Before Starting the CoC Application

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

The Collaborative Applicant is responsible for reviewing the following:

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

1A. Continuum of Care (CoC) Identification

Instructions:

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

1A-1. CoC Name and Number: MD-504 - Howard County CoC

1A-2. Collaborative Applicant Name: Howard County Government

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Howard County Government

1B. Continuum of Care (CoC) Engagement

Instructions:

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

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

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

Other:(limit 50 characters)		
Error	Not Applicable	No

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

The CoC's strategy to solicit opinions in the community related to work to end homelessness, include, but are not limited to, hosting:
-Annual NOFA input sessions where all interested community partners are invited to hear the progress made, and provide high-level input for improvement;
-Quarterly Coalition meetings to discuss funding, system and local performance measures, and hear from homeless and crisis service providers with question/answer agenda items;
-Quarterly HMIS Committee meetings to analyze current performance, inflow and outflow of households served by all providers, with opportunity to provide recommendations to improve outcomes;
-Monthly case management roundtable meetings where front-line staff from local providers are able to ask questions related to homeless system resources, share ideas, and recommend changes to increase positive impact to each other's agencies and work.

In response from feedback received throughout the past year, the CoC hosted day-long trainings on both motivational interviewing and trauma informed care from t3. This came as direct feedback from those in the CoC committed to ending homelessness.

As part of the CoC's planning process to update the Plan to End Homelessness, individual interviews with community members (volunteers), focus groups with faith groups, persons with lived experience, and case managers are held to elicit candid opinions and recommendations to the programs and structures in place to support the ending and preventing of homelessness in our CoC.

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

During summer of 2017, the Board to Promote Self-Sufficiency (BPSS) the CoC Board since 2009, decided to separate the CoC responsibilities into a new

Board. Through fall to winter 2017, the Collaborative Applicant worked to develop the new CoC Board governance and structure until the County Code is changed. As part of the reworking, the CoC has reviewed the new Governance structure, and provided input to the development of the new Board. Additionally, methods to become a CoC Coalition and Board member were developed. To solicit new members, staff:
1-Send notifications to the entire Coalition (over 200 emails) to invite to become Board and Coalition members;
2-Invit community partners to officially become voting members of the Coalition;
3-Invit members of the previous Board to join the new Board;
4-Broaden membership categories from previous Board, to reflect more partners;
5-Follow up and ask for recommendations for members, to capture full representation in the geographic area.

Since December 2017, the CoC has invited new members at least twice to get the Board and Coalition operating while legislation is being written and changed. The CoC has invited new Coalition and Board members through emails, phone calls, and in-person meetings. When new providers are identified personal invitations are given; this is not done at specific times but as partners are identified. The CoC has a website that contains opportunities for membership, dates/times of upcoming meetings and annual CoC activities .

Historically, the CoC has had persons with lived experience on the Board. With the update to the Plan to End homelessness, more persons who have experienced homelessness are being engaged through focus groups. At the time of writing this application, persons in shelter and those recently exited to permanent housing are being identified to invite to be a part of the Coalition and Board membership to include greater representation and feedback.

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

The CoC strongly encourages proposals from any eligible entity interested in applying for CoC funds. Each year, the CoC releases requests for applications for both new and renewal projects, through the CoC Lead Agency's website, announcements at meetings and emails to Coalition members. The CoC welcomes questions, provides assistance in completing the application process, and encourages agencies to apply for all funding opportunities. Notice was sent to the CoC via email on July 2, 2018 that the NOFA was open, and requested Letters of Intent to apply for renewal and new Project Applications. Notice was sent through email and website posting. On July 21, 2018 the CA provided the agencies who submitted a Letter of Intent with either the renewal or new project applications (based on what they expressed interest in) and gave the CoC's final deadline of August 6, 2018 for all project applications.

1C. Continuum of Care (CoC) Coordination

Instructions:

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

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

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Not Applicable
Head Start Program	Yes
Funding Collaboratives	Not Applicable
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	No
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

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

The Collaborative Applicant (CA) is also the Grantee that receives State homeless dollars that include HUD-ESG. All CoC and State-ESG applications for funding, reports, and monitoring are reviewed by the Rating and Ranking (RNR) Committee of the CoC Board. This ensures the planning for and

allocation of State-ESG funding is aligned in performance expectations and program outcomes of the CoC. This also ensures that the CoC is able to consult to the awarding of State-ESG grants and funding is aligned with overall system goals. All subgrantees of State-ESG funding participate in the coordinated system, HMIS, and CoC meetings. Responsibilities for the CoC and State-ESG funding are administered by the same Department and staff member, the CoC Manager (CoC Lead).

The Howard County CoC participates in all state meetings related to operating the homeless assistance grant programs, of which State-ESG dollars are included. Howard County CoC staff attend best practice trainings, state interagency council on homelessness meetings, and any ad-hoc meetings related to performance, reporting and data entry into the state data warehouse.

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

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

The CoC has one victim service provider, HopeWorks of Howard County, Inc (HW).

1.With HW, the CoC has developed the following safety and planning protocols:

If a person calls Coordinated Entry actively fleeing domestic violence, intimate partner violence, sexual violence, and/or human trafficking, coordinated entry staff only collect contact information for the household and make a warm referral for the household to contact the DV provider, HW. HWconducts an intake for safe house sheltering. This constitutes the emergency transfer plan which does not document the encounter electronically so to prioritize the households' safety. Once contact is made with the household HW immediately places the household in safe housing. HW has three safe houses for persons with children or single females, and all house locations are confidential and

secured.

If a person calls Coordinated Entry, no personal identifying information is entered into HMIS once the household is identified as having a history of domestic, intimate partner and/or sexual violence, and human trafficking. Rather they enter an anonymous name. Assessment staff enter client information into ServicePoint with their profiles shielded with information only visible to CE staff and the Service Coordinator. They are then referred to housing and services to address their immediate housing crisis.

2.For households entering permanent housing from HW, HW partners with landlords in the community and a Housing Locator to find housing, while honoring client choice in housing location. HW offers ongoing counseling for victims, children and abusers, legal advocacy/representation, a 24/7 helpline, outreach/education, hospital accompaniment, and a pet program. The CoC supports HopeWorks in maximizing client choice by funding rapid rehousing through ESG pass-through funding. This provides households with the ability to live independently with the supports in place to retain safe housing and maintain housing stability.

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

At least monthly trainings and contact is maintained between CoC Lead staff including the HMIS Administrator, on how households served are served in a trauma-informed manner with the highest levels of confidentiality to uphold best practices of both DV and homeless programs. The CoC Services Coordinator trains coordinated entry (CE) staff and provides guidance related to referrals from CE who identify as having a DV history for sheltering or services.

HopeWorks receives ESG pass through funding from the State, as well as VAWA and VOCA dollars, and is strictly prohibited from sharing client data in HMIS. HopeWorks uses a legality assessment and has worked with coordinated entry staff to ensure it aligns with housing and homeless assessment questions, and does not enter personal identifying information into HMIS. For all coordinated entry staff at the CoC's front door, HopeWorks conducts by-stander intervention training, how to encounter persons who are victims of violence, and all new intake staff are trained on the topic of victimization.

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

The CoC uses data anonymously aggregately entered into ServicePoint, in aggregate form, by the domestic violence provider to assess the scope of community needs related to intimate partner violence, stalking and sexual assault. The victim service provider, HopeWorks of Howard County Inc., is the only domestic violence and intimate partner violence provider in Howard

County, and victims of human trafficking. The CoC reviews HopeWork's data related to emergency shelter, rapid rehousing and long-term shelter to evaluate the scope of need in Howard County's CoC.

The CoC uses length of time in emergency shelter, number of days from program acceptance to move-in date for rapid rehousing, and permanent housing exit destinations as data points to evaluate the nature and extent of what is working well for this population and what housing and service interventions are most effective.

The CoC has evaluated the extent and need of best practice programs for DV households, and funds a Rapid Rehousing program, Emergency Shelter and long term safe house sheltering at HopeWorks of Howard County, Inc., the County's victim service provider. Also, using DV presentation numbers, more households are presenting as homeless due to fleeing violence than households are experiencing literal homelessness without violence.

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

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

SSO Coordinated Entry	
RRH	X
Joint TH/RRH	

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

In this past local fiscal year, 281 persons were served in the CoC who had previously experienced domestic violence, or were actively fleeing domestic violence. If a person is experiencing immediate safety concerns, they are transferred to HopeWorks, the domestic and intimate partner violence provider of the CoC. Other CoC partners who participate in the Coordinated Entry System may also serve households fleeing domestic violence if a household does not disclose the nature of their homelessness as related to domestic violence at the front door. Last Local Fiscal Year, HopeWorks served 181 persons in 91 households in their emergency safe house/shelter, 46 persons in 19 households in long-term shelter/transitional housing, and 22 persons in 10 households in rapid rehousing.

1C-4c. Applicants must describe:

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

In this past local fiscal year, 281 persons were served in the CoC who had previously experienced domestic violence, or were actively fleeing domestic violence. Of those, 214 persons in 106 households were served at one of HopeWork's programs (emergency shelter, transitional, and/or rapid rehousing). Based on the number of persons seeking homeless assistance with a report of any (current or past) domestic violence experience all were placed in immediate safe housing and provided trauma and support services to gain and maintain safety in housing. HopeWorks takes warm referrals from the CoC's coordinated entry process and directly at their agency. All of the data used to calculate the number of persons reporting past or current domestic violence through Coordinated Entry and the number of unduplicated persons and households served at HopeWorks is from the CoC's HMIS, ServicePoint. In federal fiscal year 2017, HopeWorks began participating in ServicePoint in an aggregate way and does not provide personal identifying information in records. All records are shielded.

From July 1, 2017 – June 30, 2018, HopeWorks turned away 219 households seeking shelter (including both single men, women and families.) Potential clients are turned away if they are deemed not to be in imminent danger; the violence, abuse or threatened violence occurred in the past and there are no safety concerns at the present time. Victims in imminent danger are always provided shelter, in local hotels/motels if necessary when the emergency shelter is at capacity.

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

National studies demonstrate 25% of women and 7.6% of men will experience abuse and/or violence at some point in their lives. Extrapolating these figures to local census data can provide estimates of the level of potential need within the community. With a population of 321,113, it is estimated that in Howard County 41,022 women and 11, 933 men are experiencing abuse, intimate partner violence or other domestic related violence. Howard County ranks fifth in the State with the number of domestic related crimes reported (2,007 reported in 2016), and has been ranked number five consistently since 2012. Howard County ranks sixth in the State for number of rapes reported. While not all incidences of domestic related crimes necessitate persons needing to flee violence, and subsequently in need of safe housing, are critical enough to file a police report. Overall, the number of reported domestic related crimes and rapes is only a snapshot of the crimes that are committed when compared to

national statistics.

In Local Fiscal Year 2018, HopeWorks had 2,973 total number of calls and/or walk-ins for domestic violence assistance including for advocacy, calls answered at the hotline, lethality assessment calls, request for hospital accompaniment, and direct admissions into residential programs for those who are in immediate danger. This is 48% more calls for services than the number of reported domestic related incidences to the police. Last year, 214 persons in 106 households were actively fleeing violence and were ultimately served as homeless in a residential program at HopeWorks.

While measuring the existing demand for domestic violence safe housing is difficult, last year 106 households were served in HopeWorks residential programs, 2,973 calls were made to HopeWorks requesting some level of help, and only 2,007 reports were made to local police for domestic related crimes. These numbers of calls and reports unfortunately do not include persons fleeing violence related to Human Trafficking, and does not account for the households not reporting domestic crimes to local police, or seek assistance from HopeWorks. In Howard County, estimating demands for services among this population is difficult, but we can see by the volume of reports to the police, and compare the of households served who were fleeing violence at HopeWorks is shocking; continued outreach, education and safe housing is critical to provide to persons who are homeless due to fleeing violence immediate safe and confidential housing such as rapid rehousing to resolve their homelessness and start healing on their road to independence.

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

Additional funding would allow HopeWorks to meet some of the currently unmet needs of our residential clients. Part of our array of residential services includes extended case management and rental subsidies connected to our rapid rehousing (RRH) program. HopeWorks RRH program works with survivors whose needs are best met by obtaining permanent housing for themselves and their family. HopeWorks collaborates with local property owners to secure permanent housing for domestic violence survivors using a three-way agreement that outlines a decreasing rental subsidy agreement. In our current program, HopeWorks pays the initial security deposit and first month's rent for a survivor and then pays the landlord a decreasing amount each month up to a year. The survivors pay the slowing increasing balance of rental funds owed until at the end of the initial lease period, when they pay the total cost of their rent. This allows clients to be stable in housing while they work to secure the level of employment and/or benefits needed to maintain that housing. Throughout the term of the lease, HopeWorks provides on-going case management services to ensure that each client has the emotional and tactical support they need to become fully self-sufficient.

This program provides four units to individuals and families who are homeless due to DV a safe and stable place to live, and has become a critical component in HopeWork's internal continuum – ES, TH, RRH. The addition of the RRH program allows HopeWorks to serve a greater number of families, and to serve them in a more individually responsive manner that alleviates the waitlist strain

on our other programs. As successful as this program has been, the number of families we are able to serve is limited to the amount of dollars awarded. Additional funding will allow us to serve more by making rental subsidies and extended case management services available to more families in crisis.

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

Survivors of DV and their families face multiple hurdles to return to lives of safety, independence and normalcy. The impacts of violence include physical injury as well as emotional and psychological trauma. HopeWorks' (HW) broad range of services are aimed at helping survivors access resources to respond to the violence they have experienced and overcome each barrier. Survivors are empowered to make their own decisions and determine their own future. Often victims have been denied this capacity by an abuser, and by providing clients informed, supported access to services and resources, clients are empowered to regain their ability to make their own choices. Services offered to survivors at HW are designed with improved victim safety and assist in overcoming barriers to independence.

Advocacy: Safety is the first thing discussed when victims call HW hotline, visit HW office, present at local Hospital or in the District courthouse. Is the victim safe from violence now? Does she/he have the means/knowledge/power to stay safe in the future? Advocates discuss the victim's immediate situations, needs and options and resources available. Victims often see themselves as being without any options. Advocates work to help them understand the alternatives to their situation to obtain secure shelter, protection, long terms housing plans, income, education and assistance for their children. In addition to emotional support, advocates work with victims to help them understand violence they have experienced and the impact that violence has had on their lives, is not their fault. They have the power and resources to respond to that violence in ways that will be of most help to them and their families.

Residential: HW Safe House provides emergency shelter to victims and their families fleeing violence or who are in imminent danger. Residential Advocates work with victims similar to the Advocacy Department, and discuss with victims their immediate situations, options and resources. HW Residential Programs offers longer term assistance for clients who need more time to plan for independent living including Transitional Housing, and Rapid Rehousing. Exits to housing are tracked to measure program impact. At HopeWorks 82% of residential clients exited to known housing; of these, 25% exited to permanent housing, 23% exited to family/friends, 31% exited to other emergency shelter/transitional shelter or substance abuse treatment program and 21% returned to housing with their abuser.

Legal: HW legal department offers information and legal advice to enable

victims to maximize their safety. Staff provide an assessment of needs and offer interventions and other remedies that allow victims to choose the course of action that is best for them. Clients have access to: advice, information/referral, consultation, pro se preparation, court accompaniment and direct representation. Obtaining an order of protection or peace order can be a powerful tool in keeping a victim safe, sometimes enabling them to return to a family home free of the presence of their abuser. But such orders alone cannot assure a victim's safety and so all clients are educated on the limits of such orders and resources available to help improve their safety.

Counseling: Helping clients return to healthier levels of functioning and improved safety is the clinical department's goal. The future safety of DV victims is often dependent on the survivor's strengths, self-knowledge and sense of empowerment. DV can result in unhealthy coping behaviors, including: self-blame, emotional shut down, self-harm, loyalty to the abuser(s), denial of personal needs, inability to self-protect, loss of identity, substance abuse, eating disorders and suicidal ideation. With treatment plans, clinicians work with clients to rediscover their own personal strengths and to identify areas of growth and healing.

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?
Howard County Housing Commission	100.00%	Yes-Both	No

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

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

The local PHA does have a homeless admission preference in their written policy (Admin Plan). The homeless definition included in the Admin Plan is not the HEARTH Act Homeless Definition, however, the local PHA takes referrals from Coordinated Entry for all turned over vouchers, and new vouchers issued. CE uses a By-Name list for permanent housing placements, including PSH, RRH and all voucher placements through the PHA. This partnership and policy to work with the CE ensures the homeless admission preference is fully aligned with that of the CoC's goals to rehouse the most vulnerable households when placements are made.

1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)? Yes

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

There is no formal Move on Strategy with all affordable housing providers in the CoC. However, CoC projects have worked informally (continually seeking opportunity) with persons enrolled in PSH programs and actively sought out alternate housing options if they no longer need the intensive supports they did at program acceptance, or need a different type of supportive living environment. This has included moving into HOPWA programs, into PHA-vouchers, and from Project Based into Tenant Based Rental Assistance. The CoC is currently drafting a policy to outline the strategy and process for moving households from PSH into alternate housing programs, how to identify those households, and how to identify affordable housing providers in the jurisdiction including but not limited to the local PHA and low-income housing programs.

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

The CoC's main coordinated entry point is also the County's Emergency Shelter for singles and households with children, Grassroots Crisis Intervention Center, Inc., Grassroots. In summer 2017, Grassroots launched a community-wide program to support LGBTQ youth in the coming out process, which included mediating between family and friends and assessing for housing instability or homelessness. With elevated incidences of homelessness in this population, it was a goal that LGBTQ individuals would have quicker access to housing and services if they were experiencing homelessness. Carrying into this past summer, Grassroots hosted a Safe Space training for agencies in the community to certify individuals in creating and maintaining a safe space for LGBTQ+ persons and households. All agencies invited to attend are active members of the CoC.

1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	No
3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	No

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

Engaged/educated local policymakers:	X
Engaged/educated law enforcement:	X
Engaged/educated local business leaders:	X
Implemented communitywide plans:	
No strategies have been implemented:	
Other:(limit 50 characters)	
Mobile Crisis Team partnering with Police	X
mental health staff at jail & in Police Dept.	X

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

The Coordinated Entry System has two access points that cover the entire region of the CoC; the emergency hotline at the local crisis services agency and the local domestic violence and sexual assault provider. These access points

are available to everyone within the CoC, are advertised in locations most likely to serve those in need of services, and are known throughout the CoC. The crisis services agency operates the CoC's largest and most well-known shelter, and a local drop-in center for homeless and low-income households. It is recognized throughout the community, as well as by the Department of Social Services, faith community, police, hospital, Office of Workforce Development, and 211, as the main resource for homeless assistance. In addition to advertising the CE System, households in need naturally access the crisis hotline. Origins of calls to the crisis hotline have been reviewed, and calls are received from almost every zip code within the CoC. Similarly, the DV access point is the only DV provider in the CoC and so is a natural access point for anyone in the CoC who is fleeing DV. Long-term, unsheltered homeless individuals are believed to be the population least likely to apply for assistance without special outreach. This population is engaged through an appropriately located drop-in center. Additionally, the opening of a locally developed PSH project has demonstrated the CoC's commitment to serving this population and has led to increased interest in the population in accessing the CoC's services. Numerous individuals selected for this project had previously had limited contact with CoC services other than during Code Blue weather events. The CoC has chosen to prioritize those experiencing chronic homelessness for RRH and PSH, with special emphasis on youth and families with minor children. The standard assessment tool for literal homelessness is attached, as is a pilot tool for those experiencing imminent homelessness.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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

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

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

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

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

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

Instructions

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

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

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

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

The CoC's project inventory are all PSH. Most of them are designated in their original funding to house households meeting the chronic homeless definition. The CoC has adopted the Order of Priority in 2016 and makes placements through the By-Name list for PSH. All applicants participate take referrals from the By-Name list, which ranks households by chronic homeless status, and then by length of time and severity of service needs based on the Notice published by HUD Notice CPD-16-11. Howard County considers the severity of needs and vulnerabilities when making placements.
The PSH projects included in 2018 cycle are all operating on the same criteria for severity of needs and vulnerabilities by housing (dedicated units made available by turnover, or original designation) to chronic households. As of the date of this submission, our CoC still has a demand for PSH for the chronically homeless, and the applications within support our CoC's goals to end chronic homelessness.

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

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

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

Reallocation: No

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

The COC reviews existing program performance annually through the project Annual Performance Report (APR), and application Score Cards which evaluates each CoC-funded program for housing performance, including increase of income, exit destinations, number of households/units served, and mainstream benefits received. The CoC-Funded renewal projects are all PSH and predominantly serve households who were chronic upon entry. This year, the Rating and Ranking Committee followed the criteria in place used in past CoC cycles, which included ensuring all project applicants passed HUD's threshold criteria and project requirements, as adopted by the CoC in the Policies & Procedures, if the projects are Housing First, and overall project criteria (participant eligibility, utilization rate, drawdown rate, frequency of funds recaptured by HUD), and if the projects are serving, and committed to serve,

specialized populations set by the CoC. Currently, all but one PSH was operated by one provider, Humanim, Inc., and the projects in the portfolio (if newly funded) are Dedicated projects. Older projects have been converted to Dedicated PLUS to ensure that if persons who were not chronic upon entry into the program, that a likewise vulnerable household is housed with PSH. All projects are committed to following the Order of Priority for placements into all PSH units whether CoC or locally funded to prioritize extremely vulnerable households. For the 2018 cycle, all projects are performing well and are cost effective; therefore, the Committee did not recommend reallocating any renewals into a new project.

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

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

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

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

2A-1. Roles and Responsibilities of the CoC and HMIS Lead. Does your CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Attachment Required.	Yes
2A-1a. Applicants must: (1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and (2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).	page 3-5 of the CoC Policies and Procedures, August 2018
2A-2. HMIS Policy and Procedures Manual. Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required.	Yes
2A-3. HMIS Vender. What is the name of the HMIS software vendor?	Mediware
2A-4. HMIS Implementation Coverage Area. Using the drop-down boxes, applicants must select the HMIS implementation Coverage area.	Single CoC

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

(3) total number of beds in HMIS.

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	125	40	85	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	0	0	0	
Rapid Re-Housing (RRH) beds	0	0	18	
Permanent Supportive Housing (PSH) beds	74	0	74	100.00%
Other Permanent Housing (OPH) beds	0	0	0	

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

NA - the bed coverage is 100%

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

2A-7. CoC Data Submission in HDX. Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 12/01/2017

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

Instructions:

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

2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy).	01/24/2018
2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).	04/30/2018

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

Instructions:

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

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

In the 2018 sheltered PIT count, we implemented the use of provider level surveys resulting in improved data collection and quality among persons utilizing seasonal beds. HMIS data as a data source was also increased by 25% from 2017.

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

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

Beds Added:	0
Beds Removed:	0
Total:	0

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

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

Beds Added:	0
Beds Removed:	0

Total:	0

2C-4. Changes in Unsheltered PIT Count Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct and unsheltered PIT count in 2018, select Not Applicable.	No
2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count?	No

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

Actions taken to implement the 2018 PIT count for the identified subpopulations did not change from 2017. PIT surveys (provider level, client level as well as HMIS) included military service and living situation questions that accurately identified veterans and chronically homeless persons based on the HUD definition. The canvassing of the entire CoC geographic area with a police escort helped to identify locations that families with children park or linger to be obscure. Multiple trainings were held leading up to the PIT count to increase the skills of former and new PIT volunteers around methods for asking survey questions to draw the most quality information. These actions helped to capture a reliable count of veterans, chronically homeless families and individuals and homeless families with children.

3A. Continuum of Care (CoC) System Performance

Instructions

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

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

Number of First Time Homeless as Reported in HDX.	519

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

Howard County's reported 95% of all persons entering HMIS programs were first time homeless at entry in 2016; in 2017, 84% were, a decrease in the overall share. The number of persons has significantly increased due to our DV provider participating in HMIS in aggregate form.

The CoC's coordinated entry staff has researched how to determine when households are more likely to become first time homeless. The CoC Board's coordinated entry workgroup has explored tools to screen/assess persons experiencing housing crises for risks of becoming homeless (first time/returning). The CoC sees trends in persons (including children) with onset of serious long-term medical conditions, loss of housing voucher (with the household having limited to no personal financial resources), loss of employment and households on fixed incomes as risk factors for indicating a household would become homeless.

Families with children in unsheltered living situations are given priority through Coordinated Entry. The CoC's strategies in place to address households who are at risk of becoming homeless include a multi-tiering of interventions: Diversion & Homeless Prevention. Diversion includes training CE points on how to help persons seeking assistance to access tangible immediate resources, ie: referrals to food banks, providing small financial assistance and one-time eviction assistance, and talking through if there are personal/familial relationships to assist to not become homeless. If those efforts do not alleviate the housing crisis, and the household will imminently become homeless without further assistance, they are referred to the appropriate agency for short and medium-term homeless prevention through CE. The Collaborative Applicant is

the Department of Community Resources' Office of Community Partnerships and is responsible for overseeing the CoC's strategies to reduce the number of individuals and families experiencing homelessness for the first time.

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

In 2016, measures for length of time homeless were entry/exits in HMIS and counting those bed nights. In 2016, the average length of time was 126 days, and in 2017 it decreased to 119 days, (-5.5%). In 2017, a new sub-measure was added to reflect updated HMIS standards. The average length of time from onset of homelessness to move-in date was 181 days.

The CoC's current strategies for reducing the LOT households remain homeless:
•Increasing the availability (state and local dollars) of rehousing resources so persons who are literally homeless have quicker access to housing
•Coordinating with partners on targeting housing and support service resources to households with the longest LOT
•Providing flexible funding for first month rent and arrears
•Providing training on Housing First to emphasize the need to move households into housing rather than waiting for households to become ready

The CoC's process for identifying and rehousing households with the longest LOT homeless:
•Maintaining a by-name list for literally homeless persons who need PSH or RRH
•Tracking length of time homeless for persons on the by-name list and referring them to PSH and RRH units as they become available
•Funding a Housing Locator to identify housing for households who are being rehoused from shelter and places not meant for human habitation to expedite their move-in date
•Funding a Landlord Guarantee program (incentive program for landlords) to reduce barriers for households to move into housing, effectively shortening their LOT literally homeless
•Expanding Outreach so that when housing becomes available to persons on the by-name list, all necessary paperwork is in place and persons who are homeless are more easily able to move in to housing

The Collaborative Applicant is the Department of Community Resources' Office of Community Partnerships and is responsible for overseeing the CoC's strategies to reduce the length of time individuals and families remain homeless.

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

	Percentage
Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	59%
Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	99%

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

Over the past three years, the rate of exits to PH from ES, SH and TH has changed from 55% (2015) to 38% (2016) to 59% (2017). This past year is a 21% increase.

Strategy to Increase Rate of Exits to PH: Over the past three years, the rate of exits to PH from ES, SH and TH has changed from 55% (2015) to 38% (2016) to 59% (2017). Existing strategies of funding landlord guarantee program, Housing locator and local subsidies continued this past year. In addition, rapid rehousing was incorporated into the system last fiscal year and is a strategy used to improve exits to PH. The CoC's shift to RRH as a strategy is assisting in the exit rates to PH, including targeting DV population with RRH. The CoC will continue to fund and expand rapid rehousing to increase exits to permanent housing destinations.

This past year, 99% of all households in PSH either retained their PSH or moved to another PH destination. The CoC's strategy to increase the rate of individuals and families in permanent housing projects (PSH and OPH) to retain their permanent housing or exit to permanent housing destinations is to continue:
•Mediating landlord-tenancy issues including negotiating back rent/arrears
•Providing case management supports tailored to the housing needs of the household
•Developing relationships with local landlords and property managers who are willing to rent to high-risk households
•Developing agreements with community partners to intervene with households with acute mental health issues that may impact the ability of households to retain their housing in the community
•Ensuring each PSH provider has SOAR trained staff accessible and able to

support households to retain their benefits or obtain them

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

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

3A-4a. Applicants must:
(1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;
(2) describe the CoC's strategy to reduce the rate of additional returns to homelessness; and
(3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families returns to homelessness.
(limit 2,000 characters)

From 2016 to 2017, the CoC had an overall 6% increase of those who exit return to homelessness within 6 months of exiting. However, the CoC had an overall 6% decrease of those who exit return to homeless within a 12-month period of exiting. The CoC identifies common factors based on:
•Previous homeless episode(s) is an indication that homelessness may reoccur
•For households with homeless episode in housing history who re-present to the homeless system from CE with a housing crisis, the following are common factors: recurrence of the crisis that caused their previous homeless episode, significant loss of employment or income, combined with serious mental illness

The CoC's strategies to reduce the rate of additional returns to homelessness include giving households a higher priority for referral through CE if there is a history of previous homeless episodes; tracking number of homeless episodes of persons on the by-name list and using number of homeless episodes as a prioritization point for placement into PSH and RRH to reduce the household's number of episodes of experiencing homelessness in the future; funding more rapid rehousing programs to ensure those exiting homelessness are connected to supports to reduce their returns to homelessness. In the last year, the CoC added, through reallocation of under and non-performing programs, 18 new rapid rehousing units to the housing inventory.

The Collaborative Applicant is the Department of Community Resources' Office of Community Partnerships and is responsible for overseeing the CoC's strategies to reduce returns to homelessness.

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

overseeing the CoC's strategy to increase job and income growth from employment.
(limit 2,000 characters)

The CoC has strategies and partnerships to create direct access to employment and non-employment cash income. Each homeless service provider incorporates increasing income for households they serve through increasing earned income if the head of household is able bodied or connecting to non-employment supports.

Employment. The CoC funds the County's Office of Workforce Development (OWD) for a dedicated position for homeless households, which increases access for homeless households to employment, job-readiness training, resume writing and job application assistance. OWD partners with area and local employers/businesses and hosts job fairs, and has special employment programs for adult workers, laid off workers, veterans and youth aged 16-26. OWD has a Summer Youth employment program for youth that targets homeless or runaways. Humanim, Inc. has an evidence-based Supported Employment program through their Behavioral Health Department, which provides supports to persons with severe mental illness to work full or part time. They accept referrals from homeless providers. Other providers in the community provide non-evidence-based employment supports similar to the Supported Employment program.

Non-Employment. For persons who may qualify for SSI/SSDI, they are referred to a certified SSI/SSDI Outreach, Access, and Recovery Technical Assistance (SOAR) worker. Each CoC provider has staff who are SOAR trained. For persons waiting on SSDI, case managers assist them to apply for Temporary Disability Assistance Program, a resource available for low-income disabled Marylanders waiting for federal disability. Temporary Cash Assistance, Maryland's TANF program, provides cash assistance to families with children, and case managers assist families to apply for TCA. Case managers also assist families to apply for child support which increases the household non-employment income.

3A-6. System Performance Measures Data Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017 (mm/dd/yyyy)	05/31/2018

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

Instructions

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

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

Total number of beds dedicated as DedicatedPLUS	26
Total number of beds dedicated to individuals and families experiencing chronic homelessness	44
Total	70

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

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

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

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

The CoC's strategies to rapidly rehouse every family with children includes:
1)Funding programs to rapidly rehouse families within 30 days of becoming homeless, including the Shelter Diversion program (United Way), ESG-RRH, and local Rehousing programs.
2)Funding a Housing Locator accessible to all homeless providers through CE to expedite households' move into permanent housig.
3)Meeting with landlords to explain any short to medium term subsidy provided through local flex dollars and ESG-RRH
4)Offering the landlord guarantee program (a local incentive) for landlords that would provide up to $3,000 of assistance if the household vacated the property prior to lease expiration, or damaged the property beyond the security deposit amount
5)Requesting landlord and property management leniency with poor credit/criminal background
6)Partnering with the County's Office of Consumer Protection to mediate issues between households and landlords/property management.

The CoC seeks to address both housing and service needs to ensure housing is maintained after program exit by:
1)Structing the rapid rehousing programs in the CoC to front-load services and connect to as many community resources the household may need
2)Having housing placement/search and service delivery be as client-driven as possible within the parameters of the program, so households have a sense of ownership of their housing once placed and assistance ends
3)Supporting case management in the programs that provide rapid rehousing with training including motivational interviewing and trauma informed care so that providers have access to tools needed to support households in their move into housing and are able to adequately support households in directing their own housing decisions

The CA is the Dept. of Community Resources' Office of Community Partnerships, and is responsible for overseeing the CoC's strategies to rapidly rehouse families with children within 30 days of becoming homeless.

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

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

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

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

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

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

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

The CoC and the Local Children's Board (LCB) have convened a youth homeless workgroup since October 2015, to explore the need, outline existing resources, and partners serving homeless youth in Howard County. The LCB is in each Maryland jurisdiction supported by the Governor's Office for Children and is a group of public and private members working together to ensure a strong continuum of services for families and children in our community;

homeless youth are an LCB priority population. The LCB and CoC Lead Agency are within the same Department in Howard County government. The existing strategies of the Workgroup to increase housing and services for youth experiencing homelessness are:

Collect & Analyze Data: In 2017, the LCB was awarded funding to conduct a Youth Count which included a Street Count & Resource Fair to survey homeless youth (unsheltered/HUD and unaccompanied/State). In spring 2018, the CoC was issued state funding to conduct the second annual Youth Count which was part of a state-wide initiative called Youth REACH. Once the second-year numbers are released by the state lead, we will be able to start analyzing how much housing resources need to be created and paired with existing service, for youth experiencing homelessness per HUD and state definitions.

Outreach & Prioritization: Issuing outreach cards across the community tailored to youth and places youth frequent, alerting of the coordinated entry process. Giving unaccompanied homeless youth priority in the by-name list for PSH and RRH per the Coordinated Entry vulnerability assessment.

Leadership: Realigning the leadership of youth homeless initiatives to fall under the LCB to link the programming and outreach to youth with existing services and resources.

RRH & DV: As part of this application, the DV Bonus project is designating one of the units for unaccompanied youth who are fleeing DV or HT. This will create a dedicated housing option for a significantly vulnerable unaccompanied youth.

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

Evidence of Effectiveness
Collect & Analyze Data:
This is an effective measure since the CoC and LCB did not have a comprehensive picture of the need of homeless youth in Howard County. Once the second-year data is in, we will be able to see over the course of two cycles what types of homelessness are most prevalent to start resourcing to meet the housing needs of this population.

Outreach & Prioritization: the CoC tracks the number of presentations to the coordinated entry system by subpopulations and homeless type ie: literal, imminent, and chronic, etc. The CoC's measure of calculating effectiveness of outreach efforts are to track the number of presentations to the coordinated system and the number of unaccompanied homeless youth on the by-name list for PSH and RRH. This is an effective method as it shows how many of this subpopulation are presenting for housing or are in a housing crisis. Since beginning outreach & prioritization, we have 3 unaccompanied homeless youth

on the by-name list and 19 have been placed in housing. Prioritizing unaccompanied youth for PSH and RRH is an effective strategy as it increases the availability of housing and services to the youth who present. While there is limited outreach capacity in our CoC specifically for unaccompanied homeless youth, tracking and prioritizing for housing is a measure we can document and as we see trends in the numbers and types of unaccompanied homeless youth presenting, we can tailor the outreach accordingly.

Leadership: Aligning the responsibility of the workgroup and homeless youth initiatives under the LCB is an effective strategy as there are youth-programs that are funded through the governor's office that are implemented through the LCB. the CoC will measure effectiveness by tracking the number of unaccompanied homeless youth who are linked with LCB programming, in addition to the existing homeless resources provided by the CoC. The CoC believes this is an appropriate measure since the LCB is funded to provide resources and services to this population; partnering in this way will increase impact of homeless resources, that are limited, while meeting the need of a priority population through an Office's mission that overlaps with that of the CoC.

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

The CoC collaborates with youth education providers in:
1.The Youth Homeless Workgroup is attended by the head of the pupil personnel workers from the local public schools. At the workgroup, school-system data is reviewed and shared which has informed the overall need to gather county-wide data across all definitions. This has also informed other workgroup members of the rising need of homeless students in the schools and increased nonprofit providers connection for homeless students.
2.Howard County Public School System (HCPSS)'s Homeless Advisory Committee (HAC). This group meets monthly and the CoC leadership attends and provides input to the services provided to homeless youth.
3.The HAC has an MOA in place between eleven partners to ensure agencies are collaborating effectively to improve academic outcomes, promote positive working relationships among parties working with homeless children/families, and to develop written agreements between agencies serving homeless children age 0-5 to promote an integrated model of program delivery. The CoC is party to the MOA (effective in 2014).

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

The CoC's has policies and procedures for homeless families with children to

be connected to pupil personnel workers and other school-based services. This is an established process in the CoC policy and procedures and of the Coordinated Assessment System's policies. All case managers at CoC providers link households to school supports upon intake and assessment.

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

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

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

Identifying Veterans is a standard part of the Coordinated Entry assessment. Those presenting for assistance are immediately provided with information on the local SSVF provider. Additionally, the closest VA location has outreach staff who looks for homeless Veterans within the CoC and can be called when Veterans are identified through other sources, such as the main access point, shelter, or the local drop-in center. The local Public Housing Authority does not currently hold any HUD-VASH vouchers, though some Veterans within the CoC have been connected to this resource in other jurisdictions. The PHA is currently undertaking a review of its HCVP waiting list, including assessing homeless and Veteran status. The CoC Lead Agency will follow-up to this review to determine whether HUD-VASH vouchers might be obtained, and through partnership with the PHA, how they will be prioritized and distributed.

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

3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness?	Yes
3B-3.4. Does the CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	No
3B-5. Racial Disparity. Applicants must: (1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless assistance; (2) if the CoC conducted an assessment, attach a copy of the summary.	No

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

Instructions:

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

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

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

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

The Department of Social Services is on the CoC Board, and is an active participant in workgroups such as the Coordinated Entry Workgroup and Youth Homelessness Workgroup. The CoC and DSS continually work together and look for areas of overlap and collaboration around linking homeless households with mainstream benefits such as SNAP, TANF, health insurance, among others. The Day Resource Center connects persons to SNAP, TANF, substance abuse treatment, health insurance. There is a PATH-funded outreach position that is also SOAR trained and assists households to apply for SSI/SSDI.

All homeless assistance providers have at least one SOAR trained staff and

help households in applying for SSI/SSDI. When households apply for SSI/SSDI, they are assisted in applying for TDAP, the state disability assistance program that provide a limited amount of cash assistance while the federal application is pending. Once households obtain SSI/SSDI, they are enrolled in Medicaid/Medicare; those ineligible for SSI/SSDI are connected to state insurance.

The CoC-PSH provider also connect persons with SSI/SSDI, Medicaid/Medicare, and assists persons to apply for other mainstream benefits through a Benefits Coordinator on staff. The CA emails updates regarding mainstream resources at the federal and state level. At Coalition to End Homelessness meetings, mainstream benefits are discussed and providers share where additional resources benefits an be accessed in the community, including energy rental assistance, food pantries/banks, Head Start, SNAP, TANF, and medical assistance.

The organization responsible for overseeing the CoC's strategy for mainstream benefits is the Dept. of Community Resources and Services, Office of Community Partnerships, the CoC Collaborative Applicant.

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

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	7
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach–meaning that the project quickly houses clients without preconditions or service participation requirements.	7
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	100%

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

Since 2008, the local shelter has operated the Day Resource Center (DRC) along Route 1, where most of the literally homeless persons congregate/have camps. The DRC is open three days a week for four hours each day and provides shower and laundry facilities, hot meals, computers, a medical clinic

staffed by volunteer a doctor or nurse, a Community Resource Specialist to assist in obtaining health insurance, birth certificates, state identification, and social security cards. Other services include: assistance with applying for SNAP benefits and VA outreach. A PATH funded position is also located at the DRC to serve homeless persons with a mental health diagnosis.
The CoC's outreach activities are supported by ESG-funded outreach position who: identifies persons living in unsheltered locations, assists persons in obtaining identification, birth certificates and in applying for SSI/SSDI. The position works across 100% of County, targeting persons who are least likely to see assistance at the DRC or other homeless providers, and alerts coordinated entry staff of persons unknown to the system for expedited access to services and housing. The County's ACT Team, available 24/7, takes mental health services to persons with current and past homelessness, psychiatric hospitalization, and incarceration who are unable to access or request assistance. The ACT Team is called when there is a known unsheltered homeless individual with a history of psychiatric hospitalization who is unable to be engaged through other outreach methods. The CoC's outreach activities include the annual PIT which canvasses the entire geographic area for unsheltered persons and conducts surveys. For two years, the CoC has conducted a Youth PIT which canvasses the entire geographic area for unaccompanied and homeless youth, issues paper and e-surveys, conducts public outreach and marketing with flyers, and raises awareness by contacting hospitals, schools, community centers and churches.

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

Coordinated Entry (CE) Cards are posted in places homeless individuals and families with children congregate and access, including DSS offices, the County's MultiService Center (one-stop shop for support services), local public schools, prevention agencies, food pantries, local businesses and community centers.

The CoC's strategy implemented ensures that all persons regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status or disability have access to CoC resources, and are able to access housing and supportive services.

The CoC has taken measures to provide effective communication to all persons regardless of disability or language, as the hotline for CE has a language line for persons with LEP, and all in-person CE access points are accessible for persons with disabilities.

4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as

reported in the Housing Inventory Count (HIC) for 2017 and 2018.

	2017	2018	Difference
RRH beds available to serve all populations in the HIC	0	0	0

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

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

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
1C-5. PHA Administration Plan–Homeless Preference	No	MD-504's PHA Hous...	09/10/2018
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	1.C-8 - Coordinat...	09/10/2018
1E-1. Objective Critiera–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes	1E-1. Objective C...	09/12/2018
1E-3. Public Posting CoC-Approved Consolidated Application	Yes		
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	1E-3. Public Post...	09/12/2018
1E-4. CoC's Reallocation Process	Yes	1E.4 - MD-504 Rea...	09/12/2018
1E-5. Notifications Outside e-snaps–Projects Accepted	Yes	Notification outs...	09/10/2018
1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced	Yes	Notifications Out...	09/10/2018
1E-5. Public Posting–Local Competition Deadline	Yes	1E-5. Public Post...	09/10/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	CoC Policies and ...	09/12/2018
2A-2. HMIS–Policies and Procedures Manual	Yes	MD-504 HMIS Polic...	09/10/2018
3A-6. HDX–2018 Competition Report	Yes	3A.6 - HDX Compet...	09/10/2018
3B-2. Order of Priority–Written Standards	No	3B.2. Order of Pr...	09/10/2018

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

Attachment Details

Document Description: MD-504's PHA Housing Commission Admin Plan - Homeless Preference

Attachment Details

Document Description:

Attachment Details

Document Description: 1.C-8 - Coordinated Assessment Tools - Literal and Imminent

Attachment Details

Document Description: 1E-1. Objective Criteria - Rating and Ranking with Score Card and CoC P+P

Attachment Details

Document Description:

Attachment Details

Document Description: 1E-3. Public Posting - Local Comp-Rate-Rank-Review-Select Criteria

Attachment Details

Document Description: 1E.4 - MD-504 Reallocation from P+P

Attachment Details

Document Description: Notification outside of e-snaps - to CoC and Applicants and Applicants directly

Attachment Details

Document Description: Notifications Outside e-snaps–Projects Rejected or Reduced - N/A - all accepted

Attachment Details

Document Description: 1E-5. Public Posting–Local Competition Deadline - and LOI and App coorespondance

Attachment Details

Document Description: CoC Policies and Procedures incld. Governance

of CoC and HMIS

Attachment Details

Document Description: MD-504 HMIS Policies and Procedures

Attachment Details

Document Description: 3A.6 - HDX Competition Report - 2018 -MD-504

Attachment Details

Document Description: 3B.2. Order of Priority from P+P

Attachment Details

Document Description:

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Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/12/2018
1B. Engagement	09/12/2018
1C. Coordination	09/12/2018
1D. Discharge Planning	09/12/2018
1E. Project Review	09/12/2018
2A. HMIS Implementation	09/12/2018
2B. PIT Count	09/12/2018
2C. Sheltered Data - Methods	09/12/2018
3A. System Performance	09/12/2018
3B. Performance and Strategic Planning	09/12/2018
4A. Mainstream Benefits and Additional Policies	09/12/2018
4B. Attachments	Please Complete

Submission Summary	No Input Required

CHAPTER 6 - ESTABLISHING PREFERENCES & WAITING LIST MAINTENANCE

[24 CFR Part 5, Subpart D; 982.54(d)(1); 982.204, 982.205, 982.206]

INTRODUCTION

It is a HUD requirement and the PHA's objective to ensure that families are placed on and selected from the waiting list for admissions in proper order and thus in accordance with the policies in this Administrative Plan. The maintenance of a viable waiting list ensures that an adequate pool of qualified applicants will be available to utilize program funds in a timely manner. Proper waiting list management is a SEMAP requirement.

HCHC operates a single waiting list for the Housing Choice Voucher Program. The tenant-based waiting list includes local preferences and priorities that the HCHC has adopted to meet local housing needs. With very few exceptions selection from the waiting list and subsequent admission is made in accordance with the process described in this plan

It is important to clarify the following when the HCHC manages a waiting list using preferences:

- HCHC uses a preference system to rank applications on and to select applications from the waiting list.
- Preferences are local criteria approved by the PHA on, giving certain populations priority placement on the waiting list. Preferences are subject to change. This change does not disqualify an application, but will change waiting list placement.
- Applicants are selected from the waiting list based on preference ranking; however a lower ranked applicant may be approved for admission prior to a higher ranked applicant if the higher ranked applicant has not completed the eligibility process.

A. WAITING LIST [24 CFR 982.204]

The HCHC uses a single waiting list for admissions to the Housing Choice Voucher Program. Except for Special Admissions, applicants will be selected from the waiting list in accordance with policies and preferences and income targeting requirements defined in this Administrative Plan. The PHA maintains information that permits proper selection from the waiting list.

The waiting list contains the following information for each applicant listed:

- Applicant Name
- Family Size
- Date and time of application
- Preference claim
- Racial or ethnic designation of the head of household
- Family gross annual income

B. PREFERENCES & SELECTION [24 CFR 982.207]

The HCHC's method for selecting applicants from a preference category leaves a clear audit trail that can be used to verify that each applicant has been selected in accordance with the method specified in the administrative plan.

C. LOCAL PREFERENCES [24 CFR 5.410]

Local preferences will be used to organize and select applicants from the waiting list. Each local preference will be organized by application date and time.

HUD Notice 98-64 eliminates the public notice and comment requirement when changing a preference system. HCHC must notify all applicants about the preference change, giving the applicants the opportunity to qualify for new preferences.

An applicant will not be granted any local preference if any member of the family has been evicted from housing assisted under a 1937 Housing Act program during the past three years because of drug-related criminal activity or felonious charged criminal activity.

The HCHC will grant an exception to such a family if:

- The responsible member has successfully completed a rehabilitation program.
- The evicted person clearly did not participate in or know about the drug-related activity.
- The evicted person no longer participates in any drug related criminal activity.

If an applicant makes a false statement in order to qualify for a local preference, the HCHC will deny the local preference and remove the application from the waiting list.

- The HCHC uses the following Local Preference system: Residency
- Emergency (when subsidy is available):
    - Involuntary displacement
    - Substandard Housing
    - Long Term Homelessness

Residency Preference

Applicants who live, work or have a bona fide offer to work in Howard County on the date of notice that they have reached the top of the waiting list will receive a preference over non-residents.

Acceptable verification of proof of income includes:

A Lease and Utility Bill (the Commission will require additional proof of residency for renting a room, or a portion of the house not recognized as a separate address by the U.S. Postal Service or real property records)

Other acceptable proof of address includes a combination of at least 3 of the following (dated prior to notification that family reached the top of the waiting list):

Social Service Agency Records
Social Security or Other Government Agency Records
School Registration Records for minor children
Banking Records
Credit Card Records
Medical Records
Car Insurance Records

Pay Stubs
Telephone Records

Emergency

Issuance of assistance based on the Emergency preference is contingent upon the availability of funding.
The HCHC will continue to accept applications from families requiring "Emergency" Placement during periods when the waiting list is closed, unless these families are specifically excluded from applying in the notice of Waiting List Closure.

Involuntary displacement is defined as follows:

- An otherwise eligible family, who resides in Howard County, displaced by a no fault fire or flood or other natural disaster when, replacement housing has not been offered by the landlord at a comparable rate, or if the damaged unit is not proposed to be restored to use and replacement housing cannot reasonably be located at or near the pre-disaster housing cost. If the applicant or family is found to have caused the fire or flood, HCHC will deny assistance.
- An otherwise eligible family, who was a resident of a Howard County public housing unit or Howard County voucher holder in a federally declared disaster area at the time that the area was so designated, shall receive a priority on the waiting list for a period up to six months from the date of designation. HCHC reserves the right to limit the number of families assisted under this provision in order to protect the interests of County residents currently waiting to be assisted.
- An otherwise eligible family, who resides in Howard County, displaced by eminent domain proceedings, by any Federal, State, or local governmental body in conjunction with public improvement or development. This does not include any action taken in connection with code enforcement.
- An otherwise eligible family, who resides in Howard County, displaced by an action which is the result of a decision by the courts, requiring the landlord to take certain actions when; 1) it is not possible for the landlord to correct the deficiency with the family in place, and 2) the landlord is not under any obligation to provide alternative housing.
- An otherwise eligible family, who resides in Howard County, displaced by lead paint poisoning confirmed by a knowledgeable medical entity or professional or the court requires the landlord to take abatement action and; 1) it is not possible for the landlord to correct the deficiency with the family in place, and 2) the landlord is not under any obligation to provide alternative housing.
- An otherwise eligible family, who resides in Howard County, displaced by the sale, demolition or discontinuance of a residential property which results in the loss of a housing unit which was previously affordable to a family of low or moderate income, where the HCHC has made a determination that the loss of such housing will create an undue hardship on the families being displaced.
- An otherwise eligible family, who resides in Howard County, displaced due to the threat of physical violence and is participating in a Witness Protection Program. The family must meet HCHC's eligibility criteria regarding illegal drugs and violent criminal activity, and must currently live or work in Howard County. Families must agree to relocate outside of Howard County in order to qualify for this preference, unless they are approved by the

Commission due to special circumstances to remain in Howard County.

- An otherwise eligible family, who resides in Howard County, participating in a local, Federal or State funded demonstration program designated by HCHC as critical to the fair and equitable delivery of housing services to groups who are under represented on the waiting list.

Involuntarily Displaced applicants must also meet the following additional requirements:

- Have vacated or will vacate their unit within no more than six months from the date of certification or verification
- The Action by a housing owner is beyond an applicant's ability to control, and occurs despite the applicant having met all previous conditions of occupancy and is other than a rent increase.
- The owner is not an immediate family relative, there has been a previous rental agreement, and the applicant has not been part of the owner's household immediately prior to application.

Substandard Housing is defined as follows:

- An otherwise eligible family, residing in Howard County, pursuant to a recognized lease, occupancy agreement, deed, title, or other documentation acceptable to HCHC whose housing meets one of the following conditions, as verified by the Department of Inspections, License and Permits, the Department of Public Works, the Health Department, or an equivalent Federal, State, or local governmental body, and will not be corrected by the landlord:
    - Lacks an adequate or safe source of heat,
    - Does not have operable indoor plumbing, or
    - Does not have a usable, flushing toilet.

- An otherwise eligible family, who resides in Howard County, pursuant to a recognized lease, occupancy agreement, deed, title, or other documentation acceptable to HCHC, and the unit has been declared unfit by the Department of Inspections, License and Permits, Department of Public Works, the Health Department or an equivalent Federal, State, or local governmental body, for one or more of the following reasons:
    - Unsafe levels of lead paint, when there is a child below the age of seven;
    - Unsafe levels of asbestos; or
    - The presence of a chemical agent which has been medically documented as harmful to a member of the household.

Substandard Housing is dilapidated (does not provide safe, adequate shelter; has one or more critical defects or a combination of defects requiring considerable repair; endangers the health, safety, and well being of family) if the following exists:

- Does not have operable indoor plumbing;
- Does not have usable flush toilet in the unit for the exclusive use of the family;
- Does not have usable bathtub or shower in unit for exclusive family use;
- Does not have adequate, safe electrical service;
- Does not have an adequate, safe source of heat;

- Should, but does not have a kitchen; or

Has been declared unfit for habitation by a government agency;

Long Term Homelessness:

An otherwise eligible family who for the past 90 days:

- Had a primary night-time residence that was a(n):
  - Supervised public or private operated shelter designated to provide temporary living accommodations,
  - Institution that provides temporary residence for individuals intended to be institutionalized (not incarcerated, i.e. jails and prisons),
  - Public or private place not designated or normally used as regular sleeping place for humans that can be confirmed by the Police or a county Homeless Agency.

This priority for service is limited to a maximum of 15 vouchers during any calendar year, when funding is available and not awarded for a special purpose.

HCHC will use date & time of application as the initial criteria for selecting the 15 homeless families from the waiting list. If all 15 slots are not filled due to a lack of homeless families currently on the waiting list the order of service will be determined based on the ranking criteria established by the county's "Coordinated System". The Housing Commission will review the Coordinated Systems' criteria on an annual basis to ensure that it is consistent with Fair Housing Law and does not provide an unfair advantage to any particular group.

D. INITIAL DETERMINATION OF LOCAL PREFERENCE QUALIFICATION

[24 CFR 5.415]

An applicant's certification that they qualify for a preference will be accepted without verification at the time that the application is submitted for waiting list placement. When the family is selected from the waiting list for the final eligibility determination the claim of a preference will be verified.

If the verification process indicates that an applicant does not qualify for a local preference, the applicant will be returned to the waiting list, but will be given an opportunity for an Informal Review.

If the verification process indicates that an applicant does not qualify for the local preference and the preference claim was the only reason for placement on the waiting list, the family will be removed from the waiting list.

While on the waiting list the applicant's situation may change and affect the family's entitlement to a preference. Applicants are required to notify HCHC in writing of all changes that impact the claim of a preference.

While on the waiting list an applicant may claim an additional preference. The application will be repositioned on the waiting list according to preference ranking and application date and time, except in such cases where the waiting list was only open to families claiming a particular preference. In this case the applicant must prove that they qualify for the first preference before claiming another.

HCHC will notify an applicant in writing of a preference denial. The notification will explain the reason for the denial and advise the applicant of their right to an Informal Review. If the preference denial is upheld as a result of the Informal Review or the applicant does not request the Informal Review, the applicant will be placed on the waiting list without benefit of the preference.

If an applicant falsifies documents or makes false statements in order to qualify for any preference, they will be removed from the waiting list. Applicants making false statements to claim a preference will be ineligible for assistance for three years from the date of their selection from the waiting list.

E. INCOME TARGETING

In accordance with the Quality Housing and Work Responsibility Act of 1998, each fiscal year the HCHC will reserve a minimum of seventy-five percent of its HCVP new admissions for families whose income does not exceed 30 percent of the area median income. HUD refers to these families as "extremely low-income families." The HCHC will admit families who qualify under the Extremely Low-Income limit to meet the income targeting requirement, regardless of preference. This practice is known as income targeting. When necessary to meet this requirement applicants will be skipped on the waiting list until the first extremely low-income family is reached.

The HCHC will limit admission of very low income families to heads of households who are elderly, disabled or to families currently residing in homeless shelters.

The HCHC's income targeting requirement does not apply to low-income families continuously assisted as provided for under the 1937 Housing Act. The HCHC is also exempted from this requirement where the HCHC is providing assistance to low income or moderate-income families entitled to preservation assistance under the tenant-based program as a result of a mortgage prepayment or opt-out.

An applicant reaching the top of the waiting list that has a verified annual income which exceeds the Extremely Low income limit will be permanently removed from the waiting list.

F. TARGETED FUNDING [24 CFR 982.203]

When HUD awards special funding for certain family types, families who qualify are placed on the regular waiting list. When a specific type of funding becomes available, the tenant-based and project-based waiting lists are searched for the first available family meeting the targeted funding criteria. The HCHC reserves the right to use this assistance under the "Interim Use" policy. [See Glossary under "Interim Use" for definition].

Applicants who are admitted under targeted funding which are not identified as a Special Admission are identified by codes in the automated system. The HCHC has the following "Targeted" Programs:

- Mainstream Allocation Plan for Persons with Disabilities
- HOPWA
- Non-Elderly Persons with Disabilities

G. PREFERENCE AND INCOME TARGETING ELIGIBILITY [24 CFR 5.410]

Cross-Listing of Different Housing Programs and Section 8 [24 CFR 982.205(a)]

The HCHC will not merge its waiting lists. However, if the Housing Choice Voucher waiting list is open when the applicant is placed on another waiting list, the HCHC must offer to place the family on its tenant-based assistance list.

Other Housing Assistance [24 CFR 982.205(b)]

Other housing assistance means a Federal, State or local housing subsidy, as determined by HUD, including public housing.

The HCHC may not take any of the following actions because an applicant has applied for, received, or refused other housing: [24 CFR 982.205(b)]:

- Refuse to list the applicant on the HCHC waiting list for tenant-based assistance;
- Deny any admission preference for which the applicant is currently qualified;
- Change the applicant's place on the waiting list based on preference, date of application, or other factors affecting selection under the HCHC selection policy; or
- Remove the applicant from the waiting list.

H. SPECIAL ADMISSIONS [24 CFR 982.54(d)(e), 982.203]

If HUD awards a HCHC program funding that is targeted for specifically named families, the HCHC will admit these families under a Special Admission procedure.

Special admissions families will be admitted outside of the regular waiting list process. They do not have to qualify for any preferences, nor are they required to be on the program waiting list. The HCHC maintains separate records of these admissions.

The following are examples of types of program funding that may be designated by HUD for families living in a specified unit:

- A family displaced because of demolition or disposition of a public or Indian housing project;
- A family residing in a multifamily rental housing project when HUD sells, forecloses or demolishes the project;
- For housing covered by the Low Income Housing Preservation and Resident Home-ownership Act of 1990;
- A family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term; and
- A non-purchasing family residing in a HOPE 1 or HOPE 2 project.

Applicant's who are admitted under Special Admissions, rather than from the waiting list, are identified in the HCHC's database with special codes.

I. EXCEPTIONS FOR SPECIAL ADMISSIONS [24 CFR 982.203, 982.54(d)(3)]

If HUD awards a HCHC program funding that is targeted for specifically named families, the HCHC will admit these families under a Special Admission procedure.

Special admissions families will be admitted outside of the regular waiting list process. They do not have to qualify for any preferences, nor are they required to be on the program tenant-based and the project-based waiting lists. The HCHC maintains separate records of these admissions.

The following are examples of types of program funding that may be designated by HUD for families living in a specified unit:

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- For housing covered by the Low Income Housing Preservation and Resident Home-ownership Act of 1990;
- A family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term; and
- A non-purchasing family residing in a HOPE 1 or HOPE 2 project.

J. FINAL VERIFICATION OF PREFERENCES [24 CFR 5.415]

Preference information on applications will be updated as applicants are selected from a waiting list. At that time, the HCHC will obtain necessary verifications of preference at the interview and by third party verification.

If the preference verification indicates that the applicant does not qualify for the preference the applicant will be returned to the waiting list without the local preference and given an opportunity for an Informal Review.

Changes in an applicant's circumstances while on the waiting list may affect the family's entitlement to a preference. Applicants are required to notify the HCHC in writing when their circumstances change. When an applicant claims an additional preference, the application will be appropriately re-ranked. The exception to this is, if at the time the family applied, the waiting lists were only open to families who claimed that preference. In such case, the applicant must verify that they were eligible for the first preference before they are returned to the waiting lists with the new preference.

K. PREFERENCE DENIAL [24 CFR 5.415]

If the HCHC denies a preference, the HCHC will notify the applicant in writing of the reasons why the preference was denied and offer the applicant an opportunity for an Informal Review. If the preference denial is up-held as a result of the meeting, or the applicant does not request a meeting, the applicant will be placed on the waiting list without benefit of the preference. Applicants may exercise other rights if they believe they have been discriminated against.

If the applicant falsifies documents or makes false statements in order to qualify for any preference, her/his application will be removed from the waiting list. Applicants making false statements to claim a preference will be ineligible to re-apply for assistance for three years from the date of final determination.

L. REMOVAL FROM WAITING LIST AND PURGING [24 CFR 982.204(c)]

HCHC will contact all the applicants on the waiting list periodically to update all applicant information, including preferences. Applicants that do not respond to these types of notices, in a reasonable amount of time as indicated in the notice, will be removed from the waiting list.

Grounds for removal from the waiting list include:

- Failure to respond to two notices that the applicant has reached the top of the waiting list.
- Return of any correspondence marked "unable to forward", "insufficient address" or "addressee unknown".
- Attempted fraud in order to qualify for assistance, or to lower monthly tenant rent payments.
- Failure to sign all required forms or supply necessary documentation to determine eligibility within required agency guidelines (unless HCHC determines that the failure was beyond the applicant's ability to control).

A reasonable accommodation will be made for persons with disabilities, upon request, so that they may fully access and participate in the application and eligibility process.

ASSESSMENT FOR LITERAL HOMELESSNESS

SAFETY & IMMEDIATE NEEDS

DIVERSION CONVERSATION (based on strengths)

UNIVERSAL DATA ELEMENTS
Name
SSN
Date of Birth
Race
Ethnicity
Gender
Veteran
Relationship to Head of Household
Disabling Condition
Living Situation (Homeless Status – Where did you sleep last night)
Chronic Status – Regardless of where you slept last night, how many times have you stayed on the streets, in emergency shelter, or in a Safe Haven in the past three years (including today)? Total number of months on the streets, in emergency shelter, or in a Safe Haven in the past three years? Does the Head of Household have a disabling condition?

HOWARD COUNTY-SPECIFIC RESOURCES
Income less Expenses (Family Stability Initiative)
Forensic History (Dept of Corrections RRH)

TRIAGE TOOL
VI-SPDAT/F-VI-SPDAT/TAY-VI-SPDAT

RRH/PSH PLACEMENT
By-Name List

CE REQUIREMENTS
Confidentiality/ServicePoint release
Grievance/Nondiscrimination procedure

(ServicePoint Entry)

PREVENTION TARGETING TOOL

SAFETY & IMMEDIATE NEEDS

DIVERSION CONVERSATION

Item	Pts
Pregnant	1
Child under age 2	1
No high school diploma or GED	1
Unemployed	1
Not a leaseholder	1
Reintegrating into community from any institutional setting	1
Currently receiving public assistance	2
Any involvement with child protective services	2
Self-reports being evicted or asked to leave by landlord or leaseholder	2
Self-reports applying for shelter in prior 3 months	2
Self-reports having an episode of literal homelessness as an adult	3
Age: 22 or under	2
Age: 23 – 28	1
4 or more moves in prior year	2
1-3 moves in prior year	1
3+ disruptions in family situation (foster care, reported abuse, family assistance) as child	2
1-2 disruptions in family situation (foster care, reported abuse, family assistance) as child	1
Moderate discord with landlord/leaseholder	1
Severe discord with landlord/leaseholder	2
How would you rate the level of conflict you've had with family and friends in the last month – mild, moderate, severe, no contact	*.5, 1, 1.5, 2*

CE REQUIREMENTS
Confidentiality/ServicePoint release
Grievance/Nondiscrimination procedure

(ServicePoint Entry)

Howard County Government

Continuum of Care Policies & Procedures

Effective August 2018

Howard County Continuum of Care Policies & Procedures

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Communication

Methods of sharing information to Steering Committee members (and any interested persons/agencies) between meetings will include:

1. Information sent out via email lists
2. Information added to the CoC website, including:
    a) Information on the work of the Continuum including project ranking for annual competitions
    b) Plans and implementation
    c) Data
    d) Funding availability

CoC Application Process

General Procedure

HUD CoC funds are granted based on a national competition following annual Notice of Funding Availability (NOFA) releases. The Howard County CoC (DCRS Lead Agency) coordinates the process upon receipt of the federal NOFA. Information regarding the NOFA and the community's process and requirements are disseminated to all interested parties (all homeless services and housing providers in the CoC) via the following open solicitation methods:

- Letters/emails
- Responses to public inquiries
- Announcements at meetings
- Posted on the DCRS Lead Agency website

Procedures for Application Submissions

Proposals must be submitted to the DCRS Lead Agency by the designated method, noted in the solicitation, by established due date. Proposals will always be due by 5:00 pm on the due date. Specifics regarding due dates, submission requirements, and other requirements will be posted on DCRS Lead Agency website, https://www.howardcountymd.gov/Departments/Community-Resources-and-Services/Office-of-Community-Partnerships/Continuum-of-Care-COC.

Threshold Criteria and Project Requirements

Projects must pass a threshold requirement review before being submitted to the ERA Committee. Late or incomplete applications will not pass threshold requirements for reviewing and ranking by the ERA Committee. These threshold requirements are:

- Project Applicant
    - Must be eligible to apply for CoC funding: Nonprofit organizations, State, or local government
    - Must not require participation in religious services for CoC-funded programs
    - Must be an eligible contractor for federal funds per https://www.sam.gov/
    - Must have a current tax-exempt status as verified by the IRS
    - Must not owe any overdue tax debts, as documented on IRS 990 submissions to the IRS
    - Must have financial and management capacity to carry out the project(s)
    - Must provide evidence of a homeless or formerly homeless person is on the Board of Directors or in a role in the policy-making process within the Agency

- Must be able to evidence Agency policies and procedures for the administration of CoC funds
- Must participate in Homeless Management Information Systems (HMIS)
- Must administer programs or activities in the most integrated setting appropriate to the needs of homeless persons with disabilities
- Must identify matching funds in the Budget and Budget Narrative
- Must not discriminate against households with a registered sex offender and/or person with a criminal record, including a violent crime, for acceptance into the program even if a child is in the household. It is a CoC goal to eliminate as many barriers for the "hardest-to-house" populations.
- Must provide all required information listed in Required Attachments and be capable of fulfilling all required Work Effort.

- Eligible Project & Activity Type
- Completeness of the application

Project Review and Ranking

HUD requires all Continuum of Cares (CoC) have an evaluation process for ranking all renewal and new projects. In each competition, HUD will state the percentage of renewal amounts that are required to be in either Tier 1 or Tier 2. The Performance Score Card and Assessment (described below) will be used to determine where projects will rank in the Tiers. The ERA will complete all project review and ranking.

Performance Score Card & Assessment

The Performance Score Card (Score Card) is a scoring-based tool based on the Annual Performance Report (APR) that is required annually to HUD. The Score Card reviews project-specific and CoC-wide outcomes, and are directly related to the federal goals to reduce length of homelessness, reduce returns to homelessness and increasing household income. Additional System Performance Measure may be included in future assessments, as HUD releases updates. The Assessment of each project will include:

1. Whether projects operate as "Housing First"
2. Projects with performance outcomes from Annual Performance Reports/HMIS
    - Length of stay
    - % permanent housing exit destinations
    - % increases in income
3. Project Monitoring Criteria/Summaries
    - Participant Eligibility
    - Utilization rates
    - Drawdown rates
    - Frequency or Amount of Funds Recaptured by HUD
4. Project Meeting a need for specialized population services
    - Youth
    - Victims of Domestic Violence
    - Families with Children
    - Persons Experiencing Chronic Homelessness
    - Veterans
    - Persons with Disabilities, including children

Project Reallocation

The DCRS Lead Agency must ensure projects submitted in the CoC Consolidated Application best align with HUD priorities and contribute to a competitive application that secures these dollars in our community. The DCRS Lead Agency will review reallocation options and will consider reallocation if necessary. Reallocation should occur, if one or more of the following is true:

- The results of the Score Card and Assessment show the Project is under, non-performing or is not cost-effective; or
- If current project cannot demonstrate sufficient capacity to successfully carry out the project, or is unable to be compliant with the its goals; or
- If the current NOFA indicates/recommends reallocation (or phase out of) any component or activity; and
- A sufficient plan is in place to secure and maintain permanent housing for current project participants if any projects are reallocated.

If one or more of the above criteria for reallocation is met, a Reallocation Plan will be created to develop the best program to meet the needs of the community. All reallocation decisions to decrease funding, defund or create new projects will be compared to performance criteria and funding priorities to determine the extent to which each project is aligned to achieve such outcomes. Final decisions will be made by the ERA.

Reallocating to New Projects

The DCRS Lead Agency will release new project applications/opportunities for any funds available as a result of reallocation and BONUS grants. This ERA review process will follow the same steps as renewal projects. The DCRS Lead Agency will notify applicants if their project was rejected or accepted prior to the NOFA determined deadline, as recommended by the ERA. All final rules for reallocation will be defined by HUD in the (Notice of Funding Availability) for the CoC Program Competition. Please note the DCRS Lead Agency may need to revise the requirements described and/or request additional information after the NOFA is released.

Using All Available Funds

The ERA and DCRS Lead Agency will do everything possible to ensure that all funds available to the community are applied for. When all applications have been submitted and it is found that the community is not requesting as much money as is available from HUD or no BONUS projects have been submitted, then:

- The CoC staff will email all CoC and other interested parties (all homeless service and housing providers in the CoC) with specifics regarding, how much money is available for what type of programs
- Applications deadlines for these funds will be set after the notice is distributed.

HUD Reporting Requirements

Annual Performance Reports

Annual Performance Reports (APRs), formerly called Annual Progress Reports, are required by HUD on an annual basis to track the progress and accomplishments of HUD's CoC Programs. The APR gathers information on how programs assist homeless persons to obtain and/or remain in permanent housing,

2018 Project Applicant Performance Score Card: Renewal

Howard County Continuum of Care
Project Applicant Performance Score Card: Renewals

Overview
Annually, every CoC funded program is ranked and tiered per HUD guidance. This Score Card's purpose is to ensure that HUD funded programs are providing the highest quality housing and services and that the programs are focused on achieving outcomes to end homelessness.

Overall Program Performance
To provide both project-specific outcome information and CoC-wide contributions, each CoC-funded program will be evaluated based on data entered into HMIS, the HUD Annual Performance Report (APR), and Project Applications submitted. The APR scoring criteria assess outcomes that directly relate to goals set by the HEARTH Act including reducing the length of homelessness, reducing returns to homelessness and increasing income.

NOTES
1) All criteria are scored based on materials submitted by the submission deadline, ie: APR due dates, etc.
2) The Capacity Assessment will be incorporated into the Performance Score Card results.
3) Time frame selected will be the most recently completed grant year or the last fiscal year, whichever ended *sooner*.

Project Name _____ Type of Program **PSH** RRH
Contact Person _____ Date _____
E-mail _____ Phone _____

	Criteria	Source	Max. Points	Scoring/Scaling	Response	Points
0	**Project eligibility**	Meets Project Threshold **See HUD Project Renewal Threshold narrative printed at the end of this score card. Mark each criterion pass or fail.**	11	Pass/Fail/IP 1a Pass/Fail/IP 2a Pass/Fail/IP 1b Pass/Fail/IP 2b Pass/Fail/IP 1c Pass/Fail/IP 2c Pass/Fail/IP 1d Pass/Fail/IP 2d Pass/Fail/IP 2e Pass/Fail/IP 2f Pass/Fail/IP 2g 1 point for each "Pass" .5 point for each "In Process" 0 point for each "Fail"	See criteria on last page	

Adopted from: http://www.endhomelessnesstoday.org/Task-Forces-and-Current-Initiatives.html

2018 Project Applicant Performance Score Card: Renewal

1	**Utilization Rate.** Is the utilization rate at or above 85%? Compare the number of beds requested, and number of persons served	CoC APR Q7a. >Number of Persons Served >>Total **(A)** CoC Project Application **(B)**	5	95-100% = 5 points 90-94% = 3 points 85-89% = 1 point Below 85% = 0 points (A / B = C)	A._ __ Number persons B._ ___ Funded Beds C._ __ %	
1b	**Utilization Rate.** Compare the number of units funded and number of units occupied	CoC APR Q8a >Number of Households >>Total Households **(A)** CoC Project Application **(B)**	0	Information Purposes Only	A.__ __# Households Served B.__ __# Units Funded in Project Application	
2	**Destination upon Program Exit – maintain permanent housing** What AVERAGE percentage of persons served exit to positive housing destinations?	CoC APR Q5a.5 and Q23a and Q23b **23a Exit Destination – More than 90 Days** >Total persons exiting to positive housing destinations – >> PERCENTAGE **(A)** **+** **23b Exit Destination – 90 Days of Less** >Total persons exiting to positive housing destinations – >> PERCENTAGE **(B)**	10	5 points for 91-100% 3 points for 81-90% 1 point for 75-80% 0 points for below 75% A + B = C C / 2 = D If "0" exits, enter 5 points. HMIS excludes certain exit destinations from calculations and that will not be counted against exits.	A._ __ % of persons – more than 90 days - exiting to positive housing destinations + B. ____ % of persons –90 days or less- exiting to positive housing destinations = C. ____ / 2 = E.____AVERAGE % of persons exiting to Permanent Destinations	
3	**Performance Measure:** Adults who Gained or Increased Income from Entry to Annual Assessment/Exit, Average Gain **Performance Measure:** Percent of Persons who Accomplished this Measure Did at least 35% of all participants increase their overall income?	CoC APR Q19a3 **19a3 – "Client Cash Income Change - Income Source - by Entry and Latest Status/Exit"** >Row: Number of Adults with Any Income (i.e., Total Income): >>Column: >>>Total Adults (including those with No Income) **(A)** >>>Performance Measure: Adults who Gained or Increased Income	5	5 points At least 35% increased or maintained income 3 points 30-34% increased or maintained income 2 points 25-29% increased or maintained income 1 point 20-24% increased or maintained income 0 points Less than 20 increased or maintained income	A.____ # Total Adults (including those with No Income) B._____# Performance Measure: Adults who Gained or Increased Income from Entry to Annual Assessment/Exit, Average Gain ---------- C._____% Performance Measure: Percent of Persons who Accomplished this Measure	

Adopted from: http://www.endhomelessnesstoday.org/Task-Forces-and-Current-Initiatives.html

2018 Project Applicant Performance Score Card: Renewal

		from Entry to Annual Assessment/Exit, Average Gain **(B)** >>>Performance Measure: Percent of Persons who Accomplished this Measure **(C)**				
4	**Connecting program participants to mainstream benefits.** Did at least 56% of adults served (current and leavers) increase or maintain their number of mainstream benefits received?	CoC APR Q20b and Q5a2 **20b – Number of Non-Cash Benefit Sources** >Row: 1 + Source(s) >>Column: >>>Benefit at Latest Annual Assessment for Stayers **(A)** >>>Benefit at Exit for Leavers **(B)** **Q5a2. – Number of Persons Served** >Number of Persons Served >>Total **(D)**	3	3 points Yes, at least 56% maintained or increased mainstream benefits 2 points 45-55% maintained or increased mainstream benefits 1 point 33-44% maintained or increased mainstream benefits 0 points Less than 33% maintained or increased mainstream benefits A + B /= C C / D = E	A.__ ___# Benefit at Latest Annual Assessment for Stayers + B._____ # Benefit at Exit for Leavers = C. _____Total Benefits for Stayers and Leavers / D. _____ Total Persons Served = E.____% Connected	
5	**Ending Chronic Homelessness.** Were the total number of PSH beds identified as dedicated/ prioritized for use by CH persons on the 2018 HIC greater than or equal to those identified on the 2017 HIC?	**If "No" is answered, please attach a written explanation.**	4	*For PSH projects* 4 points Yes (Positive #) 0 points No (Negative #) (B – A = C)	A.__ __# 2017 CH beds B._ ___# 2018 CH beds C._ ___ # change between years	
6	**Ending Homelessness among Households with Children & Ending Youth Homelessness.** Were more households served using RRH from 2017 to 2018?	**Use two prior APRs for comparison of RRH households served**	1	*For RRH projects* 1 points Yes (Positive #) 0 points No (Negative #) (B – A = C)	A.___ # 2017 RRH households served B.___ # 2018 RRH households served C.____ # change between years	
7	**Ending Veterans Homelessness.** Did project serve any veterans during the prior APR year?	**List number of veterans served per APR.**	0	Not scored. Please list number of veterans served (in APR).	This metric is not scored but will be used for data collection relevant to Planning. ___# Veterans (total persons in all households)	

Adopted from: http://www.endhomelessnesstoday.org/Task-Forces-and-Current-Initiatives.html

2018 Project Applicant Performance Score Card: Renewal

8a.	**Data Quality.** Is the project reporting high-quality data to HMIS?	CoC APR Q6 – all subsections **Q6a - Data Quality: Personally Identifiable Information** >Calculate Average Percent **(A)**	2	2 points: for a Percent (%) Error Rate at 5% or Lower 0 point: for a Percent (%) Error Rate at 5.01% or Higher	A.__ __ Average % of Error Rate	
		6b - Data Quality: Universal Data Elements >Calculate Average Percent **(B)**	2	2 points: for a Percent (%) Error Rate at 5% or Lower 0 point: for a Percent (%) Error Rate at 5.01% or Higher	B.__ __ Average % of Error Rate	
		6c - Data Quality: Income and Housing Data Quality >Calculate Average Percent **(C)**	6	6 points: for a Percent (%) Error Rate at 5% or Lower 0 point: for a Percent (%) Error Rate at 5.01% or Higher	C._ %_ Average % of Error Rate	
		6d - Data Quality Chronic Homelessness >Calculate Average Percent **(D)**	4	4 points: for a Percent (%) Error Rate at 5% or Lower 0 point: for a Percent (%) Error Rate at 5.01% or Higher	D._ ___ Average % of records unable to calculate	
8b.	**Data Quality: Timeliness** Is the project entering timely data?	6e - Data Quality: Timeliness (BONUS points only)		BONUS POINTS: 5 points: for 80% of data entered within 0-10 days 0 points: for 80% of data entered in 11 days or longer		
9	**Participant Eligibility / Additional Policies.** Does the PSH, RRH project operate as "**low barrier**"?	**Does the project application reflect "Low Barrier" Designation?** **If "No", please attach a written explanation.**	4	4 Points = Yes 0 Points = No	Does the project use a low barrier standard?	
10	**Participant Eligibility / Additional Policies.** Does the PSH, RRH project operate using a "**Housing First**" approach?	**Does the project application reflect "Housing First" Designation?** **If "No", please attach a written explanation.**	4	4 Points = Yes 0 Points = No	Does the project fully use Housing First?	

Adopted from: http://www.endhomelessnesstoday.org/Task-Forces-and-Current-Initiatives.html

2018 Project Applicant Performance Score Card: Renewal

11	**Coordinated Entry/Continuum of Care Participation:** Does the project fully participate in Coordinated System of Homeless Services (CSHS) and the Continuum of Care (CoC)?	**Does the project fully participate in the CSHS, including providing clients referrals to partner agencies, receiving clients through the CoC, and regular participation in the Committees and Workgroups on homeless services?**	6	2 points: Project regularly provides referrals to CSHS Partner Agencies 2 points: Project receives clients from the CSHS through the Review Panel (past) /By-Name List (once open) 2 points: Project regularly participates in Committees and Workgroups on homeless services through the CoC (75% participation is regular)	Detail your project's participation in the Coordinated System of Homeless Services and CoC. **(Information will be confirmed by CoC Manager)**	
	PSH maximum=66 **RRH maximum=63** **(BONUS maximum = 5)**					
	TOTAL					

Adopted from: http://www.endhomelessnesstoday.org/Task-Forces-and-Current-Initiatives.html

2018 Project Applicant Performance Score Card: Renewal

Project Renewal Threshold. A CoC must consider the need to continue funding for projects expiring in CY 2018. Renewal projects must meet minimum project eligibility, capacity, timeliness, and performance standards identified in this NOFA or they will be rejected from consideration for funding. See below for pass/fail elements as will be used for assessment that HUD will use to assess each Project during this competition.

(1) When considering renewal projects for award, HUD will review information in LOCCS; Annual Performance Reports (APRs); and information provided from the local HUD CPD Field Office, including monitoring reports and A-133 audit reports as applicable, and performance standards on prior grants, and will assess projects using the following criteria:

(Note: For Howard County review process, the "in process" selection will be added to indicate the project is working towards meeting the standard)

(a) Whether the project applicant's performance met the plans and goals established in the initial application as amended; Pass or Fail or In Process;

(b) Whether the project applicant demonstrated all timeliness standards for grants being renewed, including that standards for the expenditure of grant funds have been met; Pass or Fail or In Process;

(c) The project applicant's performance in assisting program participants to achieve and maintain independent living and record of success, except HMIS-dedicated projects are not required to meet this standard; Pass or Fail or In Process;

(d) Whether there is evidence that a project applicant has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site. Pass or Fail or In Process;

(2) HUD reserves the right to reduce or reject a funding request from the project applicant for the following reasons:

(a) Outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon; Pass or Fail or In Process;

(b) Audit finding(s) for which a response is overdue or unsatisfactory; Pass or Fail or In Process;

(c) History of inadequate financial management accounting practices; Pass or Fail or In Process;

(d) Evidence of untimely expenditures on prior award; Pass or Fail or In Process;

(e) History of other major capacity issues that have significantly affected the operation of the project and its performance; Pass or Fail or In Process;

(f) History of not reimbursing subrecipients for eligible costs in a timely manner, or at least quarterly; Pass or Fail or In Process; and

(g) History of serving ineligible program participants, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes. Pass or Fail or In Process.

Adopted from: http://www.endhomelessnesstoday.org/Task-Forces-and-Current-Initiatives.html

HOWARD COUNTY
MARYLAND

Allan H. Kittleman, County Executive

Departments

Project Review, Score, and Ranking Procedures, Including Reallocation

The Rating and Ranking Committee (RNR) of the Continuum of Care Board (formerly the Evaluation and Resource Allocation (ERA) Committee of the Board to Promote Self Sufficiency) follows the evaluation guidelines as described in the Howard County Government, Continuum of Care Policies & Procedures, effective August 2018. These are the same evaluation guidelines that have been used for CoC projects in past competitions when the CoC was governed by the Board to Promote Self Sufficiency. Page eight through 10 outlines the process the RNR utilizes to review, rank, reject or reallocate both renewal and any new projects, including available BONUS.

CoC Governance Policies and Procedures

In order to review outcomes based on these criteria (listed on page 10), a Score Care is used that reviews most recent Annual Performance Report (APR) data (directly from ServicePoint, as reported to HUD), as well as HUD's standard pass/fail elements. All project applications will be: scored, ranked based on score,

accepted/rejected/reallocated, then ranked into one of the two tiers, as determined by HUD. Below is a copy of the most recently updated Score Card (updated based on data elements reported in APRs).

Renewal-Score Card-2018

If you have questions, contact: Michelle L. Hippert, MCP, CoC Manager at 410-313-5971 (voice/relay) or email mhippert@howardcountymd.gov .

Continuum of Care (CoC)

Continuum of Care (CoC)

In 1995, HUD began requiring communities to submit one application for McKinney-Vento Homeless Assistance Grants. This streamlined the application process, and encouraged the coordination of housing and support services for agencies providing direct homeless services, and placed emphasis on the development of local CoCs. The CoC is defined as "the local planning body that coordinates housing and support services funding for homeless families and individuals." In 2009, President Obama introduced the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009. This Act amended and reauthorized the McKinney-Vento Homelessness Assistance Act with substantial changes. In August 2012, HUD issued the Interim Rule which provided regulations for how the HEARTH Act of 2009 would be managed and administered.

The Purpose and Activities of the CoC are to:

- Promote community-wide goals to end homelessness;
- Provide funding to quickly rehouse homeless persons;
- Promote access to mainstream resources; and
- Improve self-sufficiency among people experiencing homelessness.

The CoC's Primary Responsibilities are:

- Operating the CoC

- Designating and Operating an Homeless Management Information System (HMIS)
- CoC Planning

The Program Components of the CoC Competitive Grant Program are:

- Permanent Housing (Permanent Supportive Housing and Rapid Rehousing)
- Transitional Housing
- Support Services Only (SSO)
- Homeless Management and Information System (HMIS)

Continuum of Care (CoC) Board & Governance

If you have questions related to the Continuum of Care program, contact: Michelle L. Hippert, MCP, CoC Manager at 410-313-5971 (voice/relay) or email mhippert@howardcountymd.gov .

Mailing Address:
Michelle L. Hippert, MCP, CoC Manager
Continuum of Care Program
Office of Community Partnerships
Howard County Department of Community Resources and Services
9830 Patuxent Woods Drive, Columbia, MD 21046

If you are experiencing homelessness or an immediate housing crisis, please contact Grassroots Crisis Intervention 24 HOUR CRISIS HOTLINE: 410-531-6677 (voice/relay).

Continuum of Care (CoC) Projects | Emergency Food & Shelter Program | State Dept. of Housing and Community Dev. | Housing For All

Final CoC FY2017 Project Awards

2017 CoC Projects	Request	Award	Units
Project Revive	$ 44,568.00	$ 41,880.00	2
Shelter Plus Care	$ 151,158.00	$ 140,826.00	9
McKinney III	$ 229,995.00	$ 229,179.00	13
McKinney I	$ 291,060.96	$ 270,997.00	18
Project Stability	$ 45,752.00	$ 42,876.00	2
Gateway Home	$ 45,752.00	$ 42,876.00	2
Total	**$ 808,285.96**	**$ 768,634.00**	**46**

Previous Submissions

- **FY17 Collaborative Application - MD-504 Draft for Input**
- **Priority Listing - For Public Input 2017**
- **Project Applications:**

1. Project Revive
2. Shelter Plus Care
3. McKinney III
4. McKinney I
5. Project Stability
6. Gateway Home

Howard County, Maryland

George Howard Building

3430 Court House Drive

Ellicott City, MD 21043

ask@howardcountymd.gov

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Howard County Government

Continuum of Care Policies & Procedures

Effective August 2018

Howard County Continuum of Care Policies & Procedures

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    c) Data
    d) Funding availability

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- Must not discriminate against households with a registered sex offender and/or person with a criminal record, including a violent crime, for acceptance into the program even if a child is in the household. It is a CoC goal to eliminate as many barriers for the "hardest-to-house" populations.
- Must provide all required information listed in Required Attachments and be capable of fulfilling all required Work Effort.

- Eligible Project & Activity Type
- Completeness of the application

Project Review and Ranking

HUD requires all Continuum of Cares (CoC) have an evaluation process for ranking all renewal and new projects. In each competition, HUD will state the percentage of renewal amounts that are required to be in either Tier 1 or Tier 2. The Performance Score Card and Assessment (described below) will be used to determine where projects will rank in the Tiers. The ERA will complete all project review and ranking.

Performance Score Card & Assessment

The Performance Score Card (Score Card) is a scoring-based tool based on the Annual Performance Report (APR) that is required annually to HUD. The Score Card reviews project-specific and CoC-wide outcomes, and are directly related to the federal goals to reduce length of homelessness, reduce returns to homelessness and increasing household income. Additional System Performance Measure may be included in future assessments, as HUD releases updates. The Assessment of each project will include:

1. Whether projects operate as "Housing First"
2. Projects with performance outcomes from Annual Performance Reports/HMIS
    - Length of stay
    - % permanent housing exit destinations
    - % increases in income
3. Project Monitoring Criteria/Summaries
    - Participant Eligibility
    - Utilization rates
    - Drawdown rates
    - Frequency or Amount of Funds Recaptured by HUD
4. Project Meeting a need for specialized population services
    - Youth
    - Victims of Domestic Violence
    - Families with Children
    - Persons Experiencing Chronic Homelessness
    - Veterans
    - Persons with Disabilities, including children

Project Reallocation

The DCRS Lead Agency must ensure projects submitted in the CoC Consolidated Application best align with HUD priorities and contribute to a competitive application that secures these dollars in our community. The DCRS Lead Agency will review reallocation options and will consider reallocation if necessary. Reallocation should occur, if one or more of the following is true:

- The results of the Score Card and Assessment show the Project is under, non-performing or is not cost-effective; or
- If current project cannot demonstrate sufficient capacity to successfully carry out the project, or is unable to be compliant with the its goals; or
- If the current NOFA indicates/recommends reallocation (or phase out of) any component or activity; and
- A sufficient plan is in place to secure and maintain permanent housing for current project participants if any projects are reallocated.

If one or more of the above criteria for reallocation is met, a Reallocation Plan will be created to develop the best program to meet the needs of the community. All reallocation decisions to decrease funding, defund or create new projects will be compared to performance criteria and funding priorities to determine the extent to which each project is aligned to achieve such outcomes. Final decisions will be made by the ERA.

Reallocating to New Projects

The DCRS Lead Agency will release new project applications/opportunities for any funds available as a result of reallocation and BONUS grants. This ERA review process will follow the same steps as renewal projects. The DCRS Lead Agency will notify applicants if their project was rejected or accepted prior to the NOFA determined deadline, as recommended by the ERA. All final rules for reallocation will be defined by HUD in the (Notice of Funding Availability) for the CoC Program Competition. Please note the DCRS Lead Agency may need to revise the requirements described and/or request additional information after the NOFA is released.

Using All Available Funds

The ERA and DCRS Lead Agency will do everything possible to ensure that all funds available to the community are applied for. When all applications have been submitted and it is found that the community is not requesting as much money as is available from HUD or no BONUS projects have been submitted, then:

- The CoC staff will email all CoC and other interested parties (all homeless service and housing providers in the CoC) with specifics regarding, how much money is available for what type of programs
- Applications deadlines for these funds will be set after the notice is distributed.

HUD Reporting Requirements

Annual Performance Reports

Annual Performance Reports (APRs), formerly called Annual Progress Reports, are required by HUD on an annual basis to track the progress and accomplishments of HUD's CoC Programs. The APR gathers information on how programs assist homeless persons to obtain and/or remain in permanent housing,

2018 Project Applicant Performance Score Card: Renewal

Howard County Continuum of Care
Project Applicant Performance Score Card: Renewals

Overview
Annually, every CoC funded program is ranked and tiered per HUD guidance. This Score Card's purpose is to ensure that HUD funded programs are providing the highest quality housing and services and that the programs are focused on achieving outcomes to end homelessness.

Overall Program Performance
To provide both project-specific outcome information and CoC-wide contributions, each CoC-funded program will be evaluated based on data entered into HMIS, the HUD Annual Performance Report (APR), and Project Applications submitted. The APR scoring criteria assess outcomes that directly relate to goals set by the HEARTH Act including reducing the length of homelessness, reducing returns to homelessness and increasing income.

NOTES
1) All criteria are scored based on materials submitted by the submission deadline, ie: APR due dates, etc.
2) The Capacity Assessment will be incorporated into the Performance Score Card results.
3) Time frame selected will be the most recently completed grant year or the last fiscal year, whichever ended *sooner*.

Project Name _____ Type of Program **PSH** RRH
Contact Person _____ Date _____
E-mail _____ Phone _____

	Criteria	Source	Max. Points	Scoring/Scaling	Response	Points
0	**Project eligibility**	Meets Project Threshold **See HUD Project Renewal Threshold narrative printed at the end of this score card. Mark each criterion pass or fail.**	11	Pass/Fail/IP 1a Pass/Fail/IP 2a Pass/Fail/IP 1b Pass/Fail/IP 2b Pass/Fail/IP 1c Pass/Fail/IP 2c Pass/Fail/IP 1d Pass/Fail/IP 2d Pass/Fail/IP 2e Pass/Fail/IP 2f Pass/Fail/IP 2g 1 point for each "Pass" .5 point for each "In Process" 0 point for each "Fail"	See criteria on last page	

Adopted from: http://www.endhomelessnesstoday.org/Task-Forces-and-Current-Initiatives.html

2018 Project Applicant Performance Score Card: Renewal

1	**Utilization Rate.** Is the utilization rate at or above 85%? Compare the number of beds requested, and number of persons served	CoC APR Q7a. >Number of Persons Served >>Total **(A)** CoC Project Application **(B)**	5	95-100% = 5 points 90-94% = 3 points 85-89% = 1 point Below 85% = 0 points (A / B = C)	A._ __ Number persons B._ ___ Funded Beds C._ __ %	
1b	**Utilization Rate.** Compare the number of units funded and number of units occupied	CoC APR Q8a >Number of Households >>Total Households **(A)** CoC Project Application **(B)**	0	Information Purposes Only	A.__ __# Households Served B.__ __# Units Funded in Project Application	
2	**Destination upon Program Exit – maintain permanent housing** What AVERAGE percentage of persons served exit to positive housing destinations?	CoC APR Q5a.5 and Q23a and Q23b **23a Exit Destination – More than 90 Days** >Total persons exiting to positive housing destinations – >> PERCENTAGE **(A)** **+** **23b Exit Destination – 90 Days of Less** >Total persons exiting to positive housing destinations – >> PERCENTAGE **(B)**	10	5 points for 91-100% 3 points for 81-90% 1 point for 75-80% 0 points for below 75% A + B = C C / 2 = D If "0" exits, enter 5 points. HMIS excludes certain exit destinations from calculations and that will not be counted against exits.	A._ __ % of persons – more than 90 days - exiting to positive housing destinations + B. ____ % of persons –90 days or less- exiting to positive housing destinations = C. ____ / 2 = E.____AVERAGE % of persons exiting to Permanent Destinations	
3	**Performance Measure:** Adults who Gained or Increased Income from Entry to Annual Assessment/Exit, Average Gain **Performance Measure:** Percent of Persons who Accomplished this Measure Did at least 35% of all participants increase their overall income?	CoC APR Q19a3 **19a3 – "Client Cash Income Change - Income Source - by Entry and Latest Status/Exit"** >Row: Number of Adults with Any Income (i.e., Total Income): >>Column: >>>Total Adults (including those with No Income) **(A)** >>>Performance Measure: Adults who Gained or Increased Income	5	5 points At least 35% increased or maintained income 3 points 30-34% increased or maintained income 2 points 25-29% increased or maintained income 1 point 20-24% increased or maintained income 0 points Less than 20 increased or maintained income	A.____ # Total Adults (including those with No Income) B._____# Performance Measure: Adults who Gained or Increased Income from Entry to Annual Assessment/Exit, Average Gain ---------- C._____% Performance Measure: Percent of Persons who Accomplished this Measure	

Adopted from: http://www.endhomelessnesstoday.org/Task-Forces-and-Current-Initiatives.html

2018 Project Applicant Performance Score Card: Renewal

		from Entry to Annual Assessment/Exit, Average Gain **(B)** >>>Performance Measure: Percent of Persons who Accomplished this Measure **(C)**				
4	**Connecting program participants to mainstream benefits.** Did at least 56% of adults served (current and leavers) increase or maintain their number of mainstream benefits received?	CoC APR Q20b and Q5a2 **20b – Number of Non-Cash Benefit Sources** >Row: 1 + Source(s) >>Column: >>>Benefit at Latest Annual Assessment for Stayers **(A)** >>>Benefit at Exit for Leavers **(B)** **Q5a2. – Number of Persons Served** >Number of Persons Served >>Total **(D)**	3	3 points Yes, at least 56% maintained or increased mainstream benefits 2 points 45-55% maintained or increased mainstream benefits 1 point 33-44% maintained or increased mainstream benefits 0 points Less than 33% maintained or increased mainstream benefits A + B /= C C / D = E	A.__ ___# Benefit at Latest Annual Assessment for Stayers + B._____ # Benefit at Exit for Leavers = C. _____Total Benefits for Stayers and Leavers / D. _____ Total Persons Served = E.____% Connected	
5	**Ending Chronic Homelessness.** Were the total number of PSH beds identified as dedicated/ prioritized for use by CH persons on the 2018 HIC greater than or equal to those identified on the 2017 HIC?	**If "No" is answered, please attach a written explanation.**	4	*For PSH projects* 4 points Yes (Positive #) 0 points No (Negative #) (B – A = C)	A.__ __# 2017 CH beds B._ ___# 2018 CH beds C._ ___ # change between years	
6	**Ending Homelessness among Households with Children & Ending Youth Homelessness.** Were more households served using RRH from 2017 to 2018?	**Use two prior APRs for comparison of RRH households served**	1	*For RRH projects* 1 points Yes (Positive #) 0 points No (Negative #) (B – A = C)	A.___ # 2017 RRH households served B.___ # 2018 RRH households served C.____ # change between years	
7	**Ending Veterans Homelessness.** Did project serve any veterans during the prior APR year?	**List number of veterans served per APR.**	0	Not scored. Please list number of veterans served (in APR).	This metric is not scored but will be used for data collection relevant to Planning. ___# Veterans (total persons in all households)	

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2018 Project Applicant Performance Score Card: Renewal

8a.	**Data Quality.** Is the project reporting high-quality data to HMIS?	CoC APR Q6 – all subsections **Q6a - Data Quality: Personally Identifiable Information** >Calculate Average Percent **(A)**	2	2 points: for a Percent (%) Error Rate at 5% or Lower 0 point: for a Percent (%) Error Rate at 5.01% or Higher	A.__ __ Average % of Error Rate	
		6b - Data Quality: Universal Data Elements >Calculate Average Percent **(B)**	2	2 points: for a Percent (%) Error Rate at 5% or Lower 0 point: for a Percent (%) Error Rate at 5.01% or Higher	B.__ __ Average % of Error Rate	
		6c - Data Quality: Income and Housing Data Quality >Calculate Average Percent **(C)**	6	6 points: for a Percent (%) Error Rate at 5% or Lower 0 point: for a Percent (%) Error Rate at 5.01% or Higher	C._ %_ Average % of Error Rate	
		6d - Data Quality Chronic Homelessness >Calculate Average Percent **(D)**	4	4 points: for a Percent (%) Error Rate at 5% or Lower 0 point: for a Percent (%) Error Rate at 5.01% or Higher	D._ ___ Average % of records unable to calculate	
8b.	**Data Quality: Timeliness** Is the project entering timely data?	6e - Data Quality: Timeliness (BONUS points only)		BONUS POINTS: 5 points: for 80% of data entered within 0-10 days 0 points: for 80% of data entered in 11 days or longer		
9	**Participant Eligibility / Additional Policies.** Does the PSH, RRH project operate as "**low barrier**"?	**Does the project application reflect "Low Barrier" Designation?** **If "No", please attach a written explanation.**	4	4 Points = Yes 0 Points = No	Does the project use a low barrier standard?	
10	**Participant Eligibility / Additional Policies.** Does the PSH, RRH project operate using a "**Housing First**" approach?	**Does the project application reflect "Housing First" Designation?** **If "No", please attach a written explanation.**	4	4 Points = Yes 0 Points = No	Does the project fully use Housing First?	

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2018 Project Applicant Performance Score Card: Renewal

11	**Coordinated Entry/Continuum of Care Participation:** Does the project fully participate in Coordinated System of Homeless Services (CSHS) and the Continuum of Care (CoC)?	**Does the project fully participate in the CSHS, including providing clients referrals to partner agencies, receiving clients through the CoC, and regular participation in the Committees and Workgroups on homeless services?**	6	2 points: Project regularly provides referrals to CSHS Partner Agencies 2 points: Project receives clients from the CSHS through the Review Panel (past) /By-Name List (once open) 2 points: Project regularly participates in Committees and Workgroups on homeless services through the CoC (75% participation is regular)	Detail your project's participation in the Coordinated System of Homeless Services and CoC. **(Information will be confirmed by CoC Manager)**	
	PSH maximum=66 **RRH maximum=63** **(BONUS maximum = 5)**					
	TOTAL					

Adopted from: http://www.endhomelessnesstoday.org/Task-Forces-and-Current-Initiatives.html

2018 Project Applicant Performance Score Card: Renewal

Project Renewal Threshold. A CoC must consider the need to continue funding for projects expiring in CY 2018. Renewal projects must meet minimum project eligibility, capacity, timeliness, and performance standards identified in this NOFA or they will be rejected from consideration for funding. See below for pass/fail elements as will be used for assessment that HUD will use to assess each Project during this competition.

(1) When considering renewal projects for award, HUD will review information in LOCCS; Annual Performance Reports (APRs); and information provided from the local HUD CPD Field Office, including monitoring reports and A-133 audit reports as applicable, and performance standards on prior grants, and will assess projects using the following criteria:

(Note: For Howard County review process, the "in process" selection will be added to indicate the project is working towards meeting the standard)

(a) Whether the project applicant's performance met the plans and goals established in the initial application as amended; Pass or Fail or In Process;

(b) Whether the project applicant demonstrated all timeliness standards for grants being renewed, including that standards for the expenditure of grant funds have been met; Pass or Fail or In Process;

(c) The project applicant's performance in assisting program participants to achieve and maintain independent living and record of success, except HMIS-dedicated projects are not required to meet this standard; Pass or Fail or In Process;

(d) Whether there is evidence that a project applicant has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site. Pass or Fail or In Process;

(2) HUD reserves the right to reduce or reject a funding request from the project applicant for the following reasons:

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(b) Audit finding(s) for which a response is overdue or unsatisfactory; Pass or Fail or In Process;

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Howard County Government

Continuum of Care Policies & Procedures

Effective August 2018

Howard County Continuum of Care Policies & Procedures

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- Must not discriminate against households with a registered sex offender and/or person with a criminal record, including a violent crime, for acceptance into the program even if a child is in the household. It is a CoC goal to eliminate as many barriers for the "hardest-to-house" populations.
- Must provide all required information listed in Required Attachments and be capable of fulfilling all required Work Effort.

- Eligible Project & Activity Type
- Completeness of the application

Project Review and Ranking

HUD requires all Continuum of Cares (CoC) have an evaluation process for ranking all renewal and new projects. In each competition, HUD will state the percentage of renewal amounts that are required to be in either Tier 1 or Tier 2. The Performance Score Card and Assessment (described below) will be used to determine where projects will rank in the Tiers. The ERA will complete all project review and ranking.

Performance Score Card & Assessment

The Performance Score Card (Score Card) is a scoring-based tool based on the Annual Performance Report (APR) that is required annually to HUD. The Score Card reviews project-specific and CoC-wide outcomes, and are directly related to the federal goals to reduce length of homelessness, reduce returns to homelessness and increasing household income. Additional System Performance Measure may be included in future assessments, as HUD releases updates. The Assessment of each project will include:

1. Whether projects operate as "Housing First"
2. Projects with performance outcomes from Annual Performance Reports/HMIS
    - Length of stay
    - % permanent housing exit destinations
    - % increases in income
3. Project Monitoring Criteria/Summaries
    - Participant Eligibility
    - Utilization rates
    - Drawdown rates
    - Frequency or Amount of Funds Recaptured by HUD
4. Project Meeting a need for specialized population services
    - Youth
    - Victims of Domestic Violence
    - Families with Children
    - Persons Experiencing Chronic Homelessness
    - Veterans
    - Persons with Disabilities, including children

Project Reallocation

The DCRS Lead Agency must ensure projects submitted in the CoC Consolidated Application best align with HUD priorities and contribute to a competitive application that secures these dollars in our community. The DCRS Lead Agency will review reallocation options and will consider reallocation if necessary. Reallocation should occur, if one or more of the following is true:

- The results of the Score Card and Assessment show the Project is under, non-performing or is not cost-effective; or
- If current project cannot demonstrate sufficient capacity to successfully carry out the project, or is unable to be compliant with the its goals; or
- If the current NOFA indicates/recommends reallocation (or phase out of) any component or activity; and
- A sufficient plan is in place to secure and maintain permanent housing for current project participants if any projects are reallocated.

If one or more of the above criteria for reallocation is met, a Reallocation Plan will be created to develop the best program to meet the needs of the community. All reallocation decisions to decrease funding, defund or create new projects will be compared to performance criteria and funding priorities to determine the extent to which each project is aligned to achieve such outcomes. Final decisions will be made by the ERA.

Reallocating to New Projects

The DCRS Lead Agency will release new project applications/opportunities for any funds available as a result of reallocation and BONUS grants. This ERA review process will follow the same steps as renewal projects. The DCRS Lead Agency will notify applicants if their project was rejected or accepted prior to the NOFA determined deadline, as recommended by the ERA. All final rules for reallocation will be defined by HUD in the (Notice of Funding Availability) for the CoC Program Competition. Please note the DCRS Lead Agency may need to revise the requirements described and/or request additional information after the NOFA is released.

Using All Available Funds

The ERA and DCRS Lead Agency will do everything possible to ensure that all funds available to the community are applied for. When all applications have been submitted and it is found that the community is not requesting as much money as is available from HUD or no BONUS projects have been submitted, then:

- The CoC staff will email all CoC and other interested parties (all homeless service and housing providers in the CoC) with specifics regarding, how much money is available for what type of programs
- Applications deadlines for these funds will be set after the notice is distributed.

HUD Reporting Requirements

Annual Performance Reports

Annual Performance Reports (APRs), formerly called Annual Progress Reports, are required by HUD on an annual basis to track the progress and accomplishments of HUD's CoC Programs. The APR gathers information on how programs assist homeless persons to obtain and/or remain in permanent housing,

From: Hippert, Michelle L

To: Hippert, Michelle L

Bcc: "Adam Hilton - Bridges (adam@bridges2hs.org)"; "Aimee Olivera-Sanchez"; "Alecia Slahetka - CWS - St. John Evangelical Lutheran Church (tslahetka@aol.com)"; "Alison Zuzak - CWS - Glen Mar United Methodist Church (zuzakal@verizon.net)"; "Alvin Thomas - New Life Assisted Living (alvingthomas@comcast.net)"; "Ana Cisneros - FIRN (acisneros@firnonline.org)"; "Angie McAllister - UWCM (angie.McAllister@uwcm.org)"; "Anna Katz (anna@grassrootscrisis.org)"; "Anne Brinker (ABrinker@cac-hc.org)"; "Anne Dunn - Community Member (anne@spiritofcommunity.net)"; "Barbara Coleman - Legal Aid (bcoleman@mdlab.org)"; "Becki Bowman - Howard County Government (bbowman@howardcountymd.gov)"; "Benjamin Wade - HCPSS (benjamin_wade@hcpss.org)"; Benjamin, Keisha; "Beth Stein - Howard County Government (estein@cac-hc.org)"; "Bill Salganik - Community Advocate (billsalganik@gmail.com)"; "Bita Dayhoff - Howard County Government (bdayhoff@cac-hc.org)"; "Bob Coursey - Community Member (courseybob@yahoo.com)"; "Bola Afolabi - Bridges (bola@bridges2hs.org)"; "Brenda Cohen - Howard Community College (bcohen@howardcc.edu)"; "Brian Perry - Howard County Government (bperry@howardcountymd.gov)"; "Bryan Johnson - On Our Own of Howard County, Inc. 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Subject: CoC NOFA and Projects - draft for your review (2nd email)

Date: Tuesday, August 28, 2018 4:55:00 PM

Attachments: image003.png
Howard County CoC 2018 Application - all for comment - 8.28.18.zip

Importance: High

Zip file included (this time)

Good afternoon CoC,

Finally… I have a completed *draft* of the 2018 Continuum of Care application. Attached in a zip file is:

- Collaborative Application (main application)
- Priority Listing (how we rank the projects and overall $ requested)
- Project Applications:

	Ranking	Project Application Name	Amount	UNITS
Tier 1	1	**Shelter Plus Care**	$ 140,826.00	10
	2	**McKinney III**	$ 229,179.00	13
	3	**McKinney I**	$ 270,997.00	18
	4	**Project Revive**	$ 41,880.00	2
	5	**Project Stability**	$ 39,633.96	2
Tier 2	5	Project Stability	$ 3,242.04	
	6	Gateway Home	$ 42,876.00	2
	7	Expansion Bonus	$ 46,118.00	2
	8	DV Bonus	$ 50,000.00	3
		TOTAL	**$ 864,752.00**	52

All comments and edits are due to me no later than by Wednesday September 5, 2018, NOON.
These documents will be uploaded and available on our website (likely live tomorrow, 8/29) at https://www.howardcountymd.gov/Departments/Community-Resources-and-Services/Office-of-Community-Partnerships/Continuum-of-Care-COC

Should you have any questions, or need the documents in alternate format, please do not hesitate to call or email me.

Best & talk soon!
Michelle

Michelle L. Hippert, MCP, CoC Manager
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From: Hippert, Michelle L
To: "Jesse Guercio (jguercio@humanim.com)"; Karen Booth - Humanim, Inc. (kbooth@humanim.com); Janet Jones - Mental Health Authority (jjones@howardcountymd.gov); Jennifer Pollitt Hill (jpollitthill@wearehopeworks.org); Con Manning - HopeWorks of Howard County (cmanning@wearehopeworks.org)
Subject: FW: CoC NOFA and Projects - draft for your review
Date: Tuesday, September 04, 2018 5:04:00 PM
Attachments: image003.png
Importance: High

Good afternoon,
This serves as your notification that all of the projects submitted for renewal and new projects through this year's NOFA has been accepted and will be submitted in the 2018 application. The project names, amounts and final ranking are below. Should you have any questions, please do not hesitate to call or email me.

- Former Mental Health Authority = S+C
- Humanim, Inc. = McKinney III, McKinney I, Project Revive, Project Stability, Gateway Home, Expansion Bonus
- HopeWorks of Howard County, Inc. = DV Bonus

Much thanks,
Michelle

	Ranking	Project Application Name	Amount	UNITS
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From: Hippert, Michelle L

To: Hippert, Michelle L

Bcc: "Adam Hilton - Bridges (adam@bridges2hs.org)"; "Aimee Olivera-Sanchez"; "Alecia Slahetka - CWS - St. John Evangelical Lutheran Church (tslahetka@aol.com)"; "Alison Zuzak - CWS - Glen Mar United Methodist Church (zuzakal@verizon.net)"; "Alvin Thomas - New Life Assisted Living (alvingthomas@comcast.net)"; "Ana Cisneros - FIRN (acisneros@firnonline.org)"; "Angie McAllister - UWCM (angie.McAllister@uwcm.org)"; "Anna Katz (anna@grassrootscrisis.org)"; "Anne Brinker (ABrinker@cac-hc.org)"; "Anne Dunn - Community Member (anne@spiritofcommunity.net)"; "Barbara Coleman - Legal Aid (bcoleman@mdlab.org)"; "Becki Bowman - Howard County Government (bbowman@howardcountymd.gov)"; "Benjamin Wade - HCPSS (benjamin_wade@hcpss.org)"; Benjamin, Keisha; "Beth Stein - Howard County Government (estein@cac-hc.org)"; "Bill Salganik - Community Advocate (billsalganik@gmail.com)"; "Bita Dayhoff - Howard County Government (bdayhoff@cac-hc.org)"; "Bob Coursey - Community Member (courseybob@yahoo.com)"; "Bola Afolabi - Bridges (bola@bridges2hs.org)"; "Brenda Cohen - Howard Community College (bcohen@howardcc.edu)"; "Brian Perry - Howard County Government (bperry@howardcountymd.gov)"; "Bryan Johnson - On Our Own of Howard County, Inc. 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Subject: CoC NOFA and Projects - draft for your review (2nd email)

Date: Tuesday, August 28, 2018 4:55:00 PM

Attachments: image003.png
Howard County CoC 2018 Application - all for comment - 8.28.18.zip

Importance: High

Zip file included (this time)

Good afternoon CoC,

Finally… I have a completed *draft* of the 2018 Continuum of Care application. Attached in a zip file is:

- Collaborative Application (main application)
- Priority Listing (how we rank the projects and overall $ requested)
- Project Applications:

	Ranking	Project Application Name	Amount	UNITS
Tier 1	1	**Shelter Plus Care**	$ 140,826.00	10
	2	**McKinney III**	$ 229,179.00	13
	3	**McKinney I**	$ 270,997.00	18
	4	**Project Revive**	$ 41,880.00	2
	5	**Project Stability**	$ 39,633.96	2
Tier 2	5	Project Stability	$ 3,242.04	
	6	Gateway Home	$ 42,876.00	2
	7	Expansion Bonus	$ 46,118.00	2
	8	DV Bonus	$ 50,000.00	3
		TOTAL	**$ 864,752.00**	52

All comments and edits are due to me no later than by Wednesday September 5, 2018, NOON.
These documents will be uploaded and available on our website (likely live tomorrow, 8/29) at https://www.howardcountymd.gov/Departments/Community-Resources-and-Services/Office-of-Community-Partnerships/Continuum-of-Care-COC

Should you have any questions, or need the documents in alternate format, please do not hesitate to call or email me.

Best & talk soon!
Michelle

Michelle L. Hippert, MCP, CoC Manager
Continuum of Care (CoC) Program
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9830 Patuxent Woods Drive
Columbia, MD 21046
410-313-5971 (direct)
410-313-6424 (fax)
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From: Hippert, Michelle L
To: "Jesse Guercio (jguercio@humanim.com)"; Karen Booth - Humanim, Inc. (kbooth@humanim.com); Janet Jones - Mental Health Authority (jjones@howardcountymd.gov); Jennifer Pollitt Hill (jpollitthill@wearehopeworks.org); Con Manning - HopeWorks of Howard County (cmanning@wearehopeworks.org)
Subject: FW: CoC NOFA and Projects - draft for your review
Date: Tuesday, September 04, 2018 5:04:00 PM
Attachments: image003.png
Importance: High

Good afternoon,
This serves as your notification that all of the projects submitted for renewal and new projects through this year's NOFA has been accepted and will be submitted in the 2018 application. The project names, amounts and final ranking are below. Should you have any questions, please do not hesitate to call or email me.

- Former Mental Health Authority = S+C
- Humanim, Inc. = McKinney III, McKinney I, Project Revive, Project Stability, Gateway Home, Expansion Bonus
- HopeWorks of Howard County, Inc. = DV Bonus

Much thanks,
Michelle

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To: Hippert, Michelle L

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Subject: FW: The FY 2018 CoC Program Competition is Now Open
Date: Friday, June 29, 2018 4:25:00 PM
Importance: High

Good afternoon & Happy Friday, CoC,

See below - HUD has released the 2018 Notice of Funding Availability (NOFA) for the Continuum of Care program. I encourage you to read/peruse it, or the link below that highlights changes to this year's competition. More information to come, but please be on the lookout for pertinent dates for Project Applications/deadlines and Community Input meetings.

As today is the last day of our fiscal year, I look forward to this next year and hope you are all doing well.

Best,
Michelle

Michelle L. Hippert, MCP, CoC Manager
Continuum of Care (CoC) Program
Office of Community Partnerships
6751 Columbia Gateway Drive, Suite 300
Columbia, MD 21046
410-313-5971 (direct)
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Please Click Here for More Information
howardcountymd.gov/communityresources

From: HUD Exchange Mailing List [mailto:news@hudexchange.info]
Sent: Wednesday, June 20, 2018 10:55 AM
To: Hippert, Michelle L <mhippert@howardcountymd.gov>
Subject: The FY 2018 CoC Program Competition is Now Open

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Resources and assistance to support HUD's community partners

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The FY 2018 CoC Program Competition is Now Open

The Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2018 Continuum of Care (CoC) Program Competition has been posted to the FY 2018 CoC Program Competition: Funding Availability page on the HUD Exchange. Additional resources

are available on the *e-snaps* page on the HUD Exchange.

Submission Deadline: Tuesday, September 18, 2018 at 8:00 PM EDT

The electronic application *e-snaps* will be available on or after Thursday, June 28, 2018. In the meantime, HUD strongly encourages CoCs, Collaborative Applicants, project applicants, and stakeholders to:

- Carefully and thoroughly read the FY 2018 CoC Program Competition NOFA to understand the information; and

- Begin to plan local competitions based on the information, new and changed, from the previous Competition, provided in the FY 2018 CoC Program Competition NOFA.

Additionally, HUD will post the FY 2018 Estimated Annual Renewal Demand (ARD) Report to the HUD Exchange on or after Thursday, June 28, 2018 that will include the amounts a CoC may apply for: CoC planning, Bonus, and Domestic Violence (DV) Bonus. This report will also provide the Preliminary Pro Rata Need (PPRN) and the estimated ARD for each CoC.

What's New for the FY 2018 CoC Program Competition

The list below highlights some important information regarding new concepts CoCs should consider while planning for the FY 2018 CoC Program Competition. This list is not exhaustive and additional details are in the FY 2018 CoC Program Competition NOFA. A full list of new, changed, and highlighted information is on the HUD Exchange and can also be found on the FY 2018 CoC Program Competition: Funding Availability page.

- *Transition Grants.* Project applicants can transition their project(s) from one CoC Program Component to another during the CoC Program Competition using the funds to wind down the previous project while ramping up the new project. (Section II.B.2).

- *Domestic Violence Bonus*. CoCs can apply for up to 10 percent of their PPRN or a minimum of $50,000, whichever is greater, or a maximum of $5 million, whichever is less, to create up to three DV Bonus Projects to serve survivors of domestic violence, dating violence, and stalking. (Section II.B.3). CoCs may create up to one of each of the following project types:
    - Permanent Housing-Rapid Rehousing (PH-RRH;
    - Joint Transitional Housing (TH) and Permanent Housing-Rapid Rehousing (PH-RRH) component project; and
    - Supportive Services Only-Coordinated Entry (SSO-CE).

- *Consolidated Project.* Eligible renewal project applicants will have the ability to consolidate two or more (limit of four) eligible renewal projects into one project application during the application process. (Section II.B.4).

- *CoC Merger.* CoCs that merged between the FY 2016 CoC Program Registration and FY 2018 CoC Program Registration process are eligible for merger bonus points. (Section II.B.5).

Listserv Communications

All information related to the FY 2018 CoC Program Competition is communicated via the HUD Exchange Mailing List. Join the mailing list to receive important updates and reminders.

If you are aware or suspect that the Collaborative Applicant, CoC members, or interested stakeholders are not currently receiving these listserv messages, please forward the following link, https://www.hudexchange.info/mailinglist/, to them so that they may register for the listserv messages as this is the only form of communication used by HUD to the public.

If you have questions related to subscribing to the HUD Exchange mailing list or have issues receiving listserv messages in your inbox please contact info@hudexchange.info. Please be sure to add news@hudexchange.info and info@hudexchange.info to your contact list or safe senders list. This ensures that messages from the HUD Exchange go to your inbox and are not filtered to your spam or junk folder.

Questions

If you have questions pertaining to *e-snaps* technical issues, please submit your questions to the *e-snaps* Ask A Question (AAQ) portal on the HUD Exchange website. To submit a question to the *e-snaps* AAQ portal, select "*e-snaps*" from the "My question is related to" drop down list on Step 2 of the question submission process.

If you have questions related to the CoC Program interim rule or a policy related question, please submit your questions to the CoC Program AAQ portal. To submit a question to the CoC Program AAQ portal, select "CoC Program" from the "My question is related to" drop down list on Step 2 of the question submission process.

The AAQ portal accepts question submissions 24/7. However, responses are usually provided between 8:00 AM and 5:00 PM Eastern Time, Monday through Friday, except for federal holidays. Additionally, per the FY 2017 CoC Program Competition NOFA, starting 2 days prior to the application deadline for FY 2018 funds, the AAQ will respond only to emergency technical support questions up to the deadline of Tuesday, September 18, 2018 at 8:00 PM EDT.

Visit the HUD Exchange at https://www.hudexchange.info

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U.S. Department of Housing and Urban Development|451 7th Street S.W. | Washington | D.C. | 20410

From: Hippert, Michelle L

To: Hippert, Michelle L

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Subject: 2018 Howard County CoC Request for LOIs
Date: Monday, July 02, 2018 3:50:00 PM
Importance: High

Good afternoon,

The Howard County Office of Community Partnerships is seeking Subrecipient Applicants for the Federal Fiscal Year (FFY) 2018 Continuum of Care (CoC) Program for Permanent Supportive Housing Projects for individuals and families experiencing chronic homelessness. All applicants for renewal and new projects are required to submit applications. There is a separate application for each renewal/new project, and will be forwarded to agencies that express interest in applying.

Funding for new projects (created through BONUS or Reallocation) will be based on information prescribed by the U.S. Department of Housing and Urban Development (HUD) Notice of Funding

Availability (NOFA) for FFY18. Projects created through BONUS opportunity will be made available as HUD updates geographic funding levels. All data in renewal applications must be directly from HMIS/ServicePoint.

For Renewals Projects and any New Project created by reallocation or BONUS in new projects – please submit a letter of interest to apply. Letter of Interest (LOI) are due no later than Thursday, 7/14/2018, 5:00 PM.

Available programs for Renewal, from the Department of Community Resources and Services (HUD Recipient) are:

Gateway Home	$42,876.00
Project Stability	$42,876.00
Project Revive	$41,880.00
McKinney 3	$229,179.00
McKinney 1	$270,997.00

It is highly recommended to refer to HUD-issued guidance as agencies prepare and apply for 2018 CoC funds.

- https://www.hudexchange.info/resources/documents/FY-2018-CoC-Program-Competition-NOFA.pdf
- **More information will be disseminated as it becomes available from HUD**

Please contact me with any questions.

Thanks so much!

Michelle L. Hippert, MCP, CoC Manager
Continuum of Care (CoC) Program
Office of Community Partnerships
6751 Columbia Gateway Drive, Suite 300
Columbia, MD 21046
410-313-5971 (direct)
410-313-6424 (fax)

Please Click Here for More Information

howardcountymd.gov/communityresources

From:	Hippert, Michelle L
To:	"chriss@sshouses.org"
Cc:	Cheryl Mattis (cmattis@howardcountymd.gov)
Subject:	RE: Howard County MD - LOI Response
Date:	Saturday, July 21, 2018 2:35:00 PM
Importance:	High

Update – **please submit the items below no later than by Monday, August 6, 2018, 5:00 PM.** Electronic version are acceptable.

Much thanks,
Michelle

Michelle L. Hippert, MCP, CoC Manager
Continuum of Care (CoC) Program
Office of Community Partnerships
9830 Patuxent Woods Drive
Columbia, MD 21046
410-313-5971 (direct)
410-313-6424 (fax)

From: Hippert, Michelle L
Sent: Saturday, July 21, 2018 2:34 PM
To: 'chriss@sshouses.org' <chriss@sshouses.org>
Cc: Cheryl Mattis (cmattis@howardcountymd.gov) <cmattis@howardcountymd.gov>
Subject: Howard County MD - LOI Response
Importance: High

Good afternoon,
I am in receipt of your Letter of Interest for Howard County's CoC Permanent Supportive Housing program application for FFY2018. Attached, please find an Application for new CoC Funded projects. It is in excel format. In addition to the application, please include with your submission:

- a letter signed by your agency's authorized official,
- your agency's non-profit documentation,
- your agency's most recently completed Audit (or financial statement),
- list of Board of Directors, identifying that at least on Board member has experienced homelessness or is currently homeless, and
- any existing policies and procedures for operating HUD-funded Permanent Supportive Housing programs.

Currently, the amount available, and program component types, for New Projects are:

- $46,118 – Bonus project – 100% Dedicated to Chronic Homeless
- $50,000 – Domestic Violence Bonus Project – Rapid Rehousing for victims of domestic violence

Please let me know if you have any questions or if you would like to schedule a phone call to discuss

this opportunity.

Much thanks,
Michelle

Michelle L. Hippert, MCP, CoC Manager
Continuum of Care (CoC) Program
Office of Community Partnerships
9830 Patuxent Woods Drive
Columbia, MD 21046
410-313-5971 (direct)
410-313-6424 (fax)
howardcountymd.gov/communityresources

From:	Hippert, Michelle L
To:	"Jesse Guercio"
Subject:	RE: 2018 Howard County CoC Request for LOIs
Date:	Saturday, July 21, 2018 2:10:00 PM
Attachments:	McKinney I - FFY18 - for Humanim. 7.21.18.pdf McKinney III - FFY18 - for Humanim. 7.21.18.pdf Expansion BONUS into Project Revive - FFY18 - for Humanim. 7.21.18.pdf Gateway Home - FFY18 - for Humanim. 7.21.18.pdf Project Revive - FFY18 - for Humanim. 7.21.18.pdf Project Stability - FFY18 - for Humanim. 7.21.18.pdf
Importance:	High

Hi Jesse,

Attached please find .pdfs of the FFY18 Project Applications for:

- McKinney I - $270,997 – 18 units
- McKinney III - $229,179 – 13 units
- Project Revive - $41,880 – 2 units
- Project Stability - $42,876 – 2 units
- Gateway Home - $42,876 – 2 units
- Expansion BONUS - $46,118 – 2 units

In response to your LOI submitted on 7/13/18, please review ALL of the attached project applications as currently entered into e-snaps (our online portal for grant submissions). Most of the information carried over from last year, and I updated areas such as budget, match and some project details to account for budget changes, etc.

I am thinking of 2 significant changes this year.

1. **Use the Bonus opportunity to EXPAND Project Revive. Steps include:**
    a. Creating new project under Expansion BONUS (attached)
    b. Attaching it to Project Revive as one project – before submitted to HUD
    c. Impact: Project Revive would go from 2 units to 4.
2. **HUD is allowing up to 4 existing projects to merge into One. I would like to merge three existing projects into ONE = $173,750**
    a. Project Revive (with the Expansion BONUS dollars included) = $87,998
    b. Project Stability = $42,876
    c. Gateway Home = $42,876
    d. Impact:
        i. Three existing projects consolidated into one (including the BONUS dollars)
        ii. One project with 8 units

If Humanim has any changes to the applications attached, please let me know your changes by Monday August 6, 2018. Also, when you and your team have time, let's schedule the phone call to review any details or questions.

Best & much much thanks!
Michelle

Michelle L. Hippert, MCP, CoC Manager
Continuum of Care (CoC) Program
Office of Community Partnerships
9830 Patuxent Woods Drive
Columbia, MD 21046
410-313-5971 (direct)
410-313-6424 (fax)

From: Hippert, Michelle L
Sent: Friday, July 20, 2018 12:03 PM
To: 'Jesse Guercio' <jguercio@humanim.com>
Subject: RE: 2018 Howard County CoC Request for LOIs

Good afternoon Jesse,
In response to our LOI, I would like to schedule a call to discuss the next steps with developing the Project Applications, including all renewals and the BONUS opportunity.

I will be sending you the project applications to update from last year, as well as a blank BONUS application. The call will be to discuss changes in the application guidance from HUD and how to incorporate any new projects, and any questions you all may have in prepping as the Subrecipient.

Let me know some dates you have. Ideally, yourself, Josh and Denise should be included, and anyone else you think would be helpful.

Much thanks,
Michelle

Michelle L. Hippert, MCP, CoC Manager
Continuum of Care (CoC) Program
Office of Community Partnerships
9830 Patuxent Woods Drive
Columbia, MD 21046
410-313-5971 (direct)
410-313-6424 (fax)

From: Jesse Guercio [mailto:jguercio@humanim.com]
Sent: Friday, July 13, 2018 12:01 PM
To: Hippert, Michelle L <mhippert@howardcountymd.gov>
Subject: RE: 2018 Howard County CoC Request for LOIs

Hi Michelle,

Please find Humanim's LOI attached. Please let me know if you need any further information.

I hope the move is going well!

Jesse

From: Hippert, Michelle L <mhippert@howardcountymd.gov>
Sent: Monday, July 2, 2018 3:51 PM
To: Hippert, Michelle L <mhippert@howardcountymd.gov>
Subject: 2018 Howard County CoC Request for LOIs
Importance: High

Good afternoon,

The Howard County Office of Community Partnerships is seeking Subrecipient Applicants for the Federal Fiscal Year (FFY) 2018 Continuum of Care (CoC) Program for Permanent Supportive Housing Projects for individuals and families experiencing chronic homelessness. All applicants for renewal and new projects are required to submit applications. There is a separate application for each renewal/new project, and will be forwarded to agencies that express interest in applying.

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Howard County Government

Continuum of Care Policies & Procedures

Effective August 2018

Howard County Continuum of Care Policies & Procedures

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Howard County Continuum of Care Policies & Procedures

INTRODUCTION TO THE CONTINUUM OF CARE (COC)

In 1987, the McKinney Act was signed into federal legislation. This Act provided a definition of homelessness and grant funding administered by United States Department of Housing and Urban Development (HUD) to address the needs of the homeless. The McKinney-Vento Act originally consisted of fifteen programs providing a range of services for homeless people, including emergency shelter, transitional housing, job training, primary health care, education, and some permanent housing. The McKinney Act has been amended many times, but continues to provide funding for eligible homeless services across the country.

In 1995, HUD began requiring communities to submit one application for McKinney-Vento Homeless Assistance Grants. This streamlined the application process, and encouraged the coordination of housing and support services for agencies providing direct homeless services, and placed emphasis on the development of local CoCs. The Continuum of Care (CoC) is defined as "*the local planning body that coordinates housing and support services funding for homeless families and individuals*."

In 2009, President Obama introduced the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009. This Act amended and reauthorized the McKinney-Vento Homelessness Assistance Act with substantial changes. In August 2012, HUD issued the Interim Rule which provided regulations for how the HEARTH Act of 2009 would be managed and administered.

The new *Purpose and Activities* of the CoC under the Interim Rule are to:

- Promote community-wide goals to end homelessness;
- Provide funding to quickly rehouse homeless persons;
- Promote access to mainstream resources; and
- Improve self-sufficiency among people experiencing homelessness.

A few *Key Changes* under the Interim Rule included:

- Regulations on the streamlining of three programs (Supportive Housing Program, Shelter Plus Care, and Moderate Rehabilitation/Single Room Occupancy) into one program, the CoC Program;
- Renaming the Emergency Shelter Grant to the Emergency Solutions Grant and broadening existing emergency shelter and homelessness prevention activities to add rapid rehousing activities;
- Guidance for the change of the definition of homelessness and chronic homelessness; and
- Codifying the CoC Planning Process to emphasize coordination of activities in response to needs of the homeless.

New Program Components of the CoC Program under the Interim Rule are:

1. Permanent Housing
    a. Permanent Supportive Housing
    b. Rapid Rehousing
2. Transitional Housing
3. Support Services Only (SSO)
4. Homeless Management and Information System (HMIS)
5. Homelessness Prevention

Howard County Continuum of Care Policies & Procedures

The CoC's Primary Responsibilities under Interim Rule:
1. Operating the CoC
- Conduct semi-annual meetings of the full membership
- Issue a public invitation for new members, at least annually
- Adopt and follow a written process to select a board
- Appoint additional committees, subcommittees, or work groups
- Develop and follow a governance charter detailing the responsibilities of all parties
- Consult with Recipients and Subrecipients to establish performance targets appropriate for population and program type, monitor the performance of Recipients and Subrecipients, evaluate outcomes, and take action against poor performers
- Evaluate and report to HUD outcomes of ESG and CoC projects
- Establish and operate a centralized or coordinated assessment system
- Establish and follow written standards for providing CoC assistance

2. Designating and Operating an HMIS
- Designate a single HMIS
- Select an eligible applicant to manage the CoC's HMIS
- Monitor Recipient and Subrecipient participation in the HMIS
- Review and approve privacy, security, and data quality plans

3. CoC Planning
- Coordinate the implementation of a housing and service system within its geographic area
- Conduct a Point-in-Time count of homeless persons
- Conduct an annual gaps analysis
- Provide information required to complete the Consolidated Plan
- Consult with ESG Recipients regarding the allocation of ESG funds and the evaluation of the performance of ESG Recipients and Subrecipients

GOVERNANCE OF THE COC

Purpose

The HEARTH Act requires CoCs to have written policies and procedures that govern the provision of assistance to individuals and families under the CoC programs, and the overall administration and operations of the CoC. These policies and procedures provide guidance to local providers and other partners, but this document is not intended to be in lieu of or in place of the Interim Rule for the HEARTH Act. The Purpose of this document is to clarify local decisions and governance.

Geographic Area

The area covered by the Howard County Continuum of Care (CoC) is the geographic boundaries of Howard County Maryland.

Howard County Continuum of Care Policies & Procedures

Board to Promote Self Sufficiency (BPSS)

Howard County Council Bill No. 23-2008 formed the Board to Promote Self Sufficiency in May 2008. The Bill established the Board to Promote Self-Sufficiency, providing for the membership, terms, officers, and staffing of the Board; setting forth the requirements for meetings and voting; authorizing the use of subcommittees and the adoption of certain Operating Procedures; providing for the purpose and responsibilities of the Board; providing the expiration dates of the terms of the initial members of the Board; providing for certain exceptions applicable to the Board; and generally relating to the Board to Promote Self-Sufficiency. The BPSS operates as the Howard County CoC Governance Board. For more information on the BPSS requirements, please see *Appendix A* of this document.

Role of Board

The BPSS oversees the work of its designated Committees, receives reports on a monthly basis from committee Chairs, and reviews initiatives developed by the CoC DCRS Lead Agency. The Evaluation and Resource Allocation (ERA) Committee is designated by the Board to serve the following functions for CoC activities:

1. Analyze data on homelessness from HMIS, PIT, and APRs;
2. Evaluate performance of the CSHS (coordinated assessment system) and individual CoC programs;
3. Rate/rank funding proposals related to homeless services (federal, state & local) based on needs/gaps within the CoC;
4. Rank CoC and ESG project applications;
5. Recommend reallocating project funds as necessary to meet needs of CoC; and
6. Communicate findings and decisions to the CoC Board and the CoC.

DCRS Lead Agency

The Department of Community Resources and Services (DCRS) is the DCRS Lead Agency for both the Howard County CoC and HMIS. DCRS receives CoC funding on behalf of Howard County Government, and works with partner agencies and the Board to further the goals of HUD and meet the needs of the community. As the DCRS Lead Agency, DCRS prepares and submits the CoC Collaborative Application to HUD. DCRS is also a direct Recipient on behalf of Howard County Government with HUD for all CoC Funds, except the Shelter Plus Care (S+C) Project through the Recipient, Howard County Mental Health Authority. The DCRS Lead Agency staffs the Steering Committee on Homeless Services (Steering Committee), a committee of the BPSS. The Steering Committee provides a forum for discussing the Plan to End Homelessness, educating the community on homeless issues, eliciting input on the operations of homeless services and programs, and advocates on federal, state, and county levels regarding issues affecting people who are experiencing homelessness or who are at-risk of homelessness.

Howard County Coordinated System of Homeless Services (CSHS)

CSHS is a network of community services and supports coordinating efforts to end homelessness in Howard County. The goals of the system are to efficiently use community resources to reduce the number of homeless families and individuals, reduce the number of newly homeless, shorten the length of homeless episodes, and reduce the number of returns to homelessness. For full details on the policies and processes that guide the CSHS, please see the *CSHS Policies and Procedures*. The CSHS serves as the CoC's coordinated assessment system, as required per the Interim Rule, at 24 CFR 578. 7(a)(8):

Centralized or coordinated assessment system is defined to mean a centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool. This definition establishes basic minimum requirements for the Continuum's centralized or coordinated assessment system.

Outreach

Ongoing efforts are made to include essential providers and stakeholders. When a particular gap in membership is identified in the CoC, the DCRS Lead Agency and/or the CSHS Services Coordinator will target missing constituencies, brainstorm agencies and names, and contact people to represent missing constituencies. Outreach is made to ensure participation from the following groups for the CoC:

1. Homeless service providers and agencies
2. Community and faith-based organizations
3. Local government representatives
4. Homeless and formerly homeless people
5. Homeless advocates
6. Public Housing authorities
7. Private health care organizations
8. Mental health service providers and funders
9. Substance abuse service providers and funders
10. Local employment agencies
11. Colleges and universities
12. Veteran service agencies
13. Businesses and business associations
14. Key members of local planning groups
15. Employers
16. Political leaders
17. Law enforcement and corrections agencies
18. School districts

Steering Committee on Homeless Services (of the BPSS)

Purpose

The Steering Committee on Homeless Services (Steering Committee) will facilitate actions necessary to accomplish the goals of Howard County's Plan to End Homelessness (PEH).

Responsibilities

The Steering Committee will inform The Department of Community Resources and Services (DCRS), in its role as the CoC DCRS Lead Agency, and will provide periodic updates on the group's activities to the CoC Board (Board to Promote Self-Sufficiency, BPSS).

The Steering Committee will set and revise goals for the PEH and CoC activities, and specifically:

1. Update PEH annually; ensure goals and concepts are reflected in all CoC activities
2. Guide CSHS processes; review System supports, roles, and client flow; examine

strengths/weaknesses; and monitor goals (the former CSHS Partners Forum, with expanded role)
3. Research best practices
4. Provide input to the CoC application
5. Convene HMIS subcommittee
6. Perform the annual Point-in-Time survey
7. Convene ad-hoc workgroups as needed
8. Inform and provide recommendations to the ERA Committee of the BPSS on significant activities, needs and gaps related to meeting the goals of the PEH

The Steering Committee will meet every other month; agendas will be provided in advance and meeting minutes will be posted on the website. The Steering Committee will be chaired by a member of the BPSS.

Membership

The Steering Committee is broadly representative of the public and private homeless service sectors, including homeless client/consumer interests. The Steering Committee encourages all members of the community to participate in group discussions and working groups. The Steering Committee works to ensure diverse population input to decision-making, including consumers and community members, as well as gender, ethnic, cultural and geographical representation.

All interested persons are encouraged to attend meetings, provide input, and voice concerns. At a minimum, membership will include all CSHS Partner Agencies and other agencies in Howard County that have a vested interest in ending homelessness. The only prerequisite for membership is the agency must serve Howard County residents. Membership will include, but not be limited to representatives from the following agencies:

1. Bridges to Housing Stability, Inc.
2. Community Action Council of Howard County, Inc.
3. Community Member
4. Consumer
5. Department of Social Services
6. Family and Children Services
7. Grassroots Crisis Intervention Center, Inc.
8. Howard County Department of Corrections
9. Howard County Public School System
10. Howard County Health Department
11. Hope Works of Howard County, Inc.
12. Housing County Housing Commission
13. Howard County Mental Health Authority
14. Humanim, Inc.
15. LARS
16. Makingchange, Inc.
17. Howard County Office of Workforce Development
18. Salvation Army
19. Volunteers of America, Inc.

Each member agency will have one vote but multiple representatives may attend meetings. A BPSS member will chair the Committee, and the CoC Manager of the DCRS Lead Agency will staff the Committee. The HMIS Administrator and CSHS Services Coordinator will be voting members of the Group. Recommendations from the Steering Committee on processes and programmatic changes as related to the goals and activities of the PEH and CoC will be determined by majority vote.

Engagement

Between meetings, the DCRS Lead Agency will keep members involved by the following methods:

1. Maintaining a directory of Steering Committee members
2. Establishing working groups to move the work of the CoC and PEH forward between meetings
3. Encouraging partners with similar interests to combine efforts, either by sharing information/best practices or working on strategies to collaborate and support efforts
4. Sharing information regularly to maintain a focus on homelessness in general and the Continuum in particular

Communication

Methods of sharing information to Steering Committee members (and any interested persons/agencies) between meetings will include:

1. Information sent out via email lists
2. Information added to the CoC website, including:
    a) Information on the work of the Continuum including project ranking for annual competitions
    b) Plans and implementation
    c) Data
    d) Funding availability

CoC Application Process

General Procedure

HUD CoC funds are granted based on a national competition following annual Notice of Funding Availability (NOFA) releases. The Howard County CoC (DCRS Lead Agency) coordinates the process upon receipt of the federal NOFA. Information regarding the NOFA and the community's process and requirements are disseminated to all interested parties (all homeless services and housing providers in the CoC) via the following open solicitation methods:

- Letters/emails
- Responses to public inquiries
- Announcements at meetings
- Posted on the DCRS Lead Agency website

Procedures for Application Submissions

Proposals must be submitted to the DCRS Lead Agency by the designated method, noted in the solicitation, by established due date. Proposals will always be due by 5:00 pm on the due date. Specifics regarding due dates, submission requirements, and other requirements will be posted on DCRS Lead Agency website, https://www.howardcountymd.gov/Departments/Community-Resources-and-Services/Office-of-Community-Partnerships/Continuum-of-Care-COC.

Threshold Criteria and Project Requirements

Projects must pass a threshold requirement review before being submitted to the ERA Committee. Late or incomplete applications will not pass threshold requirements for reviewing and ranking by the ERA Committee. These threshold requirements are:

- Project Applicant
    - Must be eligible to apply for CoC funding: Nonprofit organizations, State, or local government
    - Must not require participation in religious services for CoC-funded programs
    - Must be an eligible contractor for federal funds per https://www.sam.gov/
    - Must have a current tax exempt status as verified by the IRS
    - Must not owe any overdue tax debts, as documented on IRS 990 submissions to the IRS
    - Must have financial and management capacity to carry out the project(s)
    - Must provide evidence of a homeless or formerly homeless person is on the Board of Directors or in a role in the policy-making process within the Agency

- Must be able to evidence Agency policies and procedures for the administration for CoC funds
- Must participate in Homeless Management Information Systems (HMIS)
- Must administer programs or activities in the most integrated setting appropriate to the needs of homeless persons with disabilities
- Must identify matching funds in the Budget and Budget Narrative
- Must not discriminate against households with a registered sex offender and/or person with a criminal record, including a violent crime, for acceptance into the program even if a child is in the household. It is a CoC goal to eliminate as many barriers for the "hardest-to-house" populations.
- Must provide all required information listed in Required Attachments and be capable of fulfilling all required Work Effort.

- Eligible Project & Activity Type
- Completeness of the application

Project Review and Ranking

HUD requires all Continuum of Cares (CoC) have an evaluation process for ranking all renewal and new projects. In each competition, HUD will state the percentage of renewal amounts that are required to be in either Tier 1 or Tier 2. The Performance Score Card and Assessment (described below) will be used to determine where projects will rank in the Tiers. The ERA will complete all project review and ranking.

Performance Score Card & Assessment

The Performance Score Card (Score Card) is a scoring-based tool based on the Annual Performance Report (APR) that is required annually to HUD. The Score Card reviews project-specific and CoC-wide outcomes, and are directly related to the federal goals to reduce length of homelessness, reduce returns to homelessness and increasing household income. Additional System Performance Measure may be included in future assessments, as HUD releases updates. The Assessment of each project will include:

1. Whether projects operate as "Housing First"
2. Projects with performance outcomes from Annual Performance Reports/HMIS
    - Length of stay
    - % permanent housing exit destinations
    - % increases in income
3. Project Monitoring Criteria/Summaries
    - Participant Eligibility
    - Utilization rates
    - Drawdown rates
    - Frequency or Amount of Funds Recaptured by HUD
4. Project Meeting a need for specialized population services
    - Youth
    - Victims of Domestic Violence
    - Families with Children
    - Persons Experiencing Chronic Homelessness
    - Veterans
    - Persons with Disabilities, including children

Project Reallocation

The DCRS Lead Agency must ensure projects submitted in the CoC Consolidated Application best align with HUD priorities and contribute to a competitive application that secures these dollars in our community. The DCRS Lead Agency will review reallocation options and will consider reallocation if necessary. Reallocation should occur, if one or more of the following is true:

- The results of the Score Card and Assessment show the Project is under, non-performing or is not cost-effective; or
- If current project cannot demonstrate sufficient capacity to successfully carry out the project, or is unable to be compliant with the its goals; or
- If the current NOFA indicates/recommends reallocation (or phase out of) any component or activity; and
- A sufficient plan is in place to secure and maintain permanent housing for current project participants if any projects are reallocated.

If one or more of the above criteria for reallocation is met, a Reallocation Plan will be created to develop the best program to meet the needs of the community. All reallocation decisions to decrease funding, defund or create new projects will be compared to performance criteria and funding priorities to determine the extent to which each project is aligned to achieve such outcomes. Final decisions will be made by the ERA.

Reallocating to New Projects

The DCRS Lead Agency will release new project applications/opportunities for any funds available as a result of reallocation and BONUS grants. This ERA review process will follow the same steps as renewal projects. The DCRS Lead Agency will notify applicants if their project was rejected or accepted prior to the NOFA determined deadline, as recommended by the ERA. All final rules for reallocation will be defined by HUD in the (Notice of Funding Availability) for the CoC Program Competition. Please note the DCRS Lead Agency may need to revise the requirements described and/or request additional information after the NOFA is released.

Using All Available Funds

The ERA and DCRS Lead Agency will do everything possible to ensure that all funds available to the community are applied for. When all applications have been submitted and it is found that the community is not requesting as much money as is available from HUD or no BONUS projects have been submitted, then:

- The CoC staff will email all CoC and other interested parties (all homeless service and housing providers in the CoC) with specifics regarding, how much money is available for what type of programs
- Applications deadlines for these funds will be set after the notice is distributed.

HUD Reporting Requirements

Annual Performance Reports

Annual Performance Reports (APRs), formerly called Annual Progress Reports, are required by HUD on an annual basis to track the progress and accomplishments of HUD's CoC Programs. The APR gathers information on how programs assist homeless persons to obtain and/or remain in permanent housing,

increase skills and income, and obtain greater self-determination. This information is used by HUD and Congress to assess outcomes from federal funding.
The APR is also used by the Howard County CoC as a planning tool to analyze demographics and needs, to evaluate outcomes, inform make improvements, and to assist in setting annual goals. The Howard County CoC Programs also report on the household's self-sufficiency outcomes matrix (SSOM) in the APR. In general:

- Recipients and Subrecipients receiving HUD Continuum of Care Homeless Assistance funding must report their annual progress to HUD through an Annual Performance Report (APR) submitted for each year in which HUD funding is provided
- A separate APR must be submitted for each HUD grant received
- If a project extension is received for a partial year, then an APR must be submitted for the operating year and another APR submitted for the extension period
- Information must be collected and maintained on each participant in each HUD-funded project for each the APR
    - Standard client data collection tools should be used to collect the information for the APR; in Howard County all APR data must be generated from ServicePoint from the HMIS Administrator.
    - All staff providing services to clients will be trained in how to accurately use the data collection forms
    - All data must be entered into ServicePoint and be accurate, in line with the HMIS Policies and Procedures.
- Recipients and Subrecipients must respond to all questions in the APR.
- All persons entering APR data should review APR instructions issued by HUD for guidance before completing the APR for that designated program year.
- The CoC DCRS Lead Agency is responsible for certifying (submitting) the final version of each APR for each project in the Continuum.

Information collected in the APR includes:

- General project information, including the dates of the operating year and the program type and component
- Client information, including household type, demographic and special needs information, prior living situation, income, length of stay in the project, supportive services received while in the project, reason for leaving the project and destination upon leaving the project
- Progress in achieving program goals
- Financial information, including match and project expenditures for the program year
- Recipients and Subrecipients must track and keep records documenting the match received and utilized
- A Cash Match Documentation file should be kept for each project, including cash expended, matching funds committed in the original project application submission and actual match amounts received

The APR must be submitted within 45 days to the DCRS Lead Agency after the end of the program year, for submission to HUD within 90 days after the end of each program year. The due date for the APR should be part of both the Recipient and Subrecipient's master calendar for tracking grant compliance activities. The DCRS Lead Agency will have each Recipient or Subrecipient generate APR reports in HMIS and then forward to the DCRS Lead Agency designee for review and certification prior to the DCRS Lead

Agency submits. The Howard County CoC uses the data collected in the APRs to evaluate and improve the project, for needs assessment, trend analysis and future planning.

Annual Homeless Assessment Report (AHAR)

The Annual Homeless Assessment Report (AHAR) is a report by HUD to the U.S. Congress on the extent and nature of homelessness in America. It is based on data from Homeless Management Information Systems and on information from Continuum of Care (CoC) Exhibit 1s. The AHAR provides estimates of the number of homeless persons nationally, a descriptive profile of homeless persons, and an analysis of service use patterns. For CoC's gathering and submitting this data to HUD, the local AHAR report provides useful information on homelessness and service needs at the local level. The CoC DCRS Lead Agency is also the DCRS Lead Agency for HMIS. The DCRS Lead Agency is responsible for completing the local AHAR. Client level data for the AHAR will be collected through the Homeless Management Information System (HMIS) based on HUD's universal data elements which all communities receiving HUD Homeless Assistance funding are required to collect and maintain and which are the same data elements used to generate HUD's Annual Performance Reports (APRs).

- Unduplicated data will be collected for the four standard AHAR reporting categories: Emergency Shelter-Individuals, Emergency Shelter-Families, Transitional Housing-Individuals and Transitional Housing-Families. Data will also be collected for any supplemental reporting categories established by HUD.
- In order to participate in the AHAR, the CoC's HMIS must be capable of:
    - Producing a one day point-in-time count, average day count, and longitudinal counts.
    - Identifying clients with multiple program use—e.g., how many people in ES-IND were also served in TH-IND.
    - Counting persons by household type—e.g., individual adult male, adult in household with children, or unaccompanied youth.
    - Generating frequencies by basic demographic characteristics.
    - Cross-tabulating total length of stays within each program-household type, by gender and age.
    - Totaling the number of households with children by program type.

All agencies receiving HEARTH funding will submit on monthly basis information to the HMIS on each client served, including data needed for the AHAR report. The Howard County CoC has established continuum-wide data quality control procedures to ensure the accuracy and completeness of AHAR data collected and reported. These procedures address data collection as well as running of reports, data review, and obtaining feedback on the data.The AHAR data review will address at a minimum the following three areas. In areas where problems are identified, concrete steps to address the problem will be identified and carried out.

- HMIS bed coverage (total # of beds in HMIS divided by # of beds in the CoC) must be at least 50% in one or more of the reporting categories. If bed coverage is lower, the CoC will work to increase provider participation.
- Bed utilization data (# of people served on a given night divided by the # of available beds that same night) must be based on accurate entry and exit dates for clients. For utilization rates below 60% or above 105%, the CoC will contact the provider and review raw data.
- Data completeness as evidenced by a low rate of missing data across all questions. If the percentage of missing data is high, the CoC will contact providers to identify and address problems.

The AHAR data will also be reviewed to identify:

- CoC, program or user level problems
- Client level problems records
- Anomalies between data collected between similar programs
- Anomalies between data collected in recent period vs. previous ones
- Other discrepancies

The CoC will work with participating providers regarding the AHAR data collected to confirm accuracy of information collected. The CoC will provide quarterly HMIS trainings on data collection and quality for front-line staff who are engaged in data entry activities. On an annual basis (according to HUD's designated data collection schedule), the CoC will de-duplicate and aggregate the client information collected to produce and submit a local AHAR data report using a standardized template.

- The AHAR data collection period is October 1st to September 30th of each year.
- The CoC will submit the aggregated local AHAR report electronically through the AHAR Exchange to the HUD-designated private research firm, responsible for compiling the national AHAR.
- A draft AHAR report will be submitted by the HUD-designated date.
- The CoC will work with the AHAR Research team to correct any data problems, and submit a final AHAR report by the HUD-designated date.

Homeless and Housing Reporting

Annually, the Howard County CoC reviews the housing and services available to people experiencing homelessness within the community. The methods to undertake this review include:

- Homeless Counts
- Housing Inventory
- Services Inventory

The Howard County CoC DCRS Lead Agency determines how to conduct the counts and inventories, while realizing that these activities are required by HUD, and must follow minimum requirements issued by HUD. HUD's recommendations for conducting homeless counts and housing/services inventories are described below, and will serve as a guide for the Howard County CoC.

Homeless Counts

The Continuum of Care Application for McKinney-Vento homeless assistance funding requires CoCs to produce "*statistically reliable, unduplicated counts or estimates of homeless persons in sheltered and unsheltered locations at a one-day point in time.*" CoCs are also asked to report the number of homeless persons in subpopulation categories:

- Chronically homeless
- Severely mentally ill
- Chronic substance abusers
- Veterans
- Persons with HIV/AIDS
- Victims of domestic violence
- Unaccompanied youth (ages 18 to 24)

HUD encourages CoCs to base population and subpopulation estimates on local data stored in Homeless Management Information Systems (HMIS) and/or collected through shelter and street counts. Aside from the HUD mandate to collect this information, there are many reasons why the CoC chooses to collect accurate, reliable data on our local homeless populations:

- To identify community-specific service needs and gaps
- To further understand the causes of homelessness and design more effective responses
- To use in planning and program development
- To raise public awareness of the challenges facing people experiencing homelessness
- To accurately measure and identify the needs of populations that are the hardest to serve

The Howard CoC coordinates a Point-in-Time (PIT) count of sheltered and unsheltered homeless people in the last ten days of January (between January 22 and 31) annually.

Sheltered Homeless Count

The sheltered count is an inventory of people accessing shelter on the date chosen for that year's Point in Time. It will include homeless people who are spending the night in:

- Emergency shelters
- Cold weather shelters
- Domestic violence shelters
- Residential programs for runaway/ homeless youth
- Transitional housing
- Hotel/motel/apartment voucher arrangements paid by a public/private agency because the person or family is homeless, and
- Permanent supportive housing for homeless persons. (Information on persons living in permanent supportive housing units will be used to determine the capacity rate of those programs; they will not be included in the total homeless count number.)

The following information will be collected in the Sheltered Count:

- Number of households with dependent children (couples or single parents/guardians with children)
- Number of persons in households with dependent children (adults and children)
- Number of households without dependent children (households composed of individuals including unaccompanied youth, couples, and other adult-only households)
- Number of persons in households without dependent children (adults and unaccompanied youth)

The following populations will not be included in the Shelter Count reported to HUD:

- Persons who are living doubled up in conventional housing
- Formerly homeless persons who are residing in Section 8 SRO, Shelter Plus Care, SHP permanent housing or other permanent housing units funded through the CoC or other sources
- Children or youth, who because of their own or a parent's homelessness or abandonment, now reside temporarily and for a short anticipated duration in hospitals, residential treatment facilities, emergency foster care, detention facilities and the like
- Adults living in mental health facilities, chemical dependency facilities, or criminal justice facilities

To collect Sheltered Count data, the CoC will extract the data from HMIS.

Unsheltered Homeless Count

The Unsheltered Count is an inventory of people experiencing homelessness who are residing in a place not meant for human habitation, including streets, parks, alleys, parking ramps, parts of the highway system, transportation depots and other parts of transportation systems (e.g. tunnels, railroad cars, under bridges), all-night commercial establishments (e.g. movie theaters, laundromats, restaurants), abandoned buildings, building roofs or stairwells, chicken coops and other farm outbuildings, caves, campgrounds, vehicles, and other similar places.

The following information will be collected in the unsheltered count:

- Number of households with dependent children (couples or single parents/guardians with children)
- Number of persons in households with dependent children (adults and children)
- Number of households without dependent children (households composed of individuals including unaccompanied youth, couples, and other adult-only households)
- Number of persons in households without dependent children (adults and unaccompanied youth)

To collect Unsheltered Homeless Count data, the CoC combines the following methods:

- Conduct a public places count (a PIT count based on observation of unsheltered persons without interviews)
- Conduct a public places count with interviews (a PIT count combined with either interviewing all unsheltered homeless persons encountered during the public places count or a sample of these individuals)
- Conduct a service-based count (interview people using non-shelter services, such as food pantries and drop-in centers, screen for homelessness, and count those that self-identify as unsheltered homeless persons; in order to obtain an unduplicated count, every person interviewed must be asked where they were sleeping on the night of the PIT count)
- Extract data from HMIS (use HMIS to collect, analyze or report data on unsheltered persons)

To ensure reliable data from the Unsheltered Count, the CoC will:

- Conduct trainings for PIT enumerators
- Use HMIS to check for duplicate entries or for some other purpose
- Use strategies to ensure that each unsheltered homeless person was not counted more than once during the point-in-time count

Subpopulations

The CoC will also coordinate a count of persons who fall into certain subpopulations, using data from a PIT count conducted during the last ten days of January (between January 22nd and 31st) annually. Data collected for the subpopulation analysis includes:

- Chronic homeless status (length and number of episodes)
    - Length of time the person has been homeless this time
    - How many times the person has been homeless in the past 3 years
- Whether the person has a disability
    - Disability status by category
    - Severe mental illness
    - Chronic substance abuse
    - HIV/AIDS

- Victim of domestic violence
- Veterans
- Unaccompanied youth (under 18, and 18-24)

To collect subpopulation data, the CoC will:

- Extract the data from HMIS OR
- Conduct interviews with a random or stratified sample of sheltered homeless adults and unaccompanied youth, extrapolating the results to the entire sheltered homeless population to provide statistically reliable subpopulation estimates for all sheltered persons OR
- Conduct interviews with every homeless person staying in an emergency shelter or transitional housing program on the night designated for the PIT count OR
- Ask providers to use individual client records (e.g., case management files) to provide the CoC with subpopulation data for each adult and unaccompanied youth living in a sheltered program on the night designated for the PIT count

If the CoC does not collect this information from HMIS, the CoC will:

- Provide written instructions to providers to explain the protocol to complete subpopulations count
- Train providers on the protocol and data collection forms to complete the subpopulations count
- Remind all agencies of the scheduled count and follow-up with providers to ensure the maximum possible response rate from all programs

Housing Inventory

Every year the CoC will collect data to complete a *Housing Inventory*. The date of the housing inventory will be the same date as the PIT sheltered and unsheltered count. The housing inventory must be conducted every year and will occur in the last ten days in January.

For each program that houses persons experiencing homelessness, the CoC will collect data on:

- The number of beds and units currently serving individuals and families
- The number of beds and units created in the past year ("new inventory")
- The number of beds and units that are fully funded but not yet serving homeless people ("under development")

Housing Inventory data must be obtained from all emergency shelters, transitional housing, and permanent supportive housing programs in the CoC, including those programs that do not receive HUD funding, but who serve homeless populations. Data collected from permanent supportive housing programs will be focused only on the beds and units that are dedicated to housing persons who are formerly homeless. The number of vacant emergency shelter, transitional housing, and permanent supportive housing units must also be collected for the unmet need determination.

To collect *Housing Inventory* data, the CoC DCRS Lead Agency will annually:

- Use HMIS data to complete the Housing Inventory Chart
- Conduct a housing inventory survey (via mail, fax, e-mail, web-based, phone or on-site) of homeless providers, which will include the previous year's Housing Inventory Chart and instruct providers to review and update housing inventory information on the specified night of the housing inventory

If the CoC DCRS Lead Agency decides to collect *Housing Inventory* information via a survey, the CoC DCRS Lead Agency will:

- Provide written instructions to all homeless providers on how to report an accurate bed inventory
- Train provider-level staff on how to obtain an accurate bed inventory
- Follow-up with providers (via telephone, email, or in-person) to ensure the maximum possible response rate and accuracy of the housing inventory information
- After receiving the inventory information, confirm the information with each provider to verify the accuracy of the data

Services Inventory

The CoC DCRS Lead Agency will collect information on the services available to homeless people by asking homeless service providers. When possible, the each provider will review a chart listing services and corresponding agencies that provide the services and providers will update. This service inventory will include:

- Outreach
    - Street Outreach
    - Mobile Clinic
    - Law Enforcement
- Prevention activities
    - Rental Assistance
        - Arrears
        - First Month's Rent
    - Housing Stabilization Services
        - Rental application fees
        - Security deposits equal to no more than two months' rent
        - First and Last Month's rent
        - Utility deposits
        - Utility payments
        - Moving Costs
        - Housing Search and Placement assistance and relocation
        - Case Management
        - Mediation Activities
        - Legal Services
        - Credit repair/Counseling Services
- Rapid Rehousing
    - Rental Assistance
    - Housing Stabilization Services
- Supportive Services
    - Assistance with moving costs
    - Case management
    - Child care
    - Education services
    - Employment assistance and job training
    - Food
    - Housing search and counseling services
    - Legal services

- Life skills training
- Mental health services
- Outpatient health services
- Outreach services
- Substance abuse treatment services
- Transportation
- Utility deposits

Determining Housing Needs

Annually, the CoC DCRS Lead Agency will review the data collected as a result of the homeless counts and housing/services inventories, and determine what housing and services are needed given the homeless populations. The methods to undertake this review include:

- Determining Housing Needs
- Calculating Unmet Needs

There are many methods available to conduct these reviews. The DCRS Lead Agency will determine how it will conduct these reviews guided by HUD's recommendations. This information is necessary for the long-term program and strategic planning done as a community. This includes meeting the need of families and individuals for:

- Emergency Shelter beds,
- Transitional Housing units, and
- Permanent Supportive Housing units.

HUD's standardized methodology for calculating the Unmet Need uses PIT data and local provider expertise to calculate an initial estimate of Unmet Need. Housing Unmet Need for the homeless reflects the difference between the existing bed and unit capacity and the number of homeless persons and households in the CoC at one point in time. The information for the Unmet Need calculation is collected with the PIT count and housing inventory process, except when regarding the housing needs of those experiencing homelessness. To determine the housing needs of homeless persons who are residing in emergency shelter, transitional housing, and persons who are unsheltered, the CoC will gather the informed perspective of all of the homeless assistance providers in the Continuum that work with the persons experiencing homelessness. This review will be comprehensive and thorough for each person and household counted during the PIT.

Unsheltered Homeless

The CoC DCRS Lead Agency will obtain the housing needs of *unsheltered homeless* persons by convening a group of agency partners to discuss and arrive at a consensus on the number of persons in need of each type of housing, based on the point in time surveys/results and subpopulations identified. ServicePoint users with confidentiality agreements will be requested to be a part of this work group to protect the confidentiality of households' sensitive information which will be used to determine the best type of housing needed to end their homelessness.

Sheltered Homeless

The CoC DCRS Lead Agency will assess the housing needs of *sheltered homeless* persons by asking each emergency shelter and transitional housing provider listed in the Housing Inventory Charts to report the number of their clients that need emergency shelter, transitional housing, and permanent housing to ultimately resolve their homeless situation.

Determination

When determining housing needs, the CoC DCRS Lead Agency and the convened groups will remember that:

- Each person or family should be placed in the one program type that will best assist the household in ending their homelessness; this will require the convened group to be precise when considering the type of housing needed to end the household's homelessness.
- Calculations for each program type (emergency shelter, transitional housing, or permanent supportive housing, etc.) will be done separately for unaccompanied individuals and persons in families with children; this is necessary to accurately reflect the bed capacity needs for each group.

Calculating Unmet Need

The CoC DCRS Lead Agency will use the following standardized formulas for calculating Unmet Need by program type (emergency shelter, transitional housing, and permanent supportive housing):

- Unmet need for Emergency Shelter (ES) = The number of unsheltered homeless persons who need ES + The number of persons currently in ES who will only need ES) – (Total number of ES beds + ES beds under development)
- Unmet need for Transitional Housing (TH) = (The number of unsheltered homeless persons who need TH + the number of persons in ES who need TH + the number of persons in TH who will only need TH) - (Total number of TH beds + TH beds under development)
- Unmet need for Permanent Supportive Housing (PSH) = (The number of unsheltered homeless persons who need PSH + the number of persons in ES who need PSH + the number of persons in TH who need PSH) - (Total number of vacant PSH beds + PSH beds under development)

Process for Determining CoC Priorities

Determining gaps and their relative priority are fundamental steps in the Howard County CoC planning process, which will serve as a guide for the annual Plan to End Homelessness goal setting. Decisions regarding the priority of identified gaps will be the basis for strategizing how to secure new resources or expand existing ones to best end and prevent homelessness in our community. All CoC members will be invited to be involved in the decision-making to determine and prioritize gaps. To determine and prioritize identified gaps, the CoC DCRS Lead Agency will hold an annual "*Prioritizing Howard County's Unmet Needs*" session.

- CoC and non-CoC members will be invited to participate
- Homeless count (PIT), housing (HIC) and service inventories, and Unmet Need data will be presented
- Howard County CoC members will consider and discuss several criteria when prioritizing gaps, including:
    - Relative need among sub-populations
    - Vulnerability of sub-populations (due to age, diagnosis, veteran)
    - Groups not yet served versus those with some housing resources in place
    - Whether a certain need is growing and if so, how rapidly
    - Users of high-end services (e.g., hospitalization, detoxification)

  - Gaps in each major housing type, and if so, which ones
  - Whether there are sufficient services to serve persons already in emergency shelter, transitional housing programs, or permanent housing
  - What services are missing to help people obtain and/or maintain permanent housing or permanent supportive housing
  - What services are essential to certain subgroups, and if they are missing
  - Are there major gaps in the homeless system or missing linkages among components of the system (e.g., outreach, intake, referral, assessment)
- After discussion, a list of housing, service and system gaps will be created

Grievance Policy and Procedure for Written and Verbal Complaints

Policy Statement

It is the policy of the Howard County CoC to provide its members with a fair and efficient process to present and resolve complaints and grievances. In the case of complaints about CoC-funded programs, the CoC DCRS Lead Agency will provide oversight; however, each HUD-funded organization shall have a grievance procedure and shall implement the procedure when applicable, and must incorporate the minimum steps, as listed here, regarding any complaints or grievances.

Written Complaints about the CoC

Any written complaint against the CoC will be reviewed by the ERA Committee within ten days of its receipt. The Chair will respond within 30 days by:

- Assisting the complainant in articulating /identifying issues, if needed
- Determining what action needs to be taken, if any
- Responding in writing to complainant with clear identification of issue and specifics about its resolution

Complaints about a Program Receiving CoC and ESG Funds

- A first-person written and/or documented complaint will be considered a **grievance**.
- A verbal, second-hand or hearsay complaint will be considered a **complaint**.
- The person making the grievance or complaint will be asked if they have adhered to grievance procedures provided by the program organization they are making a grievance or complaint about. If the person making the grievance or complaint has not gone through the grievance procedure provided by the organization, the DCRS Lead Agency will recommend that the person do so and document that recommendation.
- If the resolution provided by that organization was not satisfactory to the complainant, he/she may put the problem in writing and submit it to the DCRS Lead Agency. If the complainant does not want his/her name attached to the complaint, his/her anonymity will be protected. If the complainant is unwilling to put the concern in writing, the DCRS Lead Agency will document what has been said.
- Each situation will be treated seriously and with sensitivity, and will be documented for the record with date, time, program name, and nature of the complaint, as well as with any action taken towards resolution.

- Once a complaint or grievance has been submitted, the DCRS Lead Agency will approach the problem program's representative, explain the complaint or grievance, and ask for a response to the charge(s) within ten (10) business days. Responses will be documented. It will be up to the DCRS Lead Agency to decide if the matter needs to be discussed by the ERA. A second complaint or grievance will be handled the same. The complainant may file a written appeal (second complaint) within ten (10) days of the first response; the client's written appeal will be responded to within ten (10) days of its receipt.
- If a program receives a third complaint, the ERA will review the situation and recommend action, including all correspondence and documentation. The Executive Director of the program being reviewed will be asked to respond to the ERA. The third compliant will be handled within the same timeframe as the first and second.
- All complaints or grievances involving **vulnerable adults or children** will be immediately turned over to the appropriate county office.

Note: The DCRS Lead Agency is not party to any agreements between the landlords and participant households. Should a participant household believe they have been discriminated against by their landlord they should contact the Howard County Office of Human Rights immediately.

Administration Requirements

Grant Administration

The CoC Interim Rule refers to OMB Circulars for proper and sound Grant Administration, Agreements, Sub-Agreements, and financial cost principles for all Recipients and Subrecipients. All parts therein must be practiced, maintained and adhered to with regards to any CoC funds.

Specifically, as stated in 24 CFR 578.99 (e), Applicability of OMB Circulars:

> "*The requirements of 24 CFR part 85 – Administrative Requirements for Grants and Cooperative Agreements to State, Local, and Federally Recognized Indian Tribal Governments and 2 CFR part 225 – Cost Principles for State, Local and Indian Tribal Governments (OMB Circular A-87) – apply to governmental Recipients and Subrecipients except where inconsistent with the provisions of this part. The requirements of 24 CFR part 84 – Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations; 2 CFR part 230 – Cost Principles for Non-Profit Organizations (OMB Circular A-122); and 2 CFR part 220 - Cost Principles for Education Institutions apply to the nonprofit Recipients and Subrecipients, except where inconsistent with the provisions of the McKinney- Vento Act or this part.*"

Invoices

1) A Recipient or Subrecipient that receives Howard County CoC funds must submit invoices at least once per quarter, after eligible activities commence, in order to allow the Howard County Government (the Grantee) to draw from HUD in accordance with the Timeliness requirements of the Interim Rule.

2) All invoices will be on a reimbursable basis; evidence funds have been paid is required for reimbursement.
3) The Grantee will reimburse the appropriate portion of the funds to a Recipient or Subrecipient no later than 45 days after receiving an approvable request for such distribution.
4) It is the Grantee's policy that all invoices need sufficient backup documentation including evidence of paid invoices; evidence activity by funding stream and approved budget line item;
5) Other documentation may be requested by the Grantee to confirm payment is eligible against the requested CoC grant line item and eligible costs. All OMB Circular requirements must apply.

Grant Agreement Requirements

Recipients, Subrecipients and any subcontractor(s), as applicable, will be required to sign a grant agreement in which the following minimum requirements are agreed:

1) To ensure the operation of the project(s) in accordance with the provisions of the McKinney-Veto Act and all requirements under 24 CFR part 578;
2) To monitor and report the progress of the project(s) to the Continuum of Care and HUD;
3) To ensure, to the maximum extent practicable, that individuals and families experiencing homelessness are involved, through employment, provision of volunteer services, or otherwise, in constructing, rehabilitating, maintaining, and operating facilities for the project and in providing supportive services for the project;
4) To require certification that:
    a) The confidentiality of records is provided to any individual or family that was provided family violence prevention or treatment services through the project;
    b) The address or location of any family violence project assisted under this part will not be made public, except with written authorization of the person responsible for the operation of such project;
    c) Policies and practices are established that are consistent with, and do not restrict, the exercise of rights provided by subtitle B of title VII of the Act and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness;
    d) In the case of projects that provide housing or services to families, a staff person will be designated to be responsible for ensuring that children being served in the program are enrolled in school and connected to appropriate services in the community, including early childhood programs such as Head Start, part C of the Individuals with Disabilities Education Act, and programs authorized under subtitle B of title VII of the Act;
    e) The funded agency, its officers, and employees are not debarred or suspended from doing business with the Federal Government; and
    f) Information, such as data and reports, as required by HUD will be submitted; and
    g) To establish such fiscal control and accounting procedures as may be necessary to assure the proper disbursal of, and accounting for grant funds in order to ensure that all financial transactions are conducted, and records maintained in accordance with generally accepted accounting principles;
    h) To monitor Subrecipient match and report on match to HUD;
    i) To take the educational needs of children into account when families are placed in housing and will, to the maximum extent practicable, place families with children as close as possible to their school of origin so as not to disrupt such children's education;
    j) To monitor/be monitored at least annually;

k) To use the centralized or coordinated assessment system established by the Continuum of Care as set forth in § 578.7(a)(8); in Howard County, this is the Coordinated System of Homeless Services (CSHS)
   - *A victim service provider may choose not to use the Continuum of Care's centralized or coordinated assessment system, provided that victim service providers in the area use a centralized or coordinated assessment system that meets HUD's minimum requirements and the victim service provider uses that system instead;*

l) To follow the written standards for providing Continuum of Care assistance developed by the Continuum of Care, including the minimum requirements set forth in § 578.7(a)(9);

m) Enter into agreements requiring Recipient/Subrecipient/subcontractor to operate the project(s) in accordance with the provisions of this Act and all requirements under 24 CFR part 578; and

n) To comply with such other terms and conditions as HUD may establish by NOFA.

CONTINUUM OF CARE PROJECTS

The HEARTH Act requires the Howard County CoC to have written policies and procedures that govern the provision of assistance to individuals and families under the CoC programs. These policies and procedures provide guidance to local providers in administering CoC-funded assistance and include eligibility and documentation standards for CoC programs. This policies and procedures document is not intended to be in lieu of or in place of the Interim Rule for the HEARTH Act, but is intended to clarify Howard County local decisions regarding program administration. All HUD funded providers must follow the Interim Rule in its entirety.

A. Shelter Plus Care Program (S+C) – This program provides rental assistance and support services to homeless persons and to families with a member who has a diagnosed mental illness. The Howard County Mental Health Authority oversees all of the day to day activities of S+C and is a direct Recipient of this funding from HUD. However, the CoC DCRS Lead Agency applies for the funding, under the CoC Main Application.

B. Permanent Supportive Housing (PSH) – This program provides rental assistance with accompanying supportive services for homeless households, where one family member has a diagnosed disability. The PSH Program provides rental assistance at scattered site locations across Howard County; assistance cannot be used outside of Howard County. Persons who have exited the program are eligible to receive up to six months of supportive services to ensure the household's housing stability. The CoC DCRS Lead Agency is the Direct Recipient of this funding from HUD and applies for this funding annually through HUD's annual competition. The DCRS Lead Agency maintains a Grant Agreement with a Subrecipient agency to operate the program.

C. Emergency Solutions Grant (ESG) – Emergency Solutions Grant agencies are required to participate in local CoC planning and coordination of services. The Howard County DCRS Lead Agency is the Grantee with the State of Maryland's Department of Housing and Community Development (DHCD), which administers ESG funds to local state jurisdictions. The ESG programs follow the Howard County CoC Policies and Procedures.

Howard County Continuum of Care Policies & Procedures

Participant Eligibility & Documentation

Overview

All clients served through the Howard County CoC must follow the process of ranking by vulnerability, and meet HUD's "Homeless" definition. It is the goal of the Howard County CoC to serve those with the greatest vulnerabilities and barriers to housing. As set forth in the HEARTH Act, there are four categories of eligibility: 1) Literally Homeless, 2) Imminent Risk of Homelessness, 3) Homeless Under Other Federal Statutes, and 4) Fleeing/Attempting to Flee Domestic Violence. The Howard County CoC serves categories 1, 2 and 4 of the "Homeless" definition as described below. Due to the shortage of resources for those priority populations and ongoing demand, the definition of "At-Risk of Homelessness," as defined at 24 CFR 576.2, is not currently eligible for services in Howard County.

Definitions

1) Homeless Definitions. The following are the definitions of homelessness that must be followed when determining a household's eligibility for entrance into the Howard County CoC programs.
    i. Category (1) An individual or family who lacks a fixed, regular, and adequate nighttime residence:
        1. (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
        2. (ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or
        3. (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

    ii. Category (2) An individual or family who will imminently lose their primary nighttime residence, provided:
        1. (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
        2. (ii) No subsequent residence has been identified; and
        3. (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing; or

    iii. Category (4) Any individual or family who:
        1. (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;

2. (ii) Has no other residence; and
3. (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.

2) Chronically Homeless Definition. Chronically homeless means:
   i. A ''**homeless individual with a disability**,'' as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:
      1. Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; **and**
      2. Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (i)(1). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;
   ii. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; **or**
   iii. A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

3) Severe Service Needs. For persons identified as having the most *severe service needs,* at least one of the following is true:
   i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; or
   ii. Significant health or behavioral health challenges or functional impairments which require a significant level of support in order to maintain permanent housing.

4) Developmental Disability Definition. As defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002):
   i. A severe, chronic disability of an individual that
      1. Is attributable to a mental or physical impairment or combination of mental and physical impairments;
      2. Is manifested before the individual attains age 22;
      3. Is likely to continue indefinitely;
      4. Results in substantial functional limitations in three or more of the following areas of major life activity:
         a. Self-care;
         b. Receptive and expressive language;
         c. Learning;
         d. Mobility;

e. Self-direction;
f. Capacity for independent living;
g. Economic self-sufficiency.

5. Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.

ii. An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting three or more of the criteria described in paragraphs (1)(i) through (v) of the definition of developmental disability in this section if the individual, without services and supports, has a high probability of meeting these criteria later in life.

Order of Priority

For the Howard County CoC Programs providing PSH that are dedicated to and prioritizes persons experiencing chronic homelessness, the following order of priority is followed:

1) First Priority–Chronically Homeless Individuals and Families **with** the *Longest History of Homelessness* **and** with the *Most Severe Service Needs*.
    1) A chronically homeless individual or head of household as defined in 24 CFR 578.3 (B.2 of this document) for which **both** of the following are true:
        i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
        ii. The Howard County CoC's CSHS has identified the chronically homeless individual or head of household, who meets all of the criteria meeting the definition of chronically homeless, of the family as having severe service needs (see Severe Service Needs of this document).

2) Second Priority–Chronically Homeless Individuals and Families **with** the *Longest History of Homelessness*.
    1) A chronically homeless individual or head of household, as defined in 24 CFR 578.3 (B.2 of this document), for which **both** of the following are true:
        i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,
        ii. The Howard County CoC's CSHS has not identified the chronically homeless individual or the head of household, who meets all of the criteria listed under First Priority.

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

i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and
ii. The Howard County CoC's CSHS has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, and the family has Severe Service Needs, see Severe Service Need of this document.

4) Fourth Priority–All Other Chronically Homeless Individuals and Families.
   1) A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:
      i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is less than 12 months; and
      ii. The Howard County CoC's CSHS has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs

Permanent Supportive Housing (PSH) Disability Qualification

The Permanent Supportive Housing for Persons with Disabilities projects only accept homeless persons with a verified disability, and prioritizes units that are not already dedicated to the chronically homeless, to those who are experiencing chronic homelessness, based on the determined Order of Priority. The head of household or a minor may qualify the household for acceptance into the program for the qualifying disability. *Source Documentation of Disability* must be collected at program acceptance, and is not to be recollected at annual recertification.

Source Documentation

All Recipients and Subrecipients must maintain documentation, obtained at intake, to demonstrate the eligibility of households served through CoC programs, and maintain and follow written intake procedures to ensure compliance with the homeless, chronically homeless, Severe Service Needs, and Disability definitions. Lack of third-party documentation (priority source) will not prevent an individual or family from being immediately admitted to emergency shelter, receiving street outreach services, or being admitted to shelter or receiving services provided by a victim service provider. However, the provider must document in the case file must the due diligence to obtain third party verification.

Order of Priority for Source Documentation:

1) Third-party documentation,
   a. Records contained in an HMIS or comparable database used by victim service or legal service providers are acceptable evidence of third-party documentation and intake worker observations if the HMIS retains an auditable history of all entries, including the person who entered the data, the date of entry, and the change made; and if the HMIS prevents overrides or changes of the dates on which entries are made.

2) Intake worker observations, and
3) Certification from the person seeking assistance.

Acceptable evidence for homeless status, by Category:

1) *Category (1). Literally Homeless.* If the individual or family qualifies as Literally Homeless because he or she has resided in a place not meant for human habitation, or is residing in an emergency shelter, acceptable source documentation includes:
   a. Written observation by the outreach worker; or
   b. Written referral by another housing or service provider; or
   c. Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in shelter;
   d. For individuals exiting an institution—one of the forms of evidence above and:
      1. discharge paperwork or
      2. written/oral referral, or
      3. written record of intake worker's due diligence to obtain above evidence and certification by individual that they exited institution
2) *Category 2. Imminent-Risk of Homelessness.*
   a. A court order resulting from an eviction action notifying the individual or family that they must leave; or
   b. For individual and families leaving a hotel or motel—evidence that they lack the financial resources to stay; or
   c. A documented and verified oral statement; and
   d. Certification that no subsequent residence has been identified; and
   e. Self-certification or other written documentation that the individual lack the financial resources and support necessary to obtain permanent housing

3) *Category 4. Fleeing/ Attempting to Flee Domestic Violence.*
   a. For victim service providers:
      1. An oral statement by the individual or head of household seeking assistance which states: they are fleeing; they have no subsequent residence; and they lack resources. Statement must be documented by a self-certification or a certification by the intake worker.
   b. For non-victim service providers:
      1. Oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized, the oral statement must be verified; and
      2. Certification by the individual or head of household that no subsequent residence has been identified; and
      3. Self-certification or other written documentation, that the individual or family lacks the financial resources and support networks to obtain other permanent housing.

Acceptable evidence for Disability:

1) Evidence of diagnosis with one or more of the following:
   a. Substance use disorder, serious mental illness, developmental disability (as defined in Section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability.

2) Evidence must include *one* of the following:
   a. Written verification of the condition from a professional licensed by the state to diagnose and treat the condition;
   b. Written verification from the Social Security Administration;
   c. Copies of a disability check (e.g., Social Security Disability Insurance check or Veterans Disability Compensation);
   d. Intake staff (or referral staff) observation that is confirmed by written verification of the condition from a professional licensed by the state to diagnose and treat the condition that is confirmed no later than 45 days of the application for assistance and accompanied with one of the types of evidence above; or
   e. Other documentation approved by HUD.

Acceptable evidence for "Chronic Homeless:"

Evidence that the individual is a ''homeless individual with a disability'' as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)) must include:

1) **Evidence of homeless status**
   a. For paragraph (1)(i) of the "Chronically homeless'' definition in § 578.3, **evidence** that *the individual lives in a place not meant for human habitation, a safe haven, or an emergency shelter*:
      i. An **HMIS record** or record from a comparable database;
      ii. A **written observation by an outreach worker** of the conditions where the individual was living;
      iii. A **written referral** by another housing or service provider; or
      iv. Where evidence in paragraphs (a)(4)(ii)(A) through (C) of this section cannot be obtained, **a certification by the individual seeking assistance**, which must be accompanied by the intake worker's documentation of the living situation of the individual or family seeking assistance and the **steps taken to obtain evidence in paragraphs** (a)(4)(ii)(A) through (C).

2) **Evidence of a disability**
   a. Acceptable evidence of the disability includes written verification of the disability from a professional licensed by the state to diagnose and treat the disability and his or her certification that the disability is expected to be long continuing or of indefinite duration and substantially impedes the individual's ability to live independently;
      i. Written verification from the Social Security Administration;
      ii. The receipt of a disability check (e.g., Social Security Disability Insurance check or Veteran Disability Compensation);

iii. Intake staff-recorded observation of disability that, no later than 45 days from the application for assistance, is confirmed and accompanied by evidence in paragraph (a)(4)(i)(B)(1), (2), (3), or (5) of this section; or
iv. Other documentation approved by HUD.

3) **Duration & Breaks in Homelessness**
   a. For ''Chronically homeless'', **evidence** must include a **combination of the evidence above *subject to the following conditions***:
      i. Third-party documentation of a single encounter with a homeless service provider on a single day within 1 month is sufficient to consider an individual as homeless and living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter for the entire calendar month (e.g., an encounter on May 5, 2015, counts for May 1—May 31, 2015), unless there is evidence that there have been at least 7 consecutive nights not living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter during that month (e.g., evidence in HMIS of a stay in transitional housing);

      ii. Each break in homelessness of at least 7 consecutive nights not living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter between separate occasions must be documented with the evidence described in paragraphs (a)(4)(ii)(A) through (D) of this section;

      iii. Evidence of stays in institutional care facilities fewer than 90 days included in the total of at least 12 months of living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter must include the evidence in paragraphs (a)(4)(iv)(A) through (B) of this section and evidence described in paragraphs (a)(4)(ii)(A) through (D) of this section that the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately prior to entering the institutional care facility; and

      iv. For at least 75 percent of the chronically homeless individuals and families assisted by a Recipient in a project during an operating year, no more than 3 months of living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter may be documented using the evidence in paragraph (a)(4)(ii)(D) of this section for each assisted chronically homeless individual or family. This limitation does not apply to documentation of breaks in homelessness between separate occasions, which may be documented entirely based on a self-report by the individual seeking assistance.

   b. Chronically homeless under paragraph (2) of the ''Chronically homeless'' definition because he or she has been **residing in an institutional care facility for fewer than 90 days and met all of the criteria in paragraph (1) of the definition, before entering that facility, evidence must include the following:**
      i. Discharge paperwork or a written or oral referral from a social worker, case manager, or other appropriate official of the institutional care facility stating the beginning and end dates of the time residing in the institutional care facility. All oral statements must be recorded by the intake worker; or

ii. Where the evidence in paragraph (a)(4)(iv)(A) of this section is not obtainable, a written record of the intake worker's due diligence in attempting to obtain the evidence described in paragraph (a)(4)(iv)(A) and a certification by the individual seeking assistance that states that he or she is exiting or has just exited an institutional care facility where he or she resided for fewer than 90 days; and

iii. Evidence as set forth in paragraphs (a)(4)(i) through (iii) of this section that the individual met the criteria in paragraph (1) of the definition for ''Chronically homeless'' in § 578.3, immediately prior to entry into the institutional care facility.

c. If a **family qualifies as chronically homeless** under paragraph (3) of the ''Chronically homeless'' definition, evidence must include the evidence (as set forth in 3a.1-4 of this section) that the adult head of household (or if there is no adult in the family, a minor head of household) met all of the criteria in paragraph (1) or (2) of the definition.

Household Composition

1) Persons accepted into CoC programs, other than the qualifying individual, may include:
    a. Dependents, minor children whom the Head of Household can show some type of custody arrangement;
    b. Children over 18 who have documentation verifying that they are full-time students at a qualified higher-education institution, or who were originally part of the qualifying household composition;
    c. A spouse;
    d. A critically-ill parent or adult child with a disability; and
    e. Certified medical caregivers.
1) Clients must report, in writing, any changes in their household size when a person moves in or out of the unit within two (2) weeks.

Occupancy, Rent and Income

Occupancy Agreements and Leases

A. There must be a signed occupancy agreements or lease/sub-lease in place for CoC Leasing or Rental Assistance program participants.
B. The specific regulations under the Interim Rule for Rental Assistance activities and Leasing activities apply, (i.e., difference between Tenant Based Rental Assistance and Project Bases Rental Assistance).

Calculation of Rent

1) CoCs are not required to impose occupancy charges on program participants as a condition of residing in housing. However, when any form of Rental Assistance or Leasing is provided on behalf of the client, through CoC funds, the Howard County CoC charges the highest of:
    i. 30 percent of the family's monthly adjusted income (adjustment factors include the number of people in the family, age of family members, medical expenses, and child-care expenses); or
    ii. 10 percent of the family's monthly income.

Annual Income

1) Each program participant must agree to supply the information or documentation necessary to verify the program participant's income at program acceptance and upon recertification. A program participant's income must be reviewed initially, and annually thereafter.
2) However, if there is a change in family composition or an increase/decrease in the resident's income during the year, the resident may request an interim reexamination, and the client's portion of the contract rent would be adjusted accordingly. Such increases/decreases to household income must be reported prior to the end of the month in which the change occurs, so if any possible adjustment (increase or decrease) in rent can begin the next full month following when it was reported.
3) Household income must be calculated in accordance with 24 CFR 5.609 and 24 CFR 5.611(a).
4) Annual Income *Does* Includes:
    iii. The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services;
    iv. Net income from the operation of a business or profession;
    v. Interest, dividends, and other net income of any kind from real and personal property;
    vi. The full amount of periodic payments received from social security, annuities, insurance policies, retirement funds, pensions, disability or death benefits and other similar types of periodic receipts, including lump sum payment for delayed start of a periodic payment;
    vii. Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation and severance pay;
    viii. Welfare assistance. Welfare or other payments to families or individuals, based on need, that are made under programs funded, separately or jointly, by Federal, State or local governments (e.g. Social Security Income (SSI) and general assistance available through state welfare programs);
    ix. Periodic and determinable allowances, such as alimony and child support payments, and regular contributions or gifts received from persons not residing in the dwelling; and
    x. All regular pay, special pay and allowances of a member of the Armed Forces, except special hostile fire pay.

5) Annual Incomes *Does Not* Include:
    i. Income from employment of children (including foster children) under the age of 18 years;
    ii. Payments received for the care of foster children or foster adults (usually individuals with disabilities, unrelated to the tenant family, who are unable to live alone);
    iii. Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains, and settlement for personal or property losses (except payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation and severance pay);
    iv. Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member;
    v. Income of a live-in aide as defined in 24 CFR 5.403;
    vi. The full amount of student assistance paid directly to the student or to the educational institution;
    vii. The special pay to a family member serving in the Armed Forces who is exposed to hostile fire;
    viii. Amounts received under training programs funded by HUD;

ix. Amounts received by a disabled person that are disregarded for a limited time for purposes of SSI income eligibility and benefits because they are set aside for use under a Plan for Achieving Self-Support (PASS);
x. Amounts received by a participant in other publicly assisted programs which are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) and which are made solely to allow participation in a specific program;
xi. Amounts received under a resident service stipend.
xii. Incremental earnings and benefits resulting to any family member from participation in qualifying State or local employment training programs (including training programs not affiliated with a local government) and training of a family member as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives, and are excluded only for the period during which the family member participates in the employment training program;
xiii. Temporary, non-recurring or sporadic income (including gifts);
xiv. Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era;
xv. Earnings in excess of $480 for each full time student 18 years old or older (excluding the head of household and spouse);
xvi. Adoption assistance payments in excess of $480 per adopted child;
xvii. Deferred periodic payments of SSI income and social security benefits that are received in a lump sum amount or in prospective monthly amounts;
xviii. Amounts received by the family in the form of refunds or rebates under state or local law for property taxes paid on the dwelling unit;
xix. Amounts paid by a State agency to a family with a developmentally disabled family member living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home; and
xx. Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under any program to which the exclusions set forth in 24 CFR 5.609(c) apply.
A notice will be published in the Federal Register and distributed to PHAs and housing owners identifying the benefits that qualify for this exclusion. Updates will be published and distributed when necessary.

6) Adjustments to Income
   i. $480 for each dependent
   ii. $400 for any elderly or disabled family;
   iii. The sum of the following, to the extent the sum exceeds 3 percent of annual income:
      1. Unreimbursed medical expenses of any elderly family or disabled family; and
      2. Unreimbursed reasonable attendant care and auxiliary apparatus expenses for each member of the family who is a person with disabilities, to the extent necessary to enable any member of the family (including the member who is a person with disabilities) to be employed. This deduction may not exceed the earned income received by family members who are 18 years of age or older and who are able to work because of such attendant care or auxiliary apparatus; *and*

3. Reasonable child care expenses necessary to enable a member of the family to be employed or to further his or her education, provided that:
    a. the child or children are 12 years old and under;
    b. the resident is employed or enrolled in school while the dependent is receiving care;
    c. the amount deducted as child care expenses is necessary for the resident to work or attend school and the amount necessary for the resident to work does not exceed the amount earned while working; *and*
    d. the resident is not reimbursed for this expense.

7) The Earned Income Disallowance (EID), 24 CFR 5.617.
    i. Applies to disabled participants of PH projects
    ii. Special regulations apply to all disabled clients that became employed after April 20, 2001 and
        1. were previously unemployed for one or more years; or
        2. earned less than $3,375 in the previous 12 months; or
        3. increased their income during a self-sufficiency or job training program; or
        4. Received welfare benefits or participated in a Welfare-to-Work program within six months prior to getting a job.

Utility Payments

1) Utility reimbursements are only allowed when the household's rent does not include utility costs, or is not considered "Fair Market Rent." This usually occurs for those living in units that are individually metered, and clients receive bills directly from the utility company.
2) In this situation, the client's rent equals the client's required rent payment less an allowance for reasonable utility consumption (allowance schedules are issued annually by the local public housing authority). Telephone, cable and/or interest costs are not to be included as a utility for this purpose.
3) If reasonable utility expenses alone exceed the amount the client is required to pay for both shelter and utilities, the Subrecipient must make arrangements in their financial payment system to pay the utility company directly.
4) This calculation method is reflected in the HUD Resident Rent Calculation Worksheet.
5) Under no circumstance must a household receive direct payment for any costs.

> *…The CoC Program Interim Rule prohibits direct payments to program participants because it is an ineligible use of CoC Program funds. CoC Program funds are only to be used for the direct provision of housing and supportive services for eligible persons. A Recipient or Subrecipient cannot guarantee a direct cash payment to a program participant will be used for an allowable supportive service or housing payment; thus, the requirement for CoC Program funds for utility payments to be made to the utility companies and other third party service providers.* -HUD Headquarters, April 24, 2014

Housing

Housing Standards

For any assistance provided, the housing and services must be in compliance with all applicable State and local housing codes, licensing requirements, and any other requirements of the jurisdiction in which the project is located regarding the condition of the structure and the operation of the housing or services.

Lead Based Paint

Overview

On September 15, 1999, HUD published a final regulation, "*Requirements for Notification, Evaluation and Reduction of Lead-Based Paint Hazards (LBP) in Federally Owned Residential Property and Housing Receiving Federal Assistance*," known as the Lead Safe Housing Rule. The purpose of the regulation is to protect young children from lead-based paint hazards in housing that is either receiving assistance from the Federal government or is being sold by the government. The regulation establishes procedures for evaluating whether a hazard may be present, controlling or eliminating the hazard, and notifying occupants of what was found and what was addressed in such housing. The Lead Safe Housing Rule took effect on September 15, 2000. HUD program requirements concerning lead-based paint hazards are found in 24 CFR Part 35, Lead-Based Paint Poisoning Prevention in Certain Residential Structures, also known as the Lead Safe Housing Rule. The regulation is divided into "subparts" of 24 CFR Part 35. Three subparts apply to all programs.

1) *Subpart A is the disclosure regulation that requires sellers and lessors of most pre-1978 housing to disclose known information on lead-based paint and/or lead-based paint hazards to prospective buyers and renters.*
2) *Subpart B describes the scope of coverage of the new regulation and provides definitions and general requirements for all programs.*
3) *Subpart R describes methods and standards for lead-based paint hazard evaluation and reduction activities.*
4) For residential properties for which COC program funds are used for acquisition, leasing, supportive services and operations, subparts A, B, K, M, and R apply.

Lead-Based Paint Exemptions

Exemptions do not apply if a child less than age 6 resides or is expected to reside in the dwelling unit that was built before January 1, 1978. In that situation, the unit must have a visual assessment completed. However, the following are exempted from implementing the Lead Safe Housing Rule:

1) It is a residential property for which construction was completed on or after January 1, 1978;
2) It is housing/residential property for the elderly, or a residential property designated exclusively for persons with disabilities where a child less than age of 6 will not be residing if built before 1978;
3) A zero-bedroom dwelling unit, including a single room occupancy (SRO) dwelling unit, etc.).

Processes for Determining Exemptions

Before any CoC assistance may be provided, the following steps must be taken:

1) Verify age of the property, (if built after January 1, 1978, property is Exempt).
2) Verify age of all members of the household, (if no child under age of 6, property is Exempt).

If property is built before January 1, 1978, **and** a child under the age of 6 will be residing in the property, the following steps must be taken:

1) Is property a zero-bedroom or SRO-unit? If yes, property is Exempt.
2) Has x-ray or laboratory testing of all painted surfaces by certified personnel been conducted in accordance with HUD regulations and the unit is officially certified to not contain lead-based paint? If yes, property is Exempt.
3) Has this property had all lead-based paint identified and removed in accordance with HUD regulations? If yes, property is Exempt. All documentation must be maintained.
4) Has the property already undergone (and passed) a visual assessment within the past 12 months *or* has lead abatement been completed? If yes, property is Exempt. All documentation must be maintained.

If the property does not meet an above listed Exemption, the following steps must be followed:

1) A visual assessment of all paint must be conducted by personnel who have completed the following training on HUD's website at: http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm
    a. Documentation must be maintained that the training has been completed.
2) Conduct a visual assessment.
3) Complete the Lead-Based Paint Visual Assessment Certification Form.
4) Determine if deteriorated paint identified during the visual assessment needs to be repaired prior to approving the unit; de-minimus levels apply:
    a. If the answer is "Yes" to any of the following, deteriorated paint must be stabilized, and the CoC will not approve the unit for tenancy.
        i. 20 square feet on exterior surfaces;
        ii. 2 square feet in any one interior room or space; and/or
        iii. 10 percent of the total surface area on an interior or exterior component with a small surface area, like window sills, baseboards, and trim.
    b. If the answer is "No" to any of the following, deteriorated paint does not require stabilization, and the CoC will approve the unit for tenancy.
        i. 20 square feet on exterior surfaces;
        ii. 2 square feet in any one interior room or space; and/or
        iii. 10 percent of the total surface area on an interior or exterior component with a small surface area, like window sills, baseboards, and trim.

It is the Howard County CoC policy that no unit which requires paint stabilization is eligible for assistance under this program. The CoC will not permit rental assistance to be provided towards any unit that requires paint stabilization prior to occupancy.

Housing Quality Standards (HQS)

1) Units assisted with CoC funding must pass the Housing Quality Standards inspection before funds are provided, and annually thereafter.
2) The inspection involves a review of any third party documentation (such as a check of housing and public health code inspection certifications) as well as visual inspection of the unit.
3) Third party inspections are considered primary since trained inspectors perform them.

4) The person conducting the HQS must be conduct visual assessment of all paint (to verify if lead paint requires stabilization) and must have completed the following training on HUD's website: http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm
    a. Documentation must be maintained that the training has been completed.

Fair Market Rents (FMR)

For both Leasing and Rental Assistance, a unit's total rent may not exceed HUD determined fair market rent value (FMR), if utilities are included in the monthly amount. The annually published FMR's are gross rent estimates, and *include* the cost of utilities (except telephone/cable). If a unit is over the FMR limit, and/or does not include the cost of utilities, it must be documented in the client file that the unit exceeds the FMR and then must meet the Rent Reasonableness threshold for that size/type of unit instead.

Rent Reasonableness

For Leasing and Rental Assistance, rent paid must be actual costs and deemed reasonable in relation to rents being charged in the area for comparable space. If a unit's monthly charge includes utilities, the FMR limit must be used. If a unit's monthly charge excludes utilities and/or is over the annual FMR rate, the Rent Reasonable guidelines must be used. If in determining comparability, consider location, size, type, quality, amenities, facilities, and management services. If the owner has both assisted and unassisted housing units, rents for the assisted units may not exceed rents being charged for that owner's comparable unassisted units; or must be comparable within reason. The Subrecipient should keep file documentation showing the unit's rent reasonableness.

Rental Assistance

Use

1) Grant funds may be used for rental assistance for homeless individuals and families.
2) Rental assistance cannot be provided to a program participant who is already receiving rental assistance, or living in a housing unit receiving rental assistance or operating assistance through other federal, State, or local sources.
3) The Howard County CoC rental assistance is *long-term*, (longer than 24 months)
4) The Howard County CoC PSH rental assistance projects are all tenant-based (scattered sites)
5) Grant funds may be used for security deposits in an amount not to exceed 2 months of rent.
6) An advance payment of the last month's rent may be provided to the landlord, in addition to the security deposit and payment of first month's rent.

Rental Assistance Administration

1) Rental assistance may be administered by a State, unit of general local government, a public housing agency or a private nonprofit organization.
2) Housing Assistance Efficiency Act, H.R. 2790: The 113th Congress, 2D Session passed H. R. 2790 on December 3, 2014: "*To authorize private nonprofit organizations to administer permanent housing rental assistance provided through the Continuum of Care Program under the McKinney-Vento Homeless Assistance Act, and for other purposes*." https://www.govtrack.us/congress/bills/113/hr2790/text
3) Costs of administering the rental assistance are considered service delivery costs of rental assistance and are eligible in the CoC Program as Rental Assistance costs.

- Staff Time involved in administering rental assistance in the CoC Program includes contracting for and making rental assistance payments to the landlord/landowner, and conducting the Housing Quality Inspections (HQS).

Tenant-Based Rental Assistance (TBRA)

1) Tenant-based rental assistance is rental assistance in which program participants choose housing of an appropriate size in which to reside, and hold the lease in their own name.
2) Program participants who have complied with all Howard County CoC PSH program requirements may retain their rental assistance and within the Continuum of Care geographic area, if they chose.
3) Program participants who have complied with all program requirements during their residence and who have been a victim of domestic violence, dating violence, sexual assault, or stalking, and who reasonably believe they are imminently threatened by harm from further domestic violence, dating violence, sexual assault, or stalking (which would include threats from a third party, such as a friend or family member of the perpetrator of the violence), if they remain in the assisted unit, and are able to document the violence and basis for their belief, may retain the rental assistance and move to a different Continuum of Care geographic area if they move out of the assisted unit to protect their health and safety.

Vacant Units

If a unit assisted under this section is vacated before the expiration of the lease, the assistance for the unit may continue for a maximum of 30 days from the end of the month in which the unit was vacated, unless occupied by another eligible person. No additional assistance will be paid until the unit is occupied by another eligible person. Brief periods of stays in institutions, not to exceed 90 days for each occurrence, are **not** considered vacancies.

Property Damage

The Howard County CoC allows the use of grant funds in an amount not to exceed one month‘s rent to pay for any damage to housing due to the action of a program participant. This shall be a one-time cost per participant, incurred at the time a participant exits a housing unit.

Resident Rent

1) Rent must be calculated as stated in “Calculation of Rent” of this document.
2) The Howard County CoC requires program participants to pay the landlord directly for their share of the rent.

Leases

1) Program participants must enter into a lease agreement for a term of at least one year, which is terminable for cause.
2) The lease agreement must be automatically renewable upon expiration for terms that are a minimum of one month long, except on prior notice by either party.

Leasing

The following apply to Leasing Projects for monitoring purposes and reporting to HUD, since:

> *The final Leasing project expired on November 30, 2015, and renewed under Rental Assistance. The Howard County CoC PSH Leasing project was long-term, (longer than 24 months), tenant-based and scattered site.*
>
> *This Transitional Housing project was not renewed in the FFY15 competition, and ended on January 31, 2016.The Howard County CoC TH Leasing project was sponsor-based and short-medium term (up to 24 months).*

Use

1) Recipients or Subrecipients may not disburse funds directly to participants to pay the leasing costs, but must pay individual landlords directly, and must only be used for homeless individuals or families.
2) Leasing assistance may not be provided to a program participant who is already receiving rental assistance, or leasing assistance, or living in a housing unit receiving rental assistance or operating assistance through other federal, State, or local sources.
3) Leasing assistance is subject to the requirements of the Lead-Based Paint Poisoning Prevention Act. For residential structures constructed before 1978, there are requirements and procedures for addressing the hazards of lead-based paint. The requirements encompass both the residential unit, and non-dwelling portions of a structure that might be used by children under seven (7) years of age, such as a day care center.
4) Neither the Recipient nor the Subrecipient may lease property (that it owns) to itself, a parent, or a subsidiary organization. The funds designated for Leasing may only be used for the actual costs of leasing a unit. They may not be used to pay for a Recipient or Subrecipient's mortgage or other costs.
5) The Howard County Government, or any of its subsidiaries, may not own property that is leased to a client in any Howard County CoC program.

Vacant Units

The Recipient or Subrecipient (whichever entity holds the lease with the landlord) must abide by the terms of the lease. Therefore, if the lease is for a year, then they must pay for a year regardless of whether the unit is occupied. If the lease is written in such a way that it ends when a client leaves, then they may not pay rent when a program participant is not living in the unit. Vacancy payments are eligible as long as it's in compliance with the lease agreement in place. Since leases are in the Recipient or Subrecipient's name, leaseholder is liable for paying the rent even if a leased unit is unoccupied. Therefore, Recipients and Subrecipients may continue to pay rent to owners even when vacant until a new program participant moves into the unit. It is notable that brief periods of stays in institutions, not to exceed 90 days for each occurrence, are **not** considered vacancies.

Property Damage

Leasing funds may not be used to pay for property damage, even upon client move-out.

Resident Rent

1) Rent must be calculated as stated in "Calculation of Rent" of this document.
2) The Howard County CoC requires program participants to pay their share of the rent to the sponsor agency.

Leases

1) Program participants in transitional housing must enter into an agreement for a term of at least one month.
2) The lease must be automatically renewable upon expiration, except on prior notice by either party, up to a maximum term of 24 months for transitional housing.
3) Program participants must not enter into a lease agreement with the landlords; rather the project sponsor must enter into an agreement with the landlord, and have an occupancy agreement in place between the project sponsor and the household.
4) The leases and occupancy agreements must be automatically renewable upon expiration for terms that are a minimum of one month long, except on prior notice by either party.

Placement in Vacancies

Housing First

Howard County's Continuum of Care and Coordinated System of Homeless Services follows and adheres to the Housing First model of placement into permanent supportive housing for those experiencing homelessness. The main Housing First components are:

- Few to no programmatic prerequisites to permanent housing entry
- Low barrier admission policies
- Rapid and streamlined entry into housing
- Supportive services are voluntary, but can and should be used to persistently engage tenants to ensure housing stability
- Tenants have full rights, responsibilities, and legal protections
- Practices and policies to prevent lease violations and evictions
- Applicable in a variety of housing models

PSH Housing First is "*an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry*."
https://www.hudexchange.info/resources/documents/Housing-First-Permanent-Supportive-Housing-Brief.pdf

INSERT PROCESS REGARDING BY-NAME LIST AND PSH UNITS THAT BECOME AVAILABLE

Permanent Supportive Housing for Persons with Disabilities (PSHPWD)

1) When a McKinney unit becomes available the Subrecipient Agency will notify the CSHS Services Coordinator, and indicate whether the unit is for:
    a. A chronically homeless individual with a disability; or
    b. A chronically homeless family in which one adult or child has a disability); or
    c. An undesignated household (chronic/non-chronic, individual/family where individual or one adult or child has a disability).
2) The CSHS Services Coordinator will alert the CSHS Case Managers about the available unit and ask them to submit recommendations to fill the unit, according to the unit's designation. The CSHS Case Managers will submit the following documentation to the CSHS Services Coordinator:
    a. Verification of Homelessness and verification of disability, including the Disability Form;
    b. Vulnerability Assessment; and
    c. Narrative description of individual/household need.
3) After receiving all requested documentation, the CSHS Services Coordinator, will convene the Review Panel to select the most vulnerable household for placement into the available unit.
4) The Review Panel consists of the following representatives, for a total of six representatives including four who votes and one who facilitates:
    a. PSH CoC Subrecipient Agency (no vote)
    b. Howard County Public Schools
    c. Department of Social Services
    d. Community Advocate
    e. Howard County Health Department
    f. CSHS Services Coordinator (Facilitator – no vote)
5) Upon receipt of the referrals and acceptable disability verification, the Subrecipient Agency will process the referrals in chronological order, as sent from the CSHS Services Coordinator. Acceptable forms of disability verification are:
    a. Written verification of the disability from a professional licensed by the state to diagnose and treat the disability and his or her certification that the disability is expected to be long-continuing or of indefinite duration and substantially impedes the individual's ability to live independently; OR
    b. Written verification from the Social Security Administration; OR
    c. The receipt of a disability check; OR
    d. Intake staff-recorded observation of a disability that, no later than 45 days of the application for assistance, is confirmed and accompanied by evidence in this; OR
    e. Other documentation approve by HUD.
6) Once verification has been confirmed, the Subrecipient Agency will work with the candidate and their Case Manager to complete the process for eligibility determination in chronological order, as received from the CSHS Services Coordinator, until units are filled.
7) No public notice requirement is imposed because these CoC has a specific target population and CSHS service providers. This ensures that the funds are used to assist the intended population.
8) The CSHS Services Coordinator will notify CSHS Case Managers that a selection has been made and the unit has been filled.
9) Required Documentation & Records
    a. HMIS Client Authorization Form

b. CSHS Intake Form
c. CSHS Waiting List Form
d. Verification of Homelessness
e. Verification of Disability
f. Narrative Description of Household

Transitional Housing (TH)

The last CoC Transitional Housing project was not renewed in the FFY15 competition, and ended on January 31, 2016. The Howard County CoC TH Leasing project was sponsor-based and short-medium term (up to 24 months). The following apply to placements in Transitional Housing for monitoring purposes and reporting to HUD only:

1) Program Director will inform CSHS Services Coordinator of the coming availability of a unit of Transitional Housing (TH), and as soon as possible the specific date when a unit is vacated.
2) Subrecipient is committed to turning over units for admission of new families within 30 days of the vacancy. If an exception is needed to this expectation, Subrecipient's Program Director will inform CSHS Services Coordinator.
3) CSHS Services Coordinator will attempt to place a new family in a vacant TH unit as close to its turnover completion as possible, and work with Subrecipient's Program Director to do so.
4) Families selected for Subrecipient's Transitional Housing must comply with:
    a. Income limits – Limits vary from unit to unit (30% to 50% of area median income).
    b. Household composition – Families with at least one minor child.
    c. Homeless status – Household must be certified as homeless.
    d. Household size – Must fit with size of the available unit
5) Families who will reside in the Subrecipient's Transitional Housing will be identified and referred by the Howard County Coordinated System of Homeless Services (CSHS) based on these criteria:
    a. Transitional housing aligns with the household's long term housing stability plan.
    b. Transitional housing is intended to be a needed stepping stone to permanent housing.
6) CSHS Services Coordinator will consult with CSHS Participant Agencies to identify appropriate families to refer. Subrecipient's Program Director will be party to this consultation.
7) Subrecipient's Program Director will review the household's history and will interview the head(s) of household of the referred family to assess the likelihood of placement in Subrecipient's Transitional Housing program:
    a. Family interest/willingness to engage in Subrecipient's program of support and case management (not used to screen any household out of placement); and
    b. Family's ability to live in scattered-site housing.
8) Subrecipient's Program Director will inform CSHS Services Coordinator whether the referred household is accepted or not to reside in the Subrecipient's Transitional Housing.
9) Accepted households will sign an Occupancy Agreement and a Program Agreement before taking residence in Subrecipient's Transitional Housing. The Program Agreement will outline the Subrecipient's case management service, program participation requirements and grievance procedure. If a Program Participant denies supportive services, the Subrecipient agency will not deny entrance into the program, but will incorporate engagement and outreach as part of ensuring the household is stably housed.

Participants & Housing

Requirements

The rules and responsibilities of clients are outlined in the client's program document, which is signed by the Subrecipient or Recipient agency and the participating household, at move-in. A signed lease between the client and property manager is required for participation in PSH under Rental Assistance. In addition to the lease and CoC program requirements, the property management agency may have additional policies to smoothly operate and manage their properties. All rental and leasing responsibilities as outlined in the client lease are that of the client. Neither the Subrecipient nor the Recipient agencies are party to any lease agreements determined by the landlord or property management agency. The Subrecipient agency will facilitate a rental assistance agreement to establish the responsibilities for payment of rent, utilities etc., between the participant household and the Subrecipient and landlord.

Eviction Prevention

Clients must immediately disclose to the Recipient or Subrecipient if they have received a notice of eviction. Housing stability is a priority, and eviction prevention services are essential for the case managers to ensure households remain stable. Linking the household to eviction prevention providers through the Coordinated System of Homeless Services by way of referral, may help with identified barriers that could lead a household to be unstable. If a client is not interested in these services, the case managers must continue to look for ways to assist the household to remain stably housed and avoid the eviction process.

Eviction Process

If a client receives a 30-day notice from the property manager they must give a copy to the case manager and/or support staff immediately so they may begin assisting the household with follow-up. In order to stop the eviction process before it is filed with the court, the client must meet with the property manager to address the lease violation and make a rent payment plan.

Termination of Assistance

The Recipient or Subrecipient may terminate assistance to a program participant who violates program requirements or conditions of occupancy (lease agreement). Termination does not bar the Recipient or Subrecipient from providing further assistance at a later date to the same individual or family in the Howard County CoC.

Hard-to-house Populations

Recipients and Subrecipients that are serving hard-to-house populations of homeless persons must exercise judgment and examine all extenuating circumstances in determining when violations are serious enough to warrant termination so that a program participant's assistance is terminated only in the most severe cases.

Due Process

If terminating assistance to a program participant, the Recipient or Subrecipient must follow the formal grievance procedures in place that recognizes the rights of individuals receiving assistance under the due process of law. This process consists of:

- Providing the program participant with a written copy of the program's rules and the termination process before the participant begins to receive assistance, and at annual recertification;
- Written notice to the program participant containing a clear statement of the reasons for termination; a review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and
- Prompt written notice of the final decision to the program participant (see Grievance Policy and Procedure below).

Grievance Policy and Procedures

Policy Statement

It is the policy of the Howard County Continuum of Care to provide its members and program participants with a fair and efficient process to present and resolve complaints and grievances. In the case of complaints/grievances about programs, the CoC DCRS Lead Agency is the official oversight entity and the Steering Committee's input has considerable influence on its decisions. Each HUD funded organization shall have a grievance procedure and shall implement the procedure when applicable, and must incorporate the minimum steps, as listed here, regarding any complaints/grievances. A first-person written and/or documented complaint will be considered a grievance. A verbal, second-hand or hearsay complaint will be considered a complaint.

Written Grievances about the CoC

- Any grievance against the CoC will be reviewed by the Evaluation and Resource Allocation Committee within ten days of its receipt. The Chair will respond within 30 days by:
    - Assisting in articulating /identifying issues, if needed.
    - Determining what action needs to be taken, if any.
    - Responding in writing with clear identification of issue and specifics about its resolution.

Grievances/Complaints about a Program Receiving McKinney-Vento (CoC) Funds

- The person making the grievance or complaint will be asked if they have adhered to grievance procedures provided by the organization they are making a grievance or complaint about. If the person making the grievance or complaint has not gone through the grievance procedure provided by the organization, the DCRS Lead Agency will recommend that the person do so and document that recommendation.
- If the resolution provided by that organization was not satisfactory to the complainant, he/she may put the problem in writing and submit it to the DCRS Lead Agency. If the complainant does not want his/her name attached to the complaint, his/her anonymity will be protected. If the complainant is unwilling to put the concern in writing, the DCRS Lead Agency will document what has been said.
- Each situation will be treated seriously and with sensitivity, and will be documented for the record with date, time, program name, and nature of the complaint, as well as with any action taken towards resolution.
- Once a complaint or grievance has been submitted, the DCRS Lead Agency will approach the problem program's representative, explain the complaint or grievance, and ask for a response to the charge(s) within ten (10) business days. Responses will be documented. It will be up to the DCRS Lead Agency to decide if the matter needs to be discussed by the ERA.

  - A second complaint or grievance will be handled the same. The complainant may file a written appeal (second complaint) within ten (10) days of the first response; The client's written appeal will be responded to within ten (10) days of its receipt.
- If a program receives a third complaint, the ERA will review the situation and recommend action, including all correspondence and documentation. The Executive Director of the program being reviewed will be asked to respond to the ERA. The third compliant will be handled within the same timeframe as the first and second.
- All complaints or grievances involving vulnerable adults or children will be immediately turned over to the appropriate county office.

Note: Should a participant household believe they have been discriminated against by their landlord they should contact the Howard County Office of Human Rights and Office of Consumer Affairs immediately.

Annual Review Process

Clients are required to complete an annual review and re-certification with their case manager. They are expected to meet with their case manager and bring requested documentation with them. After their appointment, adjusted rent calculations (if applicable) will be applied the next full month, and a new payment agreement form will be signed processed. Copies will be sent to the client and the landlord and put into the client's file, and updated in the Subrecipient or Recipient agency's payment system. Any updated information must be entered into ServicePoint within five (5) business days of the review.

Landlord Requests for Rent Increases

In accordance with the terms of a client's lease, and state and local law, a landlord may request a rent increase. The new rent amount must still comply with the FMR and/or rent reasonableness and include a 60-day advance notice. Once the request is reviewed and approved to be within FMR and/or rent reasonable, a new rent calculation form will be completed and new payment agreement forms will be signed. Copies will be sent to the client and the landlord and put into the client's file, and updated in the Subrecipient or Recipient agency's payment system. Any updated information must be entered into ServicePoint within five (5) business days of the review.

Rent Adjustments

Clients are responsible for notifying the Recipient or Subrecipient agency upon receipt of a rent adjustment from the landlord and/or lease renewal notice. Clients must discuss the terms of any new agreement with their case manager before they sign a lease renewal.

Participant Requests for Change in Unit Size/Location

Clients may request a Relocation Request Form from their case manager or the support staff if there has been an approved addition to their family household that would necessitate needing a different unit. A request for a different unit may be made for certain other eligible reasons:

1) Safety, health or disability reasons (i.e. need a first floor unit as stairs cannot be navigated);
2) Significant deterioration of maintenance at the existing development, as documented in HQS reports;
3) Significant deterioration of safety issues at the existing development, as documented in HQS reports;
4) Landlord's decision not to offer a renewal lease;

5) If the unit fails the HQS at annual inspection, and the landlord will not take necessary measures to comply; or
6) Increase or reduction in size of family household composition (see Eligibility & Source Documentation, of this document).

Supportive Services

General

Howard County CoC Supportive Services grant budget line items may be used to pay the awarded eligible costs to address the special needs of the program participants. Howard County CoC believes that supportive services are necessary to assist program participants obtain and maintain housing. An annual assessment of the service needs of the program participants should inform the type of case planning to best serve the households needs, and provide accordingly.

Duration

1) For a TH, supportive services must be made available to residents throughout the duration of their residence in the project.
2) For PSH, supportive services must be provided for the residents to enable them to live as independently as is practicable throughout the duration of their residence in the project.
3) Services may also be provided to former residents of TH and current residents of PSH who were homeless in the prior 6 months, for no more than 6 months after leaving the program to assist their adjustment to independent or another living situation.
4) Howard County CoC is not funded by HUD for Rapid Rehousing. In the event it is, rapid rehousing projects will require the program participant to meet with a case manager not less than once per month to assist the program participant in maintaining long-term housing stability.

Eligible Costs

1) Annual Assessment of Service Needs. The costs of the assessment required by § 578.53(a)(2) are eligible costs.
2) Assistance with moving costs. Reasonable one-time moving costs are eligible and include truck rental and hiring a moving company.
3) Case management. The costs of assessing, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant(s) are eligible costs. Component services and activities consist of:
    - (i) Counseling;
    - (ii) Developing, securing, and coordinating services;
    - (iii) Using the centralized or coordinated assessment system as required under § 578.23(c)(9).
    - (iv) Obtaining federal, State, and local benefits;
    - (v) Monitoring and evaluating program participant progress;
    - (vi) Providing information and referrals to other providers;
    - (vii) Providing ongoing risk assessment and safety planning with victims of domestic violence, dating violence, sexual assault, and stalking; and
    - (viii) Developing an individualized housing and service plan, including planning a path to permanent housing stability.

4) Child care. The costs of establishing and operating child care, and providing child-care vouchers, for children from families experiencing homelessness, including providing meals and snacks, and comprehensive and coordinated developmental activities, are eligible.
    - (i) The children must be under the age of 13, unless they are disabled children.
    - (ii) Disabled children must be under the age of 18.
    - (iii) The child-care center must be licensed by the jurisdiction in which it operates in order for its costs to be eligible.
5) Education services. The costs of improving knowledge and basic educational skills are eligible.
    - (i)Services include instruction or training in consumer education, health education, substance abuse prevention, literacy, English as a Second Language, and General Educational Development (GED).
    - (ii) Component services or activities are screening, assessment and testing; individual or group instruction; tutoring; provision of books, supplies, and instructional material; counseling; and referral to community resources.
6) Employment assistance and job training. The costs of establishing and operating employment assistance and job training programs are eligible, including classroom, online and/or computer instruction, on-the-job instruction, services that assist individuals in securing employment, acquiring learning skills, and/or increasing earning potential. The cost of providing reasonable stipends to program participants in employment assistance and job training programs is also an eligible cost.
    - (i) Learning skills include those skills that can be used to secure and retain a job, including the acquisition of vocational licenses and/or certificates.
    - (ii) Services that assist individuals in securing employment consist of:
        - (A) Employment screening, assessment, or testing;
        - (B) Structured job skills and job-seeking skills;
        - (C) Special training and tutoring, including literacy training and prevocational training;
        - (D)Books and instructional material;
        - (E) Counseling or job coaching; and
        - (F) Referral to community resources.
7) Food. The cost of providing meals or groceries to program participants is eligible.
8) Housing search and counseling services. Costs of assisting eligible program participants to locate, obtain, and retain suitable housing are eligible.
    - (i) Component services or activities are tenant counseling; assisting individuals and families to understand leases; securing utilities; and making moving arrangements.
    - (ii) Other eligible costs are:
        - (A) Mediation with property owners and landlords on behalf of eligible program participants;
        - (B) Credit counseling, accessing a free personal credit report, and resolving personal credit issues; and
        - (C)The payment of rental application fees.
9) Legal services. Eligible costs are the fees charged by licensed attorneys and by person(s) under the supervision of licensed attorneys, for advice and representation in matters that interfere with the homeless individual or family's ability to obtain and retain housing.
    - (i) Eligible subject matters are child support; guardianship; paternity; emancipation; legal separation; orders of protection and other civil remedies for victims of domestic violence,

dating violence, sexual assault, and stalking; appeal of veterans and public benefit claim denials; landlord tenant disputes; and the resolution of outstanding criminal warrants.
- (ii) Component services or activities may include receiving and preparing cases for trial, provision of legal advice, representation at hearings, and counseling.
- (iii) Fees based on the actual service performed (i.e., fee for service) are also eligible, but only if the cost would be less than the cost of hourly fees. Filing fees and other necessary court costs are also eligible. If the Subrecipient is a legal services provider and performs the services itself, the eligible costs are the Subrecipient's employees' salaries and other costs necessary to perform the services.
- (iv) Legal services for immigration and citizenship matters and issues related to mortgages and homeownership are ineligible. Retainer fee arrangements and contingency fee arrangements are ineligible.

10) Life skills training. The costs of teaching critical life management skills that may never have been learned or have been lost during the course of physical or mental illness, domestic violence, substance abuse, and homelessness are eligible. These services must be necessary to assist the program participant to function independently in the community. Component life skills training are the budgeting of resources and money management, household management, conflict management, shopping for food and other needed items, nutrition, the use of public transportation, and parent training.
11) Mental health services. Eligible costs are the direct outpatient treatment of mental health conditions that are provided by licensed professionals. Component services are crisis interventions; counseling; individual, family, or group therapy sessions; the prescription of psychotropic medications or explanations about the use and management of medications; and combinations of therapeutic approaches to address multiple problems.
12) Outpatient health services. Eligible costs are the direct outpatient treatment of medical conditions when provided by licensed medical professionals including:
    - (i) Providing an analysis or assessment of an individual's health problems and the development of a treatment plan;
    - (ii) Assisting individuals to understand their health needs;
    - (iii) Providing directly or assisting individuals to obtain and utilize appropriate medical treatment;
    - (iv) Preventive medical care and health maintenance services, including in home health services and emergency medical services;
    - (v) Provision of appropriate medication;
    - (vi) Providing follow-up services; and
    - (vii) Preventive and non-cosmetic dental care.
13) Outreach services. The costs of activities to engage persons for the purpose of providing immediate support and intervention, as well as identifying potential program participants, are eligible.
    - (i) Eligible costs include the outreach worker's transportation costs and a cell phone to be used by the individual performing the outreach.
    - (ii) Component activities and services consist of: initial assessment; crisis counseling; addressing urgent physical needs, such as providing meals, blankets, clothes, or toiletries; actively connecting and providing people with information and referrals to homeless and mainstream programs; and publicizing the availability of the housing and/or services provided within the geographic area covered by the Continuum of Care.

14) Substance abuse treatment services. The costs of program participant intake and assessment, outpatient treatment, group and individual counseling, and drug testing are eligible. Inpatient detoxification and other inpatient drug or alcohol treatment are ineligible.
15) Transportation. Eligible costs are:
    - (i) The costs of program participant's travel on public transportation or in a vehicle provided by the Recipient or Subrecipient to and from medical care, employment, child care, or other services eligible under this section.
    - (ii) Mileage allowance for service workers to visit program participants and to carry out housing quality inspections;
    - (iii) The cost of purchasing or leasing a vehicle in which staff transports program participants and/or staff serving program participants;
    - (iv) The cost of gas, insurance, taxes, and maintenance for the vehicle;
    - (v) The costs of Recipient or Subrecipient staff to accompany or assist program participants to utilize public transportation; and
    - (vi) If public transportation options are not sufficient within the area, the Recipient may make a one-time payment on behalf of a program participant needing car repairs or maintenance required to operate a personal vehicle, subject to the following:
        - (A) Payments for car repairs or maintenance on behalf of the program participant may not exceed 10 percent of the Blue Book value of the vehicle (Blue Book refers to the guidebook that compiles and quotes prices for new and used automobiles and other vehicles of all makes, models, and types);
        - (B) Payments for car repairs or maintenance must be paid by the Recipient or Subrecipient directly to the third party that repairs or maintains the car; and
        - (C)The Recipients or Subrecipients may require program participants to share in the cost of car repairs or maintenance as a condition of receiving assistance with car repairs or maintenance.
16) Utility deposits. This form of assistance consists of paying for utility deposits. Utility deposits must be a one-time fee, paid to utility companies.
17) Direct provision of services. If the a service described in paragraphs (e)(1) through (e)(16) of this section is being directly delivered by the Recipient or Subrecipient, eligible costs for those services also include:
    - The costs of labor or supplies, and materials incurred by the Recipient or Subrecipient in directly providing supportive services to program participants; and
    - The salary and benefit packages of the Recipient and Subrecipient staff who directly deliver the services.

Ineligible Costs

1) Any cost that is not awarded through a designated budget line item in the award from HUD, will not be reimbursed with CoC grant funds.
2) Any activity that is not considered eligible under the awarded budget line item will not be reimbursed with CoC grant funds.
3) Staff training and the costs of obtaining professional licenses or certifications to provide supportive services are not eligible costs.

Housing Stability Plan

All participants in the Howard County CoC's programs will have a Housing Stability Plan. Thirty (30) days after program acceptance, the case manager and the household will develop the plan together. Goals should be set and evaluated periodically to ensure the household is maintaining housing stability. Goals will be determined by the household to ensuring continued engagement in their Housing Stability Plan.

Client Files

The program staff will maintain two (2) client file systems – a general client file and a case management file. HUD also requires that client information be entered regularly and accurately into ServicePoint. Client files should be kept in locked cabinets/drawers during non-business hours. All case files should be current and reflect the most recent documentation.
Note: Client release forms must be signed, and on file, for entry into ServicePoint, or for contact with medical practitioners and other agencies the client may be involved with.

Progress Notes. Case managers should keep their case management notes up-to-date and should enter into ServicePoint within 48 hours of a household change. Support notes should be entered as soon as possible after discussions are completed.

Access to Records. Access to the general files will be available to case managers, support staff, Subrecipient designees and the CoC DCRS Lead Agency. Files and other identifying information being used at a staff desk must not be left unattended.

Confidentiality. ServicePoint, the Homeless Management Information System (HMIS) used by the Howard County CoC requires release form to be signed annually. The Howard County CoC adheres to a policy of confidentiality respecting every client's right to privacy. This is a legal directive, and important to serving households experiencing homelessness. Support services files are not available to property management even if head of households agree to the sharing of information. However, support staff may release information with property management staff or outside service providers with the expressed written permission of the head of household. Policies regarding sharing information with other collaborating agencies are outlined in the Howard County CoC HMIS Policies and Procedures.

Special Populations

All eligible costs are eligible to the same extent for program participants who are unaccompanied homeless youth; persons living with HIV/AIDS; and victims of domestic violence, dating violence, sexual assault, or stalking.

Monitoring Policy & Procedures

Program Monitoring

The Howard County Department of Community Resources and Services (the Collaborative Applicant and Recipient agency), maintain standard procedures for ensuring that Continuum of Care (CoC) Program funds are used in accordance with federal requirements, and maintain sufficient records to enable the U.S. Department of Housing and Urban Development (HUD) to determine whether the Recipient and its Subrecipients are meeting the requirements of 24 CFR Part 578. To support this role/responsibility, monitoring activities identified in this policy are outlined in the CoC Monitoring Checklists in the Appendices.

HUD maintains responsibility for monitoring all CoC Recipients, and this will include monitoring Subrecipients when the Recipient is selected for HUD program monitoring.

Specific standards include general recordkeeping requirements, fiscal management, program management, program participant records, and enforcement procedures. COC Recipients/Subrecipients are required to show compliance through appropriate program implementation, administration and recordkeeping. The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act Code of Federal Regulation (CFR) for the CoC Program 24 CFR Part 578, Subpart G Grant Administration, and the Office of Management Budget (OMB) to include OMB Circular A-133 Audits of States, Local Government and Non-profit Organizations and 24 CFR Part 85; the Lead-based Paint Poisoning Prevention Act (42 U.S.C. 4821-4846); the Section 3 of the Housing and Urban Development Act 24 CFR Part 135; and Environmental review activities subject to 24 CFR Part 50 govern CoC activities..

Definitions

Collaborative Applicant

Collaborative Applicant means the eligible applicant that has been designated by the Continuum of Care to apply for a grant for Continuum of Care planning funds under this part on behalf of the Continuum.

Recipient

Is defined to mean an applicant that signs a grant agreement with the U.S. Department of Housing and Urban Development (HUD), as defined in Section 424 of the McKinney-Vento Act.

Subrecipient

Is defined to mean a private nonprofit organization, State or local government, or instrumentality of a State or local government that receives a sub-grant from the Recipient to operate a project. The definition of "Subrecipient" is consistent with the definition of "project sponsor" found in Section 401 of the McKinney-Vento Act.

Administration And General Recordkeeping

Administration and recordkeeping activities include, but are not limited to:

Continuum of Care Records As the jurisdiction's CoC Collaborative Applicant, the Howard County Department of Community Resources and Services will maintain documentation relating to establishment and operations of the local Continuum of Care (CoC), as governed by the Howard County Board to Promote Self-Sufficiency.

Program Records (24 CFR 578.103(a) (3 - 17). Project Sponsors will maintain documentation relating to implementation and operations of CoC Program projects, to include, as applicable:

1) Homeless Status - Documentation of literal homelessness as defined in 24 CFR Part 576.500(b).
2) At Risk of Homeless Status - Documentation that establishes "at risk of homelessness" status of each individual or family who receives homelessness prevention assistance as defined in 24 CFR 576.500(c).
3) Reasonable Belief of Imminent Threat of Harm - Documentation for people who moved to a different Continuum of Care (region) due to imminent threat of further domestic violence, dating violence, sexual assault, or stalking under 24 CFR 578.51(c)(3).

4) Annual Income - Documentation of annual income for people receiving housing assistance where rent or occupancy charge is paid by the program participant to the Recipient/Subrecipient, and documentation of annual program income expenditures.
5) Program Participant Records - Documentation for each program participant receiving services, an annual assessment of services for those program participants that remain in the program for more than a year, and compliance with the termination of assistance requirements under 24 CFR 578.91.
6) Housing Standards - Documentation of compliance with the housing quality standards (HQS), to include inspection reports under 24 CFR 578.75(b).
7) Services Provided - Documentation of supportive services provided under the Recipient or Subrecipients program and the amounts spent on those services, to include the annual assessment of services for participants and that the service package offered to program participants was adjusted, as applicable.
8) Match Records of the source and use of contributions made to satisfy the match requirement in 24 CFR 478.73, to include the records of match provided by Subrecipients. The record will show how the value placed on third party in-kind contributions was derived.
9) Conflicts Of Interest - Documentation to show compliance with organizational conflict-of-interest requirements.
10) Homeless Participation - Documentation to show compliance with the homeless participation requirements.
11) Faith-based Activities - Documentation to show compliance with the faith-based requirements under 24 CFR 578.87(b), as applicable.
12) Affirmatively Furthering Fair Housing – Documentation of marketing, outreach, and other materials used to inform eligible persons of the program to document compliance with the requirements in 24 CFR 578.93(c)
13) Other Federal Requirement - Documentation in support of compliance with 24 CFR 578.99, as applicable. www.fsrs.gov
14) Subrecipients And Contractors - The Recipient will retain copies of all solicitations from and agreements with Subrecipients and their contractors, records of payment requests and payments, and documentation of monitoring findings with corrective actions and sanctions of Subrecipients, as applicable.
15) Other Records Specified by HUD - Other documentation defined in 24 CFR 578.103(a)(1-17).

Confidentiality (24 CFR Part 578.103(b)) In addition to meeting the specific confidentiality and security requirements for HMIS data, the Recipient and Subrecipient will establish written procedures to ensure records containing program participant identifying information are kept secure and confidential, address or location of violence program site will not be made public, and the address or location of any housing of a program participant will not be made public.

Record Retention (24 CFR Part 578.103(c)) All records pertaining to CoC Program funds must be retained for the greater of 5 years from grant close-out, and 15 years from the date first occupied for acquisition, construction, and/or rehabilitation programs.

Access To Records (24 CFR Part 578.103(d)) All records are subject to Federal and public rights as outlined in this rule. Notwithstanding the confidentiality procedures, HUD, the HUD Office of the Inspector General, and the Comptroller General of the United States, or any of their authorized representatives, must have the right of access to all books, documents, papers, or other records of the

Recipient and its Subrecipients that are pertinent to the CoC Program grant audits, examinations, excerpts, and transcripts.

Reports (24 CFR Part 578.103(e)) In addition to reports outlined in 24 CFR parts 84 and 85, the Recipient must collect and report data on CoC Program funds in an Annual Performance Report (APR), as well as any additional reports required by HUD.

Financial Management Monitoring of CoC Programs will include internal controls to include:

1) Documentation demonstrating compliance with the Single Audit Act of 1984 and OMB Circular A-133 ("Audits of State, Local Governments, and Non-Profit Organizations"). All non-Federal entities that expend $500,000 or more of Federal awards in a year are required to obtain an annual audit in accordance with the Single Audit Act Amendments of 1996, OMB Circular A-133, the OMB Circular Compliance Supplement and Government Auditing Standards. http://harvester.census.gov/fac
2) Compliance with the Federal Procurement Management Review under the Federal Suspension and Debarment. www.gsa.gov or http://www.gsaig.gov/index.cfm/suspension-and-debarn1ent-listed-by-state/
3) Distribution. A Recipient or Subrecipient that receives funds through this part must: Distribute the appropriate portion of the funds to a Subrecipient no later than 45 days after receiving an approvable request for such distribution from the Subrecipient; and draw down funds at least once per quarter of the program year, after eligible activities commence.

Grant & Project Changes

The Recipient nor the Subrecipient may not make any significant changes to a project without prior HUD approval, evidenced by a grant amendment signed by HUD and the Recipient. Any other minor changes to an approved grant must be fully documented in both the Recipient and Subrecipient records.

1) Significant changes include a change of Recipient and Subrecipient, a change of project site, additions or deletions of the types of eligible activities approved for a project, a shift of more than 10 percent from one approved eligible activity to another, a reduction in the number units, and a change in the subpopulation served.
2) Minor changes or program revisions that require Recipient approval before the Recipient or Subrecipient can implement the change include all budget changes, a shift in funded program activities, and any program change not referenced above.

Remedial Actions & Sanctions

The Collaborative Applicant will review the performance of each Recipient in carrying out its responsibilities. This will occur through annual on-site monitoring visits, A-133 and other financial audit reports, information generated by HUD financial and reporting systems (e.g. LOCCS and e-snaps), HMIS, the Annual Performance Report (APR) and, where applicable, relevant information pertaining to Recipient and Subrecipient performance gained from other sources, to include citizen comments, complaint determinations, and litigation. For programs that fail to meet program requirements:

1) The Collaborative Applicant shall notify the Subrecipient of the non-performance and/or non-compliance with CoC Program regulations, and/or citizen comments and complaints.
2) If the Recipient determines that a Subrecipient is not complying with a program requirement or its Subrecipient agreement; the Recipient must take action through the following process:
    a. The Collaborative Applicant will document the Recipient or Subrecipient's non-compliance with the CoC Program regulations and request a corrective action plan designed to prevent a

continuation of the deficiency, to mitigate to the extent possible, its adverse effects, and to prevent its recurrence. This report will be submitted to the Collaborative Applicant by Recipient or Subrecipient.

b. The Collaborative Applicant will convene the CoC Board's Evaluation and Resource Allocation Committee to review program performance and compliance to the CoC Program regulations, and present the proposed corrective actions and sanctions. The Recipient or Subrecipient may attend the meeting to support the development of a schedule with milestones necessary to implement the corrective actions. The outcome of this review will be a Management Plan that assigns responsibilities for carrying out the remedial actions and dates for evaluating activities.

On-Site Monitoring

Annually, the Collaborative Applicant will contact the CoC Project Sponsors to schedule an on-site monitoring visit and confirm the monitoring visit with a date, time and location. The CoC Program Monitoring Checklists are provided, including the COC Internal Lists and the HUD issued checklists (from 24 CFR 583). On-site monitoring visits will be coordinated, when possible, for programs that receive both CoC Program and Emergency Solution Grant (ESG) funds. The CoC DCRS Lead Agency is the County's Recipient of CoC and Grantee for ESG State Program funds, and will attempt to coordinate with Project Sponsors to accomplish monitoring on behalf of both federal funds during one on-site monitoring visit, if the agency receives both. The monitors will observe the independently funded programs according to applicable CoC Program and ESG federal regulations.

1) The process includes:
   - Monitors open with a pre-monitoring meeting to review the scope.
   - Monitors then document, gather and analyze all information as asked from the checklists, the Grant Agreement, and any items from operating year in review, including APRs.
   - Monitors ask the Project Sponsor if they have further comments, or would like additional information on any item.
   - After the monitoring, an exit meeting is held. This is an opportunity to review any items that may pose an issue in an official report.
   - Within 45 days receipt of all documentation, Monitors issue the Report to the Subrecipient. A 30 day period to make any corrections to concerns or findings is granted.
   - Technical assistance, including templates, guides, regulations, and meetings are offered.

Homeless Management Information Systems (HMIS) Policies & Procedures (separate document)

Coordinated System of Homeless Services (Coordinated Assessment System) Policies & Procedures (separate document)

Providing Assistance

In consultation with Recipients of Emergency Solutions Grants program funds within the geographic area, Howard County has established and follows written standards for providing Continuum of Care assistance through the Coordinated System of Homeless Services (CSHS), which includes policies and procedures for evaluating individuals' and families' eligibility for assistance, and policies and procedures

for determining and prioritizing which eligible individuals and families will receive transitional and permanent supportive housing assistance. Please see CSHS Policies & Procedures document for detailed description of the process for intake, assessment and ranking for services.

APPENDICES

APPENDIX A – CONTINUUM OF CARE, BOARD TO PROMOTE SELF-SUFFICIENCY– HOWARD COUNTY CODE

APPENDIX B – CONTINUUM OF CARE (BOARD TO PROMOTE SELF-SUFFICIENCY) OPERATING PROCEDURE

APPENDIX C – LOCAL COC MONITORING TOOLS

1-LOCAL COC MONITORING OVERVIEW

2-LOCAL COC MONITORING CHECKLIST

3-LOCAL COC ANNUAL PERFORMANCE REPORT REVIEW

APPENDIX D – EVALUATION AND RESOURCE ALLOCATION (ERA) COMMITTEE CONFIDENTIALITY AGREEMENT

APPENDIX E – SCORE CARDS AND ASSESSMENT TOOL

APPENDIX F – LEAD FORMS AND WORKSHEETS

APPENDIX G – PROTECT YOUR FAMILY FROM LEAD IN YOUR HOME PAMPHLET

APPENDIX H – DEFINITIONS

APPENDIX A – CONTINUUM OF CARE, BOARD TO PROMOTE SELF-SUFFICIENCY– HOWARD COUNTY CODE

Introduced 4/17/08
Public Hearing 4/22/08
Council Action 5/5/08
Executive Action 5/8/08
Effective Date 7/9/08

County Council Of Howard County, Maryland

2008 Legislative Session

Legislative Day No. 4

Bill No. 23 -2008

Introduced by: The Chairperson at the request of the County Executive

AN ACT establishing a Board to Promote Self-Sufficiency; providing for the membership, terms, officers, and staffing of the Board; setting forth the requirements for meetings and voting; authorizing the use of subcommittees and the adoption of certain Operating Procedures; providing for the purpose and responsibilities of the Board; providing the expiration dates of the terms of the initial members of the Board; providing for certain exceptions applicable to the Board; and generally relating to the Board to Promote Self-Sufficiency.

Introduced and read first time April 7, 2008. Ordered posted and hearing scheduled.

By order Sheila M. Tolliver
Sheila M. Tolliver, Administrator

Having been posted and notice of time & place of hearing & title of Bill having been published according to Charter, the Bill was read for a second time at a public hearing on April 22, 2008.

By order Sheila M. Tolliver
Sheila M. Tolliver, Administrator

This Bill was read the third time on May 5, 2008 and Passed ___, Passed with amendments ✓, Failed ___.

By order Sheila M. Tolliver
Sheila M. Tolliver, Administrator

Sealed with the County Seal and presented to the County Executive for approval this 6th day of May, 2008 at 3:00 a.m./p.m.

By order Sheila M. Tolliver
Sheila M. Tolliver, Administrator

Approved/Vetoed by the County Executive May 8, 2008

Ken Ulman, County Executive

NOTE: [[text in brackets]] indicates deletions from existing law; TEXT IN SMALL CAPITALS indicates additions to existing law; Strike-out indicates material deleted by amendment; Underlining indicates material added by amendment.

***Section 1. Be It Enacted** by the County Council of Howard County, Maryland, that Section 2.103 "Applicability" of Article II "Administrative Rules" of Subtitle 1 "Administrative Procedure Act" of Title 2 "Administrative Procedures" of the Howard County Code is amended to read as follows:*

Title 2. Administrative Procedures

Subtitle 1. Administrative Procedure Act.

Article II. Administrative Rules.

Section 2.103. Applicability.

(a) *General*: Except as provided in subsection (b), the provisions of [this] article II shall apply to and govern the adoption of rules by all county agencies which are authorized to make rules. In the event of a conflict between this subtitle and a substantive provision of an enabling act of an agency, the latter shall prevail.

(b) This article does not apply to the following agencies: The adult public guardianship review board, the advisory board on consumer affairs, the board of appeals, the board of library trustees, the board of license commissioners, the board of social services, the cable advisory committee, the commission on aging, the fire and rescue services board, the historic landmarks and sites board, the mental health advisory board, the plumbing advisory board, the public works board, the recreation and parks board, the alcohol and drug abuse advisory board, the commission on disability issues, the council for children and youth, THE BOARD TO PROMOTE SELF-SUFFICIENCY, and the soil conservation district.

***Section 2. And Be It Further Enacted** by the County Council of Howard County, Maryland, that new Section 6.341 "Board to Promote Self-Sufficiency" is added to Subtitle 3 "Boards and Commissions" of Title 6 "County Executive and the Executive Branch" of the Howard County Code to read as follows:*

Title 6. County Executive and the Executive Branch.

Subtitle 3. Boards and Commissions.

Section 6.341. Board to Promote Self-Sufficiency.

There is a Board to Promote Self-Sufficiency. Its membership, duties, and responsibilities are set forth in Subtitle 17, "Board to Promote Self-Sufficiency," of Title 12, "Health and Social Services," of this Code.

Section 3. And Be It Further Enacted *by the County Council of Howard County, Maryland, that new Subtitle 17 "Board to Promote Self-Sufficiency" is added to Title 12 "Health and Social Services" of the Howard County Code to read as follows:*

Title 12. Health and Social Services.

Subtitle 17. Board to Promote Self-Sufficiency.

Section 17.100. General Provisions; Purpose.

(a) *General provisions.* General provisions applicable to this Board are set forth in Subtitle 3, "Boards and Commissions," of Title 6, "County Executive and the Executive Branch" of this Code.

(b) *Purpose of the Board.* The purpose of the Board is to

(1) Support the goal of the Human Services Master Plan to build a community that enables individuals and families to have adequate income and resources to meet their basic needs;

(2) Act as the planning and coordinating mechanism for initiatives to:

(i) Promote the economic stability of individuals and families; and

(ii) Reduce the incidence of poverty in Howard County; and

(3) Serve as the governance body for the distribution of certain resources that support initiatives of the Board.

Section 17.101. Membership.

(a) *Number of members.* The Board shall have a minimum of 20 members and a maximum of 27 members.

(b) *Apportionment of Representation.* As practicable, the Board shall consist of a majority private sector representation and a minority public sector representation.

(c) *Method of appointment.* Each appointed member shall be appointed by the County Executive and confirmed by the County Council.

(d) *Qualifications of members.*

(1) All members shall either reside or work in Howard County.

(2) As practicable, the Board shall reflect the gender, geographic, ethnic, and racial make up of the county.

(3) Ex-Officio members from the public sector shall include the following:

(i) The Director of the Department of Social Services, or the Director's designee;

(ii) The Director of the Department of Citizen Services, or the Director's designee;

(iii) The Director of the Mental Health Authority, or the Director's designee;

(iv) The Director of the Howard County Health Department, or the Director's designee;

(v) The Director of the Department of Housing and Community Development, or the Director's designee;

(vi) The Director of the Department of Corrections, or the Director's designee;

(vii) The Administrator of the Office of Workforce Development, or the Administrator's designee;

(viii) The President of Howard Community College, or the President's designee; and

(ix) The Superintendent of the Howard County Public School System, or the Superintendent's designee.

(4) Ex-Officio members from the public sector may include:

(i) The Chief of the Department of Police, or the Chief's designee; and

(ii) The Director of the Department of Planning and Zoning, or the Director's designee.

(5) Appointed members from the private sector shall include:

(i) A representative from the Community Action Council or any other federally designated anti-poverty agency;

(ii) A representative from Grassroots or any other homeless shelter serving both individuals and families;

(iii) A representative from Congregations Concerned for the Homeless or any other provider of Family Stabilization services;

(iv) A representative from the Association of Community Services or any other network of human services providers and advocates focused on serving families in Howard County;

(v) At least one individual who is, or was, homeless or a recipient of emergency, transitional, or subsidized housing services;

(vi) At least one individual who is, or was, a recipient of cash benefits or services, or both, to support their transition from welfare to work;

(vii) A representative of a business that provides entry and mid-level employment opportunities;

(viii) A representative of the Howard County Chamber of Commerce or any other organization whose purpose is to facilitate the success of businesses;

(ix) A representative of a faith-based organization;

(x) An individual or representative of a business that provides financial services; and

(xi) A representative of an organization that provides, or advocates for, transportation services.

(6) Appointed members from the private sector may include other community members or representatives from non-profit organizations, for-profit organizations, or faith-based organizations that:

(i) Provide crisis intervention services;

(ii) Support the financial stability of individuals and families;

(iii) Advocate for the basic needs of County residents, or

(iv) Represent the needs of children and families, seniors, or people with mental or physical disabilities.

Section 17.102. Terms of membership.

Appointed members of the Board shall serve overlapping terms of 5 years or until a successor is confirmed as provided in Section 6.300 of this Code.

Section 17.103. Responsibilities of the Board.

The Board shall:

(a) Review data and analyze the nature and characteristics of poverty within Howard County, barriers to, and gaps in, existing services, and best practices from other jurisdictions;

(b) Participate in the development of a collaborative, multi-disciplinary Plan for an integrated strategy that emphasizes prevention and early intervention;

(c) Encourage and promote services and partnerships which support the implementation of the Plan, maximize the efficient use of available resources, and generate additional resources;

(d) Support the development of an integrated approach to data collection and information management;

(e) Evaluate the impact, effectiveness, and cost-benefit of self-sufficiency initiatives;

(f) If requested by a County Agency, make recommendations to a County Agency on the use and distribution of Federal, State, or Local funds for crisis intervention, financial literacy, crisis prevention, and self-sufficiency activities including, but not limited to, funds received under the Stewart B. McKinney-Vento Homelessness Assistance Act;

(g) Act as a County advocate for issues related to poverty, financial literacy and self-sufficiency, and undertake activities which will educate and increase public awareness of these issues;

(h) By December 1 of each year, submit a report to the County Executive and County Council describing achievements for the previous fiscal year, and providing recommendations regarding policies, legislation, and funding strategies deemed necessary to accomplish the responsibilities and duties established by this section; and

(i) At the directive of the County Executive, or by resolution of the County Council, review and make recommendations on any matter related to issues of poverty or economic self-sufficiency in Howard County.

Section 17.104. Officers.

(a) *Election of Officers*. The Board shall elect a Chairperson and a Vice-Chairperson from among its members to serve as the Board's Officers as follows:

(1) One Officer shall be from the public sector; and

(2) One Officer shall be from the private sector.

(b) *Vacancy*. If there is a vacancy during the term of an Officer, the Board shall elect an officer to fill the remainder of the term.

Section 17.105. Meetings; voting.

(a) *Number and Place*. The Board shall meet at least quarterly at the times and places it determines. The Board may meet more often for special meetings at the call of the chairperson with ten days notice to members.

(b) *Board Meetings Are Public*. All meetings of the Board are open to the public except:

(1) When funding decisions are being made; or

(2) When a meeting is closed as authorized under federal, state, or local law.

(c) *Voting*.

(1) All members of the Board are voting members.

(2) A simple majority of current members shall constitute a quorum.

(3) Action may be taken by the Board upon a vote of a simple majority of the members present at a meeting at which there is a quorum.

Section 17.106. Committees; Operating Procedures; Staffing.

(a) *Authority to establish committees*. The Board may establish committees and subcommittees as it deems necessary to carry out its purpose and responsibilities.

(b) *Authority to establish operating procedures*. The Board shall adopt operating procedures that set forth:

(1) Committee responsibilities;

(2) General operations of the Board; and

(3) Terms and term limits for officers.

(c) *Delegation of authority*. The Board may delegate certain decision-making authority to a committee as deemed necessary to meet the committee's assigned responsibilities.

(d) *Committee membership*. A committee may include members of the community in addition to members of the Board but the chairperson of the committee shall be a member of the Board.

(e) *Department of Citizen Services*. The Department of Citizen Services shall provide staffing for the Board.

Section 4. And Be It Further Enacted *by the County Council of Howard County, Maryland, that the terms of the initial members of the Board shall expire as follows:*

(1) At least 3 members in 2009;

(2) At least 4 members in 2010;

(3) At least 5 members in 2011; and

(4) At least 5 members in 2012.

Section 5. And Be It Further Enacted *by the County Council of Howard County, Maryland, that this Act shall become effective 61 days after its enactment*

APPENDIX B – CONTINUUM OF CARE (BOARD TO PROMOTE SELF-SUFFICIENCY) OPERATING PROCEDURE

Howard County Board to Promote Self-Sufficiency
Operating Procedures

General/Purpose

The purpose of the Board to Promote Self-Sufficiency (the Board) shall be to 1) act as the planning and coordinating mechanism for initiatives to promote the economic stability of individuals and families and reduce the incidence of poverty in Howard County, and 2) serve as the governance body for the distribution of certain resources that support initiatives of the Board.

A listing of the Board's responsibilities is included in Section 12.1703 of the Howard County Code.

Membership

Composition
The Board shall consist of a minimum of twenty members and a maximum of twenty-seven members. To the extent possible, the majority of members shall be from the private sector and a minority from the public sector. Qualifications for membership are detailed in Section12.1701 of the Howard County Code.

The Department of Citizen Services shall designate a staff person to serve as the Executive Secretary to the Board.

Responsibilities of Members
- Attend meetings, or notify the Chair or Executive Secretary in advance if they will be absent.
- Arrive at meetings on time prepared for discussion, bringing printed copies of any materials distributed in advance of the meeting.
- Serve on at least one committee or workgroup of the Board

Resignation or Removal
A member of the Board who wishes to resign shall submit a written letter of resignation to the County Executive, County Council, and the Executive Secretary of the Board.

In accordance with Section 903 of the Howard County Charter:
- A member of the Board is deemed to have resigned if absent from three consecutive meetings of the Board and not excused by resolution of the Board. The Chair (or Vice-Chair, if it is the Chair who has been absent) shall notify the County Executive in writing when this occurs.
- A member may be removed by the County Executive for incompetence, misconduct, or failure to perform the duties of the position.

Officers

The officers of the Board shall consist of a Chair and Vice-Chair. One officer shall be from the private sector, and one officer shall be from the public sector.

The term of office for Chair and Vice-Chair shall be one year, from July 1 through June 30. A Board member may serve no more than two consecutive terms as Chair or Vice-Chair.

Responsibilities of Officers
The Chair shall:

- Preside over all meetings of the Board;
- Call additional meetings, as needed;
- Appoint the Chair for committees of the Board, with the consent of the Board;
- Serve as the Board's representative to the County Executive and County Council; and
- Ensure that the Board is acting in such a manner that supports its mission and conforms to these operating procedures.

The Vice-Chair shall carry out the duties of the Chair in the Chair's absence, and perform such other duties as the Chair or Board may require.

Election
A nominating committee shall be appointed by the Chair at least one month prior to the June Board meeting. The nominating committee shall consist of three members, and shall include both public and private representatives.

The nominating committee shall present its recommendations for Chair and Vice-Chair at the June Board meeting for a vote. Members of the Board may also make nominations from the floor.

If a vacancy occurs in the position of either officer, the Board will hold a special election to fill the vacancy.

Meetings of the Board

Frequency: The Board shall meet at least quarterly. Additional meetings of the Board may be called by the Chair when necessary to conduct the business of the Board, or at the request of a majority of the members, with ten business days notice to all members and the Executive Secretary.

Annual meeting: The annual meeting of the Board shall take place in June and shall be considered a regular meeting. The business of the annual meeting shall include election of officers and a review of the activities of the Board during the fiscal year ending that month.

Quorum: A quorum shall be a simple majority of the current membership.

Voting:

- A simple majority of the members present at the meeting is required to pass a vote.
- Only Board members have voice and vote.
- A representative attending a Board meeting on behalf of an absent member has voice but not vote.
- The Executive Secretary has voice but not vote.
- Members of Board committees, who are not members of the Board, have voice only.
- Members of the public shall have voice at the discretion of the Chair.
- The Chair will vote only in the case of a tie.

Minutes: Minutes of all Board meetings will be recorded and distributed to all members.

Open Meetings Law: Meetings are subject to the Open Meetings Act. This requires that 1) meetings must be open to the public; 2) notice of meetings must be provided, and 3) written minutes of meetings must be prepared, and maintained for a minimum of one year.

Protocol: Meetings shall be conducted according to the latest edition of Roberts Rules of Order, Newly Revised.

Committees

The Board may establish such committees and sub-committees as it deems necessary to carry out its purpose and responsibilities, and may delegate certain decision-making authority to a committee as deemed necessary to meet the committee's assigned responsibilities.

The purpose, function and decision-making authority of each committee shall be defined at the time it is established by the Board. The Board shall, on an annual basis, review its committee structure and may amend the number and purpose of its committees if deemed necessary to advance the goals of the Board.

If the Board delegates decision-making authority to a committee, the Open Meetings Law applies to the committee, and 1) the committee's meetings must be open to the public; 2) notice of the committee's meetings must be provided, and 3) written minutes of the committee's meetings must be prepared and maintained for a minimum of one year. (*See* page 3 of the Open Meetings Act Manual, 6th Edition, October 2006).

Membership of a committee shall include both members of the Board and the community, but the Chair of each committee shall be a member of the Board.

Committees shall submit a quarterly work plan for review by the Board, and regular updates on its work.

The Committee Chair shall:

- call the meetings of the committee,
- chair the meetings,

- delegate tasks among members as needed to accomplish the function of the committee, and
- bring committee recommendations to the Board for discussion and vote.

The Chair and Vice-Chair of the Board shall be ex officio members of each committee.

Annual Report

The Board shall submit an annual report of its activities to the County Executive and County Council by December 1 of each year.

Conflict of Interest

Members of the Board shall be subject to the Howard County Public Ethics Law. A member of the Board shall declare the member's interest in any matter before the Board. If there is any interest to a private sector member in a matter before the Board, the member may not participate in discussions or vote on the matter.

Amendments to the Operating Procedures

- Any proposed amendments to these Operating Procedures must be presented in writing at a Board meeting.
- The vote on the proposed amendment will be taken at the following Board meeting.
- A 2/3 vote is required to pass the amendment.
- The proposed amendment to the Operating Rules will become effective immediately after the close of the meeting at which the amendment is adopted.

Adopted by Board:

Signature of Board Chair

4-23-2009

Date

Reviewed for legal sufficiency:

Office of Law

May 11, 2008

Date

Approved, 04/23/09

APPENDIX C – LOCAL COC MONITORING TOOLS

Howard County Continuum of Care Policies & Procedures

C-1-LOCAL COC MONITORING OVERVIEW

HUD Grant Project Number:

Project Title:

Date:

Performed by:

Title:

CoC Number:

Phone:

Email:

Monitoring the CoC Program project of:

Recipient Agency: ☐

Subrecipient Agency: ☐

Agency Point of Contact:

Agency Alternate:

Agency Phone:

Howard County Continuum of Care Policies & Procedures

C-2-LOCAL COC MONITORING CHECKLIST

HUD Grant Project Number: _____

Project Title: _____ Date: _____

GENERAL RECORD-KEEPING	YES	NO	N/A
A. Are all records regarding the project (outside of financial records) centrally located?	☐	☐	☐
B. Do these records contain?	☐	☐	☐
1. CoC Program Grant Agreement with Federal Register HEARTH Act Rules	☐	☐	☐
2. Grant Agreement Amendments and Budget Revisions	☐	☐	☐
3. Award Letter	☐	☐	☐
4. Certificate of Liability Insurance (attach copy)	☐	☐	☐
5. Declaration of Restrictive Covenant, Trust Deed and Promissory Note (Acquisition, Construction & Rehab only)	☐	☐	☐
6. General correspondence relating to project	☐	☐	☐
C. Did the agency accrue any costs to the CoC Program grant prior to Award Letter?	☐	☐	☐
D. Does the agency subcontract for any services under the CoC Program?	☐	☐	☐
1. Is the approval to subcontract on file? (attach copy of subcontract)	☐	☐	☐
2. Are Grant Agreement requirements passed along to subcontractors?	☐	☐	☐
E. Does the agency have a record retention policy compliant with 24 CFR Part 578.103(17)? [CoC program records 5 years and acquisition/construction/rehab 15 years] (attach copy of policy)	☐	☐	☐
F. Are homeless or formerly homeless persons participating on board of directors or other equivalent policy-making entity of the agency? (24 CFR 578.75(q)) (attach copy of members of the policy-making entity)	☐	☐	☐
G. Does the agency Affirmatively Further Fair Housing as documented by their marketing, outreach, and other materials used to inform eligible persons of the program to document compliance with the requirements in 24 CFR 578.93(c)? (attach any outreach material used)	☐	☐	☐

GENERAL RECORD-KEEPING	YES	NO	N/A
H. In addition to meeting the specific confidentiality and security requirements for HMIS data, does the agency have a policy on client confidentiality or a filing system to safeguard client confidentiality? [24 CFR 578.103(b)1. (attach copy of policy)	☐	☐	☐
I. Is HMIS Privacy Posting displayed? Does agency staff provide a copy of the Privacy Notice to consumers?	☐	☐	☐
J. Does the agency retain documentation of compliance with the Housing Standards in 24 CFR 578.75(b), including inspection reports?	☐	☐	☐
K. Does the agency retain documentation of compliance with the faith-based activities requirements under 24 CFR 578.87(b)?	☐	☐	☐
L. Does the agency retain documentation of compliance with the Transparency Act Reporting under the Office of Management and Budget (OMB) Circulars 24 CFR Part 84 and 85 Administrative Requirements for Grants and Agreements, Circular A-133 Single Audit, and other federal requirements in compliance with 24 CFR 578.99?	☐	☐	☐
M. Does the agency retain documentation of compliance with Lead-based Paint Poisoning Prevention Act 42.U.S.C. 4821-4846.	☐	☐	☐
N. Davis-Bacon Act - The provisions of the Davis-Bacon Act do not apply to this program (24 CFR 578.99(h))	☐	☐	☐
O. Has the agency established policies and practices that are consistent with, and do not restrict, the exercise of rights provided by subtitle B of title VII of the Act and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness? (attach copy of policy)	☐	☐	☐
P. Has the agency designated a staff person to be responsible for ensuring that children being served in the program are enrolled in school and connected to appropriate services in the community? Name: _____	☐	☐	☐
Q. Is the agency, its officers, or any employees debarred or suspended from doing business with the Federal Government?	☐	☐	☐
R. Does the agency use the coordinated assessment system established by the Continuum of Care as set forth in § 578.7(a)(8)?	☐	☐	☐
S. Does the agency follow the written standards for providing Continuum of Care assistance developed by the Continuum of Care, specifically the Coordinated	☐	☐	☐

System of Homeless Services policies and procedures, which include the minimum requirements set forth in § 578.7(a)(9), related to program participant placements?			
GENERAL RECORD-KEEPING	**YES**	**NO**	**N/A**
T. Has the agency adopted internal written standards for providing Continuum of Care assistance, in accordance with those developed by the Continuum of Care, specifically according to the Coordinated System of Homeless Services policies and procedures? (attach copy of policy)	☐	☐	☐
U. Has the agency adopted a policy on termination of program participants, including a formal process that recognizes the rights of individuals receiving assistance under the due process of law, including but not limited to grievance procedures? (attach copy of policy)	☐	☐	☐
Notes/Comments:			

FINANCIAL RECORDS	YES	NO	N/A
A. Are all project financial records centrally located?	☐	☐	☐
B. Does the agency financial management system provide evidence that there are controls in place to account for all funds, property, and other assets?	☐	☐	☐
C. Does the agency financial system have separate account numbers for each project activity? Does the separate account number identify project costs on a line item basis?	☐	☐	☐
D. Are the agency's incurred grant costs consistent with the eligible costs awarded to agency within each program component?	☐	☐	☐
E. Does the agency compare budgeted line item costs against incurred costs in order to identify over/under spending on a line item basis so that adjustments can be made in a timely fashion?	☐	☐	☐
F. Are expenditures supported by timesheets, invoices, contracts, purchase orders, etc.? **Note: Timesheets must be signed by the employee and his/her supervisor.**	☐	☐	☐
G. Are direct salaries and wages of employees that are chargeable to a particular grant program or more than one grant program supported by time distribution records?	☐	☐	☐
H. Does the agency provide no less than 25% monthly in funds or in-kind contributions from other sources as match for HUD-funded grant funds, except for leasing? (24 CFR Part 578.73)	☐	☐	☐
I. Before grant execution, did the agency provide third party documentation (e.g. MOU) between the agency and any third party that will provide the services? (24 CFR 578.73(c)(3)) Note: Agency will provide for inspection the records documenting the service hours provided.	☐	☐	☐
J. Does the agency prepare and submit monthly, or at a minimum quarterly, reimbursement reports and invoices?	☐	☐	☐
K. Does agency understand that project records need to be retained for a minimum of five (5) years after close-out of the grant or clearance of any audit findings, and 15 years after close-out of a grant that funds acquisition, construction or rehabilitation activities?	☐	☐	☐
L. Has the agency been audited by independent auditors? If yes, were there any findings that the Recipient is required to resolve? (attach copy of most recent completed audit)	☐	☐	☐

FINANCIAL RECORDS	YES	NO	N/A
M. Is the agency currently registered with the System for Awards Management (SAM) to do business with the federal government?	☐	☐	☐
N. Has any program income been generated through any CoC Program-funded activities? (24 CFR Part 578.103(a)(6))	☐	☐	☐
O. If program income <u>has</u> been generated, has the agency reported the income generated through the use of the CoC Program funds?	☐	☐	☐
P. If program income has been generated, has the program income been disbursed only for eligible Coe Program activities?	☐	☐	☐
Q. Has the agency expended program income to pay program costs prior to making further HUD-fund cash withdrawals?	☐	☐	☐
R. Is the agency in compliance with OMB Circular A-122, Cost Principles for Non-Profit Organizations, which outlines the project costs that are and are not eligible for payment with federal funds; OMB Circular A-87 Cost Principles for State, Local and Indian Tribal Governments, and 24 CFR Part 84, Uniform Administrative Requirements for Grants and Agreements with Institutions of High Education, Hospitals, and Other Non-Profit Organizations, except where inconsistent with the provisions of this part?	☐	☐	☐

PROGRAM PARTICIPANT FILE RECORDKEEPING *Complete this checklist for each Program Participant file reviewed.*	YES	NO	N/A
A. Are all records regarding the program participant centrally located?	☐	☐	☐
B. Do these records contain:	☐	☐	☐
1. Documentation that program participant has been screened via centralized assessment system and determined eligible for CoC Program assistance? (CSHS forms, Review Panel Process followed)	☐	☐	☐
2. Documentation for verification of homeless status?	☐	☐	☐
3. Are program participants coming from the target population identified in the grant application; e.g. disability, etc?	☐	☐	☐
4. Does the file include verification of the participant's disability? [For Permanent Supportive Housing]	☐	☐	☐
5. Documentation for all sources of income.	☐	☐	☐
6. Summary of steps taken to verify that the participant does not receive other subsidies for rent, utilities, etc.	☐	☐	☐
7. Documentation of search in HMIS for duplicative services AND prior rental/utility assistance to ensure maximum number of payments are not exceeded.	☐	☐	☐
8. Does the file contain documentation of total adjusted income and rent calculation? Annual re-certification? (including HMIS Interim Assessment.)	☐	☐	☐
9. Evidence that Race and Ethnicity data is tracked according to federal reporting requirements.	☐	☐	☐
10. Documentation supporting that if CoC Program assistance has ended, that the household is no longer in need of services, and household has been exited out of HMIS?	☐	☐	☐
11. Documentation for termination if the participant has been terminated from the program, evidenced by following the termination policy?	☐	☐	☐
12. Lease between the program participant and landlord?	☐	☐	☐

C. Documentation that the case manager has met with the household at least monthly during their program enrollment period to develop individual service plan. Do these records include:	☐	☐	☐
1. Program intake/eligibility documentation?	☐	☐	☐
2. Identification, including birth certificate, social security card, driver license, or passport?	☐	☐	☐
3. HMIS Consent to Release Information Form signed by both client and staff?	☐	☐	☐
4. Is there a completed HMIS Entry/Exit form in the file? Is exiting data completed if the case is closed? Are there Interim Assessments completed for Annual Reviews?	☐	☐	☐
5. Evidence of referrals to mainstream resources, etc.?	☐	☐	☐
a. If Yes, which ones? _____			
b. If No, why not? _____			
6. Copy of household budget and budget goals, including housing stability plan?	☐	☐	☐
7. Are the most recent income Fair Market Rent and Rent Reasonableness guidelines being used? Are they on file?	☐	☐	☐
8. For transitional housing, do the entry-exit dates exceed the 24-month limitation of stay? Does the file explain the need?	☐	☐	☐
9. Completed Housing Quality Standards (HQS) Inspection (24 CFR 578.75(b)) *Note: Initial HQS inspection plus annual inspections.* CoC *Program rent assistance requires HQS inspection*	☐	☐	☐
10. Lead-Paint Visual Assessment Forms and Worksheets as applicable	☐	☐	☐

Program Participant HMIS Unique ID#: _____

Notes/Comments:

Howard County Continuum of Care Policies & Procedures

C-3-LOCAL COC ANNUAL PERFORMANCE REPORT REVIEW

HUD Grant Project Number: _____

Project Title: _____ Date: _____

This section will monitor the performance outcomes and deficiencies of the HUD-funded project using the most recent Annual Performance Report (APR) submitted. The review will occur during the on-site monitoring visit between the Collaborative Applicant and the Agency Program Manager or his/her designee.

Annual Performance Report grant period _____ - _____	**YES**	**NO**	**N/A**
1. ***Did the agency and Recipient complete and submit documentation in support of the Annual Performance Report (APR) within 90-days following the grant term? If not, why?***			
2. ***Are the number of participants being served and units filled consistent with the number targeted in the grant application? If not, explain why.***			
3. ***How many participants moved to permanent housing during a 12-month period? Does this meet the goal established in the grant application? If not, what actions are being taken to improve this outcome?***			
4. ***How many adult participants improved their earned income through employment by program exit? Does this meet the goal established in the grant application? If not, what actions are being taken to improve this outcome?***			
5. ***How many adult participants improved their non-cash income through mainstream resources? Does this meet the goal established in the grant application? If not, what actions are being taken to connect participants to mainstream resources?***			
6. ***Do participants exit the program with greater self-determination and stable housinq? (SSOM) If not, what programmatic changes or resources would improve the self-determination and self-sufficiency of program participants?***			
7. ***Was the program serving the number of units during the grant period as stated in the HUD Project Application?***			

APPENDIX D – EVALUATION AND RESOURCE ALLOCATION (ERA) COMMITTEE CONFIDENTIALITY AGREEMENT

Howard County Board to Promote Self Sufficiency

Evaluation and Resource Allocation (ERA) Committee

Confidentiality Agreement

As a member of the Howard County Evaluation and Resource Allocation (ERA) Committee, which is responsible for evaluating grant applications, reports, and making grant award recommendations on behalf of the Howard County Board to Promote Self Sufficiency, I agree to:

1. Keep confidential all information regarding grant applications, awards, reports and any recommendations, including all discussions points.
2. Not reveal any evaluation discussions, grant award recommendations, or reallocation decisions prior to the announcement of those decisions.

If I have questions about whether a particular type of information is confidential, I agree to consult the Chair or the CoC Manager before discussing with or revealing the information to anyone except members of the ERA Committee. I understand that accessing or releasing confidential information and/or records, or causing confidential information and/or records to be accessed or released, by myself, other individuals, clients, relatives, etc., outside the scope of my assigned role/duties constitute a violation of this agreement.

I further agree that it is my responsibility to ensure the confidentiality of all information which has been issued to me in confidence, even after my access has ended. Pursuant to this agreement, I certify that I have read and understand my obligations and responsibilities in connection with protecting confidential information and/or records, including grant applications, awards, reports and any recommendations, including all discussions points. I agree to fully indemnify and hold harmless the County from any unauthorized use, improper use, or misuse of the information, or any violation of law arising out of or in connection with the acts or omissions of information presented as a result of my role in the Committee.

This Agreement and my obligations under it shall be binding.

_____	_____
[Individual's Signature]	Date
_____	_____
Stan Levi, ERA Committee Chair	Date

APPENDIX E – SCORE CARDS AND ASSESSMENT TOOL

Howard County Continuum of Care Policies & Procedures

Howard County Continuum of Care Project Applicant Performance Score Card: Renewals

Overview

Annually, every CoC funded program is ranked and tiered per HUD guidance. This Score Card's purpose is to ensure that HUD funded programs are providing the highest quality housing and services and that the programs are focused on achieving outcomes to end homelessness.

Overall Program Performance

To provide both project-specific outcome information and CoC-wide contributions, each CoC-funded program will be evaluated based on data entered into HMIS, the HUD Annual Performance Report (APR), and Project Applications submitted. The APR scoring criteria assess outcomes that directly relate to goals set by the HEARTH Act including reducing the length of homelessness, reducing returns to homelessness and increasing income.

NOTES

1. All criteria are scored based on materials submitted by the submission deadline, ie: APR due dates, etc.
2. The Capacity Assessment will be incorporated into the Performance Score Card results.
3. Time frame selected will be the most recently completed grant year or the last fiscal year, whichever ended *sooner*.

Project Name _____ Type of Program PSH or RRH

Contact Person _____ Date _____

E-mail _____ Phone _____

	Criteria	Standard (Source)	Max. Points	Scoring/Scaling	Response	Points
0	**Project eligibility**	Meets Project Threshold **See HUD Project Renewal Threshold narrative printed at the end of this score card. Mark each criterion pass, fail or in process.**	11	Pass/Fail/IP 1a Pass/Fail/IP 2a Pass/Fail/IP 1b Pass/Fail/IP 2b Pass/Fail/IP 1c Pass/Fail/IP 2c Pass/Fail/IP 1d Pass/Fail/IP 2d Pass/Fail/IP 2e Pass/Fail/IP 2f Pass/Fail/IP 2g 1 point for each "Pass" .5 point for each "In Process" 0 point for each "Fail"	See criteria on last page	

	Criteria	Standard (Source)	Max. Points	Scoring/Scaling	Response	Points
1	**Utilization Rate.** Is the utilization rate at or above 85%?	Yes **APR (Use average number of persons served each night found on Q8 of the APR and divide by the number of beds)**	5	95-100% = 5 points 90-94% = 3 points 85-89% = 1 point Below 85% = 0 points (A / B = C)	___% A.____ Average number persons B.____ Funded Beds C.___ %	
1b	**Utilization Rate.** (Units)	Compare the number of units funded and number of units occupied	0	Information Purposes Only	____# Units Funded in Application ____ # Units Occupied per APR (Households)	N/A
2	**Housing Stability**. Is the recidivism rate (returns to ES or TH projects after exit) of persons who exited to permanent housing below 20%?	Yes **Use Question 36a. of the APR (for Housing Stability Measure 1)**	5	5 points for 0-15% recidivism 3 points for 16-20% recidivism 0 points for over 20% (B / A = C)	A. ___ Actual # of persons in the program for whom the measure is appropriate B. ____ Actual # of persons who accomplished this measure C. ____Actual % of persons who accomplished this measure	
3	**Destination upon Program Exit.** What percentage of persons served exit to permanent housing destinations or retain permanent housing?	Use (a) for RRH Or Use (b) for PSH **a. Indicate the number of persons in CoC funded rapid re-housing, RRH project types who exited between July 1, 2015 and June 30, 2016. Of the persons who exited, how many of those exited to permanent destinations?** ***Or*** **b. Indicate the number of persons in PSH project between July 1, 2015 and June 30, 2016 (Universe). Of the persons in the Universe, how many of those remained in applicable PH projects and how many of those exited to permanent destinations?**	4	5a 4 points for 93-100% 2 points for 80-92% 0 points for below 80% (A / B = C) 5b 4 points for 91-100% 2 points for 80-90% 0 points for below 80% (B + C / A = D)	5a – RRH A.____# persons who exited B. ___ # who exited to permanent destinations C. ___% Successful Exits **Or** 5b – PSH A. __ # persons in PSH (Universe) B. # persons who remained in PSH C. ___# who exited to permanent destinations D.____% Successful Exits/ Remains	

	Criteria	Standard (Source)	Max. Points	Scoring/Scaling	Response	Points
4	**Increasing participant income.** For RRH, did at least 35% of adults served (stayers and leavers) increase their overall income? For PSH, because of the **severity of needs** of participants in PSH projects, this measure is 35% of all participants either maintaining or increasing their overall income.	APR Q24.b.3. **Divide 'Adults Any Income' who increased and gained $ total by the 'Total Adults' (which includes leavers and stayers).** **For PSH only, include maintained & increased**	5	5 points At least 35% increased or maintained income 3 points 30-34% increased or maintained income 2 points 25-29% increased or maintained income 1 point 20-24% increased or maintained income 0 points Less than 20 increased or maintained income (A + B / C = D)	**Using Adults Any Income row:** A.____# maintained and/or increased (PSH only) B.____# did not have income at entry and gained at follow-up/Exit C.____Total Adults D.____% increasing overall income	
5	**Connecting program participants to mainstream benefits.** Did at least 56% of adults served (current and leavers) increase or maintain their number of mainstream benefits being received?	APR Q26a2. (Leavers) & Q26b2. (Stayers), Total APR Q7. **Use Total column to divide 'Leavers & Stayers with** **1+ Mainstream Benefits by the 'Total'**	3	3 points Yes, at least 56% maintained or increased mainstream benefits 2 points 45-55% maintained or increased mainstream benefits 1 point 33-44% maintained or increased mainstream benefits 0 points Less than 33% maintained or increased mainstream benefits (A + B / C = D)	**Using Adults Maintained or Increased Mainstream Benefits** A.___ # Leavers with 1+ Mainstream Benefits B._____ # Stayers with 1+ Mainstream Benefits C.____ # Total D.____ % Connected	
6	**Ending Chronic Homelessness.** Were the total number of PSH beds identified as dedicated/ prioritized for use by CH persons on the 2016 HIC greater than or equal to those identified on the 2015 HIC?	Yes, for PSH projects **If "No" is answered, please attach a written explanation.**	4	*For PSH projects* 4 points Yes 0 points No	_____# 2016 CH beds _____# 2015 CH beds	

	Criteria	Standard (Source)	Max. Points	Scoring/Scaling	Response	Points
7	**Ending Homelessness among Households with Children & Ending Youth Homelessness.** Were more households served using RRH from 2015 to 2016?	Yes, for RRH projects **Use two prior APRs for comparison of RRH households served**	1	*For RRH projects* 1 points Yes 0 points No	___ # 2016 RRH households served ___ # 2015 RRH households served	
8	**Ending Veterans Homelessness.** Did you project serve any veterans during the prior APR year?	**List number of veterans served per APR.**	0	Not scored. Please list number of veterans served (as reported per APR).	This metric is not scored but will be used for data collection relevant to Planning. ____# Veterans (total persons in all households)	N/A
9	**Data Quality.** Is the project reporting high-quality data to HMIS?	Yes **Use time period of** **July 1, 2015 - June 30, 2016**	4	2 points Number of unduplicated client records with *null or missing values* for the Universal Data Elements is below 10%. **+** 2 points Number of unduplicated client records *with refused or unknown values* for the Universal Data Elements is below 10%.		
10	**Participant Eligibility / Additional Policies.** Does the PSH, RRH project operate using a "**low barrier**" model?	**Does the 2016 project applicant reflect "Low Barrier" Designation?** *IE: Does the project accept program participants regardless of their income, current or past substance use, and criminal records–with the exceptions of restrictions imposed by federal, state or local law or ordinance, and history of domestic violence?* **If "No" attach written explanation.**	4	4 = Yes 0 = No	Does the project use a low barrier standard?	

	Criteria	Standard (Source)	Max. Points	Scoring/Scaling	Response	Points
11	**Participant Eligibility / Additional Policies.** Does the PSH, RRH project operate using a "**Housing First**" approach?	**Does the 2016 project applicant reflect "Housing First" tenets?** Per 2016 NOFA, "Housing First" approach means the project uses a Low Barrier model, has no service participation requirements or preconditions to entry and prioritizes rapid placement and stabilization in permanent housing. **If "No", attach a written explanation.**	4	4 = Yes 0 = No	Does the project fully use Housing First?	
12	**Coordinated Entry:** Does the project fully participate in Coordinated System of Homeless Services (CSHS)? (PSH, RRH)	**Does the project fully participate in the coordinated system of homeless services,** including providing clients referrals to partner agencies, receiving clients through the Review Panel (CSHS only), and regular participation in the Committees and Workgroups on homeless services?	6	2 points: Project regularly provides referrals to CSHS Partner Agencies 2 points: Project receives clients from the CSHS through the Review Panel 2 points: Project regularly participates in Committees and Workgroups on homeless services through the CoC (75% participation is regular)	Detail your project's participation in the Coordinated System of Homeless Services and CoC. (Information will be confirmed by CoC Manager)	
	PERFORMANCE TOTALS **PSH maximum=55** **RRH maximum=52**		**55 PSH and** **52 RRH**			
	TOTAL					

Howard County Continuum of Care Project Applicant Performance Score Card: Renewals

Project Renewal Threshold. A CoC must consider the need to continue funding for projects expiring in CY 2017. Renewal projects must meet minimum project eligibility, capacity, timeliness, and performance standards identified in this NOFA or they will be rejected from consideration for funding. See below for pass/fail elements as will be used for assessment that HUD will use to assess each Project during this competition.

(1) When considering renewal projects for award, HUD will review information in LOCCS; Annual Performance Reports (APRs); and information provided from the local HUD CPD Field Office, including monitoring reports and A-133 audit reports as applicable, and performance standards on prior grants, and will assess projects using the following criteria:

(Note: For Howard County review process, the "in process" selection will be added to indicate the project is working towards meeting the standard)

(a) Whether the project applicant's performance met the plans and goals established in the initial application as amended; Pass or Fail or In Process;

(b) Whether the project applicant demonstrated all timeliness standards for grants being renewed, including that standards for the expenditure of grant funds have been met; Pass or Fail or In Process;

(c) The project applicant's performance in assisting program participants to achieve and maintain independent living and record of success, except HMIS-dedicated projects are not required to meet this standard; Pass or Fail or In Process;

(d) Whether there is evidence that a project applicant has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site. Pass or Fail or In Process;

(2) HUD reserves the right to reduce or reject a funding request from the project applicant for the following reasons:

(a) Outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon; Pass or Fail or In Process;

(b) Audit finding(s) for which a response is overdue or unsatisfactory; Pass or Fail or In Process;

(c) History of inadequate financial management accounting practices; Pass or Fail or In Process;

(d) Evidence of untimely expenditures on prior award; Pass or Fail or In Process;

(e) History of other major capacity issues that have significantly affected the operation of the project and its performance; Pass or Fail or In Process;

(f) History of not reimbursing subrecipients for eligible costs in a timely manner, or at least quarterly; Pass or Fail or In Process; and

(g) History of serving ineligible program participants, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes. Pass or Fail or In Process.

Score Card adapted from: http://www.endhomelessnesstoday.org/Task-Forces-and-Current-Initiatives.html

Howard County Continuum of Care Policies & Procedures

APPENDIX F – LEAD FORMS AND WORKSHEETS

About this Tool

The following checklist provides an overview of common documents that can be used to verify compliance with the Lead-Based Paint Poisoning Prevention Act. Note that this checklist does not cover all of the documentation that providers would want to include in all instances. For example, additional documentation may be required if the property is found to meet exemptions listed under Part 2 of the Lead Screening Worksheet. This tool was adapted from http://www.dca.ga.gov/housing/specialneeds/programs/documents/handbookforemergencysolutionsgrantpdf-adobeacrobatpro.pdf

DOCUMENT NAME	PURPOSE
Application	Application Documents age of children
Screenshot of property record from online tax database	Documents age of property
Lead Screening Worksheet	Documents exemptions (additional documentation will vary based on exemption)
Lead-Based Paint Visual Assessment Certification	Documents that a visual assessment was conducted and problems with paint surfaces were not identified
Owner Certification (if applicable)	Documents owner certification that any identified problems with paint surfaces have been repaired and that safe work practices were followed, as applicable
Clearance Report (if applicable)	Documents that unit passed clearance
Documentation of ongoing maintenance activities: **• Visual Assessment Certification Forms** **• Clearance report from each maintenance job involving painted surfaces above the de minimis threshold** **• Notice of lead hazard reduction for each maintenance job involving painted surfaces**	Documents that a visual assessment is performed at least annually during the assistance period and that any deteriorated paint was appropriately addressed (including clearance and notice of lead hazard reduction)
Documentation of response to EIBLL child: **• Copies of risk assessment** **• Abatement or clearance report** **• Relocation documents**	Documents that if an EIBLL child was identified in the unit, the situation was addressed in accordance with the Lead Safe Housing Rule.

- **Correspondence with health department**

APPENDIX F – LEAD FORMS AND WORKSHEETS
Lead Screening Worksheets

About this Tool

The Lead Screening Worksheet is intended to guide CoC programs through the lead-based paint inspection process to ensure compliance with the Rule. CoC Program staff can use this worksheet to document any exemptions that may apply, whether any potential hazards have been identified, and if safe work practices and clearance are required and used. A copy of the completed worksheet along with any additional documentation should be kept in each program participant's case file.

INSTRUCTIONS

To prevent lead-poisoning in young children, the CoC Program must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at 24 CFR 35, Parts A, B, K, M, and R. Under certain circumstances, a visual assessment of the unit is not required. This screening worksheet will help CoC Program staff determine whether a unit is subject to a visual assessment, and if so, how to proceed. A copy of the completed worksheet along with any related documentation should be kept in each program participant's file. **Note**: ALL pre-1978 properties are subject to the disclosure requirements outlined in 24 CFR 35, Part A, regardless of whether they are exempt from the visual assessment requirements.

BASIC INFORMATION

Name of Participant: _____

Street Address: _____ City: _____State: _____Zip:_____

CoC Program Staff Name and Title:_____

PART 1: DETERMINE WHETHER THE UNIT IS SUBJECT TO A VISUAL ASSESSMENT

If the answer to one or both of the following questions is 'No,' a visual assessment is **not** triggered for this unit and no further action is required at this time. Place this screening worksheet and related documentation in the program participant's file. If the answer to both of these questions is 'Yes,' then a visual assessment **is** triggered for this unit and program staff should continue to Part 2.

1. Was the leased property constructed before 1978?
___ Yes ___ No

2. Will a child under the age of six be living in the unit occupied by the household receiving CoC assistance?
___ Yes ___ No

APPENDIX F – LEAD FORMS AND WORKSHEETS

PART 2: DOCUMENT ADDITIONAL EXEMPTIONS

If the answer to any of the following questions is 'Yes,' the property is exempt from the visual assessment requirement and no further action is needed at this point. Place this screening sheet and supporting documentation for each exemption in the program participant's file. If the answer to all of these questions is 'No,' then continue to Part 3 to determine whether deteriorated paint is present.

1. Is it a zero-bedroom or SRO-sized unit?

___ Yes ___ No

2. Has X-ray or laboratory testing of all painted surfaces by certified personnel been conducted in accordance with HUD regulations and the unit is officially certified to not contain lead-based paint?

___ Yes ___ No

3. Has this property had all lead-based paint identified and removed in accordance with HUD regulations?

___ Yes ___ No

4. Is the client receiving Federal assistance from another program, where the unit has already undergone (and passed) a visual assessment within the past 12 months (e.g., if the client has a Section 8 voucher and is receiving COC assistance for a security deposit or arrears)?
____ Yes (Obtain documentation for the case file.) ___No

5. Does the property meet any of the other exemptions described in 24 CFR Part 35.115(a).

___ Yes ___ No

Please describe the exemption and provide appropriate documentation of the exemption.

6. Has the client received the "Protect Your Family from Lead In Your Home" pamphlet and signed they reviewed and received it?

___ Yes ___ No *Maintain receipt and copy of the pamphlet in client file (see Appendix G of CoC Policies and Procedures)*

APPENDIX F – LEAD FORMS AND WORKSHEETS

PART 3: DETERMINE THE PRESENCE OF DETERIORATED PAINT

To determine whether there are any identified problems with paint surfaces, program staff should conduct a visual assessment prior to providing CoC assistance to the unit as outlined in the following training on HUD's website at:http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm

If **no** problems with paint surfaces are identified during the visual assessment, then **no** further action is required at this time. Place this screening sheet and certification form (Attachment A) in the program participant's file.

If any problems with paint surfaces **are** identified during the visual assessment, then **continue** to Part 4 to determine whether safe work practices and clearance are required.

1. Has a visual assessment of the unit been conducted?

___ Yes ___ No

2. Were any problems with paint surfaces identified in the unit during the visual assessment?

___ Yes ___ No (*Complete LEAD-BASED PAINT VISUAL ASSESSMENT CERTIFICATION FORM of this document*)

APPENDIX F – LEAD FORMS AND WORKSHEETS

PART 4: DOCUMENT THE LEVEL OF IDENTIFIED PROBLEMS

All deteriorated paint identified during the visual assessment must be repaired prior to clearing the unit for assistance. However, if the area of paint to be stabilized exceeds the de minimus levels (defined below), the use of lead safe work practices and clearance is required. If deteriorating paint exists but the area of paint to be stabilized does not exceed these levels, then the paint must be repaired prior to clearing the unit for assistance, but safe work practices and clearance are not required.

1. Does the area of paint to be stabilized exceed any of the de minimus levels below?

• 20 square feet on exterior surfaces

___ Yes ___ No

• 2 square feet in any one interior room or space

___ Yes ___ No

• 10 percent of the total surface area on an interior or exterior component with a small surface area, like window sills, baseboards, and trim

___ Yes ___ No

If any of the above are 'yes,' then safe work practices and clearance are required prior to clearing the unit for assistance.

APPENDIX F – LEAD FORMS AND WORKSHEETS

PART 5: CONFIRM ALL IDENTIFIED DETERIORATED PAINT HAS BEEN STABILIZED

Program staff should work with property owners/managers to ensure that all deteriorated paint identified during the visual assessment has been stabilized. If the area of paint to be stabilized does not exceed the de minimus level, safe work practices and a clearance exam are not required (though safe work practices are always recommended). In these cases, the COC program staff should confirm that the identified deteriorated paint has been repaired by conducting a follow-up assessment. If the area of paint to be stabilized exceeds the de minimus level, program staff should ensure that the clearance inspection is conducted by an independent certified lead professional. A certified lead professional may go by various titles, including a certified paint inspector, risk assessor, or sampling/clearance technician. Note, the clearance inspection cannot be conducted by the same firm that is repairing the deteriorated paint.

1. Has a follow-up visual assessment of the unit been conducted?

___ Yes ___ No

2. Have all identified problems with the paint surfaces been repaired?

___ Yes ___ No

3. Were all identified problems with paint surfaces repaired using safe work practices?

___ Yes ___ No ____ Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

4. Was a clearance exam conducted by an independent, certified lead professional?

___ Yes ___ No _____Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels. 5. Did the unit pass the clearance exam?

___ Yes ___ No _____Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

Note: A copy of the clearance report should be placed in the program participant's file.

APPENDIX F – LEAD FORMS AND WORKSHEETS
LEAD-BASED PAINT VISUAL ASSESSMENT CERTIFICATION FORM

I, _____ (print name), certify the following:

• I have completed HUD's online visual assessment training and am a HUD-certified visual assessor.

• I conducted a visual assessment at _____(property address and unit number) on _____ (date of assessment).

• No problems with paint surfaces were identified in the unit or in the building's common areas.

_____

(Signature)

_____

(Date)

Client Name: _____

Case Number: _____

APPENDIX F – LEAD FORMS AND WORKSHEETS
COC Lead-Based Paint Property Owner Certification Form

INSTRUCTIONS

To prevent lead-poisoning in young children, the CoC program must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at 24 CFR 35, Parts A, B, M, and R. If a visual assessment reveals problems with paint surfaces, property owners/managers must repair all identified problems with paint surfaces in accordance with the guidelines of 24 CFR 35, Parts A, B, M, and R, prior to a unit receiving CoC assistance. Property owners/managers should complete this form to certify that all identified problems with paint surfaces have been repaired/stabilized in accordance with the guidelines.

1. Have all identified problems with the paint surfaces been repaired?

___ Yes ___ No

2. Have all identified problems with paint surfaces been repaired using safe work practices?

___ Yes ___ No ___ Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

3. Was a clearance exam conducted by an independent, certified lead professional?

___ Yes ___ No ___ Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

4. Did the unit pass the clearance exam?

___ Yes ___ No ___ Applicable – The area of paint to be stabilized did not exceed the de minimus levels

Name of Tenant			
Street Address			
City	State	Zip	
Name of Property Owner/Manager			
Property Owner/Manager Signature			Date
Name COC Program Staff			
COC Program Staff Signature			Date

APPENDIX G – PROTECT YOUR FAMILY FROM LEAD IN YOUR HOME PAMPHLET

Protect Your Family From Lead in Your Home

United States Environmental Protection Agency

United States Consumer Product Safety Commission

United States Department of Housing and Urban Development

September 2013

Are You Planning to Buy or Rent a Home Built Before 1978?

Did you know that many homes built before 1978 have **lead-based paint**? Lead from paint, chips, and dust can pose serious health hazards.

Read this entire brochure to learn:

- How lead gets into the body
- About health effects of lead
- What you can do to protect your family
- Where to go for more information

Before renting or buying a pre-1978 home or apartment, federal law requires:

- Sellers must disclose known information on lead-based paint or lead-based paint hazards before selling a house.
- Real estate sales contracts must include a specific warning statement about lead-based paint. Buyers have up to 10 days to check for lead.
- Landlords must disclose known information on lead-based paint and lead-based paint hazards before leases take effect. Leases must include a specific warning statement about lead-based paint.

If undertaking renovations, repairs, or painting (RRP) projects in your pre-1978 home or apartment:

- Read EPA's pamphlet, *The Lead-Safe Certified Guide to Renovate Right,* to learn about the lead-safe work practices that contractors are required to follow when working in your home (see page 12).

Simple Steps to Protect Your Family from Lead Hazards

If you think your home has lead-based paint:

- Don't try to remove lead-based paint yourself.
- Always keep painted surfaces in good condition to minimize deterioration.
- Get your home checked for lead hazards. Find a certified inspector or risk assessor at epa.gov/lead.
- Talk to your landlord about fixing surfaces with peeling or chipping paint.
- Regularly clean floors, window sills, and other surfaces.
- Take precautions to avoid exposure to lead dust when remodeling.
- When renovating, repairing, or painting, hire only EPA- or state-approved Lead-Safe certified renovation firms.
- Before buying, renting, or renovating your home, have it checked for lead-based paint.
- Consult your health care provider about testing your children for lead. Your pediatrician can check for lead with a simple blood test.
- Wash children's hands, bottles, pacifiers, and toys often.
- Make sure children avoid fatty (or high fat) foods and eat nutritious meals high in iron and calcium.
- Remove shoes or wipe soil off shoes before entering your house.

Lead Gets into the Body in Many Ways

Adults and children can get lead into their bodies if they:

- Breathe in lead dust (especially during activities such as renovations, repairs, or painting that disturb painted surfaces).
- Swallow lead dust that has settled on food, food preparation surfaces, and other places.
- Eat paint chips or soil that contains lead.

Lead is especially dangerous to children under the age of 6.

- At this age, children's brains and nervous systems are more sensitive to the damaging effects of lead.
- Children's growing bodies absorb more lead.
- Babies and young children often put their hands and other objects in their mouths. These objects can have lead dust on them.

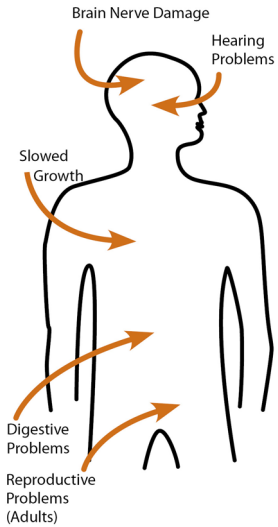
Women of childbearing age should know that lead is dangerous to a developing fetus.

- Women with a high lead level in their system before or during pregnancy risk exposing the fetus to lead through the placenta during fetal development.

Health Effects of Lead

Lead affects the body in many ways. It is important to know that even exposure to low levels of lead can severely harm children.

In children, exposure to lead can cause:



- Nervous system and kidney damage
- Learning disabilities, attention deficit disorder, and decreased intelligence
- Speech, language, and behavior problems
- Poor muscle coordination
- Decreased muscle and bone growth
- Hearing damage

While low-lead exposure is most common, exposure to high amounts of lead can have devastating effects on children, including seizures, unconsciousness, and, in some cases, death.

Although children are especially susceptible to lead exposure, lead can be dangerous for adults, too.

In adults, exposure to lead can cause:

- Harm to a developing fetus
- Increased chance of high blood pressure during pregnancy
- Fertility problems (in men and women)
- High blood pressure
- Digestive problems
- Nerve disorders
- Memory and concentration problems
- Muscle and joint pain

Check Your Family for Lead

Get your children and home tested if you think your home has lead.

Children's blood lead levels tend to increase rapidly from 6 to 12 months of age, and tend to peak at 18 to 24 months of age.

Consult your doctor for advice on testing your children. A simple blood test can detect lead. Blood lead tests are usually recommended for:

- Children at ages 1 and 2
- Children or other family members who have been exposed to high levels of lead
- Children who should be tested under your state or local health screening plan

Your doctor can explain what the test results mean and if more testing will be needed.

Where Lead-Based Paint Is Found

In general, the older your home or childcare facility, the more likely it has lead-based paint.[1]

Many homes, including private, federally-assisted, federally-owned housing, and childcare facilities built before 1978 have lead-based paint. In 1978, the federal government banned consumer uses of lead-containing paint.[2]

Learn how to determine if paint is lead-based paint on page 7.

Lead can be found:

- In homes and childcare facilities in the city, country, or suburbs,
- In private and public single-family homes and apartments,
- On surfaces inside and outside of the house, and
- In soil around a home. (Soil can pick up lead from exterior paint or other sources, such as past use of leaded gas in cars.)

Learn more about where lead is found at epa.gov/lead.

[1] "Lead-based paint" is currently defined by the federal government as paint with lead levels greater than or equal to 1.0 milligram per square centimeter (mg/cm), or more than 0.5% by weight.

[2] "Lead-containing paint" is currently defined by the federal government as lead in new dried paint in excess of 90 parts per million (ppm) by weight.

Identifying Lead-Based Paint and Lead-Based Paint Hazards

Deteriorating lead-based paint (peeling, chipping, chalking, cracking, or damaged paint) is a hazard and needs immediate attention. **Lead-based paint** may also be a hazard when found on surfaces that children can chew or that get a lot of wear and tear, such as:

- On windows and window sills
- Doors and door frames
- Stairs, railings, banisters, and porches

Lead-based paint is usually not a hazard if it is in good condition and if it is not on an impact or friction surface like a window.

Lead dust can form when lead-based paint is scraped, sanded, or heated. Lead dust also forms when painted surfaces containing lead bump or rub together. Lead paint chips and dust can get on surfaces and objects that people touch. Settled lead dust can reenter the air when the home is vacuumed or swept, or when people walk through it. EPA currently defines the following levels of lead in dust as hazardous:

- 40 micrograms per square foot ($\mu g/ft^2$) and higher for floors, including carpeted floors
- 250 $\mu g/ft^2$ and higher for interior window sills

Lead in soil can be a hazard when children play in bare soil or when people bring soil into the house on their shoes. EPA currently defines the following levels of lead in soil as hazardous:

- 400 parts per million (ppm) and higher in play areas of bare soil
- 1,200 ppm (average) and higher in bare soil in the remainder of the yard

Remember, lead from paint chips—which you can see—and lead dust—which you may not be able to see—both can be hazards.

The only way to find out if paint, dust, or soil lead hazards exist is to test for them. The next page describes how to do this.

Checking Your Home for Lead

You can get your home tested for lead in several different ways:

- A lead-based paint **inspection** tells you if your home has lead-based paint and where it is located. It won't tell you whether your home currently has lead hazards. A trained and certified testing professional, called a lead-based paint inspector, will conduct a paint inspection using methods, such as:
  - Portable x-ray fluorescence (XRF) machine
  - Lab tests of paint samples

- A **risk assessment** tells you if your home currently has any lead hazards from lead in paint, dust, or soil. It also tells you what actions to take to address any hazards. A trained and certified testing professional, called a risk assessor, will:
  - Sample paint that is deteriorated on doors, windows, floors, stairs, and walls
  - Sample dust near painted surfaces and sample bare soil in the yard
  - Get lab tests of paint, dust, and soil samples
- A combination inspection and risk assessment tells you if your home has any lead-based paint and if your home has any lead hazards, and where both are located.

Be sure to read the report provided to you after your inspection or risk assessment is completed, and ask questions about anything you do not understand.

Checking Your Home for Lead, continued

In preparing for renovation, repair, or painting work in a pre-1978 home, Lead-Safe Certified renovators (see page 12) may:

- Take paint chip samples to determine if lead-based paint is present in the area planned for renovation and send them to an EPA-recognized lead lab for analysis. In housing receiving federal assistance, the person collecting these samples must be a certified lead-based paint inspector or risk assessor
- Use EPA-recognized tests kits to determine if lead-based paint is absent (but not in housing receiving federal assistance)
- Presume that lead-based paint is present and use lead-safe work practices

There are state and federal programs in place to ensure that testing is done safely, reliably, and effectively. Contact your state or local agency for more information, visit epa.gov/lead, or call **1-800-424-LEAD (5323)** for a list of contacts in your area.[3]

[3] Hearing- or speech-challenged individuals may access this number through TTY by calling the Federal Relay Service at 1-800-877-8399.

What You Can Do Now to Protect Your Family

If you suspect that your house has lead-based paint hazards, you can take some immediate steps to reduce your family's risk:

- If you rent, notify your landlord of peeling or chipping paint.
- Keep painted surfaces clean and free of dust. Clean floors, window frames, window sills, and other surfaces weekly. Use a mop or sponge with warm water and a general all-purpose cleaner. (Remember: never mix ammonia and bleach products together because they can form a dangerous gas.)
- Carefully clean up paint chips immediately without creating dust.
- Thoroughly rinse sponges and mop heads often during cleaning of dirty or dusty areas, and again afterward.
- Wash your hands and your children's hands often, especially before they eat and before nap time and bed time.
- Keep play areas clean. Wash bottles, pacifiers, toys, and stuffed animals regularly.
- Keep children from chewing window sills or other painted surfaces, or eating soil.
- When renovating, repairing, or painting, hire only EPA- or state-approved Lead-Safe Certified renovation firms (see page 12).
- Clean or remove shoes before entering your home to avoid tracking in lead from soil.
- Make sure children avoid fatty (or high fat) foods and eat nutritious meals high in iron and calcium. Children with good diets absorb less lead.

Reducing Lead Hazards

Disturbing lead-based paint or removing lead improperly can increase the hazard to your family by spreading even more lead dust around the house.

- In addition to day-to-day cleaning and good nutrition, you can **temporarily** reduce lead-based paint hazards by taking actions, such as repairing damaged painted surfaces and planting grass to cover lead-contaminated soil. These actions are not permanent solutions and will need ongoing attention.
- You can minimize exposure to lead when renovating, repairing, or painting by hiring an EPA- or state-certified renovator who is trained in the use of lead-safe work practices. If you are a do-it-yourselfer, learn how to use lead–safe work practices in your home.
- To remove lead hazards permanently, you should hire a certified lead abatement contractor. Abatement (or permanent hazard elimination) methods include removing, sealing, or enclosing lead-based paint with special materials. Just painting over the hazard with regular paint is not permanent control.

Always use a certified contractor who is trained to address lead hazards safely.

- Hire a Lead-Safe Certified firm (see page 12) to perform renovation, repair, or painting (RRP) projects that disturb painted surfaces.
- To correct lead hazards permanently, hire a certified lead abatement professional. This will ensure your contractor knows how to work safely and has the proper equipment to clean up thoroughly.

Certified contractors will employ qualified workers and follow strict safety rules as set by their state or by the federal government.

Reducing Lead Hazards, continued

If your home has had lead abatement work done or if the housing is receiving federal assistance, once the work is completed, dust cleanup activities must be conducted until clearance testing indicates that lead dust levels are below the following levels:

- 40 micrograms per square foot (µg/ft^2) for floors, including carpeted floors
- 250 µg/ft^2 for interior windows sills
- 400 µg/ft^2 for window troughs

For help in locating certified lead abatement professionals in your area, call your state or local agency (see pages 14 and 15), or visit epa.gov/lead, or call 1-800-424-LEAD.

Renovating, Remodeling, or Repairing (RRP) a Home with Lead-Based Paint

If you hire a contractor to conduct renovation, repair, or painting (RRP) projects in your pre-1978 home or childcare facility (such as pre-school and kindergarten), your contractor must:

- Be a Lead-Safe Certified firm approved by EPA or an EPA-authorized state program
- Use qualified trained individuals (Lead-Safe Certified renovators) who follow specific lead-safe work practices to prevent lead contamination
- Provide a copy of EPA's lead hazard information document, *The Lead-Safe Certified Guide to Renovate Right*

RRP contractors working in pre-1978 homes and childcare facilities must follow lead-safe work practices that:

- **Contain the work area.** The area must be contained so that dust and debris do not escape from the work area. Warning signs must be put up, and plastic or other impermeable material and tape must be used.
- **Avoid renovation methods that generate large amounts of lead-contaminated dust.** Some methods generate so much lead-contaminated dust that their use is prohibited. They are:
  - Open-flame burning or torching
  - Sanding, grinding, planing, needle gunning, or blasting with power tools and equipment not equipped with a shroud and HEPA vacuum attachment and
  - Using a heat gun at temperatures greater than 1100°F
- **Clean up thoroughly.** The work area should be cleaned up daily. When all the work is done, the area must be cleaned up using special cleaning methods.
- **Dispose of waste properly.** Collect and seal waste in a heavy duty bag or sheeting. When transported, ensure that waste is contained to prevent release of dust and debris.

To learn more about EPA's requirements for RRP projects visit epa.gov/getleadsafe, or read *The Lead-Safe Certified Guide to Renovate Right*.

Other Sources of Lead

While paint, dust, and soil are the most common sources of lead, other lead sources also exist:

- **Drinking water.** Your home might have plumbing with lead or lead solder. You cannot see, smell, or taste lead, and boiling your water will not get rid of lead. If you think your plumbing might contain lead:
  - Use only cold water for drinking and cooking.
  - Run water for 15 to 30 seconds before drinking it, especially if you have not used your water for a few hours.

  Call your local health department or water supplier to find out about testing your water, or visit epa.gov/lead for EPA's lead in drinking water information.
- **Lead smelters** or other industries that release lead into the air.
- **Your job.** If you work with lead, you could bring it home on your body or clothes. Shower and change clothes before coming home. Launder your work clothes separately from the rest of your family's clothes.
- **Hobbies** that use lead, such as making pottery or stained glass, or refinishing furniture. Call your local health department for information about hobbies that may use lead.
- Old **toys** and **furniture** may have been painted with lead-containing paint. Older toys and other children's products may have parts that contain lead.[4]
- Food and liquids cooked or stored in **lead crystal** or **lead-glazed pottery or porcelain** may contain lead.
- Folk remedies, such as **"greta"** and **"azarcon,"** used to treat an upset stomach.

[4] In 1978, the federal government banned toys, other children's products, and furniture with lead-containing paint (16 CFR 1303). In 2008, the federal government banned lead in most children's products. The federal government currently bans lead in excess of 100 ppm by weight in most children's products (76 FR 44463).

For More Information

The National Lead Information Center
Learn how to protect children from lead poisoning and get other information about lead hazards on the Web at epa.gov/lead and hud.gov/lead, or call **1-800-424-LEAD (5323).**

EPA's Safe Drinking Water Hotline
For information about lead in drinking water, call **1-800-426-4791**, or visit epa.gov/lead for information about lead in drinking water.

Consumer Product Safety Commission (CPSC) Hotline
For information on lead in toys and other consumer products, or to report an unsafe consumer product or a product-related injury, call **1-800-638-2772,** or visit CPSC's website at cpsc.gov or saferproducts.gov.

State and Local Health and Environmental Agencies
Some states, tribes, and cities have their own rules related to lead-based paint. Check with your local agency to see which laws apply to you. Most agencies can also provide information on finding a lead abatement firm in your area, and on possible sources of financial aid for reducing lead hazards. Receive up-to-date address and phone information for your state or local contacts on the Web at epa.gov/lead, or contact the National Lead Information Center at **1-800-424-LEAD.**

Hearing- or speech-challenged individuals may access any of the phone numbers in this brochure through TTY by calling the toll-free Federal Relay Service at **1-800-877-8339**.

U. S. Environmental Protection Agency (EPA) Regional Offices

The mission of EPA is to protect human health and the environment. Your Regional EPA Office can provide further information regarding regulations and lead protection programs.

Region 1 (Connecticut, Massachusetts, Maine, New Hampshire, Rhode Island, Vermont)

Regional Lead Contact
U.S. EPA Region 1
5 Post Office Square, Suite 100, OES 05-4
Boston, MA 02109-3912
(888) 372-7341

Region 2 (New Jersey, New York, Puerto Rico, Virgin Islands)

Regional Lead Contact
U.S. EPA Region 2
2890 Woodbridge Avenue
Building 205, Mail Stop 225
Edison, NJ 08837-3679
(732) 321-6671

Region 3 (Delaware, Maryland, Pennsylvania, Virginia, DC, West Virginia)

Regional Lead Contact
U.S. EPA Region 3
1650 Arch Street
Philadelphia, PA 19103
(215) 814-2088

Region 4 (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee)

Regional Lead Contact
U.S. EPA Region 4
AFC Tower, 12th Floor, Air, Pesticides & Toxics
61 Forsyth Street, SW
Atlanta, GA 30303
(404) 562-8998

Region 5 (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)

Regional Lead Contact
U.S. EPA Region 5 (DT-8J)
77 West Jackson Boulevard
Chicago, IL 60604-3666
(312) 886-7836

Region 6 (Arkansas, Louisiana, New Mexico, Oklahoma, Texas, and 66 Tribes)

Regional Lead Contact
U.S. EPA Region 6
1445 Ross Avenue, 12th Floor
Dallas, TX 75202-2733
(214) 665-2704

Region 7 (Iowa, Kansas, Missouri, Nebraska)

Regional Lead Contact
U.S. EPA Region 7
11201 Renner Blvd.
WWPD/TOPE
Lenexa, KS 66219
(800) 223-0425

Region 8 (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)

Regional Lead Contact
U.S. EPA Region 8
1595 Wynkoop St.
Denver, CO 80202
(303) 312-6966

Region 9 (Arizona, California, Hawaii, Nevada)

Regional Lead Contact
U.S. EPA Region 9 (CMD-4-2)
75 Hawthorne Street
San Francisco, CA 94105
(415) 947-4280

Region 10 (Alaska, Idaho, Oregon, Washington)

Regional Lead Contact
U.S. EPA Region 10
Solid Waste & Toxics Unit (WCM-128)
1200 Sixth Avenue, Suite 900
Seattle, WA 98101
(206) 553-1200

Consumer Product Safety Commission (CPSC)

The CPSC protects the public against unreasonable risk of injury from consumer products through education, safety standards activities, and enforcement. Contact CPSC for further information regarding consumer product safety and regulations.

CPSC
4330 East West Highway
Bethesda, MD 20814-4421
1-800-638-2772
cpsc.gov or saferproducts.gov

U. S. Department of Housing and Urban Development (HUD)

HUD's mission is to create strong, sustainable, inclusive communities and quality affordable homes for all. Contact HUD's Office of Healthy Homes and Lead Hazard Control for further information regarding the Lead Safe Housing Rule, which protects families in pre-1978 assisted housing, and for the lead hazard control and research grant programs.

HUD
451 Seventh Street, SW, Room 8236
Washington, DC 20410-3000
(202) 402-7698
hud.gov/offices/lead/

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U. S. EPA Washington DC 20460
U. S. CPSC Bethesda MD 20814
U. S. HUD Washington DC 20410

EPA-747-K-12-001
September 2013

IMPORTANT!

Lead From Paint, Dust, and Soil in and Around Your Home Can Be Dangerous if Not Managed Properly

- Children under 6 years old are most at risk for lead poisoning in your home.
- Lead exposure can harm young children and babies even before they are born.
- Homes, schools, and child care facilities built before 1978 are likely to contain lead-based paint.
- Even children who seem healthy may have dangerous levels of lead in their bodies.
- Disturbing surfaces with lead-based paint or removing lead-based paint improperly can increase the danger to your family.
- People can get lead into their bodies by breathing or swallowing lead dust, or by eating soil or paint chips containing lead.
- People have many options for reducing lead hazards. Generally, lead-based paint that is in good condition is not a hazard (see page 10).

Howard County Department of Community Resources and Services
9830 Patuxent Woods Drive
Columbia, Maryland 21046

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E-mail: hmis@howardcountymd.gov

HOWARD COUNTY CONTINUUM OF CARE FOR HOMELESS SERVICES

HOWARD COUNTY HMIS GOVERNANCE CHARTER

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PURPOSE

The Howard County Department of Community Resources and Services, the Howard County Continuum of Care for Homeless Services (CoC) Lead Agency, operates a Homeless Management Information System (Howard County HMIS) to record and store client-level information about the numbers, characteristics, and needs of persons who use homeless housing and supportive services and for persons who receive assistance for persons at risk of homelessness.

HMIS is used to aggregate data about the extent and nature of homelessness over time; produce an unduplicated count of homeless persons; understand patterns of service use; and measure the effectiveness of homeless assistance projects and programs. Data produced is used for planning and education.

COC RESPONSIBILITIES

The CoC is responsible for:

- Designating a single information system as the official HMIS software for the geographic area.
- Designating an HMIS Lead to operate the HMIS.
- CoC Lead will provide governance as the HMIS Lead, including:
    - The requirement that the HMIS Lead enter into written Participation Agreements with each Participating Agency requiring the Participating Agency to comply with federal regulations regarding HMIS and imposing sanctions for failure to comply; and
    - The participation fee, if any, charged by the HMIS;
- Maintaining documentation evidencing compliance with the governance charter; and
- Reviewing, revising and approving the policies and plans required by federal regulation.

DESIGNATIONS

HMIS System

The CoC designates Bowman Internet Systems as the official HMIS provider for the Howard County CoC's geographic area. The ServicePoint program will be utilized as the HMIS database.

HMIS Lead

Howard County Department of Citizen Services, the Howard County Continuum of Care for Homeless Services (CoC) Lead Agency, will also serve as the HMIS Lead.

RESPONSIBILITIES OF THE HMIS LEAD

The HMIS Lead is responsible for:

- Ensuring the operation of and consistent participation by recipients of CoC, Emergency Solutions Grants (ESG) Program funds, and County funds, including oversight of the HMIS and any necessary corrective action to ensure that the HMIS complies with federal requirements;
- Developing written HMIS policies and procedures for all Participating Agencies;
- Executing a written HMIS Participation Agreement with each Participating Agency, which includes the obligations and authority of the HMIS Lead and Participating Agency, the requirements of the security plan and privacy policy with which the Participating Agency must abide, sanctions for violating the HMIS Participation Agreement, and an agreement that the HMIS Lead and the Participating Agency will process Protected Identifying Information consistent with the agreement;
- Serving as the applicant to the US Department of Housing and Urban Development (HUD) for any CoC grant funds to be used for HMIS activities for the CoC's geographic area, as directed by the Howard County Continuum of Care for Homeless Services (CoC), and entering into grant agreements with HUD to carry out the HUD-approved HMIS activities;
- Monitoring and enforcing compliance by all Participating Agencies with HUD requirements and reporting on compliance to the CoC and HUD;
- Monitoring data quality and taking necessary actions to maintain input of high-quality data from all Participating Agencies;
- The HMIS Lead must develop a security plan, data quality plan and privacy policy. The HMIS Lead must review and update the plans and policy at least annually.

DUTIES OF THE HMIS LEAD

HMIS Policies and procedures

The HMIS Lead must adopt written policies and procedures for the operation of the HMIS that apply to the HMIS Lead, the Participating Agencies and the CoC. These policies and procedures must comply with all applicable Federal law and regulations, and applicable state or local governmental requirements. The HMIS Lead may not establish local standards for any Participating Agency that contradicts, undermines, or interferes with the implementation of the HMIS standards as prescribed in this part.

Reporting

The HMIS Lead shall submit reports to HUD and the CoC as required.

Privacy

The HMIS Lead must develop a privacy policy. Every organization with access to protected identifying information must implement procedures to ensure and monitor its compliance with applicable agreements and the requirements of this part, including enforcement of sanctions for noncompliance.

HMIS Standards

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

RESPONSIBILITIES OF THE HMIS COMMITTEE

The HMIS Committee will work with the HMIS Lead to:

- Advise the development and review of a privacy plan, security plan, and data quality plan, as well as any other HMIS policies and procedures;
- The data quality plan will include a plan to monitor the HMIS to ensure that:
    - Recipients and sub recipients consistently participate in the HMIS;
    - HMIS is satisfying the requirements of all regulations and notices issued by HUD;
    - The HMIS Lead is fulfilling the obligations outlined in this HMIS Governance Charter and Participation Agreements with Participating Agencies.
- Oversee and monitor HMIS data collection and production of the following reports:
    - Point-In-Time Count;
    - Housing Inventory Chart;
    - Annual Homeless Assessment Report (AHAR); and
    - Annual Performance Reports (APRs).

RESPONSIBILITIES OF PARTICIPATING AGENCIES

Participating Agencies must comply with federal regulations regarding HMIS.

Participating Agencies must comply with federal, state, and local laws that require additional privacy or confidentiality protections.

Participating Agencies must comply with the terms of their Participation Agreement.

Participating Agencies must adhere to the Data Quality Plan and all other Howard County CoC Policies and Procedures.

JOINT HMIS LEAD-PARTICIPATING AGENCY RESPONSIBILITY FOR PRIVACY

The HMIS Lead and the Participating Agency are jointly responsible for ensuring that HMIS processing capabilities remain consistent with privacy obligations.

HMIS PARTICIPATION AGREEMENT

Between

Howard County, Maryland

Department of Community Resources and Services

and

[Participating Agency]

This Agreement is made and entered into on this _____ day of _____, 20____, by and between **Howard County, Maryland,** a body corporate and politic, hereinafter referred to as the "County," and [Participating Agency], hereinafter known as the "Participating Agency," sometimes referred to herein individually as "Party" and collectively as "the Parties."

I. Introduction

The federal Department of Housing and Urban Development requires that all entities receiving federal funds for homeless services establish and maintain a Homeless Management Information System ("HMIS"). The County, through the Department of Community Resources and Services ("the Department") uses ServicePoint, developed by Bowman Systems, as its HMIS.

ServicePoint is a web-based application that provides client tracking, case management, service and referral management, bed availability for shelters, resource indexing, and reporting. The Department is the lead agency for the Continuum of Care for Homeless Services in Howard County and is responsible for the implementation of ServicePoint.

ServicePoint allows Participating Agencies within the Howard County Continuum of Care for Homeless Services to share information on common clients. Goals of the Continuum include: an ability to expedite client intake procedures; improved referral accuracy; increased case management and administrative tools; and the ability to follow demographic trends and service utilization patterns of families and individuals experiencing homelessness or at risk of homelessness.

Access to ServicePoint is limited to Participating Agencies. When used correctly and faithfully by all involved parties, ServicePoint is designed to benefit multiple stakeholders, including County Government, homeless service agencies, and the consumers of homeless services, through a more effective and efficient service delivery system.

II. Confidentiality

A. Federal and State Regulations

1. The Participating Agency will uphold relevant Federal and State confidentiality regulations and laws that protect client records. The Agency will only release confidential client records with written consent by the client, or the client's guardian, unless otherwise provided for in the regulations or laws. A client is anyone who receives services from the Participating Agency

and a guardian is one legally in charge of the affairs of a minor or a person deemed incompetent.

B. Consent and Documentation

1. The Participating Agency will provide a verbal explanation of ServicePoint and arrange for a qualified interpreter or translator in the event that a client is not literate in English or has difficulty understanding the consent form(s).
2. The Participating Agency will not solicit or input information from clients into ServicePoint unless the information is essential to provide services or conduct evaluation.
3. The Participating Agency will ensure that all staff or volunteers who are issued a User Identification and Password to ServicePoint abide by this Partnership Agreement, including the confidentiality rules and regulations listed in this Partnership Agreement. Each user will be required to sign a User Agreement.
4. The Participating Agency will maintain all client authorizations for release of information for a period of five (5) years.

III. Participant Agency Responsibilities

A. The Participating Agency agrees to enter basic client data into ServicePoint including all HUD required data elements. The Participating Agency shall not permit users to share user identifications and passwords.
B. The Participating Agency will not give or share assigned user identification and passwords to access ServicePoint with any other organization, governmental entity, business, or individual.
C. The Participating Agency will not misrepresent its client base in ServicePoint by knowingly entering inaccurate information.
D. The Participating Agency will enter a client into ServicePoint within five business days of client intake. Completeness and accuracy of data entry must meet standards set by the Department. Compliance with these standards will be monitored monthly by the Department. Standards will be established in conjunction with participating agencies and will be provided as an addendum to this agreement.
E. The Participating Agency will designate a staff person to serve as a liaison with the ServicePoint Administrator. The liaison will be responsible for scheduling staff training, requesting reports, establishing workflow and other matters related to internal ServicePoint operations.
F. Users are required to attend a minimum of four meetings/trainings per year. See IV. E. below.

IV. Department Responsibilities

A. Except as provided in IV. B, the Department will pay the costs of the contract with Bowman Systems.
B. The Department will provide the appropriate number of licenses for each Participating Agency up to a maximum of ten licenses per Agency.

C. The Department will perform all required system maintenance.
D. The Department will respond to user requests within two business days.
E. The Department will provide technical assistance to all ServicePoint users. In addition to on-going assistance, the Department will hold bi-monthly meetings/trainings for all users.

V. Access to Information

A. The Participating Agency understands that it will retain access to all identifying and statistical data on the clients it serves.
B. The Participating Agency understands that the Department of Citizen Services will have access to all client information to run aggregate reports for planning, funding, and database maintenance purposes. The Department of Citizen Services will not release any identifying information to any other Participating Agency, organization, governmental entity, business or individual.

VI. Termination

A. **In Effect Until Terminated.** This agreement shall remain in effect unless terminated in writing by either Party, with 30 days' advance written notice.
B. **Termination for Default.** Notwithstanding paragraph A of this section, the County may terminate this agreement immediately if the Participating Agency commits a serious violation of this Partnership Agreement, with the County at its sole discretion to determine what constitutes a serious violation. For a violation that the County determines to be less serious, the County may temporarily suspend the Participating Agency's access to ServicePoint until the violation is corrected. If the Participating Agency has a history of repeated violations, the County may terminate this Partnership Agreement.

VII. Indemnification

The Participating Agency agrees to indemnify and hold the County harmless from and against any and all claims, actions, damages, liability and expense, including reasonable attorney fees and costs of defense, in connection with loss of life, personal or bodily injury and/or damage to property that may be done or suffered by reason of the Participating Agency's fault or negligence in the performance of or failure to perform its responsibilities as stated in this Partnership Agreement, or occasioned all or in part by any act or omission of the Participating Agency, its agents or employees.

VIII. Insurance

The Participating Agency shall obtain and maintain general liability insurance as necessary to protect in any legal action, tort, contract, or other liability which may be raised against the Participating Agency or the County. The Participating Agency shall provide the County with documentation of insurance as the County may require, including evidence that the policies may not be terminated without thirty (30) days' prior written notice to the County.

IX. Miscellaneous

A. This agreement may be amended by written agreement executed by both Parties.

B. Neither Party shall transfer or assign any rights or obligations without the written consent of the other party.

C. The contractual obligation of the County under this Agreement is contingent upon the availability of appropriated funds from which payment for ServicePoint and its support can be made.

F. This Agreement shall be construed and enforced in accordance with the laws of the State of Maryland.

[SIGNATURES APPEAR ON FOLLOWING PAGE]

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed on by affixing hereon their respective seals and signatures of the proper offices.

WITNESS:

_____
Name

PARTICIPATING AGENCY:

_____
Name
Title: _____

ATTEST:

_____
Lonnie R. Robbins
Chief Administrative Officer

HOWARD COUNTY, MARYLAND

BY: _____
Allan Kittleman
County Executive

APPROVED for Legal Sufficiency
this ____ day of _____, 20___.

_____
Margaret Ann Nolan
County Solicitor

APPROVED for Financial Sufficiency
this____day of _____, 20_.

_____
Stanley J. Milesky
Acting Director of Finance

APPROVED for Program Sufficiency
this _____ day of _____, 20__

_____
Jacqueline Scott, Director
Department of Community Resources and Services

2018 HDX Competition Report

PIT Count Data for MD-504 - Howard County CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count	**214**	**168**	**168**
Emergency Shelter Total	201	93	101
Safe Haven Total	0	0	0
Transitional Housing Total	4	22	24
Total Sheltered Count	**205**	**115**	**125**
Total Unsheltered Count	**9**	**53**	**43**

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	**47**	**23**	**37**
Sheltered Count of Chronically Homeless Persons	41	9	15
Unsheltered Count of Chronically Homeless Persons	6	14	22

2018 HDX Competition Report

PIT Count Data for MD-504 - Howard County CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	**30**	**25**	**23**
Sheltered Count of Homeless Households with Children	29	22	22
Unsheltered Count of Homeless Households with Children	1	3	1

Homeless Veteran PIT Counts

	2011	2016	2017	2018
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	**12**	**7**	**6**	**6**
Sheltered Count of Homeless Veterans	6	6	2	1
Unsheltered Count of Homeless Veterans	6	1	4	5

2018 HDX Competition Report

HIC Data for MD-504 - Howard County CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2018 HIC	Total Beds in 2018 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	**100**	**35**	**65**	**100.00%**
Safe Haven (SH) Beds	**0**	**0**	**0**	**NA**
Transitional Housing (TH) Beds	**0**	**0**	**0**	**NA**
Rapid Re-Housing (RRH) Beds	**0**	**0**	**0**	**NA**
Permanent Supportive Housing (PSH) Beds	**77**	**0**	**75**	**97.40%**
Other Permanent Housing (OPH) Beds	**36**	**0**	**36**	**100.00%**
Total Beds	213	35	176	98.88%

2018 HDX Competition Report

HIC Data for MD-504 - Howard County CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	53	55	25

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

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

Rapid Rehousing Beds Dedicated to All Persons

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

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Summary Report for MD-504 - Howard County CoC

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.
Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES and SH	208	405	126	119	-7	72	67	-5
1.2 Persons in ES, SH, and TH	218	405	153	119	-34	79	67	-12

b. This measure is based on data element 3.17.

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

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

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")		414		181			75	
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")		414		181			75	

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range.Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO	0	0		0		0		0	
Exit was from ES	97	7	7%	0	0%	6	6%	13	13%
Exit was from TH	0	0		0		0		0	
Exit was from SH	0	0		0		0		0	
Exit was from PH	155	7	5%	5	3%	16	10%	28	18%
TOTAL Returns to Homelessness	252	14	6%	5	2%	22	9%	41	16%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2018 HDX Competition Report
FY2017 - Performance Measurement Module (Sys PM)

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

	January 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	214	168	-46
Emergency Shelter Total	201	93	-108
Safe Haven Total	0	0	0
Transitional Housing Total	4	22	18
Total Sheltered Count	205	115	-90
Unsheltered Count	9	53	44

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	230	419	189
Emergency Shelter Total	225	419	194
Safe Haven Total	0	0	0
Transitional Housing Total	5	0	-5

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	44	44	0
Number of adults with increased earned income	1	5	4
Percentage of adults who increased earned income	2%	11%	9%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	44	44	0
Number of adults with increased non-employment cash income	0	29	29
Percentage of adults who increased non-employment cash income	0%	66%	66%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	44	44	0
Number of adults with increased total income	1	29	28
Percentage of adults who increased total income	2%	66%	64%

2018 HDX Competition Report
FY2017 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	3	4	1
Number of adults who exited with increased earned income	0	1	1
Percentage of adults who increased earned income	0%	25%	25%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	3	4	1
Number of adults who exited with increased non-employment cash income	2	2	0
Percentage of adults who increased non-employment cash income	67%	50%	-17%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	3	4	1
Number of adults who exited with increased total income	2	3	1
Percentage of adults who increased total income	67%	75%	8%

2018 HDX Competition Report
FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	172	336	164
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	7	28	21
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	165	308	143

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

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	175	619	444
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	8	100	92
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	167	519	352

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

This Measure is not applicable to CoCs in FY2017 (Oct 1, 2016 - Sept 30, 2017) reporting period.

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

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

	Submitted FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	0	12	12
Of persons above, those who exited to temporary & some institutional destinations	0	3	3
Of the persons above, those who exited to permanent housing destinations	0	5	5
% Successful exits		67%	

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

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	168	539	371
Of the persons above, those who exited to permanent housing destinations	63	319	256
% Successful exits	38%	59%	21%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	74	141	67
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	74	139	65
% Successful exits/retention	100%	99%	-1%

2018 HDX Competition Report

FY2017 - SysPM Data Quality

MD-504 - Howard County CoC

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

2018 HDX Competition Report

FY2017 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017
1. Number of non-DV Beds on HIC	63	64	64	63	29	34	7		83	90	98	105								
2. Number of HMIS Beds	63	64	54	63	27	34	4		83	76	98	103								
3. HMIS Participation Rate from HIC (%)	100.00	100.00	84.38	100.00	93.10	100.00	57.14		100.00	84.44	100.00	98.10								
4. Unduplicated Persons Served (HMIS)	230	237	360	348	5	5	4	0	67	74	114	150	0	0	346	461	0	0	0	1
5. Total Leavers (HMIS)	172	176	283	285	0	0	4	0	5	0	9	7	0	0	173	272	0	0	0	0
6. Destination of Don't Know, Refused, or Missing (HMIS)	17	22	44	35	0	0	0	0	0	0	3	0	0	0	6	18	0	0	0	0
7. Destination Error Rate (%)	9.88	12.50	15.55	12.28			0.00		0.00		33.33	0.00			3.47	6.62				

2018 HDX Competition Report

Submission and Count Dates for MD-504 - Howard County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2018 PIT Count	1/24/2018	

Report Submission Date in HDX

	Submitted On	Met Deadline
2018 PIT Count Submittal Date	4/30/2018	No
2018 HIC Count Submittal Date	4/30/2018	Yes
2017 System PM Submittal Date	5/31/2018	Yes

Howard County Government

Continuum of Care Policies & Procedures

Effective August 2018

Howard County Continuum of Care Policies & Procedures

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e. Self-direction;
f. Capacity for independent living;
g. Economic self-sufficiency.

5. Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.

ii. An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting three or more of the criteria described in paragraphs (1)(i) through (v) of the definition of developmental disability in this section if the individual, without services and supports, has a high probability of meeting these criteria later in life.

Order of Priority

For the Howard County CoC Programs providing PSH that are dedicated to and prioritizes persons experiencing chronic homelessness, the following order of priority is followed:

1) First Priority–Chronically Homeless Individuals and Families **with** the *Longest History of Homelessness* **and** with the *Most Severe Service Needs*.
    1) A chronically homeless individual or head of household as defined in 24 CFR 578.3 (B.2 of this document) for which **both** of the following are true:
        i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
        ii. The Howard County CoC's CSHS has identified the chronically homeless individual or head of household, who meets all of the criteria meeting the definition of chronically homeless, of the family as having severe service needs (see Severe Service Needs of this document).

2) Second Priority–Chronically Homeless Individuals and Families **with** the *Longest History of Homelessness*.
    1) A chronically homeless individual or head of household, as defined in 24 CFR 578.3 (B.2 of this document), for which **both** of the following are true:
        i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,
        ii. The Howard County CoC's CSHS has not identified the chronically homeless individual or the head of household, who meets all of the criteria listed under First Priority.

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

i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and
ii. The Howard County CoC's CSHS has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, and the family has Severe Service Needs, see Severe Service Need of this document.

4) Fourth Priority–All Other Chronically Homeless Individuals and Families.
   1) A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:
      i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is less than 12 months; and
      ii. The Howard County CoC's CSHS has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs

Permanent Supportive Housing (PSH) Disability Qualification

The Permanent Supportive Housing for Persons with Disabilities projects only accept homeless persons with a verified disability, and prioritizes units that are not already dedicated to the chronically homeless, to those who are experiencing chronic homelessness, based on the determined Order of Priority. The head of household or a minor may qualify the household for acceptance into the program for the qualifying disability. *Source Documentation of Disability* must be collected at program acceptance, and is not to be recollected at annual recertification.

Source Documentation

All Recipients and Subrecipients must maintain documentation, obtained at intake, to demonstrate the eligibility of households served through CoC programs, and maintain and follow written intake procedures to ensure compliance with the homeless, chronically homeless, Severe Service Needs, and Disability definitions. Lack of third-party documentation (priority source) will not prevent an individual or family from being immediately admitted to emergency shelter, receiving street outreach services, or being admitted to shelter or receiving services provided by a victim service provider. However, the provider must document in the case file must the due diligence to obtain third party verification.

Order of Priority for Source Documentation:

1) Third-party documentation,
   a. Records contained in an HMIS or comparable database used by victim service or legal service providers are acceptable evidence of third-party documentation and intake worker observations if the HMIS retains an auditable history of all entries, including the person who entered the data, the date of entry, and the change made; and if the HMIS prevents overrides or changes of the dates on which entries are made.