

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:

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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

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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

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
Other:(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

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 on-going, 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 on-going, 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

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

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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

	Not Applicable
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1C-2. CoC Consultation with ESG Program Recipients.

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

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 Consolidated Plan Jurisdictions. Yes to both

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

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 ESG-funded 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.,**

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 HousingIowa Conference. The DV providers' staff are trained in trauma informed care and certified domestic abuse advocates through the state of Iowa. 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,

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.

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.

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

Applicants must indicate whether the CoC implemented an anti-discrimination policy and conduct training:

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

***1C-6. Criminalization of Homelessness.**

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

1. Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
2. Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
3. Engaged/educated local business leaders:	<input checked="" type="checkbox"/>
4. Implemented communitywide plans:	<input checked="" type="checkbox"/>
5. No strategies have been implemented:	<input type="checkbox"/>
6. Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

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

Applicants must:

- 1. demonstrate the coordinated entry system covers the entire CoC geographic area;**
- 2. demonstrate the coordinated entry system reaches people who are least likely to apply for homelessness assistance in the absence of special outreach; and**
- 3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner.**

(limit 2,000 characters)

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.

1D. Continuum of Care (CoC) Discharge Planning

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

1E. Local CoC Competition

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

Applicants must indicate whether the CoC:

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

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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	<input checked="" type="checkbox"/>	1. Email	<input checked="" type="checkbox"/>
2. Mail	<input type="checkbox"/>	2. Mail	<input type="checkbox"/>

3. Advertising in Local Newspaper(s)	<input type="checkbox"/>	3. Advertising in Local Newspaper(s)	<input type="checkbox"/>
4. Advertising on Radio or Television	<input type="checkbox"/>	4. Advertising on Radio or Television	<input type="checkbox"/>
5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>	5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>
6. Did Not Publicly Post Review and Ranking Process	<input type="checkbox"/>	6. Did Not Publicly Post CoC Consolidated Application	<input type="checkbox"/>

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

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.

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/>

Resources:

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

1F-1 DV Bonus Projects.

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

Applicant Name	DUNS Number
This list contains no items	

2A. Homeless Management Information System (HMIS) Implementation

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/>

Resources:

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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:

**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 submitted its LSA data to HUD in HDX 2.0. Yes

***2A-4. HIC HDX Submission Date.**

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

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.

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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-notice>

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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

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 specific measures to identify youth experiencing homelessness in their 2019 PIT count. Yes

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.

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

Applicants must:

1. describe the process the CoC developed to identify risk factors the CoC uses to identify persons becoming homeless for the first time;
2. describe the CoC’s strategy to address individuals and families at risk of becoming homeless; and
3. provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time. (limit 2,000 characters)

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,

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/ESG-funded 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
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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

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 managers 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

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/ESG-funded 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

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 IowaWorks 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. IowaWorks 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 non-employment 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 they 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.

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 re-entering 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:

1. The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	<input type="checkbox"/>
2. The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery).	<input type="checkbox"/>
3. The CoC trains provider organization staff on connecting program participants with formal employment opportunities.	<input type="checkbox"/>
4. The CoC trains provider organization staff on volunteer opportunities for program participants and people experiencing homelessness.	<input type="checkbox"/>

5. The CoC works with organizations to create volunteer opportunities for program participants.	<input type="checkbox"/>
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).	<input type="checkbox"/>
7. Provider organizations within the CoC have incentives for employment.	<input type="checkbox"/>
8. The CoC trains provider organization staff on helping program participants budget and maximize their income to maintain stability in permanent housing.	<input type="checkbox"/>

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)

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.

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

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

Applicants must:

1. describe how the CoC currently rehuses 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

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.	<input checked="" type="checkbox"/>
2. CoC conducts optional training for all CoC- and ESG-funded housing and service providers on these topics.	<input checked="" type="checkbox"/>
3. CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input checked="" type="checkbox"/>
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.	<input checked="" type="checkbox"/>

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)	<input checked="" type="checkbox"/>
2. Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
3. Unsheltered Homelessness	<input checked="" type="checkbox"/>
4. Criminal History	<input type="checkbox"/>
5. Bad Credit or Rental History	<input checked="" type="checkbox"/>

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 youth-focused 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

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

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

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

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

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

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

3B-2b. Housing First for Veterans.

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

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.	<input type="checkbox"/>
2. People of different races or ethnicities are less likely to receive homeless assistance.	<input type="checkbox"/>
3. People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	<input type="checkbox"/>
4. People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	<input type="checkbox"/>
5. There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	<input checked="" type="checkbox"/>
6. The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
7. The CoC did not conduct a racial disparity assessment.	<input type="checkbox"/>

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.	<input type="checkbox"/>
2. The CoC has identified the cause(s) of racial disparities in their homeless system.	<input type="checkbox"/>
3. The CoC has identified strategies to reduce disparities in their homeless system.	<input type="checkbox"/>
4. The CoC has implemented strategies to reduce disparities in their homeless system.	<input type="checkbox"/>
5. The CoC has identified resources available to reduce disparities in their homeless system.	<input type="checkbox"/>
6: The CoC did not conduct a racial disparity assessment.	<input type="checkbox"/>

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

Instructions:

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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**

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.	100%

4A-3. Street Outreach.

Applicants must:

1. describe the CoC’s street outreach efforts, including the methods it

- 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

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 Federal Statutes. No

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.