstream benefits)

Note: Calculations based on most recent SCEH Quarterly Reporting Data

For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Mainstream Benefits Scoring: PSH Projects

85% or higher = 2 pts.

65% - 84% - 1 pt.

less than 65% = 0 pts.

Project	Non Cash Benefit Sources	# of Adult Leavers (20b)	Score
Crittonton Contor	Total Adults		
Crittenton Center	Total w/ 1+ sources		
- Project Help PSH	% Receiving Non Cash Benefits		
РЭП			
l looutlou d	Total Adults		
Heartland	Total w/ 1+ sources		
Counseling - PSH	% Receiving Non Cash Benefits		
гоп			

80% or higher = 2 pts.

60% - 79% - 1 pt.

less than 60% = 0 pts.

Tab 4 - 3A Obj 4 - All

Project	Non Cash Benefit Sources	# of Adult Leavers (20b)	Score
	Total Adults Total w/ 1+ sources		
CSADV - RRH	%Receiving Non Cash Benefits		
CFS - Bridges West	Total Adults Total w/ 1+ sources % Receiving Non Cash Benefits		

All Projects (Excluding HMIS)

Data Quality, Timeliness (Goals: <5% null/missing data in all categories;

100% of entry/exit data entered in <6 days)

Note: Calculations based on most recent SCEH Quarterly Reporting Data For all performance charts, please review your most recent SCEH Quarterly Reporting Data and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Data Quality/Completeness Scoring:	Data Entry Timeliness Scoring:
96-100% complete in all categories = 4 pts.	96-100% in $ days = 4 pts.$
at least 95% complete in all categories = 2 pts.	at least 95% in = 6 days - 2 pts.</td
Less than 95% complete in any category = 0 pts.	Less than 95% in $<$ = 6 days + - 0 pts.

Project	Data Element	% of Error Rate		Score
	Name (6a)			
	SSN (6a)			
	Date of Birth (6a)			
	Race (6a)			
	Ethnicity (6a)			
	Gender (6a)			
	Veteran Status (6b)			
	Relationship to HoH (6b)			
Crittenton Center	Client Location (6b)			
- Project Help	Disabling Condition (6b))			
PSH	Destination (Exit) (6c)			
1	Income and Sources (Entry) (6c)			
	Income and Sources (Annual Assess) (6c)			
	Income and Sources (Exit) (6c)			
	Started, # of Times/# of Months Homeless in			
	Domestic Violence (14a)			
	Fleeing Domestic Violence (14b)			

1	Residence Prior to Project Entry (15)			
	Non-Cash Benefit Received (20b)			
	Covered by Health Insurance (21)			
	Data Quality/Completeness Score			
Project	Data Entry Timeliness	Total # of Entry/Exit Records	# of Records entered in <11 days	Score
Critt Ctr - Project Help PSH	Data Entry Timeliness			
	Name (6a)			
	SSN (6a)			
	Date of Birth (6a)			
	Race (6a)			
	Ethnicity (6a)			
	Gender (6a)			
	Veteran Status (6b)			
	Relationship to HoH (6b)			
Heartland	Client Location (6b)			
Counseling -	Disabling Condition (6b))			
PSH	Destination (Exit) (6c)			
1 311	Income and Sources (Entry) (6c)			
	Income and Sources (Annual Assess) (6c)			
	Income and Sources (Exit) (6c)			
	Started, # of Times/# of Months Homeless in			
	Domestic Violence (14a)			
	Fleeing Domestic Violence (14b)			
	Residence Prior to Project Entry (15)			
	Non-Cash Benefit Received (20b)			
	Covered by Health Insurance (21)			

	Data Quality/Completeness Score			
Project	Project Data Entry Timeliness		# of Records entered in <11 days	
tand Counseling =	Data Entry Timeliness			
	Name (6a)			
	SSN (6a)			
	Date of Birth (6a)			
	Race (6a)			
	Ethnicity (6a)			
	Gender (6a)			
	Veteran Status (6b)			
	Relationship to HoH (6b)			
	Client Location (6b)			
CSADV - RRH	Disabling Condition (6b))			
CSADV - KKH	Destination (Exit) (6c)			
	Income and Sources (Entry) (6c)			
	Income and Sources (Annual Assess) (6c)			
	Income and Sources (Exit) (6c)			
	Started, # of Times/# of Months Homeless in			
	Domestic Violence (14a)			
	Fleeing Domestic Violence (14b)			
	Residence Prior to Project Entry (15)			
	Non-Cash Benefit Received (20b)			
	Covered by Health Insurance (21)			
	Data Quality/Completeness Score			
Project	Data Entry Timeliness	Total # of Entry/Exit Records	# of Records entered in <11 days	

CSADV - RRH	Data Entry Timeliness			
	·			
	Name (6a)			
	SSN (6a)			
	Date of Birth (6a)			
	Race (6a)			
	Ethnicity (6a)			
	Gender (6a)			
	Veteran Status (6b)			
	Relationship to HoH (6b)			
	Client Location (6b)			
	Disabling Condition (6b))			
CEC Bridges	Destination (Exit) (6c)			
CFS - Bridges West	Income and Sources (Entry) (6c)			
	Income and Sources (Annual Assess) (6c) Income and Sources (Exit) (6c) Chronic Homelessness (Approx Date Started, # of Times/# of Months Homeless in Past 3 years) (6d) Domestic Violence (14a) Fleeing Domestic Violence (14b) Residence Prior to Project Entry (15) Non-Cash Benefit Received (20b) Covered by Health Insurance (21)			
	Data Quality/Completeness Score			
Project	Data Entry Timeliness	Fotal # of Entry/Exit Records	# of Records entered in <11 days	
CFS - Bridges West	Data Entry Timeliness			

Point ii	n Time Count (10 pts.)	Score:
	Points to consider when scoring:	
	Types of training provided Agencies that participated in training Adequacy of training provided Complete and Accurate PIT count	Scorer's Comments:
Housin	ng Inventory Chart/AHAR (6 pts.) Points to consider when scoring:	Score:
	Bed Coverage % in HMIS Efforts to increase bed coverage # of tables used in AHAR	Scorer's Comments:
System	Performance Measures (7 pts.) Points to consider when scoring:	Score:
	Difference in SPM's from last year Efforts to improve SPM's	Scorer's Comments:

Non-funded Agency Data (5 pts.)

Points to consider when scoring:

Impact of non-funded agency data on SPM's and CoC

Efforts to improve non-funded agency data quality and timeliness

corer's Comments:			
orer 5 comments.			

IA-500 SCEH CoC 2019 Renewal Applicants Performance Charts Coordinated Entry

CE Ager	ncy Participation (9 pts.)	Score:
	Points to consider when scoring:	
	# of Agencies trained for CE vs. # of Agencies doing CE Reasons Agencies trained aren't serving clients	Scorer's Comments:
Prograr	n Participation (10 pts.) Points to consider when scoring:	Score:
	# of agencies providing each type of service vs. # of agencies actively participating in CE # of referrals made/accepted Efforts to increase accepted referrals	Scorer's Comments:
System	Outcomes (8 pts.) Points to consider when scoring:	Score:
	Increase/Decrease in Avg. length of time homeless	Scorer's Comments:
	Increase/Decrease in # of 1st time homeless	

All Projects

Financial Management, Cost Per Client, Program Capacity/Shelter Utilization, Quarterly Reporting, Application Submission

(Goals: 100% funds expended; 80%+ shelter utilization rate)

Note: Financial Calculations based on Most Recently Completed Grant Year/APR Report; Utilization Rates based on most recent SCEH Quarterly Reports For all performance charts, please review all numbers from your APR and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Recaputred Funds Scoring

100% expended = 2 pts.

1% - 5% recaptured = 1 pt.

6% - 10% recaptured = -1 pt.

>10% recaptured = -2 pts.

Unexpended Funds Scoring - ICA projects

>50% unexpended = 2 pts.

51 - 75% unexpended = 1 pt.

<75% unexpended = 0 pts.

> 1070 recuptured = 2 pts.				
		Total Funds	% of Funds	
		Recaptured/	Recaptured/	
Applicant/Project	Total Budget	Unexpended	Unexpended	Score
Crittenton Center - Project Help PSH				
Heartland Counseling - PSH				
CSADV - RRH				
Center For Siouxland - Bridges West TH				
ICA - HMIS				
ICA - Coordinated Entry				

# of clients served	Average Cost per Client Served
	#DIV/0!
	#DIV/0!
	#DIV/0!
	#DIV/0!
N/A	#VALUE!
N/A	#VALUE!

Shelter Capacity/Utilization Scoring

80-100% utilitization = 2 pts.

65 -79% utilization = 1 pt.

<65% utilization = 0 pts.

Applicant/Project	# of Clients served during 2018-2019	# of bed nights available	# of bed nights used	Shelter Utilization Rate	Score
Crittenton Center - Project Help PSH					
Heartland Counseling - PSH					
CSADV - RRH					
Center For Siouxland - Bridges West TH					

ICA - HMIS	N/A	N/A	N/A	N/A	N/A
ICA - Coordinated Entry	N/A	N/A	N/A	N/A	N/A

SCEH Quarterly Report Submission Scoring

Reports - complete and on time, every quarter = 5 pts.

Reports - complete and on time, 2+ quarters = 2 pts.

Reports - incomplete and/or late, 3+ quarters = 0 pts.

Applicant/Project	1st Quarter - complete, on time	2nd Quarter - complete, on time	3rd Quarter - complete, on time	4th Quarter - complete, on time	Score
Crittenton Center - Project Help PSH					
Heartland Counseling - PSH					
CSADV - RRH					
Center For Siouxland - Bridges West TH					
ICA - HMIS					
ICA - CE					

Application/Report Submission Scoring

Application and All Materials Complete and submitted by 5:00 p.m., Monday, August 19, 2019 = 5 pts.

Application and/or Materials Incomplete or Late = 0 pts.; application rejected by SCEH

Applicant/Project	Application in eSnaps by 8/19/19	HUD CoC APR Report	ESG Application Report	HUD Correspondence	Score
Crittenton Center - Project Help PSH					
Heartland Counseling - PSH					
CSADV - RRH					
Center For Siouxland - Bridges West TH					
ICA - HMIS					
ICA - Coordinated Entry					

New Permanent Housing Projects

Project Scoring Summary

Performance/Scoring Measure (Max. Pts. Available)			
Agency Experience (3 pts.)			
Project Detail (10 pts.)			
Housing First (8 pts.)			
Low Barrier to Entry (4 pts.)			
Low Barrier for Termination (4 pts.)			
Supportive Services (10 pts.)			
Performance Measures (8 pts.)			
Budget (20 pts.)			
Application Submission Timeliness (5 pts.)			

TOTAL COMBINED SCORE (72 pts.)
TOTAL COMBINED SCORE - PERCENTAGE

0	0	0	0	0
0.00	0.00	0.00	0.00	0.00

New Permanent Housing Projects

Agency Experience/Qualifications

Note: Calculations based on GY 2020-2021 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

PSH/RRH Scoring:					
Yes = 1 pt.					
No = 0 pts.					
Permanent Housing Projects	Experience with managing federal grants effectively	Experience leveraging funds from other govt. and private sources	Adequate organization, management, and accounting structure	Total "Yes" responses	Score
					0
					0

New Permanent Housing Projects

Project Detail - Project Type, Housing Type, Target Population

Note: Calculations based on GY 2020-2021 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

PSH/RRH Scoring:							
Yes = 2 pts.							
No = 0 pts.							
		Apartments or single family					
Permanent Housing Projects	PSH or RRH	homes/ duplexes	100% CH	100% from ES or street	100% HH w/ children	Total "Yes" responses	5

Total 1BR Units	Total Units larger than 2BR	_	Total beds for HH w/ children

New Permanent Housing Projects

Increase Housing Stability - Housing First/ Low Barrier

Note: Calculations based on GY 2020-2021 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

PSH/RRH Housing First Scoring:

Yes = 2 pts.

No = 0 pts.

	Project will quickly and successfully connect	Project has no barriers to program entry (based on low barrier scores	Project has no	supportive services to maximize housing stability and prevent returns to		Total "Yes"	
Permanent Housing Projects	connect clients to PSH		to program termination	to homelessness		Total "Yes" responses	Score
					·		0
							0

PSH/RRH Low Barrier Project Entry Scoring:

Yes = 1 pt.

No = 0 pts.

Permanent Housing Projects	Entry not denied for too little or no income	Entry not denied for active or history or substance abuse	Entry not denied for criminal record with exception for state- mandated restrictions	Entry not denied for fleeing domestic violence	Total "Yes" responses	Score
						0
						0

PSH/RRH Low Barrier Project Termination Scoring:

Yes = 1 pt.

No = 0 pts.

		Clients not			Clients not		
	Clients not	terminated	Clients not		terminated for		
	terminated for	for not	terminated for	Clients not	any other		
	non-	making	loss of income	terminated for	activity no		
	participation	progress on	or failure to	being a victim of	covered in a		
	in supportive	a service	increase	domestic	typical lease	Total "Yes"	
Permanent Housing Projects	services	plan	income	violence	agreement	responses	Score
							0
							0

IA-500 SCEH CoC 2019 New Applicants Performance Charts New Permanent Housing Projects

Supportive Services - Type, Provided by

Note: Calculations based on GY 2020-2021 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Supportive Services Scoring:

1 pt. per service up to 10 points for SS

provided by app	licant or applicant referral			
Project	Supportive Service	Provided by Applicant	Applicant Referral	Score
	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 Training			
	Mental Health Services			
	Outpatient Health Serivces			
	Outreach Services			
	Substance Abuse Treatment Services			
	Transportation			
	Utility Deposits			
	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 Training			
	Mental Health Services			
	Outpatient Health Serivces			
	Outreach Services			
	Substance Abuse Treatment Services			
	Transportation			
	Utility Deposits			

IA-500 SCEH CoC 2019 New Applicants Performance Charts New Permanent Housing Projects

Performance Measures

Note: Calculations based on GY 2020-2021 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Performance Measures Scoring:						
Yes = 2 pts.						
No = 0 pts.						

Permanent Housing Project	80% or more obtain and remain in PH project or exit to other PH destination	55% or more gain or increase their cash income from employment or any non-employment cash source	20% or more are employed	56% or more have obtain non-cash/ mainstream benefits	Score

New Permanent Housing Projects

Financial Management, Cost Per Client, Program/Shelter Capacity

Note: Calculations based on GY 2020-2021 Application

For all performance charts, please review all numbers from your application and email susan.mcguire@centerforsiouxland.org if corrections are needed.

Budget Categories/Percentages

Leasing/Rental Assistance - >75% - 5 pts.

Operations - <10% - 5 pts.

Supportive Services - <25% - 5 pts.

Admin - <7% = 5 pts.

Applicant/Project	Total Budget	Total Leasing/ Rental Assistance	% of Total Budget	Total Operations	% of Total Budget	Total Supportive Services	% of Total Budget	Admin	% of Total Budget	Score	Average Cost per Client Served
			#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		
			#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		

Note: Calculations based on FY2019 application

Shelter Capacity - not scored

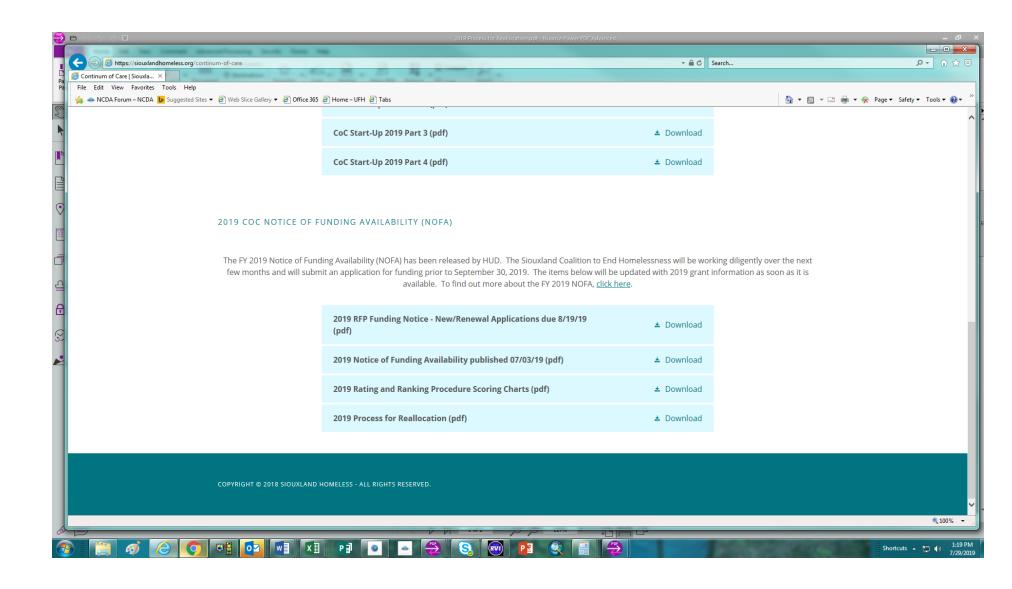
Sherier Capacity - not scored									
Applicant/Project	Total # of Clients to be served	Total # Singles/Couples to be served	Households w/ Children to be served	# of beds available	# of 1BR units available	# of 2BR units available	# units >2BR available		
	0	0		0					

Application/Report Submission Scoring

Application and All Materials Complete and submitted by 5:00 p.m., Monday, August 19, 2019 = 5 pts.

Application and/or Materials Incomplete or Late = 0 pts.; application rejected by SCEH

Application and/or Materials incomplete or	sheation and/or waterials incomplete of Eate = 0 pts.; application rejected by SCEII												
	Application in eSanps by 8/12/16												
Applicant/Project	eSanps by 8/12/16									Score			
		_											



CoC Reallocation Plan Siouxland Coalition to End Homelessness

Voluntary Reallocations:

Wholly voluntary reallocation: An applicant may voluntarily choose to reallocate funds from an existing renewal project, to free additional funds for one or more new projects.

- The applicant may choose to reallocate all or a portion of their renewal funds to create a new project(s).
- o Projects Impacted:

Total Reallocated:

All funds freed through voluntary reallocations may be made available for one or more new projects. If no new project applications are submitted, funds will remain available for the original renewal projects.

If the same applicant wishes to apply for a new project using those same funds, the following parameters apply:

- o The applicant will be required to submit a new project application in eSnaps following all usual HUD requirements for new projects.
- o The Siouxland Coalition to End Homelessness retains final approval for the new project to be included in the official Consolidated Application to HUD.
- o If, for any reason, the Siouxland Coalition to End Homelessness does not approve the new project, the same applicant may instead submit the original renewal project instead. In this way, the applicant choosing to voluntarily reallocate to a new project avoids the risk that the new project will be rejected by the Siouxland Coalition to End Homelessness and funds lost as a result.
- o All projects are subject to final consideration by HUD for funding. Approval by the Siouxland Coalition to End Homelessness does not guarantee that a project will be funded by HUD.
- o The applicant may also choose to compete for a portion or all of the funds available to the CoC through bonus funds. In this case, the applicant would be subject to competitive review along with other new project applicants. Any additional funding will depend on the scoring. If the applicant does not score well enough to be competitive for additional funding, it may still submit the new project using just their own voluntarily reallocated funds.

If another applicant wishes to apply for a new project using the reallocated funds, the following parameters apply:

- o The applicant will be required to submit a new project application in eSnaps following all usual HUD requirements for new projects.
- o The Siouxland Coalition to End Homelessness retains final approval for the new project to be included in the official Consolidated Application to HUD.
- o All projects are subject to final consideration by HUD for funding. Approval by the Siouxland Coalition to End Homelessness does not guarantee that a project will be funded by HUD.

Involuntary Reallocations:

Full or Partial Reallocation for low scoring or lower performing project: The SCEH may reallocate funds in whole or in part from eligible renewal projects to create one or more new projects without decreasing the CoC's ARD (Annual Renewal Demand).

- O Projects impacted:

Total Reallocated:

- o Projects with recaptured funds may be subject to having the amount of recaptured funds reallocated to new PH projects.
- o Funds from low/the lowest scoring project(s) and/or from lower performing projects may be involuntarily reallocated to higher scoring new PH projects that will serve chronically homeless individuals and families, including unaccompanied youth, and RRH projects that will serve homeless families and individuals, including unaccompanied youth, coming directly from the streets or emergency shelters or fleeing domestic violence situations.
- O Project applicants that are subject to partial involuntary reallocation must develop a plan to continue with their renewal projects, with the reduced level of funding. This include HUD contract compliance for numbers of persons served and the types of services provided. It may be possible to seek a contract amendment from HUD for some changes. Applicants should contact their HUD representative to discuss any options for amendment. If the reduction in funding will result in loss of assistance for persons currently served by the program, the applicant must develop a transition plan for these persons. Any concerns should be brought to the CoC.
- O If there are no applications for new project applications, funds will remain available for the original renewal projects.

Applicant: Sioux City/Dakota, Woodbury Counties CoCIA-500Project: IA-500 CoC Registration FY2019COC_REG_2019_170570

Before Starting the Project Listings for the CoC Priority Listing

The FY 2019 CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be submitted prior to the CoC Program Competition deadline as required by the FY 2019 CoC Program Competition NOFA.

The FY 2019 CoC Priority Listing includes the following:

- Reallocation forms must be completed if the CoC is reallocating eligible renewal projects to create new projects as described in the FY 2019 CoC Program Competition NOFA.
- New Project Listing lists all new project applications created through reallocation, the CoC Bonus, and DV Bonus that have been approved and ranked or rejected by the CoC.
- Renewal Project Listing lists all eligible renewal project applications that have been approved and ranked or rejected by the CoC.
- UFA Costs Project Listing applicable and only visible for Collaborative Applicants that were designated as a Unified Funding Agency (UFA) during the FY 2019 CoC Program Registration process. Only 1 UFA Costs project application is permitted and can only be submitted by the Collaborative Applicant.
- CoC Planning Project Listing Only 1 CoC planning project is permitted per CoC and can only be submitted by the Collaborative Applicant.
- YHDP Project Listing lists the eligible YHDP renewal project for the CoC that must be approved and ranked or rejected by the CoC.
- HUD-2991, Certification of Consistency with the Consolidated Plan Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

 Things to Remember:
- All new, renewal, and YHDP projects must be approved and ranked or rejected on the Project Listings.
- Collaborative Applicants are responsible for ensuring all project applications are accurately appearing on the Project Listings and there are no project applications missing from one or more Project Listings.
- If a project application(s) is rejected by the CoC, the Collaborative Applicant must notify the project applicant(s) no later than 15 days before the CoC Program Competition application deadline outside of e-snaps and include the reason for rejection.
- For each project application rejected by the CoC the Collaborative Applicant must select the reason for the rejection from the dropdown provided.
- If the Collaborative Applicant needs to amend a project application for any reason after ranking has been completed, the ranking of other projects will not be affected: however, the Collaborative Applicant MUST ensure the amended project is returned to the applicable Project Listing AND re-rank the project application BEFORE submitting the CoC Priority Listing to HUD in e-snaps.

Additional training resources are available online on the CoC Training page of the HUD Exchange at: https://www.hudexchange.info/resource/2916/project-priority-listing-cocconsolidated-application/

Applicant: Sioux City/Dakota, Woodbury Counties CoCIA-500Project: IA-500 CoC Registration FY2019COC_REG_2019_170570

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2019 CoC Priority Listing Detailed Instructions and FY 2019 CoC Priority Listing Navigational Guide on the HUD Exchange at https://www.hudexchange.info/programs/e-snaps/. Submit technical question to the HUD Exchange Ask A Question (AAQ) at https://www.hudexchange.info/program-support/my-question/.

Collaborative Applicant Name: City of Sioux City

2. Reallocation

Instructions:

For guidance on completing this form, please reference the FY 2019 CoC Priority Listing Detailed Instructions and FY 2019 CoC Priority Listing Navigational Guide on the HUD Exchange at https://www.hudexchange.info/programs/e-snaps/. Submit technical question to the HUD Exchange Ask A Question (AAQ) at https://www.hudexchange.info/program-support/my-question/.

2-1. Is the CoC reallocating funds from one or Momore eligible renewal grant(s) that will expire in calendar year 2020 into one or more new projects?

Continuum of Care (CoC) New Project Listing

Instructions:

Prior to starting the New Project Listing, Collaborative Applicants should carefully review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide, both of which are available at: https://www.hudexchange.info/resource/2916/project-priority-listing-cocconsolidated-application/

To upload all new project applications that have been submitted to this CoC Project Listing, click on the ""Update List"" button. This process may take a few minutes based upon the number of new projects submitted by project applicant(s) to your CoC in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the New Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

Project Name	Date Submitte d	Comp Type	Applican t Name	Budget Amount	Grant Term	Rank	PH/Reall oc	PSH/RR H	Expansi on
This list contains no items									

Continuum of Care (CoC) Renewal Project Listing

Instructions:

Prior to starting the New Project Listing, Collaborative Applicants should carefully review the "CoC Priority Listing Detailed Instructions" and the "CoC Project Listing Instructional Guide", both of which are available at: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources.

To upload all renewal project applications that have been submitted to this Renewal Project Listing, click on the "Update List" button. This process may take a few minutes based upon the number of renewal projects that need to be located in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the sole responsibility for ensuring all amended projects are resubmitted and appear on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

need for all renewa	there is a demonstrated all permanent supportive housing and rapid ts listed on the Renewal Project Listing.	X
	Applicant does not have any renewal permanent sing or rapid re-housing renewal projects.	

Project Name	Date Submitt ed	Grant Term	Applica nt Name	Budget Amount	Rank	PSH/RR H	Comp Type	Consoli dation Type	Expansion Type
Iowa's Continuu m	2019-08- 16 14:29:	1 Year	Institute for Com	\$43,156	1		HMIS		
Bridges West Tran	2019-08- 16 15:13:	1 Year	Center For Siouxlan d	\$130,609	4		ТН		
Siouxlan d Coordin	2019-08- 19 13:00:	1 Year	Institute for Com	\$186,608	2		SSO		

		·
Project Priority List FY2019	Page 5	09/03/2019

Rapid Rehousi ng	2019-08- 30 15:13:	1 Year	Council on Sexual	\$156,884	6	RRH	PH	
Project Help PSH	2019-08- 30 15:34:	1 Year	Crittento n Center	\$53,553	5	PSH	PH	
Heartlan d PSH	2019-09- 03 10:19:	1 Year	Heartlan d Counsel.	\$170,658	3	PSH	PH	

Continuum of Care (CoC) Planning Project Listing

Instructions:

Prior to starting the CoC Planning Project Listing, Collaborative Applicants should carefully review the "CoC Priority Listing Detailed Instructions" and the "CoC Project Listing Instructional Guide," both of which are available at: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources.

To upload the CoC planning project application that has been submitted to this CoC Planning Project Listing, click on the "Update List" button. This process may take a few minutes as the project will need to be located in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review the CoC Planning Project Listing, click on the magnifying glass next to view the project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon.

Only one CoC Planning project application can be submitted by a Collaborative Applicant and must match the Collaborative Applicant information on the CoC Applicant Profile. Any additional CoC Planning project applications must be rejected.

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

Continuum of Care (CoC) YHDP Renewal Project Listing

Instructions:

Prior to starting the New Project Listing, Collaborative Applicants should carefully review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide, both of which are available at: https://www.hudexchange.info/resource/2916/project-priority-listing-cocconsolidated-application/

To upload all new project applications that have been submitted to this CoC Project Listing, click on the ""Update List"" button. This process may take a few minutes based upon the number of new projects submitted by project applicant(s) to your CoC in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the New Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Rank	PSH/RRH
This list contains no items							

Funding Summary

Instructions

For additional information, carefully review the "CoC Priority Listing Detailed Instructions" and the "CoC Priority Listing Instructional Guide", both of which are available at: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources.

This page contains the total budget summaries for each of the project listings for which the Collaborative Applicant approved and ranked or rejected project applications. The Collaborative Applicant must review this page to ensure the totals for each of the categories is accurate. The "Total CoC Request" indicates the total funding request amount the Collaborative Applicant will submit to HUD for funding consideration. As stated previously, only 1 UFA Cost project application (for UFA designated Collaborative Applicants only) and only 1 CoC Planning project application can be submitted and only the Collaborative Applicant designated by the CoC is eligible to request these funds.

Title	Total Amount
Renewal Amount	\$741,468
Consolidated Amount	\$0
New Amount	
CoC Planning Amount	
YHDP Renewal	
Rejected Amount	\$0
TOTAL CoC REQUEST	\$741,468

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan	Yes	IA 500 Con Plan C	09/03/2019
FY 2017 Rank (from Project Listing)	No		
Other	No		
Other	No		

Attachment Details

Document Description: IA 500 Con Plan Certification

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

IA-500

Submission Summary

WARNING: The FY2017 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.

WARNING: The FY2017 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.

Page	Last Updated
Before Starting	No Input Required
1A. Identification	08/19/2019
2. Reallocation	09/03/2019
5A. CoC New Project Listing	No Input Required
5B. CoC Renewal Project Listing	09/03/2019
5D. CoC Planning Project Listing	No Input Required
5E. YHDP Renewal Project Listing	No Input Required
Funding Summary	No Input Required
Attachments	09/03/2019
Submission Summary	No Input Required

Project Priority List FY2019	Page 12	09/03/2019

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Type or clearly print the following information:)

IA-500 Sioux City/Woodbury, Dakota Counties CoC	
See Attached List	
Sioux City, IA	
Woodbury County, IA	
Dakota County, NE	
HUD - Continuum of Care Program	
City of Sioux City, IA	
Robert Padmore	
City Manager	
221KPL	
08/30/2019	
	See Attached List Sioux City, IA Woodbury County, IA Dakota County, NE HUD - Continuum of Care Program City of Sioux City, IA Robert Padmore City Manager

HUD-2991 Certification of Consistency with the Consolidated Plan IA-500 Sioux City/Dakota, Woodbury Counties CoC FY 2019 Project Listing

Project Sponsor Project Name

1. Center For Siouxland Bridges West Transitional Housing (TH)

2. Council On Sexual Assault & Domestic Violence Rapid Rehousing Project (PH-RRH)

3. Crittenton Center Project Help Permanent Supportive Housing (PH-PSH)

4. Heartland Counseling Heartland PSH (PH-PSH)

5. Institute for Community Alliances I-COUNT (HMIS)

6. Institute for Community Alliances Siouxland Coordinated Entry (SSO)