

Before Starting the CoC Application

The CoC Consolidated Application is made up of two parts: the CoC Application and the CoC Priority Listing, with all of the CoC's project applications either approved and ranked, or rejected. The Collaborative Applicant is responsible for submitting both the CoC Application and the CoC Priority Listing in order for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for:

- Reviewing the FY 2015 CoC Program Competition NOFA in its entirety for specific application and program requirements.
- Using the CoC Application Detailed Instructions for assistance with completing the application in e-snaps.
- Answering all questions in the CoC Application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing so, please keep in mind that:
 - This year, CoCs will see that a few responses have been imported from the FY 2013/FY 2014 CoC Application. Due to significant changes to the CoC Application questions, most of the responses from the FY 2013/FY 2014 CoC Application could not be imported.
 - For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses.
 - For other questions, the Collaborative Applicant must be aware of responses provided by project applicants in their Project Applications.
 - Some questions require that the Collaborative Applicant attach a document to receive credit. This will be identified in the question.
 - All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

For Detailed Instructions click [here](#).

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

1A-1. CoC Name and Number: PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

1A-2. Collaborative Applicant Name: Allegheny County Department of Human Services

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Allegheny County Department of Human Services

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

1B-1. From the list below, select those organizations and persons that participate in CoC meetings. Then select "Yes" or "No" to indicate if CoC meeting participants are voting members or if they sit on the CoC Board. Only select "Not Applicable" if the organization or person does not exist in the CoC's geographic area.

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board	Sits on CoC Board
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
Law Enforcement	Yes	No	No
Local Jail(s)	No	No	No
Hospital(s)	Yes	Yes	Yes
EMT/Crisis Response Team(s)	Yes	No	No
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes	Yes
Public Housing Authorities	Yes	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes	Yes
Non-CoC Funded Victim Service Providers	Not Applicable	Not Applicable	Not Applicable
Street Outreach Team(s)	Yes	Yes	Yes
Youth advocates	Yes	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	No	No
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Local Foundations	Yes	Yes	Yes
Operation Safety Net - Medical Outreach Teams	Yes	Yes	Yes
United Way	Yes	Yes	Yes

1B-1a. Describe in detail how the CoC solicits and considers the full range of opinions from individuals or organizations with knowledge of homelessness in the geographic area or an interest in preventing and ending homelessness in the geographic area. Please provide two examples of organizations or individuals from the list in 1B-1 to answer this question. (limit 1000 characters)

CoC governing body is Homeless Advisory Board (HAB). All COC meetings are open to the public. Agenda topics can be sent to the Chairperson of the board or to the staff person assigned to the board for consideration on the agenda. All minutes & agendas are posted to the website. HAB has solicited housing authorities to participate in CoC & to review projects (new/renewals). HA input assists the CoC to link with Public Housing options that helps assist clients to move quickly to permanent housing options. Homeless Children Education Fund is an active member. HCEF has moved the CoC to develop pilot programs with school districts & focus on a shelter case management. This Case Mgt. program insures families stay together & work on children remaining in school, securing health care, etc. Both of these groups have expanded the focus of the CoC beyond HUD funding & move across systems to address a broader range of housing & supports.

1B-1b. List Runaway and Homeless Youth (RHY)-funded and other youth homeless assistance providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings within the last 12 months (between October 1, 2014 and November 15, 2015).	Sat on the CoC Board as active member or official at any point during the last 12 months (between October 1, 2014 and November 15, 2015).
FamilyLinks	Yes	Yes	Yes
Auberle	No	No	No
Homeless Children Education Fund	No	Yes	Yes
ACTION Housing	No	Yes	Yes

1B-1c. List the victim service providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings within the last 12 months (between October 1, 2014 and November 15, 2015).	Sat on CoC Board as active member or official at any point during the last 12 months (between October 1, 2014 and November 15, 2015).
Center for Victims	Yes	Yes
Alle Kiski Hope Center	No	No
Women's Center and Shelter	No	No

1B-2. Does the CoC intend to meet the timelines for ending homelessness as defined in Opening Doors?

Opening Doors Goal	CoC has established timeline?
End Veteran Homelessness by 2015	Yes
End Chronic Homelessness by 2017	Yes
End Family and Youth Homelessness by 2020	Yes
Set a Path to End All Homelessness by 2020	Yes

**1B-3. How does the CoC identify and assign the individuals, committees, or organizations responsible for overseeing implementation of specific strategies to prevent and end homelessness in order to meet the goals of Opening Doors?
(limit 1000 characters)**

HAB may designate committees to facilitate carrying out its duties. CoC Committee is responsible for the funding & strategic re-allocation processes, sub-recipient monitoring & performance, & training. Homeless Outreach Coordinating Committee to house the chronic homeless, a veterans Boot Camp committee created in 2014 with the charge of ending veterans homelessness, & a service access for youth committee established in 2012 to end homelessness for unaccompanied youth. These committees have developed strategies to address the goals of Opening Doors. i.e. Drop In Center for Youth opening Jan 2016, Boot Camp for Veterans 2014, Reallocating HUD 2015 funds to RRH & PSH, adopting Housing First principles, low barrier access to programs & linking clients to services.

1B-4. Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for any new projects in 2015. (limit 1000 characters)

The Collaborative Applicant solicits requests for proposals through a competitive application process. Requests are sent to all vendors on the Collaborative Applicant's vendor list, which includes organizations that currently do not receive funding through the CoC or DHS. All RFPs are posted to the website and advertised in newspapers. A formal RFP is established for all new proposals and must be reviewed and approved by the Collaborative Applicant's legal department. Questions regarding RFP must be submitted in writing and all questions & answers are shared with all vendors. All projects are reviewed & scored by CoC's Evaluation Committee. Evaluation Committee can request formal presentations once projects are received. Evaluation Committee sends recommendation to full HAB for review & approval. All reviewers must sign a Conflict of Interest statement prior to evaluating projects.

1B-5. How often does the CoC invite new members to join the CoC through a publicly available invitation? Annually

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

1C-1. Does the CoC coordinate with other Federal, State, local, private and other entities serving homeless individuals and families and those at risk of homelessness in the planning, operation and funding of projects? Only select "Not Applicable" if the funding source does not exist within the CoC's geographic area.

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
HeadStart Program	No
Other housing and service programs funded through Federal, State and local government resources.	Yes

1C-2. The McKinney-Vento Act, as amended, requires CoCs to participate in the Consolidated Plan(s) (Con Plan(s)) for the geographic area served by the CoC. The CoC Program interim rule at 24 CFR 578.7(c)(4) requires that the CoC provide information required to complete the Con Plan(s) within the CoC's geographic area, and 24 CFR 91.100(a)(2)(i) and 24 CFR 91.110(b)(1) requires that the State and local Con Plan jurisdiction(s) consult with the CoC. The following chart asks for information about CoC and Con Plan jurisdiction coordination, as well as CoC and ESG recipient coordination.

CoCs can use the CoCs and Consolidated Plan Jurisdiction Crosswalk to assist in answering this question.

	Number	Percentage
Number of Con Plan jurisdictions with whom the CoC geography overlaps	4	
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	4	100.00 %
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	4	100.00 %
How many of the Con Plan jurisdictions are also ESG recipients?	2	
How many ESG recipients did the CoC participate with to make ESG funding decisions?	2	100.00 %

How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	2	100.00 %
--	---	----------

1C-2a. Based on the responses selected in 1C-2, describe in greater detail how the CoC participates with the Consolidated Plan jurisdiction(s) located in the CoC's geographic area and include the frequency, extent, and type of interactions between the CoC and the Consolidated Plan jurisdiction(s). (limit 1000 characters)

Con Plan jurisdictions are voting members of the HAB, attend quarterly HAB meetings & participate on committees. Con Plan jurisdictions receive PIT, HIC & other related homeless housing data reports as a part of the HAB as well as needed for their specific jurisdictions. Information is shared on specific project development & in performance of various providers. Some projects may be jointly funded by the CoC & the jurisdiction. Data is provided on subpopulation needs, specific breakout of homeless populations within the specific jurisdiction. Jurisdictions are members of the CoC Committee, Evaluation & ad hoc committees- RRH & Youth. Jurisdictions have participated in veteran related activities; ie Stand Down & Boot Camp. ACDED & City of Pgh, discuss issues related to projects weekly & discuss ESG issues, Penn Hills & McKeesport is as needed or at least quarterly.

1C-2b. Based on the responses selected in 1C-2, describe how the CoC is working with ESG recipients to determine local ESG funding decisions and how the CoC assists in the development of performance standards and evaluation of outcomes for ESG-funded activities. (limit 1000 characters)

ESG grantees & the CoC work jointly to review & fund specific subrecipients utilizing the same performance criteria as adopted by the CoC in 2015. The Collaborative Applicant participates on the review committee that allocates ESG funding as well as HAB members. ESG grantees will utilize this criteria for the 2016 application process. Monthly ESG meetings which include providers, CoC and ESG funders are held to discuss issues specific to the ESG providers & the CoC. All ESG providers participate in HMIS & Coordinated Entry. ESG administrators have administrative access in HMIS for all of their programs & reports are generated from HMIS for the CAPER. Ad hoc reports are prepared for ESG upon request & CoC staff work directly with ESG providers or administrators on issues, requests or coordination of activities.

1C-3. Describe the how the CoC coordinates with victim service providers and non-victim service providers (CoC Program funded and non-CoC funded) to ensure that survivors of domestic violence are provided housing and services that provide and maintain safety and security. Responses must address how the service providers ensure and maintain the safety and security of participants and how client choice is upheld. (limit 1000 characters)

The CoC currently operates a coordinated entry system (Allegheny Link) that has victim service providers participation. Homeless individuals and families fleeing domestic violence can call the Link and be referred to either DV providers or other programs within the CoC. Referrals to non victim service providers are made through HMIS; victim service providers receive referrals through a warm transfer via the phone. Clients are given the option to choose only victim service providers, non-victim service providers, or both as part of their referral through the Link. Clients may also call the DV crisis lines directly to access the victim service system without going through the Link if they choose too. The Link & DV staff are trained to protect client confidentiality, the location of DV facilities, and any information collected about the individual or family.

1C-4. List each of the Public Housing Agencies (PHAs) within the CoC's geographic area. If there are more than 5 PHAs within the CoC's geographic area, list the 5 largest PHAs. For each PHA, provide the percentage of new admissions that were homeless at the time of admission between October 1, 2014 and March 31, 2015, and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program. (Full credit consideration may be given for the relevant excerpt from the PHA's administrative planning document(s) clearly showing the PHA's homeless preference, e.g. Administration Plan, Admissions and Continued Occupancy Policy (ACOP), Annual Plan, or 5-Year Plan, as appropriate).

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 10/1/14 to 3/31/15 who were homeless at entry	PHA has General or Limited Homeless Preference
Housing Authority City of Pittsburgh	2.00%	Yes-Both
Allegheny County Housing Authority	2.00%	Yes-Both
McKeesport Housing Authority	0.00%	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-5. Other than CoC, ESG, Housing Choice Voucher Programs and Public Housing, describe other subsidized or low-income housing opportunities that exist within the CoC that target persons experiencing homelessness. (limit 1000 characters)

In addition to the Section 8 preference, the CoC has worked with the local HUD field office and subsidized housing providers to create a homeless preference in 6 project based Section 8 properties in the county. Other projects without the preference send the Collaborative Applicant e-mails when they have vacancies or wait list openings and CoC sub-recipients are given this information so that clients can apply for those openings. The Collaborative Applicant is also a "Local Lead Agency" for Low Income Housing Tax Credit projects, which has a set aside for target populations served by ACDHS, including individuals and families experiencing homelessness. ACDHS takes a lead role in serving as a clearinghouse between affordable housing providers and people experiencing homelessness and is recognized as an intermediary between affordable housing providers and those seeking housing.

1C-6. Select the specific strategies implemented by the CoC to ensure that homelessness is not criminalized in the CoC's geographic area. Select all that apply. For "Other," you must provide a description (2000 character limit)

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input checked="" type="checkbox"/>
No strategies have been implemented:	<input type="checkbox"/>
CIT Training for Police Officers	<input checked="" type="checkbox"/>
Central Recovery Center is a drop off for summary offences in lieu of jail	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

1D-1. Select the systems of care within the CoC's geographic area for which there is a discharge policy in place that is mandated by the State, the CoC, or another entity for the following institutions? Check all that apply.

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

1D-2. Select the systems of care within the CoC's geographic area with which the CoC actively coordinates to ensure that institutionalized persons that have resided in each system of care for longer than 90 days are not discharged into homelessness. Check all that apply.

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

**1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) and explain how the CoC plans to coordinate with the institution(s) to ensure persons discharged are not discharged into homelessness.
(limit 1000 characters)**

1E. Centralized or Coordinated Assessment (Coordinated Entry)

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

CoCs are required by the CoC Program interim rule to establish a Centralized or Coordinated Assessment system – also referred to as Coordinated Entry. Based on the recent Coordinated Entry Policy Brief, HUD’s primary goals for coordinated entry processes are that assistance be allocated as effectively as possible and that it be easily accessible regardless of where or how people present for assistance. Most communities lack the resources needed to meet all of the needs of people experiencing homelessness. This combined with the lack of a well-developed coordinated entry processes can result in severe hardships for persons experiencing homelessness who often face long wait times to receive assistance or are screened out of needed assistance. Coordinated entry processes help communities prioritize assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most can receive it in a timely manner. Coordinated entry processes also provide information about service needs and gaps to help communities plan their assistance and identify needed resources.

**1E-1. Explain how the CoC’s coordinated entry process is designed to identify, engage, and assist homeless individuals and families that will ensure those who request or need assistance are connected to proper housing and services.
(limit 1000 characters)**

The coordinated entry process matches people experiencing homelessness with programs best suited to meet their needs. Whenever possible, diversion from the homeless system occurs. If this is not possible, the Link assesses the household seeking assistance using the VI-SPDAT tool and additional questions to determine the project type most appropriate for that household. A computerized algorithm does a further match for program eligibility based on household size, disabilities, veteran status, and other factors to ensure that households are not referred to programs for which they are ineligible. Street outreach providers, police officers, & volunteers assist the unsheltered population to access the CoC. The Link has staff on site at Emergency Shelter & Drop In Centers to further assist those with significant barriers to access the CoC. The CoC has worked with providers to reduce unnecessary barriers to entry so that people experiencing homelessness are not turned away.

1E-2. CoC Program and ESG Program funded projects are required to participate in the coordinated entry process, but there are many other organizations and individuals who may participate but are not required to do so. From the following list, for each type of organization or individual, select all of the applicable checkboxes that indicate how that organization or individual participates in the CoC's coordinated entry process. If the organization or person does not exist in the CoC's geographic area, select "Not Applicable." If there are other organizations or persons that participate not on this list, enter the information, click "Save" at the bottom of the screen, and then select the applicable checkboxes.

Organization/Person Categories	Participates in Ongoing Planning and Evaluation	Makes Referrals to the Coordinated Entry Process	Receives Referrals from the Coordinated Entry Process	Operates Access Point for Coordinated Entry Process	Participates in Case Conferencing	Not Applicable
Local Government Staff/Officials	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CDBG/HOME/Entitlement Jurisdiction	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local Jail(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Hospital(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
EMT/Crisis Response Team(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mental Health Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Affordable Housing Developer(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Public Housing Authorities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Youth Homeless Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Administrators/Homeless Liaisons	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Victim Service Organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Street Outreach Team(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homeless or Formerly Homeless Persons	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Aging and Disability Resource Center	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CSBG Providers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
211	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

1F-1. For all renewal project applications submitted in the FY 2015 CoC Program Competition complete the chart below regarding the CoC's review of the Annual Performance Report(s).

How many renewal project applications were submitted in the FY 2015 CoC Program Competition?	63
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	2
How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2015 CoC Program Competition?	61
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2015 CoC Competition?	100.00%

1F-2. In the sections below, check the appropriate box(s) for each section to indicate how project applications were reviewed and ranked for the FY 2015 CoC Program Competition. (Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.)

Type of Project or Program (PH, TH, HMIS, SSO, RRH, etc.)	<input checked="" type="checkbox"/>
Performance outcomes from APR reports/HMIS	
Length of stay	<input checked="" type="checkbox"/>
% permanent housing exit destinations	<input checked="" type="checkbox"/>
% increases in income	<input checked="" type="checkbox"/>
% maintain or increase non cash benefits	<input checked="" type="checkbox"/>

Monitoring criteria	
Participant Eligibility	<input checked="" type="checkbox"/>
Utilization rates	<input checked="" type="checkbox"/>
Drawdown rates	<input checked="" type="checkbox"/>
Frequency or Amount of Funds Recaptured by HUD	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

Need for specialized population services	
Youth	<input checked="" type="checkbox"/>
Victims of Domestic Violence	<input checked="" type="checkbox"/>
Families with Children	<input checked="" type="checkbox"/>
Persons Experiencing Chronic Homelessness	<input checked="" type="checkbox"/>
Veterans	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

None	<input type="checkbox"/>
-------------	--------------------------

1F-2a. Describe how the CoC considered the severity of needs and vulnerabilities of participants that are, or will be, served by the project applications when determining project application priority. (limit 1000 characters)

The CoC priority ranking policy ranked PSH projects that serve chronically homeless first, then other PSH projects with CH set asides, then other PSH and PH projects next. All RRH projects in the CoC use a housing first model and, as a result, were ranked based upon performance. Transitional housing (TH) projects that served a vulnerable population, such as unaccompanied youth & DV, were ranked ahead of those that did not serve a vulnerable sub-population. Finally, TH projects that committed to a housing first model were ranked ahead of those projects that did not. Please see the attached Project Ranking policy for specific detail policy which was adopted by the Homeless Advisory Board and developed by the Evaluation Committee of the HAB.

**1F-3. Describe how the CoC made the local competition review, ranking, and selection criteria publicly available, and identify the public medium(s) used and the date(s) of posting. In addition, describe how the CoC made this information available to all stakeholders. (Evidence of the public posting must be attached)
(limit 750 characters)**

CoC Committee established the ranking tools which were publicly shared & approved by the HAB prior to the scoring of applications. Reviewers were asked to volunteer from the HAB & various committees to review projects. All renewal projects were reviewed based on last submitted APR performance, timely billing & return of funds. New & reallocation projects were posted to web & newspapers. Tools were publicly shared with projects at meetings. Final ranking was voted on by the HAB 10-27-15, letters sent to all providers on 10/30/15 by HAB chairman and ranking process & listing posted to website on 11-2-15. See attachments for minutes, scores attached to HAB minutes, tools, & process.

1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts of the FY 2015 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached.) 11/02/2015

1F-5. Did the CoC use the reallocation process in the FY 2015 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.) Yes

1F-5a. If the CoC rejected project application(s) on what date did the CoC and Collaborative Applicant notify those project applicants their project application was rejected in the local CoC competition process? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.) 10/30/2015

1F-6. Is the Annual Renewal Demand (ARD) in the CoC's FY 2015 CoC Priority Listing equal to or less than the ARD on the final HUD-approved FY 2015 GIW? Yes

1G. Continuum of Care (CoC) Addressing Project Capacity

Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

1G-1. Describe how the CoC monitors the performance of CoC Program recipients. (limit 1000 characters)

Collaborative Applicant is responsible for monitoring the performance of individual projects in the CoC, but with input on performance standards developed by the Homeless Advisory Board. HAB sets benchmarks that assist the CA in performing these evaluations & also form the basis for the project rankings. Performance is monitored through HMIS data & APRs as well as annual site monitoring visits which include both programmatic & fiscal. This information is shared with the HAB. CA receives complaints from program participants & reviews these when they occur as part of performance. When performance does not meet the CoC established benchmarks, sub-recipients must submit a corrective action plan & is monitored by CA with HAB oversight. TA is provided by CA or HAB if necessary. If that does not address the findings, the project may receive ongoing monitoring & technical assistance or transferred to another provider. Every effort is made to bring project into compliance.

1G-2. Did the Collaborative Applicant review and confirm that all project applicants attached accurately completed and current dated form HUD 50070 and form HUD-2880 to the Project Applicant Profile in e-snaps? Yes

1G-3. Did the Collaborative Applicant include accurately completed and appropriately signed form HUD-2991(s) for all project applications submitted on the CoC Priority Listing? Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

2A-1. Does the CoC have a governance charter that outlines the roles and responsibilities of the CoC and the HMIS Lead, either within the charter itself or by reference to a separate document like an MOU? In all cases, the CoC's governance charter must be attached to receive credit. In addition, if applicable, any separate document, like an MOU, must also be attached to receive credit. Yes

2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or the attached MOU. Appendix A, page 15

2A-2. Does the CoC have a HMIS Policies and Procedures Manual? If yes, in order to receive credit the HMIS Policies and Procedures Manual must be attached to the CoC Application. Yes

2A-3. Are there agreements in place that outline roles and responsibilities between the HMIS Lead and the Contributing HMIS Organizations (CHOs)? Yes

2A-4. What is the name of the HMIS software used by the CoC (e.g., ABC Software)? ACDHS HMIS
Applicant will enter the HMIS software name (e.g., ABC Software).

2A-5. What is the name of the HMIS software vendor (e.g., ABC Systems)? Deloitte
Applicant will enter the name of the vendor (e.g., ABC Systems).

2B. Homeless Management Information System (HMIS) Funding Sources

Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

2B-1. Select the HMIS implementation coverage area: Single CoC

*** 2B-2. In the charts below, enter the amount of funding from each funding source that contributes to the total HMIS budget for the CoC.**

2B-2.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	\$276,192
ESG	\$75,000
CDBG	\$0
HOME	\$0
HOPWA	\$0
Federal - HUD - Total Amount	\$351,192

2B-2.2 Funding Type: Other Federal

Funding Source	Funding
Department of Education	\$0
Department of Health and Human Services	\$0
Department of Labor	\$0
Department of Agriculture	\$0
Department of Veterans Affairs	\$0
Other Federal	\$0
Other Federal - Total Amount	\$0

2B-2.3 Funding Type: State and Local

Funding Source	Funding
City	\$0
County	\$38,062
State	\$0
State and Local - Total Amount	\$38,062

2B-2.4 Funding Type: Private

Funding Source	Funding
Individual	\$0
Organization	\$0
Private - Total Amount	\$0

2B-2.5 Funding Type: Other

Funding Source	Funding
Participation Fees	\$0
Other - Total Amount	\$0

2B-2.6 Total Budget for Operating Year	\$389,254
---	------------------

2C. Homeless Management Information System (HMIS) Bed Coverage

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

2C-1. Enter the date the CoC submitted the 2015 HIC data in HDX, (mm/dd/yyyy): 05/12/2015

2C-2. Per the 2015 Housing Inventory Count (HIC) indicate the number of beds in the 2015 HIC and in HMIS for each project type within the CoC. If a particular housing type does not exist in the CoC then enter "0" for all cells in that housing type.

Project Type	Total Beds in 2015 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter beds	436	79	291	81.51%
Safe Haven (SH) beds	71	0	71	100.00%
Transitional Housing (TH) beds	962	50	912	100.00%
Rapid Re-Housing (RRH) beds	108	0	108	100.00%
Permanent Supportive Housing (PSH) beds	2,136	0	1,649	77.20%
Other Permanent Housing (OPH) beds	40	0	40	100.00%

2C-2a. If the bed coverage rate for any housing type is 85% or below, describe how the CoC plans to increase this percentage over the next 12 months. (limit 1000 characters)

For Emergency Shelter, all beds within the CoC participate in HMIS except for two VA funded programs & 3 DV ES which are not permitted to participate in HMIS. This includes the VA Domiciliary (50 beds). Shepherd Heart ES is now entering data into HMIS (3VA Residential beds). For PSH, all beds within the CoC participate in HMIS except for 487 HUD VASH beds. VA & CA are currently in discussions on entering VA Data into the system in the coming year. Under OPH, the HIC says that there are 68 total beds with only 40 participating in HMIS. The difference is the 28 beds in the Action Housing The Residences at Wood Street SRO project, which is under development and not in operation yet. Once it becomes active, all of its beds will be in HMIS and the OPH category will have 100% HMIS bed coverage.

**2C-3. HUD understands that certain projects are either not required to or discouraged from participating in HMIS, and CoCs cannot require this if they are not funded through the CoC or ESG programs. This does NOT include domestic violence providers that are prohibited from entering client data in HMIS. If any of the project types listed in question 2C-2 above has a coverage rate of 85% or below, and some or all of these rates can be attributed to beds covered by one of the following programs types, please indicate that here by selecting all that apply from the list below.
 (limit 1000 characters)**

VA Domiciliary (VA DOM):	<input checked="" type="checkbox"/>
VA Grant per diem (VA GPD):	<input type="checkbox"/>
Faith-Based projects/Rescue mission:	<input type="checkbox"/>
Youth focused projects:	<input type="checkbox"/>
HOPWA projects:	<input checked="" type="checkbox"/>
Not Applicable:	<input type="checkbox"/>

2C-4. How often does the CoC review or assess its HMIS bed coverage? Monthly

2D. Homeless Management Information System (HMIS) Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

2D-1. Indicate the percentage of unduplicated client records with null or missing values and the percentage of "Client Doesn't Know" or "Client Refused" during the time period of October 1, 2013 through September 30, 2014.

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	7%	0%
3.3 Date of birth	0%	0%
3.4 Race	13%	0%
3.5 Ethnicity	7%	0%
3.6 Gender	0%	0%
3.7 Veteran status	6%	0%
3.8 Disabling condition	15%	1%
3.9 Residence prior to project entry	26%	2%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	18%	4%
3.15 Relationship to Head of Household	0%	0%
3.16 Client Location	0%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	24%	1%

2D-2. Identify which of the following reports your HMIS generates. Select all that apply:

CoC Annual Performance Report (APR):	<input checked="" type="checkbox"/>
ESG Consolidated Annual Performance and Evaluation Report (CAPER):	<input checked="" type="checkbox"/>
Annual Homeless Assessment Report (AHAR) table shells:	<input checked="" type="checkbox"/>

	<input type="checkbox"/>
None	<input type="checkbox"/>

2D-3. If you submitted the 2015 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR? 12

2D-4. How frequently does the CoC review data quality in the HMIS? Monthly

2D-5. Select from the dropdown to indicate if standardized HMIS data quality reports are generated to review data quality at the CoC level, project level, or both? Both Project and CoC

2D-6. From the following list of federal partner programs, select the ones that are currently using the CoC's HMIS.

VA Supportive Services for Veteran Families (SSVF):	<input checked="" type="checkbox"/>
VA Grant and Per Diem (GPD):	<input checked="" type="checkbox"/>
Runaway and Homeless Youth (RHY):	<input checked="" type="checkbox"/>
Projects for Assistance in Transition from Homelessness (PATH):	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

2D-6a. If any of the federal partner programs listed in 2D-6 are not currently entering data in the CoC's HMIS and intend to begin entering data in the next 12 months, indicate the federal partner program and the anticipated start date. (limit 750 characters)

2E. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

The data collected during the PIT count is vital for both CoCs and HUD. Communities need accurate data to determine the size and scope of homelessness at the local level so they can best plan for services and programs that will appropriately address local needs and measure progress in addressing homelessness. HUD needs accurate data to understand the extent and nature of homelessness throughout the country, and to provide Congress and the Office of Management and Budget (OMB) with information regarding services provided, gaps in service, and performance. This information helps inform Congress' funding decisions, and it is vital that the data reported is accurate and of high quality.

2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2015 sheltered PIT count? Yes

2E-2. Indicate the date of the most recent sheltered PIT count (mm/dd/yyyy): 01/28/2015

2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2015, was an exception granted by HUD? Not Applicable

2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX, (mm/dd/yyyy): 05/12/2015

2F. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Methods

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2015 PIT count:

Complete Census Count:	<input checked="" type="checkbox"/>
Random sample and extrapolation:	<input type="checkbox"/>
Non-random sample and extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

2F-2. Indicate the methods used to gather and calculate subpopulation data for sheltered homeless persons:

HMIS:	<input checked="" type="checkbox"/>
HMIS plus extrapolation:	<input type="checkbox"/>
Interview of sheltered persons:	<input checked="" type="checkbox"/>
Sample of PIT interviews plus extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

2F-3. Provide a brief description of your CoC's sheltered PIT count methodology and describe why your CoC selected its sheltered PIT count methodology. (limit 1000 characters)

As in previous years, the CoC adopted the federal format to be used by ES, SH & TH. All consumers were interviewed one on one by trained staff. Written forms were randomly compared to HMIS data ensure data was accurate & up to date client in HMIS & to review actual counts in shelters vs. written forms. All providers were trained on completion & submission of written forms. The shelter written form were compared to street outreach written forms to reduce duplication counts for street homeless. Not all shelters are open 24/7 & several are open for night time only where the consumer must return nightly so the written forms were utilized to ensure an un-duplicated count for both ES & unsheltered counts.

2F-4. Describe any change in methodology from your sheltered PIT count in 2014 to 2015, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to the implementation of your sheltered PIT count methodology (e.g., enhanced training and change in partners participating in the PIT count). (limit 1000 characters)

Actual counts were utilized in both 2014 & 2015. Federal format were used in both years including the 2015 Youth count methodology. Training was held with providers on the forms and the importance of the youth & Veteran count. All providers are required to participate in the training which details the process & measurement tool in depth which included the 2015 Youth Count. CA was available for TA & questions prior to, during & after count.

2F-5. Did your CoC change its provider coverage in the 2015 sheltered count? Yes

2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2015 sheltered count. (limit 750 characters)

Family Promise lost funding in 2014 and did not participate in the 2014 PIT. They were active and participated in 2015. The CHS Motel Hotel Program expanded its capacity during the 2015 count.

2G. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

2G-1. Indicate the methods used to ensure the quality of the data collected during the sheltered PIT count:

Training:	<input type="checkbox"/>
Provider follow-up:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Non-HMIS de-duplication techniques:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2014 to 2015 that would change data quality, including changes to training volunteers and inclusion of any partner agencies in the sheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual sheltered PIT count methodology (e.g., change in sampling or extrapolation method). (limit 1000 characters)

There were no major changes between 2014 & 2015 except for the youth count focus. Providers/volunteers are required to attend a 2 hour training on the PIT, held at least one week before the PIT. All forms are sent out electronically with detailed instructions that included the youth count modifications. Instructions are reviewed & rewritten annually based upon feedback from volunteers/providers. A PowerPoint presentation is given to each participant who attends. The PowerPoint was changed in 2015 to stress the importance of Veteran, Family & youth counts. 2015 special instructions were given on Youth, Veteran & Family counts to ensure these populations were counted appropriately & that the data is compiled & reviewed appropriately. HUD field office participated in the counts & were trained on the forms prior to participation.

2H. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

The unsheltered PIT count assists communities and HUD to understand the characteristics and number of people 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. CoCs are required to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, CoCs are strongly encouraged to conduct the unsheltered PIT count annually, at the same time that it does the annual sheltered PIT count. The last official PIT count required by HUD was in January 2015.

- 2H-1. Did the CoC approve the final unsheltered PIT count methodology for the most recent unsheltered PIT count?** Yes
- 2H-2. Indicate the date of the most recent unsheltered PIT count (mm/dd/yyyy):** 01/28/2015
- 2H-2a. If the CoC conducted the unsheltered PIT count outside of the last 10 days of January 2015, was an exception granted by HUD?** Not Applicable
- 2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy):** 05/12/2015

2I. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count: Methods

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

2I-1. Indicate the methods used to count unsheltered homeless persons during the 2015 PIT count:

Night of the count - complete census:	<input type="checkbox"/>
Night of the count - known locations:	<input checked="" type="checkbox"/>
Night of the count - random sample:	<input type="checkbox"/>
Service-based count:	<input checked="" type="checkbox"/>
HMIS:	<input type="checkbox"/>
	<input type="checkbox"/>

2I-2. Provide a brief description of your CoC's unsheltered PIT count methodology and describe why your CoC selected its unsheltered PIT count methodology. (limit 1000 characters)

OSN & Save a Life conduct street outreach weekly throughout the year so homeless locations are known & documented. Sites are documented into OSN data base system. Visiting these sites & conducting interviews has been a valid means of data collection. Over a 3 day period, encampments & other locations including soup kitchens & drop in centers were visited. Data was cross checked against shelter data from 1/28/15 to ensure no data was duplicative. The 3 day period was chosen because the weather during the last 10 days of Jan was extremely cold (-5 to -10) at night & volunteers were hindered by weather conditions so this method was selected. This allowed the CoC to extend outreach to more areas & ensure coverage for the count.

2I-3. Describe any change in methodology from your unsheltered PIT count in 2014 (or 2013 if an unsheltered count was not conducted in 2014) to 2015, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training and change in partners participating in the count). (limit 1000 characters)

All street outreach teams were trained on the survey tool & provided supporting documents. Written instructions accompanied the tool & PowerPoint. Every attempt was made to interview all homeless individuals. Those individuals exercising their right to refuse the survey resulted in only basic information being recorded. A special focus was on youth and CH individuals. All known encampments & other locations were covered during this count. Operation SafetyNet & Save a Life conducts weekly street outreach to CH. The outreach teams have been leaders in unsheltered count since 1999. The Local HUD field office participated in the counts & was trained.

2I-4. Does your CoC plan on conducting an unsheltered PIT count in 2016? Yes

(If "Yes" is selected, HUD expects the CoC to conduct an unsheltered PIT count in 2016. See the FY 2015 CoC Program NOFA, Section VII.A.4.d. for full information.)

2J. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count: Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2015 unsheltered population PIT count:

Training:	<input type="checkbox"/>
"Blitz" count:	<input type="checkbox"/>
Unique identifier:	<input checked="" type="checkbox"/>
Survey question:	<input checked="" type="checkbox"/>
Enumerator observation:	<input type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2014 (or 2013 if an unsheltered count was not conducted in 2014) to 2015 that would affect data quality. This includes changes to training volunteers and inclusion of any partner agencies in the unsheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual methodology (e.g., change in sampling or extrapolation method). (limit 1000 characters)

All street outreach teams were trained on the survey tool & provided support documents. All homeless were interviewed or attempted to be interviewed if refused to answer questions, basic information about the client was recorded. Many of the CH are known to these groups & are a part of their data base. Written instructions also accompanied tool & PowerPoint presentation. All known encampments & other locations were covered. Operation Safety Net & Save a Life does weekly street outreach to chronic homeless on the streets & have been the leaders in unsheltered count since 1999. Also had additional outreach to day shelters to try to find those who did not get counted on the streets or emergency shelters during the nighttime methods.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

3A-1. Performance Measure: Number of Persons Homeless - Point-in-Time Count.

* 3A-1a. Change in PIT Counts of Sheltered and Unsheltered Homeless Persons

Using the table below, indicate the number of persons who were homeless at a Point-in-Time (PIT) based on the 2014 and 2015 PIT counts as recorded in the Homelessness Data Exchange (HDX).

	2014 PIT (for unsheltered count, most recent year conducted)	2015 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1,573	1,424	-149
Emergency Shelter Total	493	440	-53
Safe Haven Total	75	69	-6
Transitional Housing Total	897	877	-20
Total Sheltered Count	1,465	1,386	-79
Total Unsheltered Count	108	38	-70

3A-1b. Number of Sheltered Persons Homeless - HMIS.

Using HMIS data, CoCs must use the table below to indicate the number of homeless persons who were served in a sheltered environment between October 1, 2013 and September 30, 2014.

	Between October 1, 2013 and September 30, 2014
Universe: Unduplicated Total sheltered homeless persons	3,990
Emergency Shelter Total	2,534
Safe Haven Total	83
Transitional Housing Total	2,004

3A-2. Performance Measure: First Time Homeless.

**Describe the CoC’s efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors for becoming homeless for the first time.
(limit 1000 characters)**

The CoC currently has a coordinated intake system in place where people facing a housing crisis are directed. Diversion from the homeless system is the first step that the Link uses when receiving a call/walk-in. Asking callers to rely on natural supports (family/friends) and landlord mediation is routinely used to divert. When this is not possible, the Link uses CoC resources to prevent evictions & foreclosures through one time payments of arrearage. The Link also has a comprehensive database of over 400 subsidized housing projects (over 24,000 units) to refer those who cannot afford market rate housing as an alternative to homelessness. Finally, the Link refers households facing the immediate loss of their housing to programs that can provide a security deposit or first month’s rent in order to prevent the need for emergency shelter services. Risk factors are extremely low income or no income, lack of natural supports & presence of very young children.

3A-3. Performance Measure: Length of Time Homeless.

**Describe the CoC’s efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless.
(limit 1000 characters)**

CoC adopted written standards for coordinated intake prioritizing CH with long length of homelessness so they will be served first when openings occur. The CoC is moving toward reducing the number of TH projects by reallocating them to rapid re-housing. In 2015 9 TH projects were reallocated to 7 RRH projects. CoC has also been working with the remaining transitional housing projects to reduce program enrollments by six months. In 2015 majority of existing TH reduced average rates to 18 months or less. CoC will continue to monitor lengths & propose further reductions in the coming year. A strong CoC wide effort has been underway to recruit landlords for RRH, Section 8, & other tenant based subsidy programs to reduce length of time program participants spend in housing search. CoC currently has 250 Section 8 vouchers & 6 project based Section 8 communities with a homeless preference, which has allowed households to transition quickly from homelessness to PH through these partnerships.

*** 3A-4. Performance Measure: Successful Permanent Housing Placement or Retention.**

In the next two questions, CoCs must indicate the success of its projects in placing persons from its projects into permanent housing.

3A-4a. Exits to Permanent Housing Destinations:

In the chart below, CoCs must indicate the number of persons in CoC funded supportive services only (SSO), transitional housing (TH), and rapid re-housing (RRH) project types who exited into permanent housing destinations between October 1, 2013 and September 30, 2014.

	Between October 1, 2013 and September 30, 2014
Universe: Persons in SSO, TH and PH-RRH who exited	807
Of the persons in the Universe above, how many of those exited to permanent destinations?	567
% Successful Exits	70.26%

3A-4b. Exit To or Retention Of Permanent Housing:

In the chart below, CoCs must indicate the number of persons who exited from any CoC funded permanent housing project, except rapid re-housing projects, to permanent housing destinations or retained their permanent housing between October 1, 2013 and September 31, 2014.

	Between October 1, 2013 and September 30, 2014
Universe: Persons in all PH projects except PH-RRH	1,898
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?	1,753
% Successful Retentions/Exits	92.36%

3A-5. Performance Measure: Returns to Homelessness:

Describe the CoC's efforts to reduce the rate of individuals and families who return to homelessness. Specifically, describe at least three strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness. (limit 1000 characters)

AlleghenyLink has 5 case managers who follow families from emergency shelter even after they secure permanent housing if they wish. Case managers work with clients to access services & rebuild natural/family support networks. The CoC has homeless preferences for 6 HUD subsidized communities & 250 section 8 vouchers, all of which allow a household to move into and retain permanent housing. CoC stresses income growth & linkages to services in project ranking criteria, so projects work closely with consumers to ensure that they are able to sustain housing when they exit the CoC system. TH programs focus on employment & training goals for clients in order to sustain the household once they exit to PH. These strategies assist program participants in exiting the CoC system with the tools & services in place to prevent a return to homelessness. HMIS system tracks client level data over time so returns to homelessness can be analyzed by program & system-wide.

3A-6. Performance Measure: Job and Income Growth.

Describe specific strategies implemented by CoC Program-funded projects to increase the rate by which homeless individuals and families increase income from employment and non-employment sources (include at least one specific strategy for employment income and one for non-employment related income, and name the organization responsible for carrying out each strategy). (limit 1000 characters)

The Collaborative Applicant employs a Homeless Resource Coordinator who is responsible for developing partnerships with employment & training organizations & linking resources to homeless provider network to directly assist clients. A yearly job fair, job announcements from the Workforce Investment Board, & job training partnerships are examples of activities. The CoC has used the SOAR model for over 5 years to assist consumers who are unable to work to apply for SS benefits & all sub-recipients have been SOAR trained. Kristen Armstrong is a SOAR Champion and provided TA to others working through the SOAR process. TANF & SOAR information has been widely distributed & utilized by sub-recipients. A special initiative by the state was offered to sub-recipients for job training over the past 6 months in which several agencies have enrolled consumers & brought successful outcomes for training & job placement.

3A-6a. Describe how the CoC is working with mainstream employment organizations to aid homeless individuals and families in increasing their income. (limit 1000 characters)

The Employment & Training Committee, staffed by Collaborative Applicant's Homeless Resource Coordinator engages specific organizations to work with providers in accessing various employment & training opportunities. An email newsletter named eSHARE distributes specific information regarding opportunities & providers who work with consumers to enroll & attend job training opportunities such as Bidwell, Goodwill, AC Employment & Training, and others. Employment opportunities found by training specialist is shared with the provider network and/or discussed at the quarterly Employment & Training Meeting for further refinement & engagement.

3A-7. Performance Measure: Thoroughness of Outreach.

**How does the CoC ensure that all people living unsheltered in the CoC's geographic area are known to and engaged by providers and outreach teams?
(limit 1000 characters)**

The CoC has four major street outreach organizations (Operation Safety Net, Operation Save a Life, the Pittsburgh Downtown Partnership, & Family Links) that assist the unsheltered population. Drop in centers, soup kitchens & a medical van are known to the unsheltered population as places where meals, showers, laundry, & other services can be accessed. The Link also has a person who will make "rounds" to these places to assist people in getting access to homeless services. Together, these form the Allegheny County Engagement Network. The network has a trifold map that they give out on street rounds & to the police and other volunteers who come across people living on the street. HOCC is working on an app for resources. Once engaged, this group of providers works to link consumers with the services that they need, which then leads to a trusting relationship that moves the consumer toward housing. A data base is maintained on all known street population & locations.

3A-7a. Did the CoC exclude geographic areas from the 2015 unsheltered PIT count where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g., deserts)? No

**3A-7b. What was the the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoC's unsheltered PIT count?
(limit 1000 characters)**

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

Objective 1: Ending Chronic Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

Opening Doors, Federal Strategic Plan to Prevent and End Homelessness (as amended in 2015) establishes the national goal of ending chronic homelessness. Although the original goal was to end chronic homelessness by the end of 2015, that goal timeline has been extended to 2017. HUD is hopeful that communities that are participating in the Zero: 2016 technical assistance initiative will continue to be able to reach the goal by the end of 2016. The questions in this section focus on the strategies and resources available within a community to help meet this goal.

3B-1.1. Compare the total number of chronically homeless persons, which includes persons in families, in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	189	150	-39
Sheltered Count of chronically homeless persons	148	134	-14
Unsheltered Count of chronically homeless persons	41	16	-25

3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, decrease, or no change in the overall TOTAL number of chronically homeless persons in the CoC, as well as the change in the unsheltered count, as reported in the PIT count in 2015 compared to 2014. To possibly receive full credit, both the overall total and unsheltered changes must be addressed. (limit 1000 characters)

The primary reason for the decrease in chronic homelessness has been the CoC's addition of resources for this population. New PSH beds have been added in recent years and turnover in existing beds has occurred because of the Section 8 Homeless Preference, which has allowed chronically homeless persons to access this resource when former participants move out. The focus on reaching and engaging the unsheltered CH population has contributed to the reduction of this population as well. The sheltered CH population has been reduced by moving those in shelters and transitional housing to permanent supportive housing that has been set aside only for the CH and that has become available through turnover.

3B-1.2. From the FY 2013/FY 2014 CoC Application: Describe the CoC's two year plan (2014-2015) to increase the number of permanent supportive housing beds available for chronically homeless persons and to meet the proposed numeric goals as indicated in the table above. Response should address the specific strategies and actions the CoC will take to achieve the goal of ending chronic homelessness by the end of 2015. (read only)

All Permanent Supportive Housing (PSH) beds have been identified in the above chart and providers of those beds have been asked to reserve 85% of all turnover beds to the chronically homeless. The reallocation project is a PSH program for the chronically homeless. The CoC's Coordinated Intake Center will work in conjunction with street outreach providers to identify all known chronically homeless persons enrolled with the center and placed on the wait list for the most appropriate intervention (shelter, TH, PSH). All persons referred to the intake center from street outreach or who call the intake center for PSH beds will be required to complete the Vulnerability Index to determine final eligibility for PSH placement. All beds will be assigned by the Coordinated Intake Center as PSH beds open up based on the VI scores. No PSH beds dedicated for the chronically homeless will be assigned to anyone other than the chronically homeless until there are no CH persons identified. The CoC will also be working any providers who may want to convert TH beds to PSH for CH. Over the past year, one facility based TH has converted to PSH.

3B-1.2a. Of the strategies listed in the FY 2013/FY 2014 CoC Application represented in 3B-1.2, which of these strategies and actions were accomplished? (limit 1000 characters)

All of these strategies have been accomplished except for the final programming for HMIS to make referrals from coordinated entry using the VI-SPDAT scoring. This will be completed in December 2015. The VISPDAT was partially implemented in Sept 2015 with full implementation though HMIS by December 2015. CoC's strategy was to: increase the supply of beds dedicated to CH, prioritize new & turnover beds for CH, adopt a housing first strategy, & to move those who no longer need PSH to other permanent housing opportunities so that CH have a PSH unit to access.

3B-1.3. Compare the total number of PSH beds (CoC Program and non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2015 Housing Inventory Count, as compared to those identified on the 2014 Housing Inventory Count.

	2014	2015	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC.	564	638	74

3B-1.3a. Explain the reason(s) for any increase, decrease or no change in the total number of PSH beds (CoC Program and non CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2015 Housing Inventory Count compared to those identified on the 2014 Housing Inventory Count. (limit 1000 characters)

The CoC added a new program (Bridging the Gap) which had 17 dedicated chronically homeless beds. Additionally, there were 8 other providers who added chronically homeless beds. In the 2015 HIC, providers incorrectly reported their chronic homeless beds as not being chronic homeless. This adjustment has been made.

3B-1.4. Did the CoC adopt the orders of priority in all CoC Program-funded PSH as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status ? Yes

3B-1.4a. If “Yes”, attach the CoC’s written standards that were updated to incorporate the order of priority in Notice CPD-14-012 and indicate the page(s) that contain the CoC’s update. pages 3-13

3B-1.5. CoC Program funded Permanent Supportive Housing Project Beds prioritized for serving people experiencing chronic homelessness in FY2015 operating year.

Percentage of CoC Program funded PSH beds prioritized for chronic homelessness		FY2015 Project Application
--	--	----------------------------

<p>Based on all of the renewal project applications for PSH, enter the estimated number of CoC-funded PSH beds in projects being renewed in the FY 2015 CoC Program Competition that are not designated as dedicated beds for persons experiencing chronic homelessness.</p>	<p>796</p>
<p>Based on all of the renewal project applications for PSH, enter the estimated number of CoC-funded PSH beds in projects being renewed in the FY 2015 CoC Program Competition that are not designated as dedicated beds for persons experiencing chronic homelessness that will be made available through turnover in the FY 2015 operating year.</p>	<p>42</p>
<p>Based on all of the renewal project applications for PSH, enter the estimated number of PSH beds made available through turnover that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.</p>	<p>42</p>
<p>This field estimates the percentage of turnover beds that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.</p>	<p>100.00%</p>

3B-1.6. Is the CoC on track to meet the goal of ending chronic homelessness by 2017? Yes

This question will not be scored.

3B-1.6a. If “Yes,” what are the strategies implemented by the CoC to maximize current resources to meet this goal? If “No,” what resources or technical assistance will be implemented by the CoC to reach the goal of ending chronically homeless by 2017? (limit 1000 characters)

The CoC has adopted the Prioritization for PSH outlined in CPD-14-012 for PSH projects and has also prioritized CH households for PH, TH, and RRH projects as outlined in the attached written standards. The CoC has adopted a Move Up strategy to create openings in the homeless system that can be occupied by CH households based on this prioritization. Street Outreach has been expanded and emergency shelters, drop in centers, and other service providers have been trained to locate and refer all known CH homeless persons to the Link for housing resources in the continuum. Street outreach has a long history of working with the unsheltered population that builds trust and engagement and ensures frequent, consistent offers of housing. This helps in preventing episodic homelessness from becoming chronic and in moving CH persons to housing more quickly. Coordinated Entry will have a presence at Severe Weather Emergency Shelter this winter to identify and assist in placing CH.

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

Objective 2: Ending Homelessness Among Households with Children and Ending Youth Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

Opening Doors outlines the goal of ending family (Households with Children) and youth homelessness by 2020. The following questions focus on the various strategies that will aid communities in meeting this goal.

3B-2.1. What factors will the CoC use to prioritize households with children during the FY2015 Operating year? (Check all that apply).

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Number of previous homeless episodes:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Criminal History:	<input checked="" type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder):	<input checked="" type="checkbox"/>
Head of household has mental/physical disabilities:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

3B-2.2. Describe the CoC's plan to rapidly rehouse every family that becomes homeless within 30 days of becoming homeless on the street or entering shelter. (limit 1000 characters)

Coordinated Entry ensures only those with no other resources access the system. CoC is working jointly with ESG to utilize RRH resources. CoC is increasing the number of RRH through the conversion of TH in 2015 NOFA. All RRH must be literally homeless w/o other resources. The Link is using the VI-SPADAT to id families & refer them to RRH & PSH. Locating safe, affordable rental units in the areas that meet client's identified needs is key strategy to RRH. RRH providers maintain lists of landlords/units willing to participate in RRH & continue to engage new landlords on an ongoing basis. CoC has committed CYF Family Stabilization funding to programs serving families so they can rapidly move from ES to TH or PH within 30 days. AlleghenyLink is adding an additional Case Manager to engage families when they enter shelter to quickly find housing and other resources as quickly as possible.

3B-2.3. Compare the number of RRH units available to serve families from the 2014 and 2015 HIC.

	2014	2015	Difference
RRH units available to serve families in the HIC:	38	42	4

3B-2.4. How does the CoC ensure that emergency shelters, transitional housing, and permanent housing (PSH and RRH) providers within the CoC do not deny admission to or separate any family members from other members of their family based on age, sex, or gender when entering shelter or housing? (check all strategies that apply)

CoC policies and procedures prohibit involuntary family separation:	<input checked="" type="checkbox"/>
There is a method for clients to alert CoC when involuntarily separated:	<input checked="" type="checkbox"/>
CoC holds trainings on preventing involuntary family separation, at least once a year:	<input checked="" type="checkbox"/>
Monitoring all referrals through Coordinated Intake & review of all denials by Collaborative Applicant.	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).

PIT Count of Homelessness Among Households With Children

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	578	505	-73
Sheltered Count of homeless households with children:	578	505	-73
Unsheltered Count of homeless households with children:	0	0	0

3B-2.5a. Explain the reason(s) for any increase, decrease or no change in the total number of homeless households with children in the CoC as reported in the 2015 PIT count compared to the 2014 PIT count. (limit 1000 characters)

The combination of RRH & new initiatives with the Housing Authorities have moved consumers quickly and directly to permanent housing. Implementation of Coordinated Intake has assisted in screening and assessing all consumers prior to entering the homeless system. The implementation of a written policy on prioritizing will further assist in narrowing the door to homelessness.

3B-2.6. Does the CoC have strategies to address the unique needs of unaccompanied homeless youth (under age 18, and ages 18-24), including the following:

Human trafficking and other forms of exploitation?	Yes
LGBTQ 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?	No
Unaccompanied minors/youth below the age of 18?	Yes

3B-2.6a. Select all strategies that the CoC uses to address homeless youth trafficking and other forms of exploitation.

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	<input checked="" type="checkbox"/>
Increase housing and service options for youth fleeing or attempting to flee trafficking:	<input checked="" type="checkbox"/>

Specific sampling methodology for enumerating and characterizing local youth trafficking:	<input checked="" type="checkbox"/>
Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	<input checked="" type="checkbox"/>
Community awareness training concerning youth trafficking:	<input checked="" type="checkbox"/>
Partnerships with FBI, local law enforcement and anti- Human Trafficking Coalition	<input checked="" type="checkbox"/>
N/A:	<input type="checkbox"/>

3B-2.7. What factors will the CoC use to prioritize unaccompanied youth (under age 18, and ages 18-24) for housing and services during the FY2015 operating year? (Check all that apply)

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Length of time homeless:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Lack of access to family and community support networks:	<input type="checkbox"/>
Tie breaker for unaccompanied youth in CoC written standards if all else is equal on referral through Coordinated Intake	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

3B-2.8. Using HMIS, compare all unaccompanied youth (under age 18, and ages 18-24) served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2013 (October 1, 2012 - September 30, 2013) and FY 2014 (October 1, 2013 - September 30, 2014).

	FY 2013 (October 1, 2012 - September 30, 2013)	FY 2014 (October 1, 2013 - September 30, 2104)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	78	78	0

3B-2.8a. If the number of unaccompanied youth and children, and youth-headed households with children served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 is lower than FY 2013, explain why. (limit 1000 characters)

N/A

3B-2.9. Compare funding for youth homelessness in the CoC's geographic area in CY 2015 to projected funding for CY 2016.

	Calendar Year 2015	Calendar Year 2016	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$1,133,199.00	\$1,869,946.00	\$736,747.00
CoC Program funding for youth homelessness dedicated projects:	\$828,244.00	\$964,991.00	\$136,747.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$304,955.00	\$904,955.00	\$600,000.00

3B-2.10. To what extent have youth housing and service providers and/or State or Local educational representatives, and CoC representatives participated in each other's meetings over the past 12 months?

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	6
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	6
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	6

3B-2.10a. Given the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local education liaisons and State educational coordinators. (limit 1000 characters)

The CoC has a long standing work group of Homeless Liaisons, CoC funded homeless providers, local government, and foundation partners, the Homeless Education Network. HEN meets regularly to address the unique educational needs of homeless youth. HEN holds a Summit each year and sponsors meetings quarterly. This group also holds bi-monthly work group meetings to address problems such as transportation, enrollment barriers, school supplies, and communication between homeless providers and educators to increase the effectiveness of services. HEN also works to ensure that the needs of preschoolers are met, including increasing access to Head Start and Early Head Start and tracking the developmental progress of infants and toddlers who are homeless. A focus of this year's work has been on Unaccompanied Youth that has resulted in the creation of a drop in center for youth and a special youth point in time count.

3B-2.11. How does the CoC make sure that homeless participants are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow. In addition, include how the CoC, together with its youth and educational partners (e.g. RHY, schools, juvenilee justice and children welfare agencies), identifies participants who are eligible for CoC or ESG programs. (limit 2000 characters)

CoC holds regular meetings between education and homeless providers. CoC & ESG requires every homeless program to have an Education Liaison on staff who is responsible for ensuring that the educational and developmental needs of children enrolled in their program are being met. The Education Liaisons and the Homeless Liaisons in the schools meet bi-monthly to problem solve and work on common barriers like transportation, enrollment & attendance. These groups also engage in cross training activities including presentation on coordinated entry, accessing the homeless system via the CoC, trauma & poor educational outcomes experienced by homeless children. CoC shares information among these various groups via an e-Share newsletter. These activities create a knowledge base of the resources available to better house & educate the families. CoC has a pilot project with Woodland Hills School District to identify homeless families according to either HUD or the Dept of Education McKinney Vento Act definition & ensure that those families are receiving services to improve housing stability & outcomes. The CA & the WHSD & more than 10 other school districts have a Data Sharing Agreement which tracks social service involvement, school attendance, grades & other data which increases objectivity & evidence basis of the unique needs of homeless children. The pilot program has generated recommendations that will be applied across the CoC in the coming years. In addition, the Homeless Services and Supports Coordinators who assist families in ES will assist to enroll children in school, especially for the ones who were housed in hotels using vouchers.

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

Objective 3: Ending Veterans Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

Opening Doors outlines the goal of ending Veteran homelessness by the end of 2015. The following questions focus on the various strategies that will aid communities in meeting this goal.

3B-3.1. Compare the total number of homeless Veterans in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	231	214	-17
Sheltered count of homeless veterans:	212	205	-7
Unsheltered count of homeless veterans:	19	9	-10

3B-3.1a. Explain the reason(s) for any increase, decrease or no change in the total number of homeless veterans in the CoC as reported in the 2015 PIT count compared to the 2014 PIT count. (limit 1000 characters)

The CoC began a Boot Camp initiative in August 2014, which quickly began to see results in identifying and housing homeless veterans. The CoC has also seen an increase in VASH and SSVF resources brought into the continuum, but other improvements have been made to increase the effectiveness of the CoC's response to veteran homelessness. The time from referral to enrollment in the SSVF and VASH programs has been reduced by better communication between the VA and the providers of this housing. Landlord outreach and engagement has helped to increase the housing supply for homeless vets. The CoC's Move Up strategy and a special veterans preference in a local housing authority has also helped to move the sheltered homeless veteran population to permanent housing. The CoC and VA continue to have a strong partnership in identifying and housing veterans by collaborating to find permanent housing regardless of the funding source. VA is an active participant on HAB & committees.

3B-3.2. How is the CoC ensuring that Veterans that are eligible for VA services are identified, assessed and referred to appropriate resources, i.e. HUD-VASH and SSVF? (limit 1000 characters)

The Coordinated Entry system incorporates VA funded programs, including Grant per Diem, VASH, SSVF, and some private funded programs for veterans, so that veterans who call the Link can still be referred to VA funded services. The Link also asks each veteran their discharge status and tries to direct those who are eligible for VA services to access those VA services. If the veteran cannot or will not call the VA for housing or homeless resources, the Link will refer to the CoC funded system. The VA and the CoC regularly meet to share information on available resources. VA staff also go directly to shelters, drop in centers, and participate in street rounds to identify and engage veterans who are eligible for VA funded services. VA is a member of Homeless Advisory Board & a strong partner.

3B-3.3. For Veterans who are not eligible for homeless assistance through the U.S Department of Veterans Affairs Programs, how is the CoC prioritizing CoC Program-funded resources to serve this population? (limit 1000 characters)

The CoC's Written Standards give a tie breaker preference for veterans in general, but gives an additional preference for veterans who are not eligible for VA programs. Specifically, veterans receive one point as a preference if they are a veteran and an additional point if their discharge status prohibits the VA from serving them. This means that if a veteran with an honorable discharge calls for service before a veteran with a dishonorable discharge, if all else is equal, the veteran with the dishonorable discharge will be offered housing first. The prioritization in the Written Standards is higher for a non-VA eligible household than a VA eligible household. Please see the attached Written Standards for further clarification on how this preference works. In addition this year's bonus project is for non eligible Veteran families that will address an unmet need in our CoC.

3B-3.4. Compare the total number of homeless Veterans in the CoC AND the total number of unsheltered homeless Veterans in the CoC, as reported by the CoC for the 2015 PIT Count compared to the 2010 PIT Count (or 2009 if an unsheltered count was not conducted in 2010).

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2015	% Difference
Total PIT count of sheltered and unsheltered homeless veterans:	83	214	157.83%
Unsheltered count of homeless veterans:	29	9	-68.97%

3B-3.5. Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2015. Yes

This question will not be scored.

3B-3.5a. If “Yes,” what are the strategies being used to maximize your current resources to meet this goal? If “No,” what resources or technical assistance would help you reach the goal of ending Veteran homelessness by the end of 2015? (limit 1000 characters)

CoC is maintaining a registry of veterans & has a strategy to house all unsheltered & sheltered veterans through the Boot Camp initiative. CoC has moved emergency shelter & transitional shelter veterans to permanent housing through SSVF, VASH, & Section 8 & CoC PSH programs through prioritization preference. The VA & CoC are coordinating their efforts to end Veteran Homelessness. The CoC is reallocating transitional housing beds for RRH so veterans will enter directly into permanent housing as opposed to being placed in transitional housing. Any new veterans identified will be diverted to RRH and other PH programs as previously mentioned. In addition there is a bonus project for non eligible veteran families.

4A. Accessing Mainstream Benefits

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

4A-1. Does the CoC systematically provide information to provider staff about mainstream benefits, including up-to-date resources on eligibility and mainstream program changes that can affect homeless clients? Yes

4A-2. Based on the CoC's FY 2015 new and renewal project applications, what percentage of projects have demonstrated that the project is assisting project participants to obtain mainstream benefits, which includes all of the following within each project: transportation assistance, use of a single application, annual follow-ups with participants, and SOAR-trained staff technical assistance to obtain SSI/SSDI?

FY 2015 Assistance with Mainstream Benefits

Total number of project applications in the FY 2015 competition (new and renewal):	74
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 3a, 3b, 3c, 4, and 4a on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	69
Percentage of renewal and new project applications in the FY 2015 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	93%

4A-3. List the healthcare organizations you are collaborating with to facilitate health insurance enrollment (e.g. Medicaid, Affordable Care Act options) for program participants. For each healthcare partner, detail the specific outcomes resulting from the partnership in the establishment of benefits for program participants. (limit 1000 characters)

The CoC partners with Enroll America, the Consumer Health Coalition, APPRISE, and local health care navigators to assist in enrolling homeless in health insurance programs. Enroll America has done presentations at Quarterly Homeless Provider meetings and goes on site to shelters and CoC funded homeless programs to educate staff and consumers on ways to obtain health insurance. Navigators and partners attended Stand Down and other events to assist those without insurance in the enrollment process on site at those events. The e-Share newsletter also contains information on how to assist consumers in enrolling for benefits. The Collaborative Applicant will use HMIS data to track those consumers without insurance. CoC established a performance measure for 2015 on Health Care will use this in 2016 Project Ranking Tool, which will further incentivize subrecipients to ensure that their consumers have insurance.

4A-4. What are the primary ways that the CoC ensures that program participants with health insurance are able to effectively utilize the healthcare benefits available?

Educational materials:	<input checked="" type="checkbox"/>
In-Person Trainings:	<input checked="" type="checkbox"/>
Transportation to medical appointments:	<input checked="" type="checkbox"/>
Health Care for Homeless Clinic Access located in ES, Community Health Ctrs.	<input checked="" type="checkbox"/>
Operation Safety Net Medical Van with OSN outreach component	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
Not Applicable or None:	<input type="checkbox"/>

4B. Additional Policies

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

4B-1. Based on the CoC's FY 2015 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH) and SSO (non-Coordinated Entry) projects in the CoC are low barrier? Meaning that they do not screen out potential participants based on those clients possessing a) too little or little income, b) active or history of substance use, c) criminal record, with exceptions for state-mandated restrictions, and d) history of domestic violence.

FY 2015 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2015 competition (new and renewal):	73
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2015 competition:	66
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2015 competition that will be designated as "low barrier":	90%

4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), RRH, SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2015 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

FY 2015 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2015 competition (new and renewal):	73
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2015 competition:	61
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2015 competition that will be designated as Housing First:	84%

4B-3. What has the CoC done to ensure awareness of and access to housing and supportive services within the CoC's geographic area to persons that could benefit from CoC-funded programs but are not currently participating in a CoC funded program? In particular, how does the CoC reach out to for persons that are least likely to request housing or services in the absence of special outreach?

Direct outreach and marketing:	<input checked="" type="checkbox"/>
Use of phone or internet-based services like 211:	<input checked="" type="checkbox"/>
Marketing in languages commonly spoken in the community:	<input type="checkbox"/>
Making physical and virtual locations accessible to those with disabilities:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

4B-4. Compare the number of RRH units available to serve any population from the 2014 and 2015 HIC.

	2014	2015	Difference
RRH units available to serve any population in the HIC:	119	86	-33

4B-5. Are any new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

**4B-6. If "Yes" in Questions 4B-5, then describe the activities that the project(s) will undertake to ensure that employment, training and other economic opportunities are directed to low or very low income persons to comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) and HUD's implementing rules at 24 CFR part 135?
 (limit 1000 characters)**

N/A

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

4B-7a. If "Yes" in Question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons defined as homeless in accordance with 24 CFR 578.89. Description must include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)

N/A

4B-8. Has the project been affected by a major disaster, as declared by President Obama under Title IV of the Robert T. Stafford Act in the 12 months prior to the opening of the FY 2015 CoC Program Competition? No

4B-8a. If "Yes" in Question 4B-8, describe the impact of the natural disaster on specific projects in the CoC and how this affected the CoC's ability to address homelessness and provide the necessary reporting to HUD. (limit 1500 characters)

N/A

4B-9. Did the CoC or any of its CoC program recipients/subrecipients request technical assistance from HUD in the past two years (since the submission of the FY 2012 application)? This response does not affect the scoring of this application. Yes

4B-9a. If "Yes" to Question 4B-9, check the box(es) for which technical assistance was requested.

This response does not affect the scoring of this application.

CoC Governance:	<input checked="" type="checkbox"/>
CoC Systems Performance Measurement:	<input checked="" type="checkbox"/>
Coordinated Entry:	<input checked="" type="checkbox"/>
Data reporting and data analysis:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	<input type="checkbox"/>
Maximizing the use of mainstream resources:	<input type="checkbox"/>
Retooling transitional housing:	<input type="checkbox"/>
Rapid re-housing:	<input checked="" type="checkbox"/>
Under-performing program recipient, subrecipient or project:	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

4B-9b. If TA was received, indicate the type(s) of TA received, using the categories listed in 4B-9a, the month and year it was received and then indicate the value of the TA to the CoC/recipient/subrecipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.

This response does not affect the scoring of this application.

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance
Coordinated Entry & CoC Governance	07/27/2015	5
HMIS, Systems Performance Measurement	08/20/2015	5
Data Reporting & Data Analysis, Governance	09/01/2015	5
CoC Governance	07/02/2015	5
Rapid Re-Housing Best Practices;VISPADAT	08/20/2015	5

4C. Attachments

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

For required attachments related to rejected projects, if the CoC did not reject any projects then attach a document that says "Does Not Apply".

Document Type	Required?	Document Description	Date Attached
01. 2015 CoC Consolidated Application: Evidence of the CoC's Communication to Rejected Projects	Yes	PA 600 Rejection ...	11/18/2015
02. 2015 CoC Consolidated Application: Public Posting Evidence	Yes	PA-600 CoC Applic...	11/17/2015
03. CoC Rating and Review Procedure	Yes	PA 600 Ranking Pr...	11/19/2015
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	PA 600 Rating and...	11/17/2015
05. CoCs Process for Reallocating	Yes	PA600 Reallocatio...	11/17/2015
06. CoC's Governance Charter	Yes	PA 600 Governance...	11/05/2015
07. HMIS Policy and Procedures Manual	Yes	PA 600 HMIS Polic...	11/19/2015
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	Housing Authority...	11/05/2015
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No		
11. CoC Written Standards for Order of Priority	No	PA 600 Written St...	11/05/2015
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes	No		
13. Other	No		
14. Other	No		
15. Other	No		

Attachment Details

Document Description: PA 600 Rejection Documenation

Attachment Details

Document Description: PA-600 CoC Application public posting evidence

Attachment Details

Document Description: PA 600 Ranking Procedures & Time Line,
Minutes

Attachment Details

Document Description: PA 600 Rating and Review Procedure Public
Posting Evidence

Attachment Details

Document Description: PA600 Reallocation Plan

Attachment Details

Document Description: PA 600 Governance Charter

Attachment Details

Document Description: PA 600 HMIS Policies & Training Manuals

Attachment Details

Document Description:

Attachment Details

Document Description: Housing Authority Plans for PA 600

Attachment Details

Document Description:

Attachment Details

Document Description: PA 600 Written Standards

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

Page	Last Updated
1A. Identification	11/14/2015
1B. CoC Engagement	11/19/2015
1C. Coordination	11/19/2015
1D. CoC Discharge Planning	11/14/2015
1E. Coordinated Assessment	11/19/2015
1F. Project Review	11/19/2015
1G. Addressing Project Capacity	11/19/2015
2A. HMIS Implementation	11/14/2015
2B. HMIS Funding Sources	11/14/2015
2C. HMIS Beds	11/16/2015
2D. HMIS Data Quality	11/18/2015
2E. Sheltered PIT	11/16/2015
2F. Sheltered Data - Methods	11/19/2015
2G. Sheltered Data - Quality	11/19/2015
2H. Unsheltered PIT	11/17/2015
2I. Unsheltered Data - Methods	11/19/2015
2J. Unsheltered Data - Quality	11/18/2015
3A. System Performance	11/19/2015
3B. Objective 1	11/19/2015
3B. Objective 2	11/19/2015
3B. Objective 3	11/19/2015
4A. Benefits	11/17/2015
4B. Additional Policies	11/18/2015
4C. Attachments	11/19/2015
Submission Summary	No Input Required

Laver, Terri

From: Prokop, Kelly
Sent: Tuesday, October 27, 2015 9:48 AM
To: mjensen@ywcaph.org
Subject: Proposal for HUD Rapid Re-Housing Bonus Program for Homeless Families

Dear Ms. Jensen,

Thank you for submitting a response to the RFP for a U.S. Department of Housing and Urban Development (HUD) Rapid Re-Housing Bonus Program for Homeless Families.

Each response was reviewed by an evaluation committee, which included representatives from across DHS as well as external stakeholders. The evaluation committee reviewed all of the responses extensively and based their recommendation on which organization could best meet the goals and objectives outlined in the RFP.

We regret to inform you that the evaluation committee has not recommended that your organization be included in the overall 2015 HUD NOFA application for a Bonus Program. We thank you for submission and encourage you to continue to review our website for solicitations of interest to you.

Kelly Prokop, Esq.
Office of Data Analysis, Research and Evaluation
Allegheny County Department of Human Services
412.350.6622

Laver, Terri

From: Prokop, Kelly
Sent: Tuesday, October 27, 2015 9:47 AM
To: Jesse Hayward
Subject: Proposal for a HUD RRH Bonus Program for Homeless Families

Dear Mr. Hayward,

Thank you for submitting a response to the RFP for a U.S. Department of Housing and Urban Development (HUD) Rapid Re-Housing Bonus Program for Homeless Families.

Each response was reviewed by an evaluation committee, which included representatives from across DHS as well as external stakeholders. The evaluation committee reviewed all of the responses extensively and based their recommendation on which organization could best meet the goals and objectives outlined in the RFP.

We regret to inform you that the evaluation committee has not recommended that your organization be included in the overall 2015 HUD NOFA application for a Bonus Program. We thank you for submission and encourage you to continue to review our website for solicitations of interest to you.

Kelly Prokop, Esq.
Office of Data Analysis, Research and Evaluation
Allegheny County Department of Human Services
412.350.6622

Laver, Terri

From: Prokop, Kelly
Sent: Tuesday, October 27, 2015 9:46 AM
To: Rod Willaman (RWillaman@chartierscenter.org)
Subject: Proposals for HUD Rapid Re-Housing Bonus Projects

Mr. Willaman,

Thank you for submitting responses to the RFP for a U.S. Department of Housing and Urban Development (HUD) Rapid Re-Housing Bonus Program and the RFP for a HUD RRH Bonus Program for Homeless Families.

Each response was reviewed by an evaluation committee, which included representatives from across DHS as well as external stakeholders. The evaluation committee reviewed all of the responses extensively and based their recommendation on which organization could best meet the goals and objectives outlined in the RFP.

We regret to inform you that the evaluation committee has not recommended that your organization be included in the overall 2015 HUD NOFA application for a Bonus Program. We thank you for submission and encourage you to continue to review our website for solicitations of interest to you.

Kelly Prokop, Esq.
Office of Data Analysis, Research and Evaluation
Allegheny County Department of Human Services
412.350.6622

Screenshot of Allegheny County Department of Human Services (Collaborative Applicant for PA-600) website, showing links for:

- PA-600 Project priority listing/ranking (Project Listing for the PA-600 Pittsburgh McKeesport, Penn Hills Allegheny County CoC)
- PA-600 CoC Rating and Review Procedure (Process for determining the ranking for the Project Listing for PA-600 CoC)
- PA-600 2015 CoC Consolidated Application: Public Posting (DRAFT PA 600 HUD 2015 Continuum of Care Application)

Website: <http://www.alleghenycounty.us/Human-Services/Programs-Services/Basic-Needs/Housing-Administrative-Information.aspx>

The screenshot shows a web browser window displaying the Allegheny County Department of Human Services website. The browser's address bar shows the URL: <http://www.alleghenycounty.us/Human-Services/Programs-Services/Basic-Needs/Housing-Administrative-Information.aspx>. The website features a navigation menu with categories like LIVE, WORK, EXPLORE, GOVERNMENT, NEWS AND EVENTS, and ABOUT. A large banner image of a diverse group of people is at the top, with the text "HOUSING ADMINISTRATIVE INFORMATION" overlaid. Below the banner is a search bar and a "HOW DO I..." dropdown menu. The main content area is titled "Housing Administrative Information" and includes a breadcrumb trail: Government > Health and Human Services > Human Services > Programs and Services > Basic Needs > Housing Administrative Information. The page is organized into sections: "Plans" (Housing and Homeless Services Strategic Plan 2015-18, Ten-Year Plan to End Homelessness - Ending Homelessness Now: Creating New Partnership, July 2005), "Reports" (HUD/HAP Project Listing for the PA-600 Pittsburgh McKeesport, Penn Hills Allegheny County CoC, DRAFT PA 600 HUD 2015 Continuum of Care Application, HUD/HAP Contracted Providers Directory, Continuum of Care Homeless Services Fact Sheet), and "Point-in-Time (PIT) Surveys" (Allegheny County Point in Time Summary - Street to Permanent Housing). A sidebar on the right lists "HOMELESS SERVICES" including Housing Administrative Information, Landlord Resources, and Severe Weather Emergency Shelter. Social media icons for Facebook, Twitter, LinkedIn, and Email are visible on the right side of the page.

PA 600 Continuum of Care Final Ranking Policies and Ranking List for FY 2015

As the Governing Body for the Allegheny County Continuum of Care (PA-600), the Homeless Advisory Board (HAB) has developed the following process for ranking existing projects and new projects that are seeking funding within the Continuum. Many of the duties that are necessary to carry out this process have been delegated to the Allegheny County Department of Human Services (DHS), which serves as the CoC's Collaborative Applicant. However, final authority for determining which projects will be submitted in the CoC's application for funding and the ranking of projects within that application rests with the Continuum of Care's Governing Body—the Homeless Advisory Board.

The Allegheny County Continuum of Care (CoC) has adopted the following process for ranking new and renewal projects under the FY2015 competition. The CoC will develop a **Ranking List** of all new and renewal projects within the CoC based on the criteria established below.

Eligibility for Funding

To be eligible to be placed on the Ranking List, a project must submit all final documentation and application information to the Allegheny County Department of Human Services (the CoC Collaborative Applicant) by October 20, 2015, meet the CoC required submission dates set forth in Attachment A, meet the application deadlines established within the US Department of Housing and Urban Development (HUD) Notice of Funding Availability (NOFA), and meet all other eligibility criteria outlined in that NOFA and established by the CoC, its Governing Body, and its Collaborative Applicant. If a project is renewing an existing grant, the project must also have an executed Grant Agreement from HUD and be in full compliance with all applicable laws and regulations established by the federal, state, and local government.

The **Ranking List** will be divided into two groups—**group 1** will be those projects that are newly allocated or meet the minimum threshold score of 550 for renewal projects; **group 2** will be those renewal projects that fall below the 550 minimum threshold score, but that have agreed to a corrective action plan. Within these two groups, projects will be ranked according to the following **Policy Priorities**:

1. Permanent Supportive Housing for the Chronically Homeless
2. Permanent Supportive Housing with at least 75% Beds Dedicated for the Chronically Homeless
3. All other Permanent and Permanent Supportive Housing
4. Rapid Re-housing for families
5. All other Rapid Re-housing
6. HMIS
7. Supportive Services for Coordinated Intake
8. Transitional Housing that Identify and are Verified as Using a Housing First Model
9. Transitional Housing for Unaccompanied Youth
10. Transitional Housing for Veterans
11. Transitional Housing for Survivors of Domestic Violence

12. All other Transitional Housing

The CoC has adopted the **Ranking Tool** that scored renewal projects on a scale from 0 to 800, with the minimum threshold for Group 1 of 550. This Ranking Tool utilized information gathered from each project's Fiscal Year 2013/2014 Annual Progress Report (APR). The evaluation information included utilization rates, amount of funding returned to HUD, accuracy of billing, and performance measures (discharging to or retaining permanent housing, maintaining or increasing income, employment, and maintaining or increasing the receipt of mainstream benefits) that were recommended by the Continuum of Care Committee and approved by the Allegheny County Homeless Advisory Board (HAB), the CoC's governing body. The scores derived by the Ranking Tool are used to both determine the group within which the project will be placed and to break ties among projects that fall within the same policy priority. For example, among 2 projects eligible for renewal that are both PSH for the Chronically Homeless, the project with the higher score on the Ranking Tool will be ranked first. If a project scores below 550 on the Ranking Tool, it will be placed in the second group of projects regardless of what type of project it is and where it is among the CoC's policy priorities. For example, if a project scores 400 on the Ranking Tool and it is a PSH project for the Chronically Homeless, it will be placed below all other Transitional Housing projects that score above 550. Projects that score below 550 on the Ranking Tool will be required to undergo a Corrective Action Plan that will be designed to improve performance. If performance does not improve in subsequent years, the project may be removed from the next year's Project Ranking List.

Exclusion from the Project Ranking List

Projects that fall below the 550 minimum threshold score and do not agree to a corrective action plan OR projects that have received documentation from the US Department of Housing and Urban Development (HUD) that a project will not have its grant agreement signed due to being out of compliance with HUD's regulations and/or the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act will not be included in the **Ranking List**. Projects that do not wish to seek renewal funding will also be excluded from the Ranking List. Funds from these projects will be re-allocated to new projects within the Continuum of Care through a competitive Request for Proposals process.

Notice of Projects Ranking

The Allegheny County Department of Human Services will post the Final Ranking List on its website and will notify the Executive Directors of those projects on the Ranking List by November 1, 2015.

Appeals

Renewal projects that do not agree with their placement on the Ranking List or with their exclusion from the Ranking List may submit an appeal to the Chair of the Allegheny County Homeless Advisory Board. The HAB will designate a subcommittee to review the appeal and make a final recommendation on the placement of the project in the Ranking List prior to the HAB. The HAB will make a final decision on the submission of any project that appeals its placement on the Ranking List at least five (5) days prior to the submission of the CoC application to HUD. Members of the HAB will follow the Conflict of Interest

Policies adopted in the Governance Charter when participating in discussions and when casting a vote on the project(s) requesting an appeal.

Since appeals of the scores determined by the Ranking Tool have already been heard (see below), appeals will only be heard on the basis of a project's placement within a specific Policy Priority or its exclusion from the Final Ranking List.

Background and Preliminary Rankings

Preliminary FY2015 Ranking Structure

The following Ranking Structure was recommended by the CoC Committee on May 21, 2015:

1. Permanent Housing and Safe Haven project dedicating 75% - 100% of their beds to chronic homeless and scoring over 550 will be ranked according to their score as the first group.
2. Bridging the Gap, a project that is serving 100% chronic homeless utilizing Housing First, started their project in November 2014. They are at capacity now but do not have an APR to reflect the full year of performance. It was, therefore, decided that they must score 550 points or more and would be ranked after the 75% to 100% chronic homeless beds.
3. Permanent Housing projects prioritizing 28% - 9% of their beds to chronic homeless and scoring over 550 will be ranked according to their score as the second group.
4. Hosanna House, New Foundations I, will be taken over in July by a new provider who will increase the number of housing units, utilize the housing first model and serve chronic homeless with turnover beds and will be placed after the 28%-9% projects.
5. In recognition of the importance of permanent housing beds, Permanent Housing projects not prioritizing any beds for chronic homeless will be placed in the third group.
6. A Step Forward was awarded in the HUD 2014 competition. The HUD contract has not yet been executed. It is estimated that the project will begin operation in the fall, 2015. The committee felt strongly that the project, a Rapid Re-Housing Project, should be ranked immediately after the third group.
7. Transitional Housing projects that scored above 550 will be listed in rank order based upon their scoring. The group did not consider the reduction in the time in the program as a consideration in this year's competition due to the high performance of this group.
8. Permanent Housing and Transitional Housing projects who fell below the 550 level will be ranked last based upon their score.
9. HMIS will be placed between the transitional housing projects and the projects falling below the 550 level. The Planning Grant will be considered once the new projects are reviewed and ranked.

All projects who returned 5 or 10% of their grant funding, fell below the minimum score level or did not choose to either consider dedicating turnover beds to chronic homeless in their Permanent Housing Program or to reduce their project time for Transitional Housing, will be requested to consider this element in their 2016 application. It was also recommended that next year's

prioritization include actual average length of stay for projects and rates of returning to homelessness.

Once the NOFA is issued by HUD for the 2015 application, the committee will be asked to consider ranking and integrating the new project applications.

Preliminary Appeals of Scores

Projects that disagreed with their score from the Ranking Tool were able to appeal that score to the Continuum of Care Committee in September of 2105. Projects that felt that there were errors on their APR or that felt that there were extenuating circumstances that caused their performance to be lower than normal were given the opportunity to have their score and/or ranking changed.

Evaluation of HUD 2015 Applications
PA 600 Ranking Process

Activity	Date	Notes
Continuum of Care Committee Meets to develop and adopt Renewal and New Project Evaluation Tools	2/4/15 and 3/4/15	Continuum of Care Committee Meetings 2/4/15 and 3/4/15 were held to review and approve tool and process.
ACDHS Staff prepare Performance Worksheets from APRs	3/15/15 to 4/5/15	The worksheets distributed at 4/6/15 meeting as a part of the pre-application process for renewals.
Renewal Projects receive Performance Worksheet to review and write comments regarding their performance	4/6/2015	
Performance Worksheets returned by individual project for review by the Evaluation Committee.	4/30/2015	Evaluators will be given a set of the all projects received except those having a conflict of interest and those projects will be given to an independent reviewer - Mary Frances Pilarski from the VA.
Evaluation Committee Convened to review Renewal Performance Review Process	5/4/2015	Performance Worksheets distributed with evaluation tool. Tool was reviewed and written instructions distributed.
Evaluation Committee returned master scoring sheet for all projects to DHS.	5/18/2015	All reviewers returned score sheets and were tabulated into one master sheet to determine overall scores.
Evaluation Committee Meeting to review all renewal projects and rank order projects.	5/21/2015	See minutes from September 21 for details of results.

New Permanent Supportive Housing Project RFP published.	7/9/2015	Two Safe Havens requested that funds/projects be re-allocated for PSH. PSH re allocation process - RFP was released for PSH.
New Permanent Supportive Housing Project proposals received	7/31/2015	
New PSH Projects reviewed by Evaluation Committee Review projects	8/3-13/2015	
Evaluation Committee Meeting to review all PSH projects received and reviewed	8/28/2015	See minutes from 8/28/15 for details of results.
Letters sent to all proposers on decisions.	9/3/2015	
New Rapid Re Housing Re allocation project RFP published	8/12/2015	HAB voted 7/28/15 to re allocate for RRH from TH. This RFP was designed to address the reallocation of those funds.
New RRH proposals received	8/28/2015	
Evaluation Committee Review of RRH proposals received	8/31-9/8/2015	
Evaluation Committee Meeting to review all RRH projects received and reviewed	9/11/2015	See notes from 9/11/15 for details of results
Negotiations with Mercy, & YWCA	9/17/2015	
Negotiations with Goodwill	9/22/2015	
Letters sent to all proposers on decisions for RRH projects.	10/5/2015	
Bonus Project RFP published	9/30/2015	
Bonus Project RFP due	10/7/2015	
Bonus Project Reviewed by Evaluation Committee	10/14/2015	Only Youth projects received. Evaluation Committee requests another RFP for a Family Program be issued. Single Youth project recommended for negotiations
Bonus Project for Families RFP published	10/20/2015	

Bonus Project for Families RFP due	10/22/2015	
Bonus Project reviewed by Evaluation Committee	10/26/2015	
Letters sent to all Bonus Projects received and reviewed	10/26/2015	
Overall Evaluation Committee meets to rank order all applications and make recommendations to HAB	10/20/2015	
Homeless Advisory Board formal vote on ranking	10/27/2015	
Ranking letters to providers	10/30/2015	
Ranking posted to Web site	11/2/2015	
Final Submission to HUD	11/19/2015	

Support Documents

Attachment A	Confidentiality Policy
Attachment B	Homeless Advisory Board Minutes Adopting Ranking
Attachment C	Minutes from All Evaluation Committee Meetings
Attachment D	Ranking Tool for Renewal Projects
Attachment E	Ranking Tool for All Reallocation Projects
Attachment F	Ranking Tool for All New Projects

Attachment A

Proposal Evaluator Confidentiality and Conflict of Interest Statement

Allegheny County is committed to maintaining the highest level of objectivity and transparency in our proposal evaluation process. Your designation as an evaluator requires that you understand the policies regarding proposal confidentiality and reviewer conflicts of interest.

Confidentiality

As a proposal evaluator, you have access to information not generally available to the public. You will have access to information about bidders that is to be used only for the purpose of evaluation. You may not use any information obtained in your role as a proposal evaluator for any personal benefit, or copy or disseminate any portion of any proposal.

Conflicts

A conflict of interest or the appearance of a conflict of interest may occur if you are directly or indirectly involved with an organization that has submitted a proposal for evaluation. By signing this form, you are certifying that no such conflicts exist as of the time of signing. If you become aware of any potential conflict of interest as you review a proposal, you must immediately notify Maria Wallace at maria.wallace@alleghenycounty.us.

Examples of potential conflicts of interest are listed below:

- Affiliation with a bidding organization or entity, for example:
 - You are currently employed by the organization or are considering employment with the company on either an ongoing or contract basis
 - You hold a consulting or advisory role with the company
 - You hold a position on the company's board, or a similar role
 - You hold a financial interest in the organization
 - You are a student or volunteer of the organization
- Relationship with someone who has a personal interest in the proposal – such as a marriage or family relationship, any business or professional partnership, close personal friendship, or any other relationship that might tend to affect your objectivity or judgment
- Any other relationship or affiliation that, when viewed objectively by an outside observer may give an appearance of bias or impropriety
- Soliciting, accepting, or agreeing to accept any personal benefit in exchange for your recommendation or consideration of a proposal

If you have a question or are unsure whether a particular relationship or affiliation presents a conflict of interest, please note it here and we will review your situation: _____

Please select the appropriate statement and sign below.

- I have read this document and understand my obligations as explained herein. I understand that I must advise Maria Wallace if a conflict currently exists or arises during my term of service as an RFP evaluator. I further understand that I must sign and deliver this statement to Maria Wallace by email, standard mail, or fax prior to the evaluation process.

Date: _____

Proposal Name: _____

Evaluator Signature: _____

Evaluator Name (Printed): _____

- I cannot serve as a reviewer for this proposal due to a conflict of interest.

Date: _____

Proposal Name: _____

Evaluator Signature: _____

Evaluator Name (Printed): _____

Return this form to Maria Wallace.

Email (preferred):

maria.wallace@alleghenycounty.us

Standard mail:

Maria Wallace
Allegheny County Department of Human Services
One Smithfield Street, Suite 400
Pittsburgh, PA 15222

Fax:

(412) 350-4004

Attachment B

Homeless Advisory Board Minutes Adopting Ranking

Allegheny County Homeless Advisory Board

HAB Quarterly Meeting

October 27, 2015 10:00AM to Noon
Human Services Building
One Smithfield Street, Pittsburgh.

Purpose: The Homeless Advisory Board (HAB) is a public/private partnership formed to assist and recommend Allegheny County, the City of Pittsburgh, the City of McKeesport and the Municipality of Penn Hills on public policy, programs, activities, data and all other efforts that will eliminate homelessness and improve the wellbeing of homeless persons and families.

HAB Member Attendees

Add from sign-in

Guest Attendees

Add from sign-in

Notes

1. Welcome & Minute Approval—Frank Hammond

Frank Hammond noted that the minutes from the July 2015 Quarterly Meeting minutes were sent out prior to the meeting and asked if anyone had any comments or changes to them, None were offered. Nancy Dunkis moved to approve the minutes as presented. Linda Kilderry seconded the motion. The July 2015 Quarterly Meeting minutes were approved as presented.

2. Continuum of Care Governance Charter- Frank Hammond

Mr. Hammond gave an overview of the Continuum of Care Governance Charter that was sent out prior to the meeting. He stated the Governance Charter includes the expectations of the HAB, Code of Conduct, Conflict of Interest Policy, and the bylaws of the HAB. He also noted that **the Governance Charter will be reviewed annually and remain a living document.** Judy Eakin questioned the quorum and membership of the voting HAB. Barb Smith from HEARTH asked about the chairs and co-chairs of the committees being a part of the Executive Committee. A discussion of the need to change the number of people present to constitute a Quorum and approve a vote took place. Questions arose about the present language that allows half of the membership present to equal a quorum and only one third of members present needed to pass a motion and whether or not that would allow a very small group to make significant decisions. The group also discussed if the providers could nominate and vote for the Executive Leadership Committee. Discussion followed with the HAB Nominations and Selection Process.

The group discussed the need to have membership rotate and how that should occur. Mr. Hammond, increase participation to monthly meetings, decrease numbers by the additional demand in time and commitment. Former membership attendance is taken into consideration when selecting nominees for the HAB.

Two changes to the Governance Charter were proposed:

1st change to the charter: Half plus one was passed for the number needed to pass a vote of the membership.

2nd change to the charter: Board members should be appointed by the Executive Committee, rather than the current Chair of the HAB. Barb Smith motion to make a

Allegheny County Homeless Advisory Board

larger committee or the Executive Committee make the recommendation of nominations. Adrienne Walnoha second. Change to the charter approved.

Mary Parks motion to approve the charter with the two proposed amendments. Governance Charter Approved.

3. HAB Nominations and Selection Process- Frank Hammond

Mr. Hammond explained the nomination process and that new terms for the HAB would begin at the January 2016 meeting. Mr. Hammond referred to the Nomination Form that was passed out at the meeting and explained how someone could nominate themselves or another person in the community to serve on the board. He further explained the expectations of members and especially noted that participation in HAB meetings and subcommittee meetings was an essential responsibility. Nominations must be submitted by Friday the 13th of November to Mr. Hammond by email, mail or fax 412-236-5150. Please nominate appropriately for the committees and consider the amount of time needed to be an active member.

4. HUD Application Materials Review and Vote- Chuck Keenan

a. Ranking of Projects

Chuck Keenan explained the Ranking Policy document that was sent out prior to the meeting and the process that the Continuum of Care undertook to rank individual projects in this year's HUD application. The Ranking List for 2015 followed the HEARTH Interim Rule and took past performance and HUD's policy priorities into consideration. The CoC Committee developed with the ranking tool, which formed the basis for the formal rankings for the HUD application of 2015.

The Ranking List was broken into two groups. The groups followed the Ranking Priorities that took into consideration the project type and particular subpopulations served by the project. Group 1 of the ranking tool scored 550 and above on their past performance and benchmarks. Group 2 of the ranking tool scored below 550 on their past performance and did not meet the benchmarks established. Ms. Kilderry noted that performance was based off the priorities that HUD has emphasized. Annual renewal demand has been increased in Tier 2 to 15% of all projects. HUD wants all CoC's to rank their projects based on performance. Approval for the Ranking Policy was approved by the nonaffiliated members of the HAB. Due to Conflict of Interest the following HAB members did not vote.

Reginald Young

Frank Hammond

Linda Kilderry

Rod Willaman

Barb Smith

Steve Forrester

Mary Parks

Lenny Prewitt

Adrienne Walnoha

The ten remaining HAB members in attendance also approved the Ranking List of Projects for the 2015 HUD application.

Allegheny County Homeless Advisory Board

b. Written Standards

Mr. Keenan outlined the Written Standards document that was sent out prior to the meeting. He also explained a one page chart that went along with the standards and that summarized the waiting list prioritizations that the CoC discussed. He explained the priority given to chronic homeless, length of homelessness, and need for supportive services. Allegheny County has chosen to use the VI-SPDAT to measure the need for services. The Written Standards were approved as presented.

5. Updates

Updates were provided by Committee Chairs or initiative leads. Minutes from the Committee meetings were distributed with the Quarterly Meeting materials

a. Advocacy—Adrienne Walnoha

The Advocacy Committee has been focusing their attention on clients that are experiencing homeless and allowing our consumers to drive the dialogue. Meetings take place on the first Wednesday of each month at 8:30 am. The next meeting will be on November 4, 2015 at Panera Bread on the BLVD of the Allies.

b. Continuum of Care—Linda Kilderry

Met last on September 9th. Discussion around the VI-SPDAT and what information is being provided to the providers. The Continuum of Care Committee has been working with ESG funders to develop a ranking tool that is similar in use to the tool used in the CoC. The intent is to design the tool to be performance based, and to this point the group has determined that the measures used for transitional housing will be the same as those required for HUD. The next meeting of the Committee is on December 9th, and the group will be working on a draft of the tool for that discussion. Looking more at performance measures and developing the ranking tool for the 2016 application. The December 9th meeting will take place at 10AM in the Steelers room.

c. Homeless Outreach Coordinating Committee—Frank Hammond

The HOCC has elected Anne Kanairoi as the committee chair.

d. Homeless Education Network—Joe Lagana

The HCEF Summit 6 will be on November 13, 2015. It will focus on Unaccompanied Youth and the work that has been done to implement these six recommendations from the Unaccompanied Youth Taskforce. One of those recommendations has recently been met, a drop in center for young people. The HEN meets quarterly, with the next meeting scheduled for the morning of December 18th. Mr. Lagana announced the Homeless Children's Education Fund's annual Summit is scheduled for November 13th, and will focus on advancements that have been made around unaccompanied youth—serving as a follow-up from last year's Summit V. The Summit is expected to bring in hundreds of participants, and a number of topic areas will be presented, including collaboration with law enforcement and the judicial system. HCEF has been holding focus groups with law enforcement officers to gather their perspective on young people living on the street and discussing responses to working with these youth. Additionally, they are exploring the ability to develop an app that would inform officers of available resources when they do encounter youth experiencing homelessness.

Allegheny County Homeless Advisory Board

e. VA Boot Camp—Chuck Keenan

The VA Boot Camp is an initiative in Allegheny County between ACDHS, the City of Pittsburgh, HUD and Veterans Affairs with the charge of ending veteran homelessness by the end of 2015—as such, the Boot Camp is concluding at the end of December. Mayor's Office and the County's Executive Office has been working to declare functional zero by the end of the year.

f. Executive Committee—Laurel Randi

Ms. Randi, filling in for Ms. Downing, updated meeting participants on the HAB's 10 year plan which concluded two years previously. The Executive Committee has decided to embark on a new plan for the Continuum which involves fundraising for a consultant to assist with the planning process. The plan consists of the framework and action plan to end homelessness as of 2020. Crisis resolution, prevention, transition to permanent housing and establish resource and program priorities. The plan will be specific to Allegheny County Continuum of Care.

6. Announcements

- Reginald Young noted that the state budget has still not been approved and that this may mean that some agencies may not have funding if they rely on the state. The ACDHS is very concerned about all our providers. If there are essential services that have not been able to funded due to the lack of state resources, DHS would like you to let us know.
- Reminder that all HUD providers' 2015 CoC supplemental information required for the application are needed immediately.

PA 600 2015 HUD Continuum of Care Application

Rank	Sub-recipient Name	Project Name	Total Score	Component Type	Population	Request \$	total
1	UPMC Western Psychiatric Institute & Clinic	Flex 51	753.5	PH/PSH	Single Adults	\$411,007	\$ 411,007
2	Pittsburgh AIDS Task Force	CHOICE III	740.5	PH/PSH	Single Adults & Families	\$89,514	\$ 500,521
3	UPMC Western Psychiatric Institute & Clinic	Mathias Project	712.5	SH	Single Adults	\$233,351	\$ 733,872
4	Mercy Life Center	Mercy Trail Lane	707	SH	Single Adults	\$699,352	\$ 1,433,224
5	Mercy Life Center	Spectrum I	693	PH/PSH	Single Adults	\$501,127	\$ 1,934,351
6	Community Human Services Corporation	Families United	684	PH/PSH	Single Adults & Families	\$349,206	\$ 2,283,557
7	Community Human Services Corporation	Work Towards Sustainability from Crisis	678	PH/PSH	Single Adults	\$134,037	\$ 2,417,594
8	East End Cooperative Ministry	East End Cooperative Ministry Safe Haven Program	677	SH	Single Adults	\$120,049	\$ 2,537,643
9	Pittsburgh AIDS Task Force	CHOICE II	664	PH/PSH	Single Adults & Families	\$163,295	\$ 2,700,938
10	FamilyLinks	Familylinks Community Housing Program	649	PH/PSH	Single Adults & Families	\$116,196	\$ 2,817,134
11	Pittsburgh AIDS Task Force	CHOICE I	644.5	PH/PSH	Single Adults & Families	\$144,275	\$ 2,961,409
12	Mercy Life Center	Generations	643	PH/PSH	Single Adults	\$199,581	\$ 3,160,990
13	Chartiers Center	Hestia Project	566	PH/PSH	Single Adults & Families	\$680,804	\$ 3,841,794
14	Mercy Life Center	Bridging the Gap	257	PH/PSH	Single Adults	\$169,999	\$ 4,011,793
15	Bethlehem Haven	Haven Homes	962	PH/PSH	Single Adults	\$256,072	\$ 4,267,865
16	Mercy Life Center	Home for Good	946	PH/PSH	Single Adults	\$161,998	\$ 4,429,863
17	Sojourner MOMS	MOMS II	749.5	PH/PSH	Families	\$317,978	\$ 4,747,841
18	St Vincent de Paul	Path to New Life	734.5	PH/PSH	Single Adults	\$84,887	\$ 4,832,728
19	Sojourner MOMS	MOMS I	731.5	PH/PSH	Families	\$150,759	\$ 4,983,487
20	Allegheny Valley Association of Churches	Hospitality Homes I	719.5	PH/PSH	Single Adults & Families	\$272,082	\$ 5,255,569
21	North Hills Affordable Housing (HEARTH)	HEARTH Permanent Housing	718.5	PH/PSH	Families	\$81,903	\$ 5,337,472
22	UPMC Western Psychiatric Institute & Clinic	Flex 50 Families	713.5	PH/PSH	Families	\$580,492	\$ 5,917,964
23	East End Cooperative Ministry	FAITH (Formerly Dad's House)	713	PH/PSH	Families	\$434,439	\$ 6,352,403
24	UPMC Western Psychiatric Institute & Clinic	Flex 15	709.5	PH/PSH	Single Adults & Families	\$131,705	\$ 6,484,108
25	ACTION Housing	Housing Plus 2	708.5	PH/PSH	Single Adults	\$168,918	\$ 6,653,026
26	Sojourner MOMS	Open Arms	708.5	PH/PSH	Single Adults & Families	\$215,987	\$ 6,869,013
27	UPMC Western Psychiatric Institute & Clinic	Neighborhood Living Program	701	PH/PSH	Single Adults & Families	\$754,997	\$ 7,624,010
28	Community Human Services Corporation	Community Human Services Shelter Plus Care Program	690	PH/PSH	Single Adults	\$367,794	\$ 7,991,804
29	Sisters Place Inc	Sisters Place Permanent Housing Program	660	PH/PSH	Families	\$268,614	\$ 8,260,418
30	Sisters Place Inc	Sisters Place Day Light Permanent Housing Program	657	PH/PSH	Families	\$65,812	\$ 8,326,230
31	Community Human Services Corporation	Rapid Re-Housing for Families Demonstration Program	633	PH	Families	\$285,163	\$ 8,611,393
32	Sojourner MOMS	Sankofa	556.5	PH/PSH	Families	\$192,101	\$ 8,803,494
33	UPMC Western Psychiatric Institute & Clinic	New Foundations I	378	PH/PSH	Families	\$304,232	\$ 9,107,726
34	Gaudenzia Erie, Inc	Village I	700	PH/PSH	Families	\$127,407	\$ 9,235,133
35	Gaudenzia Erie, Inc	Dolores Howze Program	681	PH/PSH	Single Adults & Families	\$67,805	\$ 9,322,938
36	YWCA	YWCA Chrysalis	662	PH/PSH	Single Adults & Families	\$199,538	\$ 9,522,476
37	YWCA	YWCA WISH Program	567	PH/PSH	Single Adults & Families	\$278,471	\$ 9,800,947
38	Veterans Leadership Program of W PA	Valor	553	PH/PSH	Single Adults & Families	\$154,959	\$ 9,955,906
39	Veterans Leadership Program of W PA	HUD Independence Program	552	PH/PSH	Single Adults & Families	\$135,777	\$ 10,091,683
40	Mercy Life Center	A Step Forward	135	PH/RRH	Families	\$164,570	\$ 10,256,253
41	Goodwill of SW PA	Good Start	1074	PH/RRH	Families	\$72,087	\$ 10,328,340
42	Gaudenzia Erie, Inc	G-PGH PHASE 3	1011	PH/RRH	Single Adults & Families	\$180,040	\$ 10,508,380
43	YWCA	YW Bridges Rapid Re-Housing Program	987	PH/RRH	Families	\$129,603	\$ 10,637,983
44	UPMC Western Psychiatric Institute & Clinic	Soteria Project	1081	PH/RRH	Single Adults & Families	\$207,771	\$ 10,845,754
45	Mercy Life Center	Through Open Door	1062	PH/RRH	Single Adults	\$158,788	\$ 11,004,542
46	Veterans Leadership Program of W PA	Constitution	1042	PH/RRH	Single Adults	\$226,112	\$ 11,230,654
47	Pittsburgh AIDS Task Force	Integrated Rapid Re-Housing Program	1039	PH/RRH	Single Adults	\$100,152	\$ 11,330,806
48	Allegheny County Department of Human Services	HMIS	N/A	HMIS	N/A	\$198,942	\$ 11,529,748
49	Allegheny County Department of Human Services	HMIS Expansion	N/A	HMIS	N/A	\$152,250	\$ 11,681,998
50	Allegheny County Department of Human Services	Allegheny Link	N/A	SSO	N/A	\$68,761	\$ 11,750,759

51	Center for Victims	Womanspace Transitional Housing	718	TH	Single Adults & Families	\$11,359	\$ 11,762,118
52	Alle- Kiski Hope Center	House of Hope	680.5	TH	Single Adults & Families	\$241,853	\$ 12,003,971
53	Center for Victims	Womanspace Townhouses Program	656	TH	Families	\$200,203	\$ 12,204,174
54	Auberle	Movin' On Program	667	TH	Single Adults	\$234,573	\$ 12,438,747
55	Sisters Place Inc	Sisters Place Transitional Housing Program	742	TH	Single Adults & Families	\$136,544	\$ 12,575,291
56	Womanspace East	Womanspace East Transitional Housing Program	727	TH	Families	\$291,146	\$ 12,866,437
57	North Hills Affordable Housing (HEARTH)	HEARTH Transitional Housing Program	702.5	TH	Families	\$442,434	\$ 13,308,871
58	Bridge to Independence	Bridge to Independence Combined Transitional Housing Program	689.5	TH	Single Adults & Families	\$369,731	\$ 13,678,602
59	Goodwill of SW PA	Goodwill HARBOR Project	655.5	TH	Single Adults	\$375,570	\$ 14,054,172
60	Bethlehem Haven	Safe Haven	618.5	TH	Single Adults	\$123,050	\$ 14,177,222
61	Goodwill of SW PA	Healthy Start House	614.5	TH	Families	\$229,116	\$ 14,406,338
62	Primary Care Health Services	First Step Recovery Homes Transitional Housing Program	603.5	TH	Single Adults	\$65,540	\$ 14,471,878
63	Rodman Street Baptist Church	Naomi's Place	594.5	TH	Single Adults & Families	\$89,671	\$ 14,561,549
64	Bethlehem Haven	Bethlehem Haven Step Up Program	567.5	TH	Single Adults	\$169,447	\$ 14,730,996
65	Bethlehem Haven	First Step	564.5	TH	Single Adults	\$206,538	\$ 14,937,534
66	Allegheny Valley Association of Churches	Hospitality Network Ext	564	TH	Families	\$60,284	\$ 14,997,818
67	Goodwill of SW PA	Northside Common Ministries Permanent Housing Program	515	PH	Single Adults	\$117,417	\$ 15,115,235
68	Light of Life	Dual Diagnosed Program	542.5	PH	Single Adults	\$118,556	\$ 15,233,791
69	Veterans Leadership Program of W PA	Liberty	506	PH	Single Adults	\$82,816	\$ 15,316,607
70	Veterans Leadership Program of W PA	Victory	473.5	PH	Families	\$238,785	\$ 15,555,392
71	ACTION Housing Inc	Homeless Youth Transition I	513	TH	Single Adults 18-24	\$178,797	\$ 15,734,189
72	ACTION Housing Inc	Homeless Youth Transition II Program	499	TH	Single Adults 18-24	\$131,449	\$ 15,865,638
73	ACTION Housing	Homeless Teens III	360.5	TH	Single Adults 18-24	\$311,370	\$ 16,177,008
74	Community Human Services Corporation	Housing Solutions	800	PH/RRH	Families	\$1,114,782	\$1,114,918
75	Veterans Leadership Program	Constellation	657	PH/RRH	Families	\$432,918	\$432,918
76	ACTION Housing	Homebound	486.5	PH/RRH	Single Adults 18-24	\$410,241	\$410,241
n/a	Allegheny County Department of Human Services	Allegheny County CoC Planning Project Application	N/A	Planning Grant	N/A	\$527,385	\$527,385

Amount in Tier 2 Amount in Tier 1

\$ 13,750,457 \$ 303,715 \$ 71,855

ARD	\$ 16,177,008
Bonus	1958077
Over/under	\$ -
Planning Grant	\$527,385
Total Applicatin	\$ 18,662,470

Attachment C

Minutes from All Evaluation Committee Meetings

Evaluation Committee

October 20, 2015

Attending: Meg Balsamico, Penn Hills Planning Department (HAB Board Member)
Liz Daniels-Totten, City of Pittsburgh (Representing HAB Board Member)
Nancy Dunkis, Allegheny County Economic Development (HAB Board Member)
Joe Mannina, ACDHS/Office of Behavioral Health
Kelly Russell, City of Pittsburgh (Representing HAB Board Member)
Jack McGraw, Allegheny County Housing Authority (HAB Board Member)
Lisa Trunick, Bethlehem Haven
Amy Beadling, Mercy Life Center
Rod Willaman, Chartiers Center (HAB Board Member)
Robert Eamigh, Allegheny County Department of Human Services
Terri Laver, Allegheny County Department of Human Services

Terri Laver welcomed everyone to the meeting and asked for introductions. The Draft PA 600 Continuum of Care Final ranking Policies and Ranking List for FY 2015 was distributed and reviewed.

Terri gave a summary of the process to date for the rankings. Review and Ranking of the Renewal projects were completed on May 21, 2015 by the Evaluation Committee. An RFP for Permanent Supportive Housing was finalized in August to award two Permanent Supportive Housing projects from funds received from reallocating Safe Haven projects. The Homeless Advisory Board voted to reallocate 9 scattered-site transitional housing programs in July. An RFP was issued in August, and a decision was finalized in September. A bonus project RRP was recommended by the Homeless Advisory Board Executive Committee for Youth RRH and Family RRH. The RFP process is now in the scoring process and a recommendation will be made to the HAB at full meeting on October 27.

The goals of today's meeting is: to review the Draft PA 600 Continuum of Care Final ranking Policies and Ranking List for FY 2015 and review the rank order of projects and recommend to the HAB the rank order based upon the scoring of projects completed in May for renewals, August for PSH, and September for RRH. This recommendation for ranking only includes the actual scoring at the time the projects were presented to the committee and does not include any additional information related to any special conditions or considerations made during or after the evaluation process took place.

Rob Eamigh explained HUD's tier system for this year's application process. HUD is limiting 85% of the funding to be in tier 1 and 15% of the funding in tier 2. Tier 2 will receive a maximum of 60 points from

the CoC if the CoC receives a high score on their part of the application. Points will be given to each Tier 2 application based upon HUD's review of those proposals and their specific scoring system. Projects in tier 2 will be competing nationally for funding.

The committee reviewed the Draft PA 600 Continuum of Care Final Ranking Policies and Ranking List for FY 2015 and recommended that the HAB adopt this document to submit to HUD as documentation for the 2015 process for evaluating projects in PA 600. Nancy Dunkis moved that the Draft PA 600 Continuum of Care Final Ranking Policies and Ranking List for FY 2015 be adopted by the Evaluation Committee and to recommend that the HAB adopt this document to be submitted to HUD for the 2015 competition. Rod Willaman seconded the motion and the vote was carried with no opposition or abstentions.

Jack McGraw made a motion to recommend to the HAB the ranking list as presented based upon the review of the project at the time evaluations were completed, to further make modifications as necessary to include the bonus project(s) or other changes as needed based upon information that the HAB may have regarding current or new projects. Kelly Russell seconded the motion. The motion carried with three abstentions: Lisa Trunick, Rod Willaman and Amy Beadling.

The committee adjourned at 11:00 AM.

RFP: RRH for Families Bonus Program

10/26/2015

Evaluation Committee Meeting Notes

Attendees:

Kelly Russell
Andy Halfhill
Liz Daniels-Totten
Nancy Dunkis
Charles Keenan

Facilitators:

Maria Wallace
Kelly Prokrop

Observers:

Robert Eamigh

The meeting opened with a summary of the process followed and the distribution of scores received for the Family RRH projects. This RFP had a two day turnaround since the committee wanted to present a Family project to the Homeless Advisory Board on October 27 to approve for bonus funding submission to HUD. Evaluators scored and discussed 5 proposals received. The 5 proposals received were for RRH for families. No other RFPs were received. The following is a discussion of the scores:

CHS

- Has the most experience with RRH (2 current grants, have much in place); can hit the ground running with a new project and start performing at a high level
- Good value to the CoC- serving 45 families at \$500,000
- CoC would not be providing additional capacity in the provider community (CHS already doing RRH)

Chartiers Center

- Talked a lot about HESTIA, their PSH program, but not a lot about RRH
- Lack experience in RRH
- Specialize in mental health, but not sure that that is the right target population for RRH

VLP

- We have a need to serve homeless veterans with families who can't receive services through the VA
- Have a poor track record with HMIS
- Have experience with RRH doing SSVF, a VA-funded RRH Programs
- Submitted a proposal for families and for singles, this would only be for families

YWCA

- Poorly written
- Did not seem to want to go outside of their current comfort zone with working with landlords
- Focus primarily on the East End- would they be able to connect someone to housing who was not in the East End?

Gaudenzia

- High budget- not getting as much value for the cost
- Too many staff in the budget
- Proposal not especially poorly written, but not among the strongest

The committee concluded that they would like to award two programs; the first to CHS (the highest scorer), as they offered the best value and had experience in RRH and the second to VLP, as homeless veterans is a sub-population of concern in Allegheny County and noted in the NOFA. They suggested removing VLP's proposal so that individuals were not included and offering the remainder of the award value to CHS.

The recommendation to the HAB vote would include two family projects. Previously the committee considered youth programs for submission. As a result the committee will ask the HAB to approve the submission of two family programs and one youth program per the minutes of October 16.

HUD 2015 Bonus Funding Evaluation Committee Meeting

Meeting Notes

10/16/2015

Attendees:
Kelly Russell
Andy Halfhill
Liz Daniels-Totten
Terri Laver

Facilitators:
Maria Wallace
Kelly Prokrop

Observers:
Robert Eamigh
Charles Keenan

The meeting opened with a summary of the process followed and the distribution of scores received. Evaluators scored and discussed 2 proposals received. The two proposals received were for RRH for unaccompanied youth. The RFP solicited proposals for both RRH for unaccompanied youth and families. No proposals were received for the bonus funding for families.

Chartiers- proposed an RRH for Youth

- The program felt more like PSH than RRH. Unclear from their Proposal that Chartiers fully understands RRH.
- Would have like to have seen a firmer plan for leaving youth covering their own rent by the end of the program.
- Budgeted for 13 months of rent vs. Action's 9 months
- They have experience in transitional housing which would work well.
- Could possibly have a focus on parenting youth
- Have more experience working with families than with youth

Action Housing-proposed an RRH for Youth

- The proposal was strong.
- Would have like to have a see a stronger plan for transitioning youth out at 9 months.
- Had a strong understanding of the RRH model
- Had solid experience with Youth

The committee recommended that Action Housing proposal move forward with an application to HUD and to recommend to the Homeless Advisory Board that this project be ranked among the submission for HUD 2015.

The committee was concern that no proposals were received for RRH for families. After some discussion, the committee recommended that if time allowed a second shorten time frame RFP be issued just for families.

Rapid Re-Housing Evaluation Committee Meeting

September 11, 2015

Attending: Kelly Russell, Lisa Trunick, Abigail Horn, Alison Wolfson, Andy Halfill, Liz Daniels-Totten, Maria Wallace, Andrew Gleason, Rob Eamigh, Chuck Keenan, Kelly Prokop

Marie Wallace opened the meeting with introductions and distributing the scoring sheets. The scoring sheets were broken into performance measures that each project was evaluated on by all of the reviewers. Not all of the reviewers were able to attend the meeting but scores were considered. Each reviewer was required to sign a conflict of interest statement and reviewed the evaluation process. Each project was required to submit a full proposal. The Rapid Re-Housing request for proposal was posted on the DHS website and projects were required to submit their proposal by August 28, 2015.

Each project was reviewed by the committee. The following is a summary of the review regarding the positive and negative statements made by the committee.

Pittsburgh AIDS Task Force (PATF)

+Has been a good partner and good performer.

+Provides services to HIV/AIDS population – only provider in the CoC that provides this service

Veterans Leadership Program (VLP)

(-) going through major transition at admin level, so possibly on shaky ground

(-) history of high staff turnover

WPIC

+ have an established relationship with DHS

+ have been a good performer of services

Goodwill of Southwestern PA

+ have an established relationship with DHS

(-) are we getting a good value by continuing to fund this small program? Outlier by \$10k per unit. [contact them and ask them to serve more units for the same money (4-6 instead of 3)]

(-) high staffing costs – only one with higher staffing costs than leasing costs

Gaudenzia Erie

+/- used to be a different provider, “shaky mom & pop.” Then Gaudenzia (state-wide) took over. Now have better capacity and stronger program all around

+/- used to be geared toward D&A but proposal is to be open to different populations

(-) descriptive of the services they could provide, but stated they could only serve “non-disabled” clients (in the population chart). But that might not be the target population

(-) not specific on who their partners will be for services

Mercy

+/- most of their money is going to rental costs, not much money for services because of issues with their existing funding. So they are requesting a budget increase, presumably to even things back out. Increase might still be high – so may be worth a conversation with them about reduction in number of units/large increase in cost per unit

(-) did not explain decrease in units / budget increase in proposal

(-) had ESG grant as the bulk of their match funds. But can't match HUD funds w HUD funds. Should have known this (they have this some other way, but grant writer didn't know)

YWCA

(-) a few numbers in proposal were below HUD performance goals

(-) no locations in West End or Southside

(-) proposal was a bit wordy

(-) check data on weekly/monthly basis & randomly – consider adding daily check

(-) did not justify increased amount

(-) only provided cover page of their audit

+ one of the agencies that has experience running a scattered site program, which is applicable to RRH

+ housing coordinator on staff already

+ already have a network of landlords

(-) per unit cost was high (requested budget increase way beyond what the increase in units was)

(-) have also gone through some major staff changes, tend to have high turnover

+/- have a good housing director now, but the person who was there before wasn't doing a good job

Chartiers

+ good application, last app was good too (PSH)

+ have a big project already

(-) seemed like an outlier in that they only have one project. Seems like a big project, impressive, but not sure that they have enough experience to do program on larger scale

+/- they serve a harder to serve population already (PSH)

+ doing a good job with PSH, no complaints about their staff or program at all.

+ they have stood out. If/when we get other funding, they would be a top choice. But for this grant, since they are a PSH provider, don't want to take funding away from established programs.

(-) would have to hire a new person to implement this project, per their budget, while some other programs already have the capacity/wouldn't have to allocate funds to staff

Conclusions of Meeting

Since there were questions regarding Goodwill, Mercy and YWCA proposals, the committee suggested that DHS contact them to review their budgets and units to determine if they could re-budget within the guidelines of the proposal requirements.

Based upon scoring, see attached documents, that the following projects be recommended for submission to HUD for 2015: PATF, VLP, WPIC, Goodwill, Gaudenzia Erie, Mercy and YWCA. Chartiers should be considered if any of the listed agencies withdraw from their project application or if additional reallocation funding is considered.

HUD Permanent Supportive Housing RFP

Evaluation Committee

Meeting Notes

August 17, 2015

Attending: Andrew Gleason (OBH)
Abby Horn (DARE)
Kelly Russell (City Planning Dept.)
Liz Daniels-Totten (City Planning Dept.)
Rob Eamigh
Kiandra Foster (United Way)
Andy Halfhill
Chuck Keenan
Sandy Leibler (Executive Office)
Kelly Prokop
Maria Wallace

On August 17, 2015, a meeting was convened to discuss the proposals and scores for the re-allocated funding for Permanent Supportive Housing (PSH) Request for Proposal. The Evaluation Committee was convened to specifically to review proposals for two new PSH projects. Formal RFPs were issued by Allegheny County Department of Human Services (Lead Agency for the Continuum of Care).

Each project was scored based upon the following criteria: Experience, Target Population, Approach to the project, housing approach, supportive services provided, referrals and outreach, proposed performance outcomes, participation in HMIS, and budget.

The scores distributed and discussed. The following is a summary of the discussion:

Women's Program

- Center for Spirituality
 - Poorly written
 - Lacked evidence of organizational structure to back up the proposal
 - Didn't seem to have much of a record of success or a strong plan for delivering the service
 - Self-contained- their development plan was to train their own staff; would have liked to have heard more about partnerships

Center for Spirituality's proposal scored significantly lower than Bethlehem Haven's. The committee quickly reached consensus that this was not a proposal that they would like to discuss further or consider. The recommendation was Beth Haven.

Combined Program

- Chartier's Center
 - Scored higher than Mercy in support services and housing
 - Only requesting funds for housing, not support services- made this proposal stronger
 - Already billing Healthchoices for the service coordination piece
 - Have a structure already in place- looking to expand
 - Weren't going to lease up within 6 months- Mercy would be ready to go
 - Budget was confusing

Even without the bonus points, Mercy scored higher than Chartier's. Chartier's had a strong proposal but Mercy did as well. The RFP was Mercy's to lose, and the committee did not think that Mercy's proposal was weak enough to merit losing the contest. (In fact they thought it was stronger than Chartier's). The recommendation was Mercy.

The outcome will be discussed with the full Evaluation Committee to determine the placement of these projects within the ranking for the Continuum of Care. The final list of all projects will be brought before the Homeless Advisory Board for review and approval.

Evaluation Committee

May 21, 2015

Attending: Liz Daniels-Totten, City of Pittsburgh
Andrew Gleason, ACDHS/Office of Behavioral Health
Kelly Russell, City of Pittsburgh
Kiandra Foster, Allegheny County Volunteer Board for Emergency Food and Shelter
Bob Pacacha, Allegheny County Housing Authority
Katie Florack, Pittsburgh AIDS Task Force
Debbie McManus, Center for Victims of Violent Crimes
Lisa Trunick, Bethlehem Haven
Meghan Huerbin, Mercy Life Center
Seth Abrams, Allegheny County Department of Human Services
Robert Eamigh, Allegheny County Department of Human Services
Terri Laver, Allegheny County Department of Human Services

Terri Laver welcomed everyone to the meeting and asked for introductions. Terri explained the purpose of the meeting was to review and rank the renewal grants for HUD 2015. The recommendation of the Evaluation Committee will be forwarded to the Homeless Advisory Board for final approval.

A Summary of the Performance Report and Evaluation scoring was distributed to the reviewers. In addition, three additional lists were distributed. They included: a listing by project total score regardless of type of project, a listing of projects by type of project and score and a listing by project type, score and % of beds dedicated to serving chronic homeless for PSH or length of time in TH project.

The Evaluation Committee reviewed a listing of scores by project type and then one by highest to lowest. In reviewing the scores from each committee member, the scores did reflect a consistent pattern of evaluating based upon the scoring system established by the Continuum of Care Committee. Evaluators did make adjustments based upon the comment made by each project on the reasons why their individual APR information may have been high or low and how modifications were made by the project to increase performance levels or maintain their high level of performance.

Each score list also contained information related to whether a Permanent Housing project was committing all or some of their beds to serve chronic homeless individuals or families. Transitional Housing projects were asked to reduce the time consumers were enrolled in their program. Several

projects did reduce their time to 12 months or 18 months. This information was also considered in the overall ranking of projects.

In addition, the committee asked Seth Abrams to list projects that returned funds and the percentage each returned ranging from a high of 10 % to a low of 2% of their overall budget for the project. The following is a summary of projects that returned funding by percentage:

10% or higher Return of Funds

Heart House (Goodwill)

Alle Kiski

Rapid Re-Housing Demo (CHS)

Families United (CHS)

Dan Robinson (WPIC)

4% Return of Funds

Buffalo Street (WPIC)

YWCA Bridge Housing Program

Hospitality Homes (AVAC)

7% Return of Funds

Teens III (ACTION Housing)

5% Return of Funds

First Step Recovery Homes

Residential Program (Gaudenzia)

Mathias Program (WPIC)

Spectrum (Mercy)

2% Return of Funds

Village II (Gaudenzia)

Airborne (VLP)

Neighborhood Living /Family Empowerment Programs (WPIC)

Pathways (PATF)

Armed with this information, as well as the overall combined scores from all of the reviewers, the Evaluation Committee members reviewed and reflected on the overall best ranking for the renewal grants. At this time, the committee did not consider any new projects utilizing reallocation or bonus project funding. The following are the criteria agreed upon by the committee:

1. Permanent Housing and Safe Haven project dedicating 75% - 100% of their beds to chronic homeless and scoring over 550 will be ranked according to their score as the first group.
2. Bridging the Gap, a project that is serving 100% chronic homeless utilizing Housing First, started their project in November 2014. They are at capacity now but do not have an APR to reflect the

full year of performance. It was, therefore, decided that they must score 550 points or more and would be ranked after the 75% to 100% chronic homeless beds.

3. Permanent Housing projects prioritizing 28% - 9% of their beds to chronic homeless and scoring over 550 will be ranked according to their score as the second group.
4. Hosanna House, New Foundations I, will be taken over in July by a new provider who will increase the number of housing units, utilize the housing first model and serve chronic homeless with turnover beds and will be placed after the 28%-9% projects.
5. In recognition of the importance of permanent housing beds, Permanent Housing projects not prioritizing any beds for chronic homeless will be placed in the third group.
6. A Step Forward was awarded in the HUD 2014 competition. The HUD contract has not yet been executed. It is estimated that the project will begin operation in the fall, 2015. The committee felt strongly that the project, a Rapid Re-Housing Project, should be ranked immediately after the third group.
7. Transitional Housing projects that scored above 550 will be listed in rank order based upon their scoring. The group did not consider the reduction in the time in the program as a consideration in this year's competition due to the high performance of this group.
8. Permanent Housing and Transitional Housing projects who fell below the 550 level will be ranked last based upon their score.
9. HMIS will be placed between the transitional housing projects and the projects falling below the 550 level. The Planning Grant will be considered once the new projects are reviewed and ranked.

All projects who returned 5 or 10% of their grant funding, fell below the minimum score level or did not chose to either consider dedicating turnover beds to chronic homeless in their Permanent Housing Program or to reduce their project time for Transitional Housing, will be requested to consider this element in their 2016 application. It was also recommended that next year's prioritization include actual average length of stay for projects and rates of returning to homeless.

Once the NOFA is issued by HUD for the 2015 application, the committee will be asked to consider ranking and integrating the new project applications.

Terri Laver will prepare the renewal ranking list based upon the above guidance and it will be distributed with the minutes.

The committee adjourned at 11:45.

Evaluation Committee

May 4, 2015

Attending: Meg Balsamico, Municipality of Penn Hills,
Liz Daniels-Totten City of Pittsburgh
Kelly Russell City of Pittsburgh
Kiandra Foster Allegheny County Volunteer Board for Emergency Food and Shelter
Jack McGraw Allegheny County Housing Authority
Rod Willaman Chartiers Center
Katie Florack Pittsburgh AIDS Task Force
Debbie McManus Center for Victims of Violent Crimes
Robert Eamigh Allegheny County Department of Human Services
Charles Keenan Allegheny County Department of Human Services
Terri Laver, Allegheny County Department of Human Services

Terri Laver welcomed everyone to the meeting and asked for introductions. Terri explained the purpose of the meeting was to review the process for the ranking of renewal projects for HUD 2015, discuss issues or concerns regarding the process and to distribute the performance reports to each evaluator.

The Performance Report and Evaluation scoring was developed by the Continuum of Care Committee. The committee voted on the process and tool earlier this year.

Each evaluator will review all assigned projects utilizing the following criteria:

Utilization of Beds on the Point in Time on January 28, 2015

Utilization of Units on the last Wednesday in January, April, July and October.

85% of the Consumers in Permanent Housing will stay at the end of the APR or exit to Permanent Housing

80% of the exiting Consumers in Transitional Housing will exit to Permanent Housing (Projects exceeding this HUD goal will receive more points.)

75% of the ADULT Consumers will maintain or increase income

20% of the ADULT Consumers will be employed

50% of the ADULT Consumers will receive one or more non-cash benefit

Amount of Underspending of the individual grant

In addition, two other performance measures were added and were scored based upon ACDHS experience with the agency/project. They are: Timeliness and accuracy of billing and Documented return of renewal documents for review. The Evaluation Committee recommended that projects returning their documents on time, with the correct number of copies and with the proper documents, be given 5 points. Those who were late in submitting all of the documents on April 30, 2014 would be given 2.5 points and those not making the proper number of copies, not returning all of the documents or to the proper location would receive 0 points.

New projects will be considered in another process and the committee will be asked at a future date to review new projects once the final re-allocation amount is determined.

The sample form and all of the information was reviewed. The meeting adjourned at 11:10 AM.

Allegheny County Homeless Advisory Board

Continuum of Care Committee

March 4, 2015 10:00 am to 11:15 am
Department of Human Services- Riverview Room
1 Smithfield Pittsburgh, PA

The mission of the Continuum of Care (CoC) committee is to address the complex issues and challenges faced by homeless services providers operating within the Continuum of Care. The CoC committee's goal is to support homeless services providers of Allegheny County, City of Pittsburgh, the City of McKeesport and the Municipality of Penn Hills through the development and implementation of policies and actions that will identify and facilitate best practices and cultivate synergy within the Continuum that results in strong outcomes for homeless programs on the whole as well as the individuals and families experiencing homelessness.

Attendees

Chuck Keenan-ACDHS	Linda Rae Kilderry- SVdP	Andrea Bustos-ACDHS
Stephanie Vituccio-ACDHS	Abigail Horn- ACDHS	Natalie Ryan- CHS
Liz Daniels-Totten - City of PGH	Kate Holko- ACDHS	Judy Eakin- HEARTH
Lisa Trunick -Beth Haven	Sheila Bell- ACDHS	Joe Elliott - ACDHS
Rob Eamigh- ACDHS	Ryan Burger - ACDHS	

Notes

1. Linda Kilderry called the meeting to order.
 - a. Introductions were made and agenda distributed.
2. Linda Kilderry distributed the Ranking of Allegheny County CoC Renewal Projects.
 - a. An explanation was given of the possible bonus points for exceeding HUD defined goals in several sections.
 - b. The committee approved the ranking tool for 2015 CoC application
 - c. The ranking tool will be sent to the Homeless Advisory Board for their review previous to HAB meeting
 - i. The committee would also like the HAB to know more about the role of the CoC Committee including the work on the ranking tool, review process and coordinated entry
3. Joe Elliott asked for the voting and attendance policy for the CoC Committee
 - a. The committee would like to look into the original attendance policy
 - b. Linda Kilderry noted this committee has always been open to all interested parties
 - c. Linda Kilderry and Judy Eakin would like to request specific agency attendance
 - d. It was decided that all agencies outside of ACDHS and only one staff from ACDHS would be allowed to vote

Allegheny County Homeless Advisory Board

4. Suggestions were made for a different process for the Ranking Committee
 - a. Require the HAB to read ten applications and rank them
 - b. Only requiring 10 applications and rankings per person
 - c. Chuck Keenan stated that he prefers a small group to rank all eighty programs
 - d. Due to consistency issue on a process where members read a limited number of applications instead of all applications, it was decided not to move forward on this thought.
5. Linda Kilderry distributed the 2015 HUD New Project Application Scoring Guidelines
 - a. The new project application scoring was approved
6. A stipulation was approved to allow room for changes on ranking of applications based on the NOFA once it is released
 - a. The committee would like to address any changes in the ranking due to new information released in the NOFA in a future meeting
7. Volunteers for the Ranking Committee
 - a. Any volunteers wishing to participate in the ranking and review committees should send their request to Terri Laver or Chuck Keenan
 - b. Liz Daniels-Totten is required to be on the ranking committee
8. Linda Kilderry announced that HUD released a policy brief on coordinated entry. Chuck Keenan gave a brief description
 - a. Kate Holko will attach the email with the committee meeting minutes
9. Ryan Burger presented information on the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI SPDAT)
 - a. Conference calls have been made with Community Human Services Corp. (CHS), Philadelphia's Community Solutions, and West Virginia's State Continuum who are all using the VI SPDAT
 - b. Conference calls have also been made to Buffalo who is not using the VI SPDAT
 - c. Positive reactions have been given about the recommendation of services
 - i. Evidence based practice
 - ii. Suggested intervention
 - d. There are three outcome scores, ranging from 1 to 20, a client given the VI SPDAT can receive
 - i. Not recommended for services
 - ii. Rapid Re-housing
 - iii. Permanent supportive housing
 - e. A Pilot project with the VI SPDAT being used with Coordinated Intake
 - i. Benefits for the pilot project would include:
 1. Tracking scores and finding permanent placement for clients

Allegheny County Homeless Advisory Board

2. Better understanding of the current coordinated intake business process
 3. Data collection to present to the HAB
 - f. Sheila Bell added that using the VI SPDAT would not move household referrals around the programs' bulletin boards during the trial period

10. Questions, suggestions and discussion from the CoC committee on the VI SPDAT
 - a. Judy Eakin has a concern about the questions being asked and collecting accurate information
 - i. Natalie Ryan explained that the questions are asked appropriately to receive a yes or no answer
 - ii. Additional questions can be asked based on observation from the assessor to add points as needed
 - iii. Natalie said she felt face-to-face meetings and phone conversations felt like the same interaction and built the same rapport with clients
 - b. There was a request for VI SPDAT training for all agencies
 - c. Discussion on the limitation of the VI SPDAT with people experiencing domestic violence and unaccompanied youth
 - d. Explanation that rapid re-housing recommendations provided by the VI SPDAT would also relate to the transitional housing at this time
 - e. Linda Kilderry suggested that the tool may be used for street rounds instead of the client calling the Allegheny Link
 - f. Another suggestion was for the VI SPDAT to be used for current transitional housing clients but there was a concern about the questions relating to the client's current circumstances
 - i. The case management VI SPDAT was suggested for this purpose
 - g. Chuck Keenan proposed that it may be possible we need to "close the side doors" for coordinated intake once utilizing the VI SPDAT
 - i. It would be possible for each agency to complete their initial assessment and then send the client through coordinated intake
 - ii. Or use the same tool across the county so all agencies are doing the same process. This would require training agency staff on the tool being used.
 - h. The VI SPDAT could allow for an actual scope of coordinated intake and the magnitude of the waiting lists
 - i. Then looking at all services provided and needed and consider reallocation to adjust services to need
 - ii. Utilizing the VI SPDAT and HMIS we could understand the client's history opening doors for support and treatment

Allegheny County Homeless Advisory Board

11. Announcements

- a. Judy Eakin announced that HEARTH will be hosting and presentation from CCIS and navigating the child care system
 - i. She is asking for participants to talk about their suggestions and issues that arise when there are school closures
 - ii. The meeting will take place March 27, 2015 at 10AM
 - iii. Peter Harvey will be sending out an email for registration

12. Next meeting agenda items

- a. Understanding the VI SPDAT
- b. HUD Application updates
 - i. Preparation for the application
 - ii. NOFA

The Next CoC Committee will be April 1st @ 10:00 am in Steelers Rm, Third Floor, Human Services Building.

Continuum of Care Committee

February 4, 2015 10:00 am to 11:15 am
Department of Human Services- Riverview Room
1 Smithfield Pittsburgh, PA

The mission of the Continuum of Care (CoC) committee is to address the complex issues and challenges faced by homeless services providers operating within the Continuum of Care. The CoC committee's goal is to support homeless services providers of Allegheny County, City of Pittsburgh, the City of McKeesport and the Municipality of Penn Hills through the development and implementation of policies and actions that will identify and facilitate best practices and cultivate synergy within the Continuum that results in strong outcomes for homeless programs on the whole as well as the individuals and families experiencing homelessness.

Attending: Sheila Bell
Andrea Bustos
Liz Daniels-Totten
Nancy Dunkis
Judy Eakin
Joe Elliott
Rob Eamigh
Chuck Keenan
Linda Rae Kilderry
Terri Laver
Kelly Russell
Karen Snair
Lisa Trunick

Linda Rae Kilderry called the meeting to order 10:00 am. All were welcomed and introductions made.

Nancy Dunkis and Liz Daniels-Totten updated the committee on the ESG process for this year. ESG will revise their ranking tool for the 2016 process that will be line with the Continuum of Care performance measures including data quality and other standards. Currently the 2014 data standards were just implemented in October 2014. A combination of factors moved the ESG funders to this decision. They are: The amount of new information required in the 2014 standards, collecting of the new data elements and programming of it would not allow for the performance reports to be pulled for the March 2015 process nor would all of the client data be the same since HUD changed data fields. The performance reports are not yet able to be pulled because a full year's worth of data has not been completely collected in the system. Although data was

converted, the data fields in the old standards were not mandatory or in some cases did not exist.

ESG application process will utilize a review committee consisting of members from the Homeless Advisory Board and ESG funders (who are members of the HAB).

Applications will be released February 26 with expected return in March.

The evaluation process will occur after all applications are received.

The Continuum of Care Committee then began a discussion of the tools that will be used for the HUD 2015 Application Process. ACDHS is expecting to receive notification from HUD that the 2015 application process will begin earlier this year since the Grant Inventory Worksheet (GIW) was released on February 2. With the release of the GIW, the lead agency has 2 weeks to review all the grants on GIW and add any projects that will be expiring in 2016. In addition this is the only time that the lead agency can re-allocate funding. It is expected that a small amount of funding will be re-allocated from current providers who are underfunding. In addition, an email will be sent to all transitional scattered site providers notifying them of the opportunity to give up their grant in order to create a new Rapid Re-Housing for Families or a new chronic homeless permanent housing program. (Please note: HUD only allow Rapid Re-Housing for Families to be created under the HUD 2014 Application so it is assumed until the NOFA is released that funds may only be shifted to that type of program or to a Permanent Housing for Chronic Homeless.)

The Committee began a review of the 2014 Renewal Ranking Tool. The ranking will be based off of information from the 2015 Point in Time, the bed counts submitted on the 2014 application including the number of prioritized chronic homeless beds for PH programs and the most recently filed Annual Progress Report (APR) filed with HUD. The version that was officially filed with HUD would be the basis of the information. HMIS generates the APR and the agency reviews and approves their data.

There was a discussion regarding projects who exceeded the establish benchmark. The committee felt that if projects exceeded the performance benchmarks they should be rewarded with additional points. For example: if a project exceeded the 80% of persons exiting to Permanent Housing from Transitional Housing they could receive 6 points instead of 5 points as a maximum. This extra point would apply to the housing, maintaining or exceeding income, employment and non-cash benefits.

The following were the changes that were agreed upon:

1. A short description of three sentences should be added to the ranking tool for evaluators who are not familiar with the program.
2. Utilization- minor changes were made to the description- APR will be added to each of the utilization of units and the reference to 86% will be removed. The scoring will remain the same.

3. Housing Performance-SSO Performance measure will be removed since there are no longer SSO's to be ranked. The PH and TH performance goals will remain with the exception that the HUD performance measure for TH be adopted. TH will be changed from 70% to 80% and PH will increase from 80% to 85%. If a project exceeds the performance measure for housing, the project could receive 6 points instead of 5 points if they are 90% or above.
4. Leaver and Stayer performances for income, employment and non-cash benefits would be combined in the performance benchmarks for 2015. In 2014 these measures were separated between leavers and stayers. (This relates to questions 25, 26 and 36 on the APR.)
5. Additional questions will be added for TH and PH.
 - a. For transitional programs the committee felt that projects need to begin to look at their maximum length of stay. Although under the regulations, consumers can stay up to 24 months, HUD is encouraging projects to reduce the average length of stay for consumers. A question will be added to the ranking and also reported on the application regarding what is the maximum length of stay goal for your transitional housing program. The following is the scoring: 24 months will receive 1 point, 18 months 2 points, 12 months 3 points, 6 months 4 points, 3 months 5 points.
 - b. For Permanent Housing Programs the question will be how many beds were prioritized to chronic homeless in HUD 2014? How many new turnover beds will be prioritize in the HUD 2015? If a project has 100% Chronic Homeless they will receive maximum points. The points for those prioritizing a portion of their chronic homeless beds will be given points accordingly.
6. Missing Data quality fields will continue to be recorded and scored since data quality is a part of the overall CoC application as well as it is reported on each individual application.
7. Priority and rank order for applications will continue to be within specific categories except those who fall below the funding line as established by the Evaluation Committee.

A draft copy of the revised tool will be sent to the committee for review and approval before sending to the HAB.

Since there will be a small amount of funds available for re-allocation this year, a new application ranking tool will also be needed. The committee agreed to review the proposed tool and send comments after it is reviewed. It was agreed that if a transitional housing program gave up their program and then submitted a grant application which met all of the parameters of a permanent housing or rapid rehousing program, this project could receive up to 30 bonus points for that project. This is also with the understanding that all the consumers in the current transitional housing program would not remain in the new Permanent Housing program.

Allegheny County Homeless Advisory Board

For the next meeting of the group will begin to work on the vulnerability index tool.

Next meeting March 4, 2015 at 10:00 AM Riverview Room, One Smithfield Street, Pittsburgh.

Meeting concluded at 11:45 AM.

Attachment D
Ranking Tool for Renewal Projects

Ranking of Allegheny County CoC Renewal Projects

Under 2015 HUD Continuum of Care process, Allegheny County Continuum of Care will be required to rank order all renewal projects. In order to rank all renewals in a fair and impartial manner using performance data as recommended by HUD, a 60-point evaluation system based upon performance and grant funding utilization was developed. The criteria for the ranking came from the program's last submitted APR to HUD, the January 28, 2015 Point in Time and the amount of funding not utilized by the agency during the APR period. For Permanent Housing, additional points may be awarded for serving chronic homeless or willingness to dedicate some portion of their turnover beds to serving chronic homeless. For Transitional housing programs, additional points may be awarded based on projected length of stay for clients. This is the first step in moving toward the goal defined in the HEARTH Act of reducing the length of time an individual or family remains homeless. Overall score could equal 60 points maximum when project receives a perfect score for all performance benchmarks. There is a possibility of adding 4 bonus points to a score to adjust for populations served.

The benchmarks that are established for the evaluation include the following:

Utilization of Beds on the Point in Time on January 28, 2015

Utilization of Units on the last Wednesday in January, April, July and October.

85% of the Consumers in Permanent Housing will stay at the end of the APR or exit to Permanent Housing

80% of the exiting Consumers in Transitional Housing will exit to Permanent Housing (Projects exceeding this HUD goal will receive more points.)

75% of the ADULT Consumers will maintain or increase income

20% of the ADULT Consumers will be employed

50% of the ADULT Consumers will receive one or more non-cash benefit

Please note that scoring may vary and does not directly correspond to the established performance benchmark. For example; 50% having non-cash benefits will only receive 3 points. This is an effort to reward projects whose consumer outcomes are higher than the benchmark. A bonus point will be awarded to agencies whose consumer outcomes are significantly higher than the benchmarks.

Agencies are encouraged to answer the questions on pages 3 and 4 of the Performance Worksheet to provide further information regarding their project. This information will be considered for scoring.

The following scoring system is recommended but can be adjusted based upon the program explanation for the under-utilization or lack of performance on certain benchmarks:

Section 1: Utilization of Beds and Units

Utilization of beds on the night of January 28, 2015(MAX 5 Points)

Percentage	Points
85% and above	5
75% – 85%	4
60% - 74%	3
50% - 59%	2
25% - 49%	1
24% and below	0

Utilization rates of units on the last Wednesday in January, April, July and October (Each section can receive points-MAX 5 Points per quarter or 20 points overall)

Percentage	Points
85% and above	5
75% – 85%	4
60% - 74%	3
50% - 59%	2
25% - 49%	1
24% and below	0

Section 2: Housing Performance

Housing- Permanent and Transitional Housing goal: (MAX 5 Points plus 1 bonus) Projects will answer one of these two questions depending upon whether they are a Permanent Housing or a Transitional Housing program. Projects can receive a bonus point if they are high performing.

- a. Consumers remaining in Permanent Supportive Housing program or exiting to Permanent Housing must meet at least 85% performance measure in order to receive the full 5 points. Projects with 90% or more performance can receive a bonus point or 6 points.

Percentage	Points
90% and above	5 + 1 Bonus
85% - 89%	5
80% – 84%	4
70% - 79%	3
50% - 69%	2
25% - 49%	1
24% and below	0

- a. Consumers in Transitional Housing exiting to Permanent Housing must meet at least 85% performance measure in order to receive the full 5 points. Projects with 90% or more performance can receive a bonus point or 6 points.

Percentage	Points
90% and above	5 + 1 Bonus
85% - 89%	5
80% - 84%	4
70% - 79%	3
50% - 69%	2
25% - 49%	1
24% and below	0

Section 3: Income, Employment and Non Cash Benefits

Income (MAX 5 Points + 1 Bonus) Consumer's income remains the same or increases either by employment or other cash benefits. Projects with 80% or more performance can receive a bonus point or 6 points.

Percentage	Points
80% and above	5 + 1 bonus
75% - 79%	5
60% - 74%	3
50% - 59%	2
25% - 49%	1
24% and below	0

Employment (MAX 5 Points plus 1 Bonus). Projects with 40% or more performance can receive a bonus point or 6 points.

Percentage	Points
40% or more employed	5+1 bonus
20% -39% employed	5
11%-19% employed	4
6% - 10% employed	3
1%-5% employed	1-2
0	0

Non Cash Benefits (MAX 5 Points) Consumer has at least one or more non-cash benefits. Projects with 85% or more performance can receive a bonus point or 6 points.

Percentage	Points
85% or more have non-cash benefits	5+1 Bonus
75% -84% have non-cash benefits	5
65% - 74% have non-cash benefits	4
50% - 64% have non-cash benefits	3
25% - 49% have non-cash benefits	1-2
24% and below have non-cash benefits	0

Section 4: Data Quality

Data Quality is the number of Missing Data Elements on an APR.

Percentage	Points
No data elements missing	5
All missing data elements are under 5% or less of the number of total missing or don't know or refused	4
One or more data elements are over 5% but less than 10%	3
One or more data elements are over 10% but less than 25%	2
One or more data elements are missing or don't know or refused over 25%	0-1

Section 5: Budget

Amount of Funds under-utilized by grant during program year reported in APR.

0-5% return of funds	4-5
6-10% return of funds	2-3
11% and above	0-1

Section 6: Program Specific Measures

There are two program specific measures that each project should answer. A Permanent Housing program should answer the Permanent Housing question only. The Transitional Housing Program should answer the Transitional Housing question only. If a project answers both questions, they should be given zero points since they did not follow instructions. Safe Haven Programs are the exception since they are technically neither PH nor TH; however, they could answer either question but NOT BOTH.

- a. **Permanent Housing:** This question applies only to Permanent Housing programs. **Chronic Homeless Points (Max. 5 points):** Points may be awarded to agencies who dedicated all or a portion of their beds to Chronic Homeless. An existing 100% chronic homeless program can be awarded additional points based upon their level and ability to serve chronic homeless. If a project shifted a portion of their overall bed capacity to serving chronic homeless in HUD 2014 application, they may be awarded a portion of the 5 point bonus. A project in 2015, which is new to serving chronic homeless but did not serve them previously, could be awarded a portion of the chronic homeless points. The chronic homeless question is found on Section 6 of the Performance Benchmark Report. (See scale below)

100% dedicated to serving Chronic Homeless	5
Project committed to serving a portion of their beds to chronic homeless in 2014; will commit more beds in 2015	4
Project committed to serving a portion of their beds to chronic homeless in 2014 and these beds will remain dedicated to chronic homeless	3
Project is just committing to serving chronic homeless in 2015	2
Project is not committing to serving chronic homeless	0

- b. **Transitional Housing:** This question applies only to Transitional Housing projects. One of the priorities of the HEARTH Act is to reduce the length of time an individual or family remains homeless. As a first step, points may be awarded to transitional housing projects based on participants' expected length of stay in the program before they move to permanent housing. Points may be adjusted based on the described plan to achieve the goal.

3 months	5
6 months	4
12 months	3
18 months	2
24 months	0 - 1

The scoring will utilize data to evaluate performance of each program. Projects are encouraged to comment on their outcome data reported to HUD in their APR as a part of the evaluation process. If the project makes no effort to comment, this can be reflected in their overall score.

EXAMPLE:

**Allegheny County Department of Human Services
HUD 2015 Application
APR Performance for 2013-2014**

Agency: XYZ Incorporated
Project Name: Homeward Bound

Total Grant Award	\$ 200,000.00	Program had no exits New Program Program was closed for renovations	
Type of Program	Permanent Supportive Housing		
No. of Units	10		
No. of Beds	20		
Persons Served in APR Adults and Children (APR Q 7)	30		
Total Persons Exiting (APR Q 22a2)	10	Total Persons Staying(APR Q 22b2)	20
Total Adults Exiting (APR Q 22a2)	5	Total Adults Staying(APR Q 22b2)	10

Section 1 to 5 is performance information on the specific program listed above. All data for performance measures were taken from the project's last HUD submitted APR and the 2015 Point in Time. Projects are requested to review the data in sections 1 to 5 and then respond to question in Sections 6 & 7. Once performance score card is completed, the project must submit 15 copies of this document plus one copy of the original application to Allegheny County Department of Human Services by April 30, 2015. Failure to submit the number of copies or information by the due date will result in a reduction of points and low ranking.

Section 1: Utilization

**Utilization
Performance**

BED Utilization on Point in Time January 28 2015	100%
January Utilization of Units- APR Q 11	75%
April Utilization of Units-APR Q 11	75%
July Utilization of Units-APR Q 11	85%
October Utilization of Units-APR Q 11	100%

Section 2: Housing Performance

Permanent Supportive Housing: 85%
Consumers remaining in PSH or exiting to any HUD defined permanent housing option (APR Q 36a Measure 1)

Transitional Housing: 80% of the consumers exiting to any HUD defined permanent housing option (APR Q 36b Measure 1)

Housing Performance/ Number of Consumers	Percentage
28	93.33%
	0%

Section 3: Income, Employment & Non Cash Benefits

Adult consumers who maintain or increase income from all sources (APR Q 25)

20 % of the adult consumers are employed during program APR. (APR Q 36a Measure 3 for PSH or APR Q 36b Measure 3 for TH)

50% or more Adult Consumers who received non-cash benefits during program year APR Q 26 or new performance measure Q 37)

Income, Employment & Non Cash Benefits	% of Consumers
12	80%
2	13%
15	100%

Section 4: Data Quality

Program had no data quality missing values

Program had the following number of data quality items missing from record or don't know answers:

Data Quality Category	No. of Persons Missing Values/Don't Know	%
Social Security Number	10	33%
Ethnicity	1	3%
Race	0	0%
Veteran Status at entry	0	0%

Income at entry	0	0%
Income at exit	0	0%
Non cash at entry	0	0%
Non cash at exit	0	0%
Residence Prior to Entry	0	0%
Developmental Disability (at entry)	0	0%
HIV/AIDS (at entry)	0	0%
Mental Health (at entry)	0	0%
Substance Abuse (at entry)	0	0%
Domestic Violence (at entry)	0	0%
Destination (at exit)	0	0%

Section 5: Budget

Amount of Funds Agency returned at end of grant term/% should be less than 5% of funds

	Percentage
\$ 2,589	1%

Section 6: Program Specific Measure. Program Specific Measures are divided into Permanent Supportive Housing and Transitional Housing Program. Please respond to the specific program that applies to your program.

a. Permanent Supportive Housing Program Chronic Homeless

Does this program currently serve 100% chronic homeless? (If yes, Do not answer the next two questions for Chronic Homeless below.)	YES	NO
	No. of Beds	% of Beds
In the HUD 2014 Application, how many turnover beds were prioritized for chronic homeless beds?	2	10%
In the HUD 2015 Application, does the project plan to prioritize <u>additional turnover beds</u> for chronic homeless beds?	0	0%

If the project is not going to prioritize or dedicate any beds for Chronic Homeless in 2014 or 2015, please explain why this decision was made.

b. Transitional Housing Program is usually for a 24 month period. One of the priorities of the HEARTH Act is to reduce the length of time an individual or family remains homeless. HUD would like all transitional housing programs to reduce the length of time an individual or family may remain in transitional housing.

For the 2015 application, what is your program goal for the average number of months a program participant may remain in the program? (Select one time frame from the list below)

- 3 months
- 6 months
- 9 months
- 12 months
- 15 months
- 18 months
- 24 months

Explain in 750 characters or less how this goal will be achieved and why the time frame was selected.

Section 7: Response to Performance Measures.

Did the program meet all the Performance Measures listed in Sections 1 to 5?

yes no

If no, please address the following questions in a brief and concise answer:

1. Which benchmark(s) did the program not meet?

List Benchmark	Reason for Not Meeting Benchmark
SSN Number for Children missing	At intake the SSN numbers for 10 children were missing. We did not correct the entry assessment once we secured information
Ethnicity	One person refused to give ethnicity.

2. Further information about this program that may assist the evaluator to understand the challenges or the high performance of your program.

Program is able to permanently house severely mentally ill person. Many of the adults are unable to be employed due to severity of their MH diagnosis.

3. What action(s), if any, have been taken to address improving the specific benchmarks that fell below expectations?

The program is working with the adults to volunteer initially in the community. Two persons volunteer at their children's school and two others are volunteering with the Food Bank once a week. The volunteer activities are encouraging connections to the community and building self-esteem and self-sufficiency.

Example:

Scoring for XYZ Incorporated/Homeward Bound

5	BED Utilization on Point in Time January 28, 2015 -85% or more beds filled
4	January Utilization of Units- APR
4	April Utilization of Units-APR
4	July Utilization of Units-APR
5	October Utilization of Units-APR
6	Permanent Housing:85% Consumers remaining in PH 6 months or longer or exiting to PH
n/a	Transitional Housing: 80 % Consumers moving to Permanent Housing
6	Consumers maintain or increase income from all sources
3	20% or more Consumers are employed
6	Consumers are connected to non-cash benefits
1	Data Quality
5	Amount of Funds Agency returned at end of grant term should be less than 5% of funds
3	Permanent Housing - Serving Chronic Homeless
n/a	Transitional Housing - Length of stay
52	Total Score

PLEASE NOTE: Based upon the explanation by the agency regarding their performance, the evaluator could adjust the score. This was not taken into consideration with this project except for not meeting all benchmarks for Chronic Homeless bonus.

Revised 2/10/15

Process Approved by the Continuum of Care Committee March 4, 2015

Renewal Project Application Scoring

Evaluator name: _____

Project name: _____ Agency: _____

Category	Possible Points	Score	Bonus Points	Comments
Utilization Goals				
1. Bed Utilization on Point in Time January 29, 2014 -85% or more beds filled	5			
2. January Unit Utilization of Units-85% or more units filled	5			
3. April Unit Utilization of Units-85% or more units filled	5			
4. July Unit Utilization of Units-85% or more units filled	5			
5. October Unit Utilization of Units-85% or more units filled	5			
Consumer performance goals				
6. Permanent Housing Goal	5 +1 Bonus			
a. Permanent Housing: 85% Consumers remaining in PH 6 months or longer or exiting to PH				
b. Transitional Housing: 80 % Consumers moving to Permanent Housing				
7. 75% or more Consumers maintain or increase income from all sources	5 +1 Bonus			
8. 20% or more Consumers are employed	5 +1 Bonus			
9. 50% or more Consumers are connected to non-cash benefits	5 +1 Bonus			
Project performance goals				
10. Data Quality	5			
11. Amount of Funds Agency returned at end of grant term/% should be less than 10% of funds	5			
12. Program specific goals				
a. PH - Serving Chronic Homeless	5			
b. TH - Length of stay				
TOTAL SCORE				

Notes:

**Allegheny County Department of Human Services
 HUD 2015 Application
 APR Performance for 2013-2014**

Agency: _____
 Project Name: _____

Total Grant Award		Program had no exits	
Type of Program		New Program	
No. of Units		Program was closed for renovations	
No. of Beds			
Persons Served in APR Adults and Children (APR Q 7)			
Total Persons Exiting (APR Q 22a2)		Total Persons Staying (APR Q 22b2)	
Total Adults Exiting (APR Q 22a2)		Total Adults Staying (APR Q 22b2)	

Section 1 to 5 is performance information on the specific program listed above. All data for performance measures were taken from the project's last HUD submitted APR and the 2015 Point in Time. Projects are requested to review the data in sections 1 to 5 and then respond to question in Sections 6 & 7. Once performance score card is completed, **the project must submit 15 copies of the this document plus one copy of the original application** to Allegheny County Department of Human Services by the date indicated in the accompanying instructions. Failure to submit the number of copies or information by the due date will result in a reduction of points and low ranking.

Section 1: Utilization

Utilization Performance

BED Utilization on Point in Time January 28 2015	
January Utilization of Units- APR Q 11	
April Utilization of Units-APR Q 11	
July Utilization of Units-APR Q 11	
October Utilization of Units-APR Q 11	

Section2: Housing Performance

Permanent Supportive Housing Housing: 85% Consumers remaining in PSH or exiting to any HUD-defined permanent housing option (APR Q 36a Measure 1)

Transitional Housing: 80% Consumers of the consumer exiting to any HUD-defined permanent housing option (APR Q 36b Measure 1)

Housing Performance/ Number of Consumers	Percentage
	#DIV/0!
	#DIV/0!

Section 3: Income, Employment & Non Cash Benefits

Adult consumers who maintain or increase income from all sources (APR Q 25)

20 % of the adult consumers are employed during program APR. (APR Q 36a Measure 3 for PSH or APR Q 36b Measure 3 for TH)
50% or more Adult Consumers who received non-cash benefits during program year APR Q 26 or new performance measure Q 37)

Income, Employment & Non Cash Benefits	% ofConsumer
	#DIV/0!
	#DIV/0!
	#DIV/0!

Section 4: Data Quality

Program had no data quality missing values

Program had the following number of data quality items missing from record or don't know answers:

Data Quality Category	No. of Persons Missing	%
Social Security Number		#DIV/0!
Ethnicity		#DIV/0!
Race		#DIV/0!
Veteran Status at entry		#DIV/0!
Income at entry		#DIV/0!
Income at exit		#DIV/0!
Non cash at entry		#DIV/0!
Non cash at exit		#DIV/0!
Residence Prior to Entry		#DIV/0!
Developmental Disability (at entry)		#DIV/0!
HIV/AIDS (at entry)		#DIV/0!
Mental Health (at entry)		#DIV/0!
Substance Abuse (at entry)		#DIV/0!
Domestic Violence (at entry)		#DIV/0!
Destination (at exit)		#DIV/0!

Section 5: Budget

Percentage

Amount of Funds Agency returned at end of grant term/% should be less than 5% of funds

	#DIV/0!
--	---------

Section 6: Program Specific Measure. Program Specific Measures are divided into Permanent Supportive Housing and Transitional Housing Program. Please respond to the specific program that applies specifically to your program.

a. Permanent Supportive Housing Program Chronic Homeless

Does this program currently serve 100% chronic homeless? (If yes, do not answer the next two questions for Chronic Homeless below.)	YES	NO
	No. of Beds	% of Beds
In the HUD 2014 Application, how many turnover beds were prioritized for chronic homeless beds?		#DIV/0!
In the HUD 2015 Application, does the project plan to prioritize additional turnover beds for chronic homeless beds?		#DIV/0!

If the project is not going to prioritize or dedicate any beds for Chronic Homeless in 2014 or 2015, please explain why this decision was made?

b. Transitional Housing Program is usually for a 24 month period. One of the priorities of the HEARTH Act is to reduce the length of time an individual or family remains homeless. HUD would like all transitional housing programs to reduce the length of time an individual or family may remain in transitional housing.

For the 2015 application what is your program goal for the average number of months a program participant may remain in the program? (Select one time frame listed below from the list below)

- | | |
|------------------|------------------|
| 3 months | 15 months |
| 6 months | 18 months |
| 9 months | 24 months |
| 12 months | |

Explain in 750 characters or less how this goal will be achieved and why the time frame was selected.

Attachment E

Ranking Tool for All Reallocation Projects

INSTRUCTIONS: All criteria should be scored on a scale of as detailed in the "Score" column (where 0 is unsatisfactory and 5 is excellent). These individual scores should then be totaled by section. Total possible points are listed for each section.

Evaluator Name:

Applicant Name:

<i>Evaluators: Please Complete Sections in Green</i>		
Section/Criteria	Score	Strengths/Weaknesses
Organizational Experience (15 pts)	(1-5)	
The organization demonstrates past success in working with and providing housing and support services to the target population.		
The organization demonstrates strong experience in meeting HUD's performance goals for maintaining or exiting to permanent housing and maintaining or increasing family income and/or meeting their own goals for families.		
The organization demonstrates strong experience in effectively utilizing federal funds to provide housing and support services as well as leveraging state, local and private sector funds.		
<i>Subtotal Organizational Experience:</i>	0	
PROGRAM 1: SINGLE WOMEN PSH (115 points)		
Target Population (5 pts)	(1-5)	
The organization proposes to serve the target population--single women experiencing homelessness who have a documented disability--and clearly defines any specific sub-populations they intend to serve. The number of beds proposed is appropriate to serve the target population.		
Approach (10 pts)	(1-5)	
The organization presents a strong plan for recruiting, retaining and professionally developing quality staff who are experienced in working with the target population.		
The organization presents a strong strategy for implementing the Single Women PSH program within 3-6 months of signing a contract, including coordinating with outside partners to leverage funds and support.		
<i>Subtotal Approach:</i>	0	
Housing Services (15 pts)	(1-5)	
The organization presents a strong plan for assisting individuals in obtaining and remaining in permanent housing, with thoughtful consideration of how to address needs and barriers.		
The organization demonstrates a strong commitment to following a Housing First model.		
The organization presents a strong plan for assessing the suitability of the facility for habitation by single women (e.g., safety, location, access to community amenities).		
<i>Subtotal Housing Services:</i>	0	
Support Services (15 pts)	(1-5)	
The organization presents a strong plan for who will provide all of the supportive services listed on pg. 12 of the RFP (proposer, partner agency, or non-partner agency)		
The organization presents a strong plan for how families will access all of the supportive services listed on pg. 12 of the RFP (e.g. Onsite, program van, etc.), and how often they will access.		
The supportive services that are included in the proposal are appropriate for the needs of the target population.		
<i>Subtotal Support Services:</i>	0	
Referrals and Outreach (5 pts)	(1-5)	
The organization presents a strong plan for managing referrals through HMIS (e.g., bulletin board, updating assessments, etc.), and has a contingency plan if the PSH program experiences difficulty meeting the requirements to serve exclusively homeless individuals.		
Performance Outcomes (10 pts)	(1-5)	
The organization presents a strong plan for tracking and achieving the HUD performance standards for maintaining or exiting to permanent housing, maintaining or increasing family income, and maintaining or gaining at least one non-cash benefit (e.g. food stamps) during the year		
The organization thoughtfully describes other outcomes it plans to achieve through the program and presents a strong plan for tracking and achieving those outcomes.		
<i>Subtotal Performance Outcomes :</i>	0	
HMIS (5 pts)	(1-5)	
The organization is experienced in inputting data into HMIS and demonstrates a strong plan for inputting quality data in a timely way.		
Budget and Budget Narrative (20 pts)	(1-5)	
The organization proposes a detailed budget and budget narrative that fits within the HUD funding guidelines: \$257,000 for the Single Women PSH		

The organization provides a clear description of Match amount by Type (in-kind or cash), Source (government or private), Contributor and Purpose.		
In addition to the Match, the organization provides a clear plan for leveraging 200% of the total funding amount to support the Single Women PSH		
The organization demonstrates its financial stability.		
<i>Subtotal Budget and Budget Narrative:</i>	0	
SUBTOTAL PROGRAM 1: SINGLE WOMEN PSH	0	
Bonus (15 points) - if the organization meets the criterion below, enter 15 points. If it does not, enter 0.	(0 or 15)	
The organization is surrendering a transitional or safe haven program and applying to provide a PSH Program		
TOTAL PROGRAM 1: SINGLE WOMEN PSH	0	
PROGRAM 2: Combined PSH (115 points)		
Target Population (5 pts)	(1-5)	
The organization proposes to serve the target population--single men and women experiencing homelessness who have a documented disability--and clearly defines any specific sub-populations they intend to serve. The number of beds proposed is appropriate to serve the target population		
Approach (10 pts)	(1-5)	
The organization presents a strong plan for recruiting, retaining and professionally developing quality staff who are experienced in working with the target population.		
The organization presents a strong strategy for implementing the Combined PSH program within 3-6 months of signing a contract, including coordinating with outside partners to leverage funds and support.		
<i>Subtotal Approach:</i>	0	
Housing Services (15 pts)	(1-5)	
The organization presents a strong plan for assisting individuals in obtaining and remaining in permanent housing, with thoughtful consideration of how to address needs and barriers.		
The organization demonstrates a strong commitment to following a Housing First model.		
The organization presents a strong plan for assessing the suitability of the facility for habitation by single men and women (e.g., safety, location, access to community amenities).		
<i>Subtotal Housing Services:</i>	0	
Support Services (15 pts)	(1-5)	
The organization presents a strong plan for who will provide all of the supportive services listed on pg. 12 of the RFP (proposer, partner agency, or non-partner agency)		
The organization presents a strong plan for how families will access all of the supportive services listed on pg. 12 of the RFP (e.g. Onsite, program van, etc.), and how often they will access.		
The supportive services that are included in the proposal are appropriate for the needs of the target population.		
<i>Subtotal Support Services:</i>	0	
Referrals and Outreach (5 pts)	(1-5)	
The organization presents a strong plan for managing referrals through HMIS (e.g., bulletin board, updating assessments, etc.), and has a contingency plan if the PSH program experiences difficulty meeting the requirements to serve exclusively homeless individuals		
Performance Outcomes (10 pts)	(1-5)	
The organization presents a strong plan for tracking and achieving the HUD performance standards for maintaining or exiting to permanent housing, maintaining or increasing family income, and maintaining or gaining at least one non-cash benefit (e.g. food stamps) during the year		
The organization thoughtfully describes other outcomes it plans to achieve through the program and presents a strong plan for tracking and achieving those outcomes.		
<i>Subtotal Performance Outcomes :</i>	0	
HMIS (5 pts)	(1-5)	
The organization is experienced in inputting data into HMIS and demonstrates a strong plan for inputting quality data in a timely way.		
Budget and Budget Narrative (20 pts)	(1-5)	
The organization proposes a detailed budget and budget narrative that fits within the HUD funding guidelines: \$162,000 for the Combined PSH		
The organization provides a clear description of Match amount by Type (in-kind or cash), Source (government or private), Contributor and Purpose.		
In addition to the Match, the organization provides a clear plan for leveraging 200% of the total funding amount to support the Combined PSH		

The organization demonstrates its financial stability.		
<i>Subtotal Budget and Budget Narrative:</i>	0	
SUBTOTAL PROGRAM 2: COMBINED PSH	0	
Bonus (15 points) - if the organization meets the criterion below, enter 15 points. If it does not, enter 0.	(0 or 15)	
The organization is surrendering a transitional or safe haven program and applying to provide a PSH Program		
TOTAL PROGRAM 2: COMBINED PSH (with Bonus)	0	
Please provide overall comments for Program 1: Single Women PSH:		
Please provide overall comments for Program 2: Combined PSH:		

INSTRUCTIONS: All criteria should be scored on a scale of as detailed in the "Score" column (where 0 is unsatisfactory and 5 is excellent). These individual scores should then be totaled by section. Total possible points are listed for each section.

Evaluator Name:

Applicant Name: **Chartier's Center**

Evaluators: Please Complete Sections in Green

Section/Criteria	Score	Strengths/Weaknesses
Organizational Experience (15 pts)	(1-5)	
The organization demonstrates past success in working with and providing housing and support services to homeless individuals or families.		
The organization demonstrates strong experience in meeting HUD's performance goals for RRH Clients outlined on pg. 7 of the RFP. If the organization has not previously operated an RRH Program, they demonstrate strong experience in meeting similar goals set forth by their organization.		
The organization demonstrates strong experience in effectively utilizing federal funds to provide housing and support services as well as leveraging state, local and private sector funds.		
<i>Subtotal Organizational Experience:</i>	0	
SUB-POPULATION: Behavioral Health		
Target Population (5 pts)	(1-5)	
The organization proposes to serve individuals with behavioral health needs and clearly defines any specific sub-populations they intend to serve. The number of beds proposed is appropriate to serve the target population.		
Approach (10 pts)	(1-5)	
The organization presents a strong plan for recruiting, retaining and professionally developing quality staff who are experienced in working with the target population.		
The organization presents a strong strategy for coordinating with outside partners to ensure that the RRH Program is successful.		
<i>Subtotal Approach:</i>	0	
Housing Services (15 pts)	(1-5)	
The organization presents a strong plan for assisting individuals in obtaining and maintaining housing, with thoughtful consideration of how to address needs and barriers.		
The organization presents a strong plan for identifying appropriate scattered site units- units that are suitable for habitation by RRH clients, have reasonable rents and are located within the County.		
The organization presents a strong plan for recruiting and working with landlords and other homeless service providers.		
<i>Subtotal Housing Services:</i>	0	
Support Services (15 pts)	(1-5)	
The organization presents a strong plan for who will provide the supportive services listed on pg. 7 of the RFP (proposer, partner agency, or non-partner agency)		
The organization presents a strong plan for how individuals or families will access all of the supportive services listed on pg. 7 of the RFP (e.g. Onsite, program van, etc.), and how often they will access.		
The supportive services that are included in the proposal are appropriate for the needs of the target population.		
<i>Subtotal Support Services:</i>	0	
Referrals and Outreach (5 pts)	(1-5)	
The organization presents a strong plan for managing referrals through HMIS (e.g., bulletin board, updating assessments, etc.), and has a contingency plan if the RRH Program experiences difficulty meeting the requirements to serve exclusively homeless individuals.		
Performance Outcomes (10 pts)	(1-5)	
The organization presents a strong plan for tracking and achieving the HUD performance standards for maintaining or exiting to permanent housing, maintaining or increasing family income, and maintaining or gaining at least one non-cash benefit (e.g. food stamps) during the year.		
The organization thoughtfully describes other outcomes it plans to achieve through the program and presents a strong plan for tracking and achieving those outcomes.		
<i>Subtotal Performance Outcomes:</i>	0	
HMIS (5 pts)	(1-5)	
The organization is experienced in inputting data into HMIS and demonstrates a strong plan for inputting quality data in a timely way.		
Budget and Budget Narrative (20 pts)	(1-5)	

The organization proposes a detailed budget and budget narrative that justifies cost. The cost per unit is of good value to the County.		
The organization provides a clear description of Match amount by Type (in-kind or cash), Source (government or private), Contributor and Purpose.		
In addition to the Match, the organization provides a clear plan for leveraging 200% of the total funding amount to support the RRH Program.		
The organization demonstrates its financial stability.		
<i>Subtotal Budget and Budget Narrative:</i>	0	
Bonus (15 points) - if the organization meets the criterion below, enter 15 points. If it does not, enter 0.	(0 or 15)	
The organization is surrendering a transitional and applying to provide a RRH Program.	0	
TOTAL	0	
Please provide overall comments:		

Attachment F
Ranking Tool for All New Projects

INSTRUCTIONS: All criteria should be scored on a scale of as detailed in the "Score" column (where 1 is unsatisfactory and 5 is excellent). These individual scores should then be totaled by section. Total possible points are listed for each section.

Evaluator Name:

Applicant Name:

<i>Evaluators: Please Complete Sections in Green</i>		
Section/Criteria	Score	Strengths/Weaknesses
Organizational Experience (15 pts)	(1-5)	
The organization demonstrates past success in working with and providing housing and support services to homeless individuals or families.		
The organization demonstrates strong experience in meeting HUD's performance goals for RRH Clients outlined on pg. 7 of the RFP. If the organization has not previously operated an RRH Program, they demonstrate strong experience in meeting similar goals set forth by their organization.		
The organization demonstrates strong experience in effectively utilizing federal funds to provide housing and support services as well as leveraging state, local and private sector funds.		
<i>Subtotal Organizational Experience:</i>	0	
SUB-POPULATION: Homeless Families		
Target Population (5 pts)	(1-5)	
The organization proposes to serve families experiencing homelessness and clearly defines any specific sub-populations they intend to serve. The number of beds proposed is appropriate to serve the target population.		
Approach (10 pts)	(1-5)	
The organization presents a strong plan for recruiting, retaining and professionally developing quality staff who are experienced in working with the target population.		
The organization presents a strong strategy for coordinating with outside partners to ensure that the RRH Program is successful.		
<i>Subtotal Approach:</i>	0	
Housing Services (15 pts)	(1-5)	
The organization presents a strong plan for assisting individuals in obtaining and maintaining housing, with thoughtful consideration of how to address needs and barriers.		
The organization presents a strong plan for identifying appropriate scattered site units- units that are suitable for habitation by RRH clients, have reasonable rents and are located within the County.		
The organization presents a strong plan for recruiting and working with landlords and other homeless service providers.		
<i>Subtotal Housing Services:</i>	0	
Support Services (15 pts)	(1-5)	
The organization presents a strong plan for who will provide the supportive services listed on pg. 6-7 of the RFP (proposer, partner agency, or non-partner agency)		
The organization presents a strong plan for how individuals or families will access all of the supportive services listed on pg. 6-7 of the RFP (e.g. Onsite, program van, etc.), and how often they will access.		
The supportive services that are included in the proposal are appropriate for the needs of the target population.		
<i>Subtotal Support Services:</i>	0	
Referrals and Outreach (5 pts)	(1-5)	
The organization presents a strong plan for managing referrals through HMIS (e.g., bulletin board, updating assessments, etc.), and has a contingency plan if the RRH Program experiences difficulty meeting the requirements to serve exclusively homeless individuals.		
Performance Outcomes (10 pts)	(1-5)	
The organization presents a strong plan for tracking and achieving the HUD performance standards for maintaining or exiting to permanent housing, maintaining or increasing family income, and maintaining or gaining of at least one non-cash benefit (e.g. food stamps) during the year.		
The organization thoughtfully describes other outcomes it plans to achieve through the program and presents a strong plan for tracking and achieving those outcomes.		
<i>Subtotal Performance Outcomes:</i>	0	
HMIS (5 pts)	(1-5)	
The organization is experienced in inputting data into HMIS and demonstrates a strong plan for inputting quality data in a timely way.		
Compliance with Applicable Laws and Regulations (5 pts)	(1-5)	
The organization has thoughtfully addressed their plan and commitment to comply with the laws and regulations listed on page 8 of the RFP.		
Budget and Budget Narrative (20 pts)	(1-5)	
The organization proposes a detailed budget and budget narrative that justifies cost. The cost per unit is of good value to the County.		
The organization provides a clear description of Match amount by type (in-kind or cash), Source (government or private), Contributor and Purpose.		
In addition to the Match, the organization provides a clear plan for leveraging 200% of the total funding amount to support the RRH Program.		
<i>Subtotal Budget and Budget Narrative:</i>	0	
TOTAL: Homeless Families	0	

SUB-POPULATION: Unaccompanied Youth		
Target Population (5 pts)	(1-5)	
The organization proposes to serve unaccompanied youth and clearly defines any specific sub-populations they intend to serve. The number of beds proposed is appropriate to serve the target population.	5	
Approach (10 pts)	(1-5)	
The organization presents a strong plan for recruiting, retaining and professionally developing quality staff who are experienced in working with the target population.		
The organization presents a strong strategy for coordinating with outside partners to ensure that the RRH Program is successful.		
<i>Subtotal Approach:</i>	0	
Housing Services (15 pts)	(1-5)	
The organization presents a strong plan for assisting individuals in obtaining and maintaining housing, with thoughtful consideration of how to address needs and barriers.		
The organization presents a strong plan for identifying appropriate scattered site units- units that are suitable for habitation by RRH clients, have reasonable rents and are located within the		
The organization presents a strong plan for recruiting and working with landlords and other homeless service providers.		
<i>Subtotal Housing Services:</i>	0	
Support Services (15 pts)	(1-5)	
The organization presents a strong plan for who will provide the supportive services listed on pg. 6-7 of the RFP (proposer, partner agency, or non-partner agency)		
The organization presents a strong plan for how individuals or families will access all of the supportive services listed on pg. 6-7 of the RFP (e.g. Onsite, program van, etc.), and how often		
The supportive services that are included in the proposal are appropriate for the needs of the target population.		
<i>Subtotal Support Services:</i>	0	
Referrals and Outreach (5 pts)	(1-5)	
The organization presents a strong plan for managing referrals through HMIS (e.g., bulletin board, updating assessments, etc.), and has a contingency plan if the RRH Program		
Performance Outcomes (10 pts)	(1-5)	
The organization presents a strong plan for tracking and achieving the HUD performance standards for maintaining or exiting to permanent housing, maintaining or increasing family		
The organization thoughtfully describes other outcomes it plans to achieve through the program and presents a strong plan for tracking and achieving those outcomes.		
<i>Subtotal Performance Outcomes :</i>	0	
HMIS (5 pts)	(1-5)	
The organization is experienced in inputting data into HMIS and demonstrates a strong plan for inputting quality data in a timely way.		
Compliance with Applicable Laws and Regulations (5 pts)	(1-5)	
The organization has thoughtfully addressed their plan and commitment to comply with the laws and regulations listed on page 8 of the RFP.		Simply site the law.
Budget and Budget Narrative (20 pts)	(1-5)	
The organization proposes a detailed budget and budget narrative that justifies cost. The cost per unit is of good value to the County.		
The organization provides a clear description of Match amount by Type (in-kind or cash), Source (government or private), Contributor and Purpose.		
In addition to the Match, the organization provides a clear plan for leveraging 200% of the total funding amount to support the RRH Program.		
<i>Subtotal Budget and Budget Narrative:</i>	0	
TOTAL: Unaccompanied Youth	5	
Please provide overall comments:		

INSTRUCTIONS: All criteria should be scored on a scale of as detailed in the "Score" column (where 1 is unsatisfactory and 5 is excellent). These individual scores should then be totaled by section. Total possible points are listed for each section.

Evaluator Name:

Applicant Name:

<i>Evaluators: Please Complete Sections in Green</i>		
Section/Criteria	Score	Strengths/Weaknesses
Organizational Experience (15 pts)	(1-5)	
The organization demonstrates past success in working with and providing housing and support services to homeless individuals or families.		
The organization demonstrates strong experience in meeting HUD's performance goals for RRH Clients outlined on pg. 7 of the RFP. If the organization has not previously operated an RRH Program, they demonstrate strong experience in meeting similar goals set forth by their organization.		
The organization demonstrates strong experience in effectively utilizing federal funds to provide housing and support services as well as leveraging state, local and private sector funds.		
<i>Subtotal Organizational Experience:</i>	0	
Target Population (5 pts)	(1-5)	
The organization proposes to serve families experiencing homelessness and clearly defines any specific sub-populations they intend to serve. The number of beds proposed is appropriate to serve the target population.		
Approach (10 pts)	(1-5)	
The organization presents a strong plan for recruiting, retaining and professionally developing quality staff who are experienced in working with the target population.		
The organization presents a strong strategy for coordinating with outside partners to ensure that the RRH Program is successful.		
<i>Subtotal Approach:</i>	0	
Housing Services (15 pts)	(1-5)	
The organization presents a strong plan for assisting individuals in obtaining and maintaining housing, with thoughtful consideration of how to address needs and barriers.		
The organization presents a strong plan for identifying appropriate scattered site units- units that are suitable for habitation by RRH clients, have reasonable rents and are located within the County.		
The organization presents a strong plan for recruiting and working with landlords and other homeless service providers.		
<i>Subtotal Housing Services:</i>	0	
Support Services (15 pts)	(1-5)	
The organization presents a strong plan for who will provide the supportive services listed on pg. 6-7 of the RFP (proposer, partner agency, or non-partner agency)		
The organization presents a strong plan for how individuals or families will access all of the supportive services listed on pg. 6-7 of the RFP (e.g. Onsite, program van, etc.), and how often they will access.		
The supportive services that are included in the proposal are appropriate for the needs of the target population.		
<i>Subtotal Support Services:</i>	0	
Referrals and Outreach (5 pts)	(1-5)	
The organization presents a strong plan for managing referrals through HMIS (e.g., bulletin board, updating assessments, etc.), and has a contingency plan if the RRH Program experiences difficulty meeting the requirements to serve exclusively homeless individuals.		
Performance Outcomes (10 pts)	(1-5)	
The organization presents a strong plan for tracking and achieving the HUD performance standards for maintaining or exiting to permanent housing, maintaining or increasing family income, and maintaining or gaining at least one non-cash benefit (e.g. food stamps) during the year.		
The organization thoughtfully describes other outcomes it plans to achieve through the program and presents a strong plan for tracking and achieving those outcomes.		
<i>Subtotal Performance Outcomes:</i>	0	
HMIS (5 pts)	(1-5)	
The organization is experienced in inputting data into HMIS and demonstrates a strong plan for inputting quality data in a timely way.		
Compliance with Applicable Laws and Regulations (5 pts)	(1-5)	
The organization has thoughtfully addressed their plan and commitment to comply with the laws and regulations listed on page 8 of the RFP.		

Budget and Budget Narrative (20 pts)	(1-5)	
The organization proposes a detailed budget and budget narrative that justifies cost. The cost per unit is of good value to the County.		
The organization provides a clear description of Match amount by Type (in-kind or cash), Source (government or private), Contributor and Purpose.		
In addition to the Match, the organization provides a clear plan for leveraging 200% of the total funding amount to support the RRH Program.		
<i>Subtotal Budget and Budget Narrative:</i>	0	
Total	0	
Please provide overall comments:		

Screenshot of Allegheny County Department of Human Services (Collaborative Applicant for PA-600) website, showing links for:

- PA-600 Project priority listing/ranking (Project Listing for the PA-600 Pittsburgh McKeesport, Penn Hills Allegheny County CoC)
- PA-600 CoC Rating and Review Procedure (Process for determining the ranking for the Project Listing for PA-600 CoC)
- PA-600 2015 CoC Consolidated Application: Public Posting (DRAFT PA 600 HUD 2015 Continuum of Care Application)

Website: <http://www.alleghenycounty.us/Human-Services/Programs-Services/Basic-Needs/Housing-Administrative-Information.aspx>

The screenshot shows a web browser window displaying the Allegheny County Department of Human Services website. The browser's address bar shows the URL: <http://www.alleghenycounty.us/Human-Services/Programs-Services/Basic-Needs/Housing-Administrative-Information.aspx>. The website features a navigation menu with categories like LIVE, WORK, EXPLORE, GOVERNMENT, NEWS AND EVENTS, and ABOUT. A large banner image of a diverse group of people is at the top, with the text "HOUSING ADMINISTRATIVE INFORMATION" overlaid. Below the banner is a search bar and a "HOW DO I..." button. The main content area is titled "Housing Administrative Information" and includes a breadcrumb trail: Government > Health and Human Services > Human Services > Programs and Services > Basic Needs > Housing Administrative Information. The page is organized into sections: "Plans" (Housing and Homeless Services Strategic Plan 2015-18, Ten-Year Plan to End Homelessness - Ending Homelessness Now: Creating New Partnership, July 2005), "Reports" (HUD/HAP Project Listing for the PA-600 Pittsburgh McKeesport, Penn Hills Allegheny County CoC, DRAFT PA 600 HUD 2015 Continuum of Care Application, HUD/HAP Contracted Providers Directory, Continuum of Care Homeless Services Fact Sheet), and "Point-in-Time (PIT) Surveys" (Allegheny County Point in Time Summary - Street to Permanent Housing). A sidebar on the right lists "HOMELESS SERVICES" including Housing Administrative Information, Landlord Resources, and Severe Weather Emergency Shelter. Social media icons for Facebook, Twitter, LinkedIn, and Email are visible on the right side of the page.

PA 600: Re Allocation Process for HUD 2015 NOFA

Two re-allocation processes were undertaken for the HUD 2015 NOFA application. The Homeless Advisory Board has placed a priority on re-allocating funds for Permanent Supportive Housing projects who serve chronic homeless and from Transitional Housing to Rapid Re-Housing projects. The board recognizes the importance of increasing the supply of these units in our community. The descriptions below provide the details and steps taken to re-allocate the funding in a fair and equitable manner.

Permanent Supportive Housing Process

In May 2015, two Safe Haven projects came forward with the desire to convert their projects to Permanent Supportive Housing. The lead agency, Allegheny County Department of Human Services (ACDHS) consulted with the HUD Field Office on the requirements for this to occur. After discussion with the field office and the Homeless Advisory Board, the ACDHS issued a formal process to re-allocate the funding for the Safe Haven Projects. One project was completely re-allocated while the second re-allocated a portion of the funding. The following are the steps taken in this process

New Permanent Supportive Housing Project proposals received	7/31/2015
New PSH Projects reviewed by Evaluation Committee Review projects	8/3-13/15
Evaluation Committee Meeting to review all PSH projects received and reviewed	8/28/2015
Letters sent to all proposers on decisions.	9/3/2015

Transitional Housing Reallocation Process

In 2014, the Homeless Advisory Board convened a work group to study Rapid Re-housing and how it could best be expanded in the continuum. One recommendation from this group was to identify Transitional Housing projects that could be converted to Rapid Re-housing where feasible. At the July 27, 2015 meeting of the Homeless Advisory Board (HAB), members reviewed the number of Transitional Housing projects and the scope of their work within the Continuum of Care. The board felt the continuum could benefit by converting several transitional housing program to rapid re-housing. The HAB identified nine transitional housing programs with scattered site units as the first group to reallocate to RRH.

As a result of this request, all nine projects surrendered their programs for re-allocation. The designated lead for PA 600, Allegheny County Department of Human Services, then began the formal process of

securing proposals, evaluating and selecting applications for the HUD 2015 process. The proposal was advertised in major newspapers, was distributed to the DHS vendor list (which includes non-CoC funded organizations), and on the DHS website. The following is a breakdown of the timeline and process utilized for the reallocation process:

New Rapid Re Housing Re allocation project RFP published	8/12/2015
New RRH proposals received	8/28/2015
Evaluation Committee Review of RRH proposals received	8/31-9/8/ 2015
Evaluation Committee Meeting to review all RRH projects received and reviewed	9/11/2015
Negotiations with Mercy, & YWCA	9/17/2015
Negotiations with Goodwill	9/22/2015
Letters sent to all proposers on decisions for RRH projects.	10/5/2015

Summary

Both the Permanent Supportive Housing and the Rapid Re-Housing Projects had an established process to request, evaluate and recommend specific projects. This was done through a formal Request for Proposals process that endeavored to find the most qualified applicant(s) to administer the new Permanent Supportive and Rapid Re-Housing projects. Letters were distributed to each applicant with their outcome in this process. Final approval for the overall ranking for the entire CoC application was approved on 10-27-15 by the Homeless Advisory Board. This approval included the ranking of all new projects to be incorporated into one priority/ranking chart for the purposes of submitting it to HUD for the 2015 application.

ALLEGHENY COUNTY, PENNSYLVANIA CONTINUUM OF CARE (CoC)

GOVERNANCE CHARTER

Purpose

The U.S. Department of **Housing and Urban Development (HUD)** charges communities that receive funds under the Homeless Continuum of Care Program of the **Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act)** with specific responsibilities. This document summarizes the Responsibilities and Authorities for Operation and Governance of the **Allegheny County Continuum of Care (CoC)** under the HUD HEARTH Act.

The purpose of this Charter is to:

- Outline the responsibilities and membership of the CoC;
- Establish the responsibilities and membership of the CoC's Homeless Advisory Board (HAB) to act on behalf of the CoC;
- Establish the duties and responsibilities of the CoC's Infrastructure Organization (IO), the Allegheny County Department of Human Services (DHS); and
- Establish the code of conduct, conflict of interest, Homeless Management Information System (HMIS) Governance Charter, and Charter Update Rules for the CoC.

Key Stakeholders and Terminology

Allegheny County Continuum of Care (CoC) – The CoC is the county's community-based homeless assistance program planning network. It is composed of representatives from organizations such as nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons to the extent these groups are represented within the geographic area and are available to participate. [Hearth Act §578.5(a)]

While the CoC's work will focus, at a minimum, on those services funded through HUD's Continuum of Care and Emergency Solutions Grant (ESG) programs, its work is intended to be generally inclusive of all housing and services for people experiencing homelessness or at risk of becoming homeless, regardless of the funding source associated with the services.

The Continuum of Care program – This program represent one of HUD's funding streams. It supports transitional housing, permanent supportive housing for disabled persons, permanent housing, supportive services, and the HMIS.

Homeless Advisory Board (HAB) - The HAB is the working board that acts on the behalf of the Allegheny County CoC. It is comprised of representatives of relevant organizations and projects serving homeless subpopulations, at least one homeless or formerly homeless individual, and other stakeholders and local funders of the CoC. [Hearth Act §578.5(b)]

Infrastructure Organization (IO) – The Allegheny County DHS serves as the IO. The HAB has delegated to the IO the day-to-day and operational responsibilities that fulfill the core duties of the CoC. These, in part, include acting as the CoC’s Collaborative Applicant, providing overall financial management, developing and maintaining the HMIS, developing and running a centralized assessment and coordinated intake system, monitoring performance, providing data and reports, and staffing HAB meetings and initiatives.

Collaborative Applicant – The Collaborative Applicant collects and combines the required application information from all projects within the CoC and also applies for planning funds on behalf of the CoC. The HAB on behalf of the CoC has designated the Allegheny County DHS to serve as the CoC’s Collaborative Applicant. [Hearth Act §578.9(a3)]

Allegheny County Continuum of Care (CoC)

Membership: The Allegheny County CoC is the collective membership body of representative stakeholders engaged in ending and preventing homelessness in Allegheny County. It meets bi-monthly. Any individual interested in contributing to and productively shaping the delivery of housing or homeless services who annually attends at least one recognized meeting of the CoC (which includes CoC meetings or HAB committee meetings) and provides basic contact information will be recognized as a general member of the CoC.

Responsibilities: As outlined in the Hearth Act CoC Interim Final Rule [§578.7], the broad responsibilities of the CoC include (1) operating the CoC, (2) designating an HMIS for the CoC, and (3) planning for the CoC. As a large membership body comprised of numerous stakeholders throughout the county, the CoC has delegated these responsibilities and decision-making authority to the HAB.

Homeless Advisory Board (HAB)

Membership: To ensure that the HAB can operate as an effective decision-making body, the HAB membership will have 15 - 21 individuals representing the sectors and/or stakeholder organizations listed below. Individuals on the HAB may represent multiple sectors or stakeholders:

- Affordable Housing Developer or Landlord
- Allegheny County Homeless Provider(s) (including faith-based organizations) representing diverse subpopulations¹ and program types
- Allegheny County
 - County Executive’s Office
 - Department of Human Services
 - Department of Economic Development, Emergency Solutions Grant (ESG)

¹ Examples of subpopulations that may be represented include: persons with substance use disorders; persons with HIV/AIDS; veterans; the chronically homeless; families with children; unaccompanied youth; the seriously mentally ill; and victims of domestic violence, dating violence, sexual assault, and stalking.

- Behavioral Health Provider(s)
- City of Pittsburgh
 - ESG
 - Mayor's Office
- City of McKeesport
- Municipality of Penn Hills
- Consumer(s) of Homeless Services (Present or Former)
- Education
- Faith-based Organization(s)
- Health/Hospital
- Housing Authority (e.g., City of Pittsburgh, City of McKeesport, Allegheny County)
- Local funders, including the foundation community
- Training and Employment
- Chamber of Commerce and other members of the business community

Responsibilities: Ultimately, the HAB is responsible for all duties assigned to the CoC in the Hearth Act CoC Interim Final Rule (§578.7). These responsibilities include:

- *Operating the CoC:*
 - Designate an Infrastructure Organization (IO) that is responsible for the day-to-day operations of the CoC.
 - Convene regular CoC Meetings.
 - Review, vote on amendments, and approve a Governance Charter annually.
 - Establish and oversee collaborative process for the development and submission of CoC applications. This includes appointing a Collaborative Applicant.
 - Establish and evaluate performance targets and outcomes for recipients within the CoC program. The HAB CoC Program Committee sets performance and ranking targets (voted upon by the full HAB) and the IO monitors and reports upon them.
 - Ensure the operation of a coordinated intake and assessment system.
 - Ensure appropriate policies and procedures are in place that will result in an efficient, high quality operation in compliance with HUD standards. The HAB reviews and approves policies and procedures, drafted by the IO, for items that fall under the HAB's responsibilities for operating and planning the CoC.
- *Designating and operating an HMIS:*
 - Designate an HMIS Lead that has the capacity to run a system that collects and reports meaningful data.
 - Please see Appendix B, HMIS Governance Charter, for the complete list of HAB responsibilities related to HMIS.
- *CoC Planning:*
 - Coordinate the implementation of a system within Allegheny County that meets the needs of homeless individuals and families, including (a) outreach, engagement, and assessment; (b) shelter, housing, and supportive services; and (c) prevention strategies.
 - Review and approve any new CoC projects that become possible through strategic re-allocation of HUD funding or when new monies become available from HUD or other federal partners.

- Ensure the completion of an annual Point-in-Time count, an annual gaps analysis of the homeless needs and services available in the county, and the Consolidated Plans.
- Include ESG program recipients as part of the CoC planning and evaluation process.

HAB Logistics and By-Laws: Please see Appendix A, HAB By-Laws, which outline HAB terms of appointment and service, use of proxy, voting parameters, CoC meeting participation, meeting logistics including scheduling of meetings and cancellations, board officer elections and responsibilities, and committee structure.

Infrastructure Organization (IO)

History: For the last 20 years, the day-to-day and operational responsibilities to fulfill the core duties of the CoC have been delegated by the HAB to an IO, the Allegheny County DHS. DHS also acts as the Collaborative Applicant on behalf of the CoC. DHS is well-positioned to play this role given its stewardship and access to county-wide funding for many of the services that supplement and complement HUD’s funding (e.g. mental health; drug and alcohol; child welfare; TANF; etc.). It subsidizes the staffing needed to support the CoC and the HAB. It also maintains internal analytical capacity through its office of Data Analysis, Research and Evaluation (DARE) and provides access to the county’s nationally acclaimed data warehouse that allows cross-system analysis of the individuals and families accessing the CoC.

DHS was created in 1997 to consolidate the provision of human services across Allegheny County. It is the largest department within Allegheny County government. In addition to its Executive Office, DHS encompasses five program offices (Behavioral Health; Children, Youth and Families; Community Services; Intellectual Disability; and the Area Agency on Aging) and three support offices (Administrative and Information Management Services; Community Relations; and Data Analysis, Research and Evaluation). Annually DHS serves more than 210,000 individuals (approximately one in six County residents) through an array of 1,700 distinct services.

DHS provides a wide range of services, including: services for older adults; mental health and drug and alcohol services (includes 24-hour crisis counseling); child protective services; at-risk child development and education; hunger services; homeless services; non-emergency medical transportation; job training and placement for public assistance recipients and older adults; and services for individuals with intellectual and/or developmental disabilities. As primary contractor to the Commonwealth of Pennsylvania for the Medicaid Behavioral Health HealthChoices program, DHS is able to work closely with the behavioral health managed care organization and others to promote prevention and holistic health. DHS and its partners are also able to leverage behavioral health funds in order to maximize the benefit of HUD and other funding streams.

DHS provides services to eligible individuals without regard to race, color, sex, gender identity or expression, sexual orientation, age, religion, national origin, political affiliation, disability, familial status, military service, or religious, community or social affiliations.

Responsibilities: DHS serves as the Allegheny County CoC’s IO. As the IO, DHS will fulfill the following responsibilities:

1. Administration:

- Serve as the Collaborative Applicant for the Allegheny County CoC program, including:
 - collecting and combining the required application information from all sub-recipients in the CoC,
 - receiving input from the HAB CoC Program Committee on the draft application,

- working with the HAB which will advise, review drafts, and approve the final submission of the CoC program application,
- submitting the annual application on behalf of the HAB to HUD for the CoC program, and
- applying, with guidance and approval of the HAB, for new projects through strategic re-allocation of funding or when new monies become available from HUD or other federal partners.
- Submit Annual Performance Reports (APRs) to HUD for individual projects within the CoC;
- Submit an Annual Homeless Assessment Report (AHAR) to HUD on behalf of the CoC;
- Manage and maintain over 80 homeless/housing provider contracts for CoC program operations;
- Mediate disputes between program participants and homeless service providers in the CoC;
- Maintain staff to fulfill all IO responsibilities;
- Develop written standards and procedures for service providers in the CoC, as well as the IO, including prioritization for permanent supportive housing, transitional, and rapid re-housing assistance and how much program participants will be expected to pay towards the rent in such programs, etc.;
- Draft written policies and procedures that are related to the HAB's responsibilities for planning for the CoC and present them to the HAB for their review and approval;
- Staff all CoC meetings, events and HAB committees; arrange scheduling and other logistics as necessary, and;
- Perform any other day-to-day duties necessary to support the HAB in overseeing the CoC.

2. Planning:

- Conduct an annual gap analysis of needs and services available to the homeless population in Allegheny County;
- Assist in the allocation of ESG funding in Allegheny County;
- With the CoC Committee, develop performance measurements to ensure that programs are meeting the needs of homeless persons in the CoC;
- Taking direction from the HAB, ensure implementation of the CoC's annual planned goals and priorities.

3. Data collection, monitoring and reporting:

- Serve as the HMIS Lead for Allegheny County CoC, including:
 - developing Data Quality Standards, a Privacy Plan, and a Security Plan, and an HMIS Governance Charter (see Appendix B),
 - designing the HMIS, ensuring the HMIS is administered in compliance with requirements prescribed by HUD,
 - training HMIS participating organizations on the HMIS,
 - ensuring consistent participation of recipients and sub-recipients in the HMIS,
 - monitoring HMIS participating organizations to ensure that they are complying with adopted policies and procedures (including data quality, security and privacy),
 - producing an APR and other reports using data out of HMIS,
 - compiling a Housing Inventory Chart (HIC),
 - adding additional fiscal resources to develop HMIS and integrate it into the larger human services information system infrastructure; and
 - administering HMIS grant funds from HUD.
- With input from the CoC Program Committee, conduct an annual Point-in-Time count per HUD's specifications;
- Monitor recipient and sub-recipient compliance with HUD regulations;

- Monitor recipient and sub-recipient performance and bring trends that highlight areas of concern before the HAB;
- Work with the HAB to take action against poor performers;
- Evaluate outcomes of projects funded under the ESG program and CoC programs, and report to HUD;
- Produce and submit reports as needed for different funding streams within the CoC; and
- Provide information to local partners who are required to submit a Consolidated Plan to HUD annually.

4. Systems Coordination:

- Serve as the Operator for the CoC's Centralized Assessment and Coordinated Intake System, including:
 - answering incoming calls, e-mails, or walk-ins from persons experiencing homelessness or at-risk of homelessness in the CoC;
 - making referrals to programs through the HMIS for individuals and families experiencing homelessness to CoC providers and programs;
 - diverting individuals and families from the homeless system who are not homeless;
 - counseling individuals and families on other services available through DHS (e.g. services for mental health concerns, disabilities, early childhood, aging, etc.) as well as services and supports in the community at large;
 - ensuring fair and equal access to the Allegheny County homeless system,
 - using a standardized assessment tool to triage those most at-risk of homelessness and to prioritize those with the most need for services;
 - developing a specific policy to guide the operation of the centralized or coordinated assessment system on how its system will address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim service providers;
 - providing regular updates to the HAB about the status of the system;
 - ensuring that this system complies with requirements established by HUD; and
 - contributing additional fiscal resources to operate coordinated intake and integrate it into the larger human services business practice and information system infrastructure. Facilitate cross-DHS program area collaborations (e.g. drug and alcohol, mental health, child welfare, aging, etc.) to strengthen CoC outcomes;
- Develop community partnerships with funders and organizations that serve sub-populations such as (but not limited to) veterans, unaccompanied youth, people with mental illness and/or substance abuse disorders, and affordable housing to implement county-wide strategies to prevent homelessness, and when it occurs, ensure that it is as brief as possible and likely not to reoccur.

5. Fiscal Oversight:

- Account for and manage all resources received from HUD for the operation of the CoC with oversight of the County Controller to assure that there is no waste, fraud or abuse of funds;
- Allocate additional Allegheny County resources (e.g., block grant funds, Medicaid funds) to complement and supplement the CoC; and
- Work with the HAB to fundraise additional sources of CoC funding.

6. Accountability to the CoC:

- Provide data and information on the operation and performance of the CoC in a timely manner as requested by the HAB; and
- Meet all federal, state, and local deadlines.

EXPECTATIONS AND CODE OF CONDUCT

Board members, committee members, and staff members of the Collaborative Applicant and HMIS Lead must exercise care, diligence and prudence when acting on behalf of the CoC.

The members of the HAB are entrusted with specific responsibilities related to use of public funds invested in addressing a serious community concern—homelessness. Members are expected to observe the highest standards of ethical conduct in the execution of these responsibilities. In the performance of their duties, HAB members are expected to carry out the mandate of the CoC to the best of their ability, and to maintain the highest standards of integrity for actions with other members of the HAB, CoC representatives, service recipients, service providers, and members of the public.

Members of the HAB are expected to conduct themselves with courtesy and respect, without harassment, or physical or verbal abuse.

Personal relationships should not result in special considerations, including bias or favoritism, that influence the performance of their official duties in a manner contrary to the interest of the broader CoC. HAB members are expected to exercise adequate control and supervision over matters for which they are individually responsible.

HAB members must assure that the resources entrusted to them are used for conducting official business only. Members of the HAB must abide by the Conflict of Interest Policies set forth below.

In line with the rules and guidelines of the CoC, members of the HAB have a responsibility to protect the security of any confidential information provided to, or generated by, the activities of the CoC.

The solicitation and acceptance of gifts by an individual who is in a position to participate in a decision making process or gain inside information regarding the activities of the CoC (or by the organization(s) that he or she represents) that would provide a benefit in excess of the minimal value from persons, organizations, or corporations with a vested interest in the outcomes of decisions made by the HAB on behalf of the CoC or its member agencies is strictly prohibited.

Failure to abide by this Code of Conduct may result in an individual's termination of HAB membership.

CONFLICT OF INTEREST

HAB and committee members must abide by the following rules in order to avoid conflicts of interest in compliance with 24 CFR §§ 578.95 (b), (d) and promote public confidence in the integrity of the HAB and its process. Failure to adhere to these rules is grounds for removal from the Board and any of its committees.

- HAB and committee members may not participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefit to:
 - Any organization that they or a member of their immediate family represents or has represented in the previous year; or
 - Any organization from which they or a member of their immediate family derives, or has derived, income or anything of value in the previous year.
- Whenever HAB or committee members or any of their immediate family members have a financial interest or any other personal interest in a matter coming before the HAB or one of its committees, they must:
 - Fully disclose the nature of the interest; and
 - Recuse themselves from discussing, lobbying, or voting on the matter.

HAB and committee members must disclose any actual or potential conflicts of interest regarding any business included in the meeting's agenda at the beginning of each HAB or committee meeting.

Any matter in which the HAB or committee members have an actual or potential conflict of interest will be decided only by a vote of disinterested individuals. The minutes of any meeting at which such a vote is conducted must reflect the disclosure of interested Board and committee members' actual or potential conflicts of interest and their abstention.

ANNUAL CONFLICT OF INTEREST ACKNOWLEDGEMENT FORM

Members of the HAB or of any committee under this charter must sign a conflict of interest form annually, affirming that they have reviewed the conflict of interest policy and disclosing any conflicts of interest that they face or are likely to face in fulfillment of their duties as members. Members will not be permitted to participate until the statement is on file with the Collaborative Applicant.

A conflict of interest exists if:

- The person currently, or within the last one year has been, or has a current agreement to serve in the future as, a Board member, staff member or paid consultant of an organization making a proposal for funding; or
- The person's employer or an organization on whose Board of Directors the person sits now has, or within the last one year has had, a contractual relationship with an organization making a proposal for funding. However, if the person's employer, or the organization on whose Board of Directors the person sits, is a funding entity or organization whose mission includes providing services and/or funding to other services providers, under this definition of "conflict of interest," no conflict exists; or
- Any other circumstance exists which impedes the person's ability to objectively, fairly and impartially review and rank the proposals for funding. For example, the person is currently enrolled in a program that is administered by an organization making a proposal for funding.

- Members of the CoC Program Committee Review Panel will have a conflict of interest if they have also submitted a project application for ranking and must recuse themselves from ranking their own project.

Failure to abide by this Conflict of Interest policy may result in an individual's termination of HAB membership.

UPDATING THIS CHARTER

The HAB will review this Governance Charter on an annual basis and make changes or additions as required by regulation or in order to advance the goals and mission of the HAB. This Governance Charter and every subsequent amendment to it must be approved by a majority of the HAB members. The Executive Committee, in consultation with the IO, will review the Governance Charter annually and recommend to the HAB changes to improve the functioning of the HAB and maintain compliance with federal and state regulations.

Appendix A: Homeless Advisory Board (HAB) By-Laws

Terms of Appointment and Service: Annually, the HAB will invite CoC members to join the Board. Persons wishing to serve on the HAB (or to nominate someone else) will fill out a nomination form that will be collected by the HAB each November. The selection process will involve a review for:

- HAB stakeholder representation needs;
- Conflicts of interest;
- Nominee willingness and ability to meaningfully contribute to CoC mission (e.g., time, staffing, finances, research, etc.);
- Nominee commitment to the CoC as evidenced by attendance at CoC meetings and/or experience in the field; and
- Consideration for diversity.

The HAB Executive Committee will make selections for new members from the annual pool of nominated applicants. These selections will then be voted on by the full HAB at the first HAB meeting in January of each year. Members may serve for two consecutive three-year terms. If a HAB member resigns during his/her term, he/she must notify the HAB Chair and Secretary in writing. HAB members may be asked to be replaced if they fail to meet expectations of the position as determined by the Chair of the HAB. Under normal circumstances, each year, it is anticipated that one third of the board membership will rotate through the nomination and appointment process.

All HAB members will attend bi-monthly CoC meetings. In addition, HAB members are expected to serve on at least one HAB Committee, most of which meet monthly.

Use of Proxy: A HAB member who is unable to attend a given meeting may not designate another person to act as her/his proxy (including the ability to vote on action items).

Voting: Items presented for a vote must be submitted to the chair at least 2 weeks in advance of the next CoC meeting. HAB members must be made aware of action items that will be voted upon in the CoC meeting at least one week prior to the meeting. Only HAB members can vote on motions. Half plus one of the seated members will constitute a quorum for the transaction of business at any meeting. If no quorum is present, votes will be tabled until a quorum can be reached. Two thirds vote is required to pass any motion.

All votes shall be cast in accordance with Robert's Rules of Order, newly revised (1970). No member may vote on any item which presents a real or perceived conflict of interest, as determined by the HAB Member and/or the HAB Chair.

Any action may be taken without a meeting of the HAB when necessitated by an urgent matter that requires approval by the Board in advance of the next scheduled meeting. If a meeting cannot be called, a discussion and vote may be held in the form of a conference call.

CoC Participation in Meetings: All CoC meetings will be open to the public and will be conducted in accordance with the Pennsylvania Sunshine Act. CoC and community members are encouraged to attend CoC meetings and to provide information to the CoC orally or in written form. Fifteen minutes will be designated at the end of every meeting for ad hoc updates and information sharing. Further, any member of the CoC may present an action item to the HAB for consideration or vote, provided that these items are submitted to the HAB Chair or

Vice Chair at least two weeks prior to the scheduled CoC meeting date. Only appointed members of the HAB will be permitted to vote on these items.

Meeting Logistics: CoC Meetings will be held every other month on the last Tuesday of the months of January, March, May, July, September, and November at 10:00 AM, or as otherwise determined by the Board in accordance with HUD requirements, at DHS's offices at 1 Smithfield Street, Pittsburgh PA 15222. Meeting agendas will be created by the HAB Executive Committee with support from the IO and will be distributed to HAB and CoC membership at least one week prior to the scheduled meetings, along with any meeting handouts and materials. Materials will be distributed by email unless a specific member requests fax or postal delivery. The IO staff will maintain records necessary to meet, at minimum, the requirements under the CoC Interim Rule. All meeting minutes and formal documents will be kept on file electronically at the Allegheny County DHS for a period of 5 years.

Meeting Cancellations: If a CoC meeting is cancelled due to weather or other unforeseen circumstances, the Chair will decide if the meeting will be rescheduled for a later date not to exceed 1 month past the original meeting date. If the meeting is not rescheduled, materials and updates will be sent to all HAB and CoC members within 1 week of the cancelled meeting date.

Board Officers: The election of officers will take place at the January meeting of the CoC. HAB members nominate candidates for officer positions within their existing membership and elect officers to a two-year term. Officers can be re-elected by HAB membership for up to two consecutive terms (four years). The three elected officers are the Chair, Vice Chair, and Secretary. These officers serve as part of the Executive Committee [described below]. Duties and responsibilities of the officers are as follows:

- Chair and Vice Chair – set CoC meeting agendas and run CoC meetings
- Secretary – finalize and distribute CoC meeting minutes
- All officers will represent the CoC and HAB at various community meetings and will advocate for the needs of the homeless population in Allegheny County

Committees: The HAB may designate committees to facilitate carrying out its duties. All committees are advisory to the board; they do not have decision-making ability outside of a vote by the full HAB, with the exception of the Executive Committee. Each HAB Committee must have two Co-Chairs, one HAB member and one representing the CoC-at-large (appointed by the HAB Executive Committee). Each Committee will have at least one IO representative and should also strive to have at least one participant who has experienced a housing crisis, either in the past or present. In order to efficiently and effectively carry out tasks, HAB Committees should not exceed 15 members, including co-chairs. Any member of the CoC can serve on a committee. Co-Chairs are responsible for setting the direction and agenda for the Committee in accordance with HAB priorities and ensuring the right membership mix is available for committee work. Each Committee will keep records of attendance and minutes. Each Committee will establish a regularly scheduled date, time and location for meetings.

Proxy Committee Chairs: If a HAB Member would like to name a proxy to serve as a committee chair, the proxy member must represent a similar organization / background as the member and must have an understanding of the issues presented before the committee. The written request for proxy authorization must be provided to the HAB Chair so that it may be entered into the record.

Committee Chair Responsibilities: Committee Co-Chairs attend all CoC meetings and may be asked to provide a report of their Committee's progress at CoC meetings, at the discretion of the HAB Chair. Committee Co-Chairs may request for items to be presented for vote at CoC meetings, following rules for submission of items outlined above. In the event that a specific committee has achieved its specific goals or there is a desire to merge committees, the Chairperson from the committee will place this item on the agenda of the CoC meeting and the HAB will vote on the change in structure.

The following are HAB standing committees; their duties and responsibilities are outlined below.

1. **Executive Committee.** The Executive Committee is the primary planning body for the CoC. It consists of the three HAB officers (Chair, Vice Chair and Secretary), the HAB members who are also Committee Co-Chairs, and an IO representative. The purpose of the Executive Committee is to set CoC meeting agendas and to drive the strategic direction of the HAB and the Allegheny County CoC, based upon data, best practices/evidence-based practices and established priorities.

The Executive Committee has the authority to:

- Represent the HAB as a whole and vote on critical issues when timing required for a decision does not permit scheduling a full board meeting. If this occurs, the decision must be ratified by the full HAB at the next meeting ;
 - With HAB and full CoC input, draft the strategic plan/direction for the CoC and present the plan/direction for vote by the HAB;
 - Annually review the CoC Governance Charter and recommend changes to improve HAB functioning;
 - Appoint Co-Chairs to HAB Committees;
 - Orient new HAB members;
 - In collaboration with IO, ensure that the CoC is operating in compliance with federal and state regulations; and
 - Creates Ad Hoc Committees when needed.
2. **Continuum of Care (CoC) Program Committee.** The CoC Program Committee reviews the annual HUD application requirements and advises the HAB and the IO (which also serves as the HUD Collaborative Applicant) on application submission. It creates an evaluation tool that is used to establish project rankings for funding recommendations within the continuum and annually creates the review panel and evaluation sheet for reviewing ranking projects. The CoC Program Committee assists with the establishment of performance targets by population and project type, reviews concerns raised through monitoring of recipient and sub-recipient performance and outcomes, and makes recommendations to the IO and HAB for addressing poor performers. The CoC Program Committee also convenes a review panel to rank providers for the annual HUD application. Finally, the CoC Program Committee is also responsible for ensuring that the population needs in the community and the types of programs in the application are congruent.
 3. **Communication and Education Committee (formerly Advocacy).** The purpose of the Communication and Education Committee is to develop and distribute messaging about the needs of homeless persons in Allegheny County. Based on the conviction that the organized, strategic, and effective engagement of stakeholders in relevant policies and funding is critical to creating an effective homeless system, this committee also coordinates advocacy efforts at the county, state and federal levels.

4. **Data and Planning Committee.** The purpose of the Data and Planning Committee is to regularly review available data, propose data collection needs and performance metrics to the HAB, and identify trends, gaps and needs. It establishes clear guidelines for data requests to the IO and annually determines the HAB's main data needs for the coming year so the IO can meet those needs in a timely fashion. The data committee also works closely with the CoC Program Committee to provide data interpretation for the annual HUD ranking and submission process. Finally, the Data and Planning Committee assists the IO with planning for and reviewing results of the annual Point-in-Time study.
5. **Homeless Outreach Coordinating Committee (HOCC).** The purpose of the HOCC is to address the complex issues and challenges faced by people experiencing housing crisis living in places not meant for human habitation, which includes being on the streets and under bridges or using the emergency shelter network in Pittsburgh and Allegheny County. Annually, the HOCC assists with implementation of the Point-in-Time study. The committee also ensures that street outreach agencies are notified of any targeted homeless encampments before evictions. They also help to develop strategies to educate and inform law enforcement officials and other stakeholders about the needs of unsheltered population.
6. **Ad Hoc Committees.** In addition to the above standing committees, the HAB Executive Committee may create ad hoc committees to carry out special initiatives that it deems can best be accomplished by a committee of the HAB.
7. **Affiliate Groups.** While not official HAB Committees, there are numerous outside affinity groups and taskforces whose work is of critical importance to the CoC and is integrated into the HAB's planning capacity. Their members are represented within the CoC and the HAB includes their work in CoC meeting agendas as well as Ad Hoc Committees when appropriate. Examples of affiliate groups include:
 - Homeless Education Network (HEN)
 - Veteran's Boot Camp Committee
 - Local Housing Options Team (LHOT)
 - Unaccompanied Youth Task Force
 - Employment and Training Advisory Board (ETAB)

Appendix B: HMIS Governance Charter

Purpose

- HMIS is an information system designated by the Allegheny County Continuum of Care (CoC) used to record, analyze, report and transmit client and activity data in regard to the provision of shelter, housing and services to individuals and families are homeless or at risk of homelessness
- The governance charter includes all procedures and policies needed to comply with the CoC Program Interim Rule and with HMIS requirements as prescribed by HUD
- Outlines roles and responsibilities of the CoC, the HMIS Lead Agency and Contributing HMIS Organizations (CHOs).

CoC Responsibilities:

The Homeless Advisory Board (HAB), with the authority given it under the CoC Governance Charter, will:

- Designate a single information system as the official HMIS software for the CoC. The HAB designates the Allegheny County CoC HMIS software developed by Deloitte as the official HMIS software of the CoC.
- Designate an HMIS Lead Agency to operate the HMIS. The HAB designates the Allegheny County Department of Human Services as the HMIS Lead Agency for the CoC.
- Develop and annually review an HMIS Governance Charter
- Maintain documentation evidencing compliance with this governance charter
- Review, revise and approve all required HMIS policies and plans, including a privacy plan, security plan and data quality plan
- Ensure the HMIS is adequately funded
- Regularly monitor the HMIS Lead Agency to ensure the HMIS is administered in compliance with HUD requirements
- Ensure consistent participation of the CoC's CHOs within the HMIS

HMIS Lead Agency Responsibilities

The HMIS Lead Agency (Allegheny County Department of Human Services) will:

- Operate the CoC's HMIS in accordance with this governance charter and at the direction of the HAB
- Authority granted to HMIS lead by CoC to: host, maintain, backup, recovery, repair, upgrade, customize and enhance the HMIS as well as integrate with warehouse data
- Conduct training for recipients on the use of the system
- Develop written policies and procedures that comply with all applicable federal, state and local laws and regulations
- At least once annually, or upon request from HUD, submit to the CoC an unduplicated count of clients served and an analysis of unduplicated counts, when required by HUD
- Submit reports to HUD on behalf of the CoC as required
- Develop and submit a privacy plan, security plan and data quality plan to the HAB, per 24 CFR 580.35, within 6 months of effective date of final rule of the HMIS Proposed Rule. The HMIS

- lead must implement all administrative, physical and technical safeguards within 6 months of initial approval of security plan
- Ensure completeness, accuracy and consistency of HMIS data
 - Execute a written HMIS Participation Agreement with each CHO, including obligations and authority of the HMIS lead
 - Ensure HMIS is in compliance with HUD data, technical and data standards
 - Serve as the sole applicant to HUD for grant funds to be used for HMIS activities within the CoC's geographic area
 - Monitor and enforce compliance by all CHOs with the HUD requirements, and report on compliance to the HAB and HUD

Allegheny County Housing Authority

applicant may request an informal review of the decision within 10 business days of the denial. The Allegheny County Housing Authority will describe how to obtain the informal review. The informal review process is described in Section 15.2 of this Plan.

5.0 SELECTING FAMILIES FROM THE WAITING LIST

5.1 WAITING LIST ADMISSIONS AND SPECIAL ADMISSIONS

The Housing Authority may admit an applicant for participation in the program either as a special admission or as a waiting list admission.

If HUD awards funding that is targeted for families with specific characteristics or families living in specific units, the Allegheny County Housing Authority will use the assistance for those families. If this occurs, the Allegheny County Housing Authority will maintain records demonstrating that these targeted housing choice vouchers were used appropriately. When one of these targeted vouchers turns over, the voucher shall be issued to applicants with the same specific characteristic as the targeted program describes.

5.2 PREFERENCES

The Allegheny County Housing Authority, according to our local needs and preferences, will select families based on the following preferences:

Category 1 Preferences: (1) Applicants for whom a law enforcement agency is seeking housing as an accommodation for its witness protection or confidential informant programs; and (2) victims of domestic violence. Preferences in this Category have equal priority.

Category 2 Preference: Residents of the Allegheny County Housing Authority public housing program asked to move due to the modernization of his or her unit or community regardless of whether the waiting list is open or closed.

Category 3 Preference: Successful graduates of the Allegheny County Housing Authority public housing Family Self-Sufficiency Program regardless of whether the waiting list is open or closed.

Category 4 Preference: Veterans with an honorable discharge.

* Category 5 Preference: Homeless preference to permit no more than 50 vouchers to be given to families experiencing homelessness with or without disabilities. All applicants must be referred through the Allegheny County Department of Human Services.

Preferences listed in Category 1 have priority over preferences listed in Category 2 and will therefore be offered housing before those listed in Category 2, and the same is true

for the other Categories. The date and time of application will be noted on each application and will be utilized to determine the sequence that each individual with a preference is offered housing within the categories.

If an applicant qualifies for multiple categories, the highest one will control.

A preference does not guarantee admission. The applicant must still meet the Allegheny County Housing Authority's eligibility and screening criteria.

Victims of Domestic Violence: In order to qualify for the victim of domestic violence preference, a final Protection from Abuse Order must be provided by the applicant to the Allegheny County Housing Authority. The final Protection from Abuse Order must have been issued within 60 days of the date that it is provided to the Allegheny County Housing Authority. However, the Allegheny County Housing Authority may make exceptions to this rule on a case by case basis.

An applicant who lives in a violent neighborhood or is fearful of other violence outside the household does not qualify for the preference of victim of domestic violence.

The applicant must certify that the abuser will not reside with the applicant unless the Housing Authority gives prior written approval.

The Housing Authority will approve the return of the abuser to the household under the following conditions:

- A. The Housing Authority verifies that the abuser has received therapy or counseling that appears to minimize the likelihood of the recurrence of violent behavior and/or
- B. A counselor, therapist or other appropriate professional recommends in writing that the individual be allowed to reside with the family.

If the abuser returns to the family without approval of the Housing Authority, the Housing Authority will deny or terminate assistance for breach of the certification.

If the family requests it, the Allegheny County Housing Authority will try to ensure that the new location of the family is concealed

The Allegheny County Housing Authority will not penalize a family in admission to the program, solely because the family resides in public housing.

5.2.1 Federal Disasters

In the case of a federally declared disaster, the Allegheny County Housing Authority reserves the right for its Executive Director to suspend its preference system for whatever

City of Pittsburgh Housing Authority

Relocation

Enhanced Voucher

Regular HCV Funding

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

4-III.C. SELECTION METHOD

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

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

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

HACP Policy

HACP has selected specific local preferences that will be used in the assignment of vouchers. These preferences are: 1. Involuntary Displacement due to demolition, disposition, or transformation of public or assisted housing or other housing impacted by development or redevelopment activity funded in whole or in part by HACP; 2. Employment/Elderly & Disabled Preference; and 3. Recipients and former recipients of Homeless Assistance Service referred by the Allegheny County Department of Human Services. Families qualifying for preference #1 will receive priority over families qualifying for preference #2. Families qualifying for either preference will receive priority over families not qualifying for a preference. Individuals or families qualifying for preference three will receive priority over families qualifying for preference 2, and this preference will be granted whether the waiting list is open or closed.

INVOLUNTARY DISPLACEMENT DUE TO DEMOLITION, DISPOSITION, OR TRANSFORMATION OF PUBLIC OR ASSISTED HOUSING OR OTHER HOUSING IMPACTED BY DEVELOPMENT OR REDEVELOPMENT ACTIVITY FUNDING IN WHOLE OR IN PART BY HACP

Involuntarily Displaced persons are applicants not living in standard, permanent replacement housing. The applicant is or will be involuntarily displaced if she or he have or will vacate the housing unit in which he or she resides because of demolition/disposition of public housing or HOPE VI development or other public or assisted housing, or other housing transformation or revitalization activities. Individuals with this preference will come to the top of the waiting list.

In instances where the PHA has applied for and HUD has awarded replacement or relocation housing vouchers (funds) this preference will not apply, as vouchers will be authorized under Section 4. III. B. for Special Admission.

I. EMPLOYMENT/ELDERLY & DISABLED PREFERNECE

A. Employment Head of Household

An application in which the head of household is considered working in a long-term full-time or part-time capacity:

i. Any head of household legally employed by an employer in a full-time capacity.

The head of household must work for wages, commissions or other consideration of value and have been so gainfully employed after the date of application. The head of household must demonstrate full-time employment for, at least, six (6) consecutive months of the preceding twelve (12) months prior to the date of he pre-application or the date of placement except for mitigating circumstances, such as, lay-off, business closure, or regular seasonal employment, such as construction or teaching. Full-time employment must be an average of thirty-two (32) hours per week. It must be apparent that the full-time employment is not of a temporary nature, and the head of household must anticipate such continuous employment prior to the date of the application. Self-employed individuals would not qualify for this Local Preference unless the head of the household are able to demonstrate one full year of self-employment prior the date of application; or

ii. Long-term Part-time Employment

Any head of household legally employed in a long-term part-time capacity. The head of household must work for wages, commissions or other consideration of value and have been so gainfully employed for, at lease, six (6) consecutive months prior to the date application (if admitted within sixty (60) days of the pre-application) or the date of placement (in all other cases) except for mitigating circumstances, such as, lay-off business closure, or regular seasonal employment, such as construction or teaching. Part-time employment must be an average of twenty (20) hours per week. It must be apparent that the part-time employment is of a continuous, as opposed to a temporary nature, and the head of household must anticipate such continuous employment after the date of application. Self-employed individuals would not qualify for this preference unless the head of the household were able to demonstrate on full year of self-employment prior to the date of application.

iii. Graduate of HACP Career Development Program

Any head of household, any spouse, co-head, or other adult family member seeking to establish an independent household, who has completed the HACP Career Development Program and secured employment and maintained that

employment for six (6) months will be eligible for a preference equal to the long-term, full time employment preference.

B. Elderly/Disabled

An elderly household is defined as a household where the head, spouse, or co-head is age 62 or older.

A disabled household is defined as a household where the head, spouse, or co-head has a disability as defined in 42 U.S.C. Section 423; or

The head, spouse, or co-head has a physical, mental, or emotional impairment that:

- Is expected to be of long-continued and indefinite duration;
- Substantially impedes his or her ability to live independently;
- Is of such a nature that ability to live independently could be improved by more suitable housing conditions;
- Is determined to have a developmental disability as defined in the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6001(8)).

The disabled person definition does not exclude persons who have the disease of AIDS or any conditions arising from the etiologic agent for the AIDS virus.

The disabled person definition does not include a person whose disability is based solely on any drug or alcohol dependence (for eligibility purposes).

II. INVOLUNTARILY DISPLACEMENT

Involuntarily Displaced persons are applicants not living in standard, permanent replacement housing. The applicant is or will be involuntarily displaced if she or he have or will vacate the housing unit in which he or she resides because of demolition/disposition of public or assisted housing; HOPE VI development activities or other housing revitalization activities; or disaster. Individuals with this preference will come to the top of the waiting list.

A. Involuntarily Displaced due to demolition, disposition, or transformation of public or assisted housing or other housing impacted by development or redevelopment activity funded in whole or in part by HACP – Any applicant who is being involuntarily displaced due to the demolition, disposition, or transformation of Public Housing, assisted housing, or other housing units when the activity is funded in whole or in part by HACP. In instances where HUD has not provided replacement housing (funds) or when approvals for such funds are delayed.

B. Disaster – Any applicant family who is involuntarily displaced as a result of a disaster declared or otherwise formally recognized pursuant to Federal

disaster relief laws. In the case of a disaster, the family must provide third-party written verification from an appropriate agency or unit of government (such as FEMA) that the disaster resulted in the permanent displacement of the family due to the extensive damage to their dwelling. The PHA shall reserve the right to determine, in its sole discretion, the acceptability of such third-party verification.

III. PREFERENCE FOR RECIPIENTS AND FORMER RECIPIENTS OF HOMELESS ASSISTANCE SERVICE REFERRED BY THE ALLEGHENY COUNTY DEPARTMENT OF HUMAN SERVICES

Individuals and families that have successfully completed Homeless Assistance programs through the Allegheny County Department of Human Services, Bureau of Homeless Services will be eligible for this preference. Such programs include Permanent Supportive Housing, Transitional Housing, Bridge Housing, Rapid Re-housing and Emergency Shelters.

Individuals and families' eligibility for this preference must be verified by the Administrator of the Bureau of Homeless Services at the Allegheny County Department of Human Services. That eligibility determination will be based upon the following criteria:

1. Successful completion of a Permanent Supportive Housing program that is determined by the lack of need for the supportive services, but an on-going need for rental assistance.
2. Successful completion of a Transitional, Rapid Re-housing, or Bridge Housing program, including compliance with all required program guidelines and agreements. Consumers, who have been involuntarily terminated will not be eligible for the set-aside vouchers.
3. Families with minor children, who have not completed Transitional Bridge, or Emergency Housing Programs may also be eligible if the Administrator determines that a lack of permanent affordable housing is contributing to the family's on-going housing instability. This instability will be determined by at least three homeless episodes within the last three years and a referral to the Allegheny County Office of Children, Youth and Families within the last year.

Individuals and families referred by the Allegheny County Department of Human Services and verified as being eligible for this preference will receive the preference whether the waiting list is open or closed.

IV. PREFERENCE FOR ACTIVE DUTY UNITED STATES SERVICE MEMBER OR VETERAN



U. S. Department of Housing and Urban Development
Pittsburgh Office
339 Sixth Avenue
Pittsburgh, PA 15222-2507

April 28, 2015

**Ron Donner
Supportive Housing Management
Services
803 East Pittsburgh Plaza
East Pittsburgh, PA 15112**

Dear Mr. Donner:

**SUBJECT: Approval of Request to Establish Homeless Preference
Sylvania Place Apartments, 033-EE074**

Thank you for your request dated April 14, 2015 to establish an Owner-Adopted Homeless Preference at Sylvania Place Apartments. Your request is in accordance with Housing Notice H 2013-21.

Your request specifies that you will use the definition of homeless as provided in the Hearth Act and will use the Allegheny County Department of Human Services (DHS) – Bureau of Homeless Services as a referral agency. Applicants must be actively participating in a permanent or transitional housing program within DHS and must be in good standing within that program at the time of referral. Applicants must meet the screening criteria established in the property’s Tenant Selection Plan and will be screened in accordance with established Fair Housing nondiscrimination laws.

Sylvania Place Apartments, a 23-unit elderly development located at 29 Sylvania Place Avenue in Pittsburgh, will have a property-wide homeless preference. Implementation of the preference must adhere to the provisions of Housing Notice H 2013-21.

We look forward to working with you as you implement the homeless preference. Please contact Roxanne Oertel at 412-644-6898 or roxanne.m.oertel@hud.gov if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "B.D. Murray", with a stylized flourish at the end.

**Brian D. Murray
Chief, Asset Management Branch
Pittsburgh Multifamily Program Center**

✓ cc: C. Keenan, DHS

RECEIVED MAY 04 2015

SHMS

Supportive Housing Management Services
a Division of ACTION-Housing, Inc.
803 East Pittsburgh Plaza, East Pittsburgh, PA 15112
(412) 829-3910 or 1-800-238-7555/ Fax #829-3914

April 14, 2015

Brian Murray
U.S. Department of HUD
Pittsburgh Multifamily Program Center
Moorhead Federal Building
1000 Liberty Avenue, Suite 1000
Pittsburgh, PA 15222

Dear Mr. Murray:

- SUBJECT: Requested Owner-Preference for Homeless – Sylvania Place Apartments
- In accordance with U.S. Department of HUD Notice H 2013-21, we are requesting the following owner-preferences for individuals or families experiencing homelessness

Preference Requirements:

1. Applicant must meet definition of homeless under the HEARTH Act
2. Applicant must be referred from Allegheny County Department of Human Services- Bureau of Homeless Services
3. Applicant must be actively participating in a Permanent or Transitional Housing program within the Allegheny County Continuum of Care and must be in good standing within that program at the time of the referral. Good standing means participating in services, making progress toward any goal plans, and paying the household's share of any rent due and should not have any pending actions against it by the homeless provider.
4. Applicant must meet all qualifications for the Property and all applicable requirements as specified in HUD Notice H 2013-21



Equal Housing Opportunity



Requested Owner-Preference for Homeless
Page 2

Property for which Owner-Preference is being requested:

Sylvania Place Apartments (Project No. 033-EE074)

29 Sylvania Avenue

Pittsburgh, PA 15132

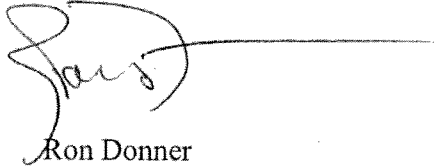
Type of Property: PRAC 202- 50% Area Median Income- One-Bedroom Units

Property Designation: Elderly- Persons 62 years or older

If approved we will modify the Tenant Selection Plan and notify current applicants on the waiting list of the newly adopted owner-preference.

Please contact me if there is anything further you require.

Sincerely:

A handwritten signature in black ink, appearing to read "Ron Donner", with a long horizontal line extending to the right from the end of the signature.

Ron Donner

SHMS Operations Manager



U. S. Department of Housing and Urban Development
Pittsburgh Office
339 Sixth Avenue
Pittsburgh, PA 15222-2507

May 18, 2015

Joan C. Kotz
Director of Operations
SeniorCare Network
1215 Hulton Road
Oakmont, PA 15139-1196

Dear Ms. Kotz:

**SUBJECT: Approval of Request to Establish Homeless Preference
York Commons, Project Number 033-44803**


Thank you for your request dated April 30, 2015 to establish an Owner-Adopted Homeless Preference at York Commons. Your request is in accordance with Housing Notice H 2013-21.

Your request specifies that you will use the definition of homeless as provided in the Hearth Act and will use the Allegheny County Department of Human Services (DHS) – Bureau of Homeless Services as a referral agency. Applicants must be actively participating in a permanent or transitional housing program within DHS and must be in good standing within that program at the time of referral. Applicants must meet the screening criteria established in the property’s Tenant Selection Plan and will be screened in accordance with established Fair Housing nondiscrimination laws.

York Commons, a 102-unit elderly development located at 4003 Penn Avenue in Pittsburgh, will have a property-wide homeless preference. Units will not be set aside nor will any units be held off-line; vacancies will be filled by alternating selections from the existing waiting list with referrals from DHS of eligible applicants who meet the preference criteria. Implementation of the preference must adhere to the provisions of Housing Notice H 2013-21.

We look forward to working with you as you implement the homeless preference. Please contact Sara Obringer at 412-644-6412 or sara.j.obringer@hud.gov if you have any questions.

Sincerely,


Brian D. Murray
Chief, Asset Management Branch
Pittsburgh Multifamily Program Center

RECEIVED MAY 22 2015

✓ cc: C. Keenan, DHS

1215 Hulton Road
Oakmont, PA 15139-1196 SO
+12-826-6071
Fax: +12-826-6520
www.SrCare.org



SeniorCare Network

An Affiliate of Presbyterian SeniorCare

RECEIVED BY HUD
PITTSBURGH OFFICE

2015 MAY 6 AM 11 50

April 30, 2015

Mr. Bryan Murray, Chief MF Project Management
U.S. Department of Housing and Urban Development
William Moorhead Federal Building
1000 Liberty Avenue, Suite 1000
Pittsburgh, PA 15222

RE: Owner Adopted Admission Preferences for Individuals or Families Experiencing Homelessness

Dear Mr. Murray:

Please consider this writing as my request for the approval of adding an admission preference for one unit at each of the following properties:

York Commons – Project #033-44803
Bridge Street Commons – Project #033-11090

The preference we are seeking is for the purpose of housing homeless individuals who meet the definition of homeless as outlined in The McKinney-Vento Homeless Assistance Act, as amended by S.896, The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009.

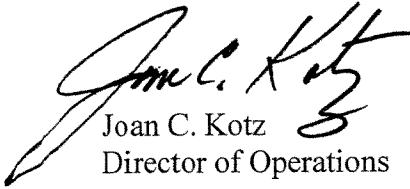
We would be partnering with a referring agency. We will not set aside or hold any units off-line, but would fill vacancies by alternating selections from the existing waiting list with referrals from the participating organization of eligible applicants who meet the preference criteria. We will screen all referred applicants in the required manner as we do for all applicants on our waiting list. The Tenant Selection Plans for each of these sites will be revised to clearly define the process of alternating applicants.

We will not partner with any agency, organization or consortia that exclusively provide services restricted to people with specific disabilities or diagnoses. Additionally, we will not partner with any agency, organization, or consortia that deny services to members of any federally protected class under the Fair Housing Laws.



Please feel free to contact me at phone #412-826-6101 or via email at jkotz@srcare.org if you have any questions or require any additional information. Thank you for your consideration in this matter.

Sincerely,



Joan C. Kotz
Director of Operations

/jm

Cc: James Pieffer, SeniorCare Network
Cassandra Law, SeniorCare Network
Jane Miller, HUD



U. S. Department of Housing and Urban Development
Pittsburgh Office
339 Sixth Avenue
Pittsburgh, PA 15222-2507

April 28, 2015

**Donna Allen, CPM, ARM
Allegheny Housing Rehabilitation Corporation
5604 Baum Boulevard
Pittsburgh, PA 15206-3754**

Dear Ms. Allen:

**SUBJECT: Approval of Request to Establish Homeless Preference
Hill Com II, 033-44083**

Thank you for your request dated April 27, 2015 to establish an Owner-Adopted Homeless Preference at Hill Com II. Your request is in accordance with Housing Notice H 2013-21.

Your request specifies that you will use the definition of homeless as provided in the Hearth Act and will use the Allegheny County Department of Human Services (DHS) – Bureau of Homeless Services as a referral agency. Applicants must be actively participating in a permanent or transitional housing program within DHS and must be in good standing within that program at the time of referral. Applicants must meet the screening criteria established in the property’s Tenant Selection Plan and will be screened in accordance with established Fair Housing nondiscrimination laws.

Hill Com II, a 48-unit family scattered-site development located in the Uptown Neighborhood of Pittsburgh, will have a property-wide homeless preference. Implementation of the preference must adhere to the provisions of Housing Notice H 2013-21.

We look forward to working with you as you implement the homeless preference. Please contact Melvin Cherry at 412-644-4241 or melvin.c.cherry@hud.gov if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "B.D. Murray".

**Brian D. Murray
Chief, Asset Management Branch
Pittsburgh Multifamily Program Center**

RECEIVED MAY 01 2015

cc: C. Keenan, DHS



ALLEGHENY HOUSING REHABILITATION CORPORATION

5604 Baum Boulevard • Pittsburgh, PA 15206-3754 • (412) 687-6200 • FAX (412) 687-9725

DONNA L. ALLEN, CPM®, ARM®
Vice President of Management

April 27, 2015

U.S. Department of Housing and Urban Development

Pittsburgh Field Office

1000 Liberty Avenue, Suite 1000

Pittsburgh, PA 15222-4004

Attention: Jane Miller – Field Office Director

Brian Murray – Chief, Project Management

RE: Homeless Preference – Hill Com II – 033-44083

Dear Ms. Miller and Mr. Murray:

Thank you for facilitating the conference call with Charles Keenan of the Allegheny County Department of Human Services regarding the federal homeless program, Opening Doors. Allegheny Housing Rehabilitation Corporation, (AHRCO) is requesting a general preference for homeless families for the development Hill Com II. We are seeking to partner with the Allegheny County Department of Human Services to identify and house families facing homelessness.

Hill Com II is a 48 unit, scattered- site development located in the Uptown section of Pittsburgh. The preference would provide access to 1, 2 and 3 bedroom units. All utilities are included and the units are spacious. Hill Com II is located in an area that is experiencing new residential and commercial development that will benefit existing and new families looking to live in this area. The development is located on a bus line with access to major shopping, health care and educational facilities within a 5 mile radius.

We understand that the following guidelines in selecting families under this preference will apply:

- The current tenant selection criteria will apply consistently to families under the Homeless Preference.
- AHRCO may not require families to participate in supportive services in order to obtain or remain in housing at Hill Com II.
- Families who do not meet the tenant selection criteria would have the ability to request a grievance hearing to review the grounds for rejection and provide any additional information for review.
- Families currently on the Hill Com II waiting list will be notified of this designation per HUD Notice H 2013-21.



EQUAL HOUSING OPPORTUNITY
EQUAL OPPORTUNITY EMPLOYER

- Families currently on the Hill Com II waiting list will be notified of this designation per HUD Notice H 2013-21.

If there is further information needed to support this request, please contact me at 412-687-6200, extension 319 or dallen@ahrco.com.

Sincerely,

A handwritten signature in black ink, appearing to read "Donna L. Allen", with a long horizontal flourish extending to the right.

Donna L. Allen CPM, ARM

Vice President of Management



U. S. Department of Housing and Urban Development
Pittsburgh Office
339 Sixth Avenue
Pittsburgh, PA 15222-2507

August 4, 2015

Charlise Smith
Ralph A. Falbo, Inc.
429 Fourth Avenue, Suite 1100
Pittsburgh, PA 15219

1 RECEIVED AUG 07 2015

Dear Ms. Smith:

**SUBJECT: Approval of Request to Establish Homeless Preference
Just Inn Transition, 033-35193**

Thank you for your request dated July 17, 2015 to establish an Owner-Adopted Homeless Preference at Just Inn Transition. Your request is in accordance with Housing Notice H 2013-21.

Your request specifies that you will use the definition of homeless as provided in the Hearth Act and will use the Allegheny County Department of Human Services (DHS) – Bureau of Homeless Services as a referral agency. Chuck Keenan is the Administrator of the Bureau of Homeless Services. Applicants must be actively participating in a permanent or transitional housing program within DHS and must be in good standing within that program at the time of referral. Applicants must meet the screening criteria established in the property's Tenant Selection Plan and will be screened in accordance with established Fair Housing nondiscrimination laws.

Just Inn Transition, a 43-unit elderly (55+) development located in the Mount Washington Neighborhood of Pittsburgh, will have a property-wide homeless preference. Implementation of the preference must adhere to the provisions of Housing Notice H 2013-21. To begin implementing the homeless preference and utilizing the referral agency, please contact Chuck Keenan at 412-350-5606 or via email at charles.keenan@county.allegheny.pa.us.

We look forward to working with you as you implement the homeless preference. Please contact Charlene Gillcrese at 412-644-2899 or charlene.o.gillcrese@hud.gov if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "B. Murray", written over a horizontal line.

Brian D. Murray
Chief, Asset Management Branch
Pittsburgh Multifamily Program Center

✓ cc: C. Keenan, DHS



U. S. Department of Housing and Urban Development
Pittsburgh Office
339 Sixth Avenue
Pittsburgh, PA 15222-2507

August 12, 2015

**Joan C. Kotz
Director of Operations
SeniorCare Network
1215 Hulton Road
Oakmont, PA 15139-1196**

Dear Ms. Kotz:

**SUBJECT: Approval of Request to Establish Homeless Preference
Etna Commons, Project Number 033-11102**

Thank you for your request dated July 28, 2015 to establish an Owner-Adopted Homeless Preference at Etna Commons. Your request is in accordance with Housing Notice H 2013-21.

Your request specifies that you will use the definition of homeless as provided in the Hearth Act and will use the Allegheny County Department of Human Services (DHS) – Bureau of Homeless Services as a referral agency. Applicants must be actively participating in a permanent or transitional housing program within DHS and must be in good standing within that program at the time of referral. Applicants must meet the screening criteria established in the property’s Tenant Selection Plan and will be screened in accordance with established Fair Housing nondiscrimination laws.

Etna Commons, a 47-unit elderly development located at 21 Hickory Street in Etna Borough, will have a property-wide homeless preference. Units will not be set aside nor will any units be held off-line; vacancies will be filled by alternating selections from the existing waiting list with referrals from DHS of eligible applicants who meet the preference criteria. Implementation of the preference must adhere to the provisions of Housing Notice H 2013-21.

We look forward to working with you as you implement the homeless preference. Please contact Sara Obringer at 412-644-6412 or sara.i.obringer@hud.gov if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "B.D. Murray", written over a horizontal line.

**Brian D. Murray
Chief, Asset Management Branch
Pittsburgh Multifamily Program Center**

✓ cc: C. Keenan, DHS

RECEIVED AUG 13 2015



U. S. Department of Housing and Urban Development
Pittsburgh Office
339 Sixth Avenue
Pittsburgh, PA 15222-2507

August 4, 2015

**Charlise Smith
Ralph A. Falbo, Inc.
429 Fourth Avenue, Suite 1100
Pittsburgh, PA 15219**

Dear Ms. Smith:

RECEIVED AUG 07 2

**SUBJECT: Approval of Request to Establish Homeless Preference
Bry Mard Apartments, 033-35196**


Thank you for your request dated July 17, 2015 to establish an Owner-Adopted Homeless Preference at Bry Mard Apartments. Your request is in accordance with Housing Notice H 2013-21.

Your request specifies that you will use the definition of homeless as provided in the Hearth Act and will use the Allegheny County Department of Human Services (DHS) – Bureau of Homeless Services as a referral agency. Chuck Keenan is the Administrator of the Bureau of Homeless Services. Applicants must be actively participating in a permanent or transitional housing program within DHS and must be in good standing within that program at the time of referral. Applicants must meet the screening criteria established in the property's Tenant Selection Plan and will be screened in accordance with established Fair Housing nondiscrimination laws.

Bry Mard Apartments, a 37-unit elderly (55+) development located in Pittsburgh, will have a property-wide homeless preference. Implementation of the preference must adhere to the provisions of Housing Notice H 2013-21. To begin implementing the homeless preference and utilizing the referral agency, please contact Chuck Keenan at 412-350-5606 via email at charles.keenan@county.allegheny.pa.us.

We look forward to working with you as you implement the homeless preference. Please contact Roxanne Oertel at 412-644-6898 or roxanne.m.oertel@hud.gov if you have any questions.

Sincerely,


**Brian D. Murray
Chief, Asset Management Branch
Pittsburgh Multifamily Program Center**

✓ cc: C. Keenan, DHS

Allegheny County CoC Written Standards for Providing Assistance

The Allegheny County Continuum of Care (PA-600) is committed to ensuring that eligible individuals and families experiencing homelessness have fair and equal access to services for which they are eligible. The Continuum of Care (CoC) does not discriminate against any individual or family experiencing homelessness based on race, gender, age, ancestry, religion, ethnicity, sexual orientation, gender identity, disability, familial status, or any other protected class currently listed in federal, state, or local ordinances in the provision of services within the CoC.

At this time, the Allegheny County CoC will not make referrals to housing programs within the Continuum of Care for any individual or family who is not literally homeless (living on the streets, in an emergency shelter, safe haven, or place not meant for human habitation), is facing the immediate (today or tonight) loss of their current housing, or is coming from transitional housing as described below. The waiting list of referrals for housing programs within the CoC will follow the prioritization outlined below. For non-housing programs, including rental assistance and prevention programs, the CoC will refer homeless and near homeless individuals and families for service based upon the priorities and guidelines outlined below for those specific project types.

Definitions

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

(a) An individual who:

- i. Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
- ii. Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years; and
- iii. Can be diagnosed with one or more of the following conditions: 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;

(b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition before entering that facility; or

(c) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) of this definition, including a family whose composition has fluctuated while the head of household has been homeless. In order for a family to qualify as chronically homeless, the Head of Household must have a documented disability.

HUD Homeless. The HEARTH Act defines a homeless person or family as:

Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for 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 a place not meant for human habitation immediately before entering that institution;

Individuals and families who will imminently lose their primary nighttime residence;

Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; or

Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

At this time, the Allegheny County Continuum of Care does not have permission to use Definition #3 above to qualify persons as homeless.

HAP Homeless. The PA Homeless Assistance Program defines a homeless person as:

1. residing in a group shelter; domestic violence shelter; hotel or motel paid for with public or charitable funds; a mental health, drug, or alcohol facility; jail; or hospital with no place to reside; or living in a home, but due to domestic violence, needs a safe place to reside;
2. having received verification that they are facing foster care placement of their children solely because of lack of adequate housing, or need housing to allow reunification with children who are in foster care placement;
3. living in a “doubled-up” arrangement for six months or less on a temporary basis;
4. living in a condemned building;
5. living in housing in which the physical plant presents life and/or health threatening conditions; e.g., having dangerous structural defects or lacking plumbing, heat, or utilities; or
6. living on the streets, in cars, doorways; etc.

Length of Time Homeless: Length of Time Homeless will be calculated based upon an individual or family’s request for service (their referral date and time) unless other third party written documentation can be obtained that will document an individual or family’s homelessness episode beginning at an earlier date.

Most Severe Service Needs: The Allegheny County CoC defines most severe service needs on a scale using the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT). The VI-SPDAT

measures an individual or family's needs for services based on history of homelessness, risks, socializations and daily functioning, wellness, and health conditions. It is a "triage tool that is designed to be used by all providers within a community to quickly assess the health and social needs of homeless persons and match them with the most appropriate support and housing interventions that are available." The higher the score on this tool, the greater the service needs.

Near Homeless/Imminently Homeless: Individuals and families are near homeless or imminently homeless if they are facing eviction and/or having received either written or verbal notification from the landlord or mortgage holder that they will lose their housing unless some type of payment is received. Verbal notification must be followed up with written documentation.

Eligibility for Services in the CoC

Individuals and families seeking assistance from the Allegheny County Continuum of Care must qualify as homeless under the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act for federally funded programs or as homeless under the Pennsylvania Homeless Assistance Program (HAP) for state funded homeless programs.

Please be aware that HUD strongly recommends that Third Party Documentation is the preferred method of documentation. Self-Certification is acceptable; however, as a last resort. Agencies/programs should seek either Third Party Documentation or Oral Third Party Documentation before resorting to Self-Certification.

For Further information on eligibility and documenting homelessness, please see Appendix A: Verification and Documentation of Homelessness and At Risk of Homelessness at the end of this document.

Other than documented homelessness or near homelessness, no other conditions (other than those eligibility requirements for specific programs) exist for service in the Allegheny County Continuum of Care. Specific eligibility requirements must be related to the provision of services to a specific target population approved by the Allegheny County Homeless Advisory Board, including Veterans, persons with specific disabilities or disabling conditions, former youth involved in the child welfare system, ex-offenders, survivors of domestic violence, or other sub-populations that the CoC identifies as a priority or target population. Providers may also impose other selection criteria as a condition of program enrollment, but those criteria must be related to the provision of necessary services and be related to a successful completion of the program. The Allegheny County CoC believes strongly in Housing First principles and encourages its network of homeless providers to reduce unnecessary barriers to program entry and to avoid terminations from programs if at all possible.

At this time, the Allegheny County CoC will not make referrals to housing programs within the Continuum of Care for any individual or family who is not literally homeless (living on the streets, in an emergency shelter, safe haven, or place not meant for human habitation), is facing the immediate (today or tonight) loss of their current housing, or is coming from transitional housing as described below. The waiting list of referrals for housing programs within the CoC will follow the prioritization outlined below. For non-housing programs, including rental assistance and prevention programs, the

CoC will refer homeless and near homeless individuals and families for service based upon the priorities and guidelines outlined below for those specific project types.

The Allegheny County Continuum of Care will exercise due diligence when conducting outreach and assessment to ensure that persons are served in the order of priority in these Written Standards. The CoC recognizes that some persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant where there are persons who meet a higher priority within the CoC and who have not yet accepted the PSH opportunities offered to them. Street outreach providers will continue to make attempts with those persons using a housing first approach to place as few conditions on a person’s housing as possible and the CoC will work with CoC funded housing providers to reduce barriers to entry and adopt a housing first approach.

Prioritization for All Permanent Supportive Housing Units

Permanent supportive housing is a proven, effective means of reintegrating chronically homeless and other highly vulnerable homeless families and individuals with psychiatric disabilities or chronic health challenges into the community by addressing their basic needs for housing and providing ongoing support. Permanent supportive housing is permanent housing with indefinite leasing or rental assistance paired with supportive services to assist homeless persons with a disability or families with an adult or child member with a disability achieve housing stability. It is the most service rich of all housing interventions in the Continuum of Care and, thus, should be reserved for those who need that level of service the most. Because of this, the Allegheny County Continuum of Care will prioritize those who would benefit most by this intervention in accordance with the priorities set below.

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

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
- ii. The CoC or CoC Program recipient has identified the chronically homeless individual or head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those with long homeless histories (at least one year consecutively or cumulatively within the 4 episodes of at least one year) with the highest VI-SPDAT score.

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

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,
- ii. The CoC or CoC program recipient has **not** identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of

the family as having severe service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those with long homeless histories (at least one year consecutively or cumulatively within the 4 episodes of at least one year) with the next highest VI-SPDAT score.

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

- i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and
- ii. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those who are chronically homeless with less than one year cumulatively within the 4 episodes of at least one year with the highest VI-SPDAT score.

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

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

(e) Fifth Priority—Non-chronic Homeless Individuals and Families with a Disability with the Most Severe Service Needs. An individual or family that is eligible for CoC Program-funded PSH who has been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter for any period of time **and** has been identified as having the most severe service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those non-chronically homeless persons with disabilities with the highest VI-SPDAT score.

(f) Sixth Priority—Non-chronic Homeless Individuals and Families with Disability Coming from Places Not Meant for Human Habitation, Safe Havens, or Emergency Shelters. An individual or family that is eligible for CoC Program-funded PSH who has been living in a place not meant for human habitation, a safe haven, or an emergency shelter.

(g) Seventh Priority—Non-chronic Homeless Individuals and Families with a Disability Coming from Transitional Housing. An individual or family that is eligible for CoC Program-funded PSH who is coming from transitional housing, where prior to residing in the transitional housing lived on streets or in an emergency shelter, or safe haven. This priority also includes homeless individuals and homeless households with children with a qualifying disability who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and are living in transitional housing—all are eligible for PSH even if they did not live on the streets, emergency shelters, or safe havens prior to entry in the transitional housing. In very limited circumstances, individuals or families who are chronically homeless may temporarily move into transitional housing and retain their chronic homeless status, but only if they have been moved into transitional housing while looking for an apartment or awaiting placement in a permanent housing unit. In such limited circumstances, this individual or family will not be considered

as part of the Seventh Priority described herein, but will retain their chronic status and will be prioritized based upon chronic status, their length of time homeless, and service needs.

At this time, the Allegheny County CoC will not make referrals to permanent supportive housing for any individual or family who is not literally homeless (living on the streets, in an emergency shelter, safe haven, or place not meant for human habitation), is facing the immediate (today or tonight) loss of their current housing, or is coming from transitional housing as described in (g) above.

The Allegheny County CoC will follow the order of priority above for all Permanent Supportive Housing programs funded by the CoC. Individual projects may still serve target populations (e.g Veterans, persons with HIV/AIDS, People with mental illness), but individuals will be referred to those projects based on the priorities identified above.

Tie Breakers/Secondary Priorities: In cases where there are multiple individuals or families that have the same prioritization category, the following will be used as priorities to further provide the order of assistance. Veterans and veterans who are ineligible for homeless services under the US Department of Veterans Affairs (VA), persons and families actively fleeing domestic violence, and unaccompanied youth will be prioritized among the waiting list when all other prioritizations are equal. The final tie breaker will be the date and time that the referral for service was made. Thus, when two families present for service under category (a), if one is fleeing domestic violence, that family will be offered the next available unit that meets their needs even if they called for service after the other family. If neither family is fleeing domestic violence, is a veteran, or is an unaccompanied youth, the family that was referred for service first will be offered the next available unit that meets their needs.

The following is a breakdown of how the tie breakers will be scored within the coordinated intake prioritizations list.

- Veteran (Discharge status Honorable, General, Other than Honorable Conditions) 1 point
- Veteran (Discharge status Dishonorable, Bad Conduct) 2 points
- Unaccompanied Youth 2 points
- Fleeing Domestic Violence 2 points

Prioritization for All Other Permanent Housing Units, Except Rapid Re-Housing

Permanent housing (PH) is defined as community-based housing without a designated length of stay in which formerly homeless individuals and families live as independently as possible. Under PH, a program participant must have a documented disability and be the tenant on a lease (or sublease) for an initial term of at least one year that is renewable and is terminable only for cause. Further, leases (or subleases) must be renewable for a minimum term of one month. Services are typically provided for participants in permanent housing, but are not required. As with permanent supportive housing, PH is a very effective tool in assisting formerly homeless participants in achieving housing stability and, because it is for an indefinite period of time, should be reserved for those most likely to need such housing. Because of this, the Allegheny County Continuum of Care will prioritize those who would benefit most by this intervention in accordance with the priorities set below.

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

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
- ii. The CoC or CoC Program recipient has identified the chronically homeless individual or head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those with long homeless histories (at least one year consecutively or cumulatively within the 4 episodes of at least one year) with the highest VI-SPDAT score.

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

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,
- ii. The CoC or CoC program recipient has **not** identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those with long homeless histories (at least one year consecutively or cumulatively within the 4 episodes of at least one year) with the next highest VI-SPDAT score.

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

- i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and
- ii. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those who are chronically homeless with less than one year cumulatively within the 4 episodes of at least one year with the highest VI-SPDAT score.

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

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

(e) Fifth Priority—Non-chronic Homeless Individuals and Families with a Disability with the Most Severe Service Needs. An individual or family that is eligible for CoC Program-funded PSH who has been

living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter for any period of time **and** has been identified as having the most severe service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those non-chronically homeless persons with disabilities with the highest VI-SPDAT score.

(f) Sixth Priority–Non-chronic Homeless Individuals and Families with Disability Coming from Places Not Meant for Human Habitation, Safe Havens, or Emergency Shelters. An individual or family that is eligible for CoC Program-funded PSH who has been living in a place not meant for human habitation, a safe haven, or an emergency shelter.

(g) Seventh Priority–Non-chronic Homeless Individuals and Families with a Disability Coming from Transitional Housing. An individual or family that is eligible for CoC Program-funded PSH who is coming from transitional housing, where prior to residing in the transitional housing lived on streets or in an emergency shelter, or safe haven. This priority also includes homeless individuals and homeless households with children with a qualifying disability who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and are living in transitional housing—all are eligible for PSH even if they did not live on the streets, emergency shelters, or safe havens prior to entry in the transitional housing. In very limited circumstances, individuals or families who are chronically homeless may temporarily move into transitional housing and retain their chronic homeless status, but only if they have been moved into transitional housing while looking for an apartment or awaiting placement in a permanent housing unit. In such limited circumstances, this individual or family will not be considered as part of the Seventh Priority described herein, but will retain their chronic status and will be prioritized based upon chronic status, their length of time homeless, and service needs.

At this time, the Allegheny County CoC will not make referrals to permanent housing for any individual or family who is not literally homeless (living on the streets, in an emergency shelter, safe haven, or place not meant for human habitation), is facing the immediate (today or tonight) loss of their current housing, or is coming from transitional housing as described in (g) above.

The Allegheny County CoC will follow the order of priority above for all Permanent Housing programs funded by the CoC. Individual projects may still serve target populations (e.g Veterans, persons with HIV/AIDS, people with mental illness), but individuals will be referred to those projects based on the priorities identified above.

Tie Breakers/Secondary Priorities: In cases where there are multiple individuals or families that have the same prioritization category, the following will be used as priorities to further provide the order of assistance. Veterans and veterans who are ineligible for homeless services under the US Department of Veterans Affairs (VA), persons and families actively fleeing domestic violence, and unaccompanied youth will be prioritized among the waiting list when all other prioritizations are equal. The final tie breaker will be the date and time that the referral for service was made. Thus, when two families present for service under category (a), if one is fleeing domestic violence, that family will be offered the next available unit that meets their needs even if they called for service after the other family. If neither family is fleeing domestic violence, is a veteran, or is an unaccompanied youth, the family that was referred for service first will be offered the next available unit that meets their needs.

The following is a breakdown of how the tie breakers will be scored within the coordinated intake prioritizations list.

- Veteran (Discharge status Honorable, General, Other than Honorable Conditions) 1 point

- Veteran (Discharge status Dishonorable, Bad Conduct) 2 points
- Unaccompanied Youth 2 points
- Fleeing Domestic Violence 2 points

Prioritization for Rapid Re-Housing Units

Rapid re-housing is the practice of focusing resources on helping families and individuals quickly move out of homelessness and into permanent housing, which is usually housing in the private market. Services to support rapid re-housing include housing search and landlord negotiation, short-term financial and rental assistance, and the delivery of home-based housing stabilization services, as needed. Priority is placed on helping individuals and families move into permanent housing as rapidly as possible and providing services to help them maintain housing. Rapid re-housing has demonstrated effectiveness in reducing homelessness, particularly among families. Rapid re-housing also increases turnover in shelters, which allows them to accommodate more families without increasing capacity.

Although still considered permanent housing, rapid re-housing is most effective for individuals and families who do not need a full array of long-term supportive services, but rather a short term package of services to meet their individual needs in finding and maintaining housing, employment, and/or financial resources. As such, priority for rapid re-housing units will be given to those with moderate service needs (typically with a VI-SPDAT score between 4 and 9) and for only as long as necessary to overcome their barriers to self-sufficiency and housing outside of the CoC. Participants will be re-assessed for on-going eligibility every three months and will be provided assistance only for as long as necessary with a maximum term of two years allowed by the federal regulations. Participants in CoC funded RRH projects will be required to pay 30% of their adjusted household income toward the rent of their unit, will be expected to meet with their case manager/service coordinator monthly, will assist in their housing search, and will provide documentation of their need for on-going assistance at least quarterly. Each rapid re-housing project in the Allegheny County Continuum of Care will have an assigned VI-SPDAT score range and referrals will be made to each project from households that fall within that range only.

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

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
- ii. The CoC or CoC Program recipient has identified the chronically homeless individual or head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having moderate service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those with long homeless histories (at least one year consecutively or cumulatively within the 4 episodes of at least one year) with VI-SPDAT scores typically in the range of 4-9. Within this category, the waiting list will be ordered by VI-SPDAT score, beginning with the highest score assigned to that project and going in descending order.

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

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is **less than 12 months**
- ii. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having moderate service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those who are chronically homeless with less than one year cumulatively within the 4 episodes of at least one year with a VI-SPDAT score typically in the range of 4-9. Within this category, the waiting list will be ordered by VI-SPDAT score, beginning with the highest score assigned to that project and going in descending order.

(c) Third Priority—Non-chronic Homeless Individuals and Families with Moderate Service Needs. An individual or family that is eligible for CoC Program-funded PSH who has been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter for any period of time **and** has been identified as having the moderate service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those non-chronically homeless persons with disabilities with a VI-SPDAT score typically in the range of 4-9. Within this category, the waiting list will be ordered by VI-SPDAT score, beginning with the highest score assigned to that project and going in descending order.

At this time, the Allegheny County CoC will not make referrals to Rapid Re-housing for any individual or family who is not literally homeless (living on the streets, in an emergency shelter, safe haven, or place not meant for human habitation), is facing the immediate (today or tonight) loss of their current housing, or is coming from transitional housing as described in (g) above.

The Allegheny County CoC will follow the order of priority above for all Rapid Re-housing programs funded by the CoC. Individual projects may still serve target populations (e.g Veterans, persons with HIV/AIDS, People with mental illness), but individuals will be referred to those projects based on the priorities identified above.

Tie Breakers/Secondary Priorities: In cases where there are multiple individuals or families that have the same prioritization category, the following will be used as priorities to further provide the order of assistance. Veterans and veterans who are ineligible for homeless services under the US Department of Veterans Affairs (VA), persons and families actively fleeing domestic violence, and unaccompanied youth will be prioritized among the waiting list when all other prioritizations are equal. The final tie breaker will be the date and time that the referral for service was made. Thus, when two families present for service under category (a), if one is fleeing domestic violence, that family will be offered the next available unit that meets their needs even if they called for service after the other family. If neither family is fleeing domestic violence, is a veteran, or is an unaccompanied youth, the family that was referred for service first will be offered the next available unit that meets their needs.

The following is a breakdown of how the tie breakers will be scored within the coordinated intake prioritizations list.

- Veteran (Discharge status Honorable, General, Other than Honorable Conditions) 1 point

- Veteran (Discharge status Dishonorable, Bad Conduct) 2 points
- Unaccompanied Youth 2 points
- Fleeing Domestic Violence 2 points

Prioritization for Transitional, Bridge, and PennFree Bridge Housing Units

Transitional, bridge, and PennFree bridge housing programs (together referred to as transitional housing) provide temporary residence—up to 24 months—for people experiencing homelessness. Housing is combined with wrap-around services to assist the individual with developing stability in their lives. Transitional housing is designed to provide homeless individuals and families with the interim stability and support to successfully move to and maintain permanent housing. Transitional housing may be used to cover the costs of up to 24 months of housing with accompanying supportive services. Program participants must have a lease (or sublease) or occupancy agreement in place when residing in transitional housing.

Transitional housing is most effective for individuals and families who do not need a full array of long-term supportive services, but rather a short term package of services to meet their individual needs in finding and maintaining housing, employment, and/or financial resources. As such, priority for transitional housing units will be given to those with moderate service needs (typically with a VI-SPDAT score between 3 and 10) and for only as long as necessary to overcome their barriers to self-sufficiency and housing outside of the CoC. Participants will be re-assessed for on-going eligibility every three months and will be provided assistance only for as long as necessary with a maximum term of two years allowed by the state or federal regulations applicable to each project. Participants in transitional housing projects will be required to pay 30% of their adjusted household income or another CoC approved sliding scale toward the rent of their unit, will be expected to meet with their case manager/service coordinator monthly, will assist in their housing search, and will provide documentation of their need for on-going assistance at least quarterly. Each transitional housing project in the Allegheny County Continuum of Care will have an assigned VI-SPDAT score range and referrals will be made to each project from households that fall within that range only.

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

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
- ii. The CoC or CoC Program recipient has identified the chronically homeless individual or head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having moderate service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those with long homeless histories (at least one year consecutively or cumulatively within the 4 episodes of at least one year) with VI-SPDAT scores typically in the range of 3-10. Within this category, the waiting list will be ordered by VI-SPDAT score, beginning with the highest score assigned to that project and going in descending order.

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

- i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is **less than 12 months**
- ii. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having moderate service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those who are chronically homeless with less than one year cumulatively within the 4 episodes of at least one year with a VI-SPDAT score typically in the range of 3-10. Within this category, the waiting list will be ordered by VI-SPDAT score, beginning with the highest score assigned to that project and going in descending order.

(c) Third Priority—Non-chronic Homeless Individuals and Families with Moderate Service Needs. An individual or family that is eligible for CoC Program-funded transitional housing who has been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter for any period of time **and** has been identified as having the moderate service needs. Service needs are defined by VI-SPDAT score in Allegheny County. Priority will be given to those non-chronically homeless persons with disabilities with a VI-SPDAT score typically in the range of 3-10. Within this category, the waiting list will be ordered by VI-SPDAT score, beginning with the highest score assigned to that project and going in descending order.

Tie Breakers/Secondary Priorities: In cases where there are multiple individuals or families that have the same prioritization category, the following will be used as priorities to further provide the order of assistance. Veterans and veterans who are ineligible for homeless services under the US Department of Veterans Affairs (VA), persons and families actively fleeing domestic violence, and unaccompanied youth will be prioritized among the waiting list when all other prioritizations are equal. The final tie breaker will be the date and time that the referral for service was made. Thus, when two families present for service under category (a), if one is fleeing domestic violence, that family will be offered the next available unit that meets their needs even if they called for service after the other family. If neither family is fleeing domestic violence, is a veteran, or is an unaccompanied youth, the family that was referred for service first will be offered the next available unit that meets their needs.

The following is a breakdown of how the tie breakers will be scored within the coordinated intake prioritizations list.

- Veteran (Discharge status Honorable, General, Other than Honorable Conditions) 1 point
- Veteran (Discharge status Dishonorable, Bad Conduct) 2 points
- Unaccompanied Youth 2 points
- Fleeing Domestic Violence 2 points

At this time, the Allegheny County CoC will not make referrals to Transitional, Bridge, or PennFree Bridge housing for any individual or family who is not literally homeless (living on the streets, in an emergency shelter, safe haven, or place not meant for human habitation) or is facing the immediate (today or tonight) loss of their current housing.

The Allegheny County CoC will follow the order of priority above for all Transitional Housing programs funded by the CoC. Individual projects may still serve target populations (e.g Veterans, persons with HIV/AIDS, people with mental illness), but individuals will be referred to those projects based on the priorities identified above.

Prioritization for Emergency Shelter Units

An emergency shelter is facility whose primary purpose is to provide temporary shelter for the homeless in general or for specific populations of the homeless for a period of 60 days or less. Supportive services may or may not be provided in addition to the provision of shelter. Emergency shelters are designed to provide short-term, temporary assistance to individuals and families with no other resources, supports, or housing options.

Priority– Homeless Individuals and Families with the Longest History of Homelessness. Emergency shelter lists will be prioritized based on the length of time homeless only.

Prioritization for Prevention Units

The services under this component may include housing relocation and stabilization services as well as short- and medium-term rental assistance to prevent an individual or family from becoming homeless. Through this component, recipients and subrecipients may help individuals and families at-risk of homelessness (near homeless) to maintain their existing housing or transition to new permanent housing. Eligibility for prevention programs includes households who are HUD homeless, HAP homeless, and near homeless.

Priority– Homeless Individuals and Families with the Longest History of Homelessness. The waiting list for prevention programs will be prioritized based on the length of time homeless or near homeless only.

APPENDIX A

Verification and Documentation of Homelessness and At Risk of Homelessness

Verification and Documentation of Homelessness and At Risk of Homelessness

Procedure

On January 4, 2012, HUD regulations were published which established four categories of homelessness and three categories of at risk of homelessness. These regulations require that homeless providers of service must document homelessness or at risk of homeless prior to entry into a HUD Supportive Housing Program (SHP) or Emergency Solutions Grant (ESG) funded program.

HUD has mandated that all Continuums of Care establish a standardized format and forms for documenting homelessness across the Continuum beginning with contracts funded and implemented in the 2011 HUD Supportive Housing Program. Documenting homelessness is required for ALL HUD SHP and ESG programs. Attached to this procedure are specific Checklists corresponding to the specific definition of Homelessness in accordance with HUD directives. The Checklists have specific programs that apply to the categories of homeless and at risk of homeless. This check list should be utilized as a tool and guidance to insure that homeless verification steps are followed and adequate documentation is secured for each consumer or household. A copy of the checklist with the specific type of homeless category should become a part of the consumer file.

In addition, HUD is requiring a specific order of documenting homeless situations. Homelessness verification can be documented in one of three ways:

a. Third Party documentation –

- (1) Every attempt should be made to secure written third party documentation for consumers entering Transitional or Permanent Housing Program.
 - i. Letter must be on letterhead or the Agency Standardized Certification Form can be utilized with appropriate information completed related to the organization.
 - ii. Letter or Agency Standardized Certification Form must state name of the individual and/or family members, date of birth and SSN if available i.e. John Brown (DOB12-11-1957) No SSN available or SSN 444-33-1234.
 - iii. Letter or Agency Standardized Certification Form must indicate the specific dates of stay at shelter or observations of homelessness
 - iv. Letter or Agency Standardized Certification Form must indicate the specific reason/condition of homelessness i.e. John Brown has been residing under the 10th Street Bridge for the past 6 months as documented by OSN. Or John Brown has been residing at the EECM shelter for 10 days
 - v. Agency Standardized Certification Form must be fully completed.
 - vi. Signed and dated by appropriate third party representative.

Examples: case management, director of agency, etc.

- (2) Oral Third Party Documentation – Record information from verifying individual in the case record utilizing the Oral Third Party Statement form.

This form should be complete with as much detail as possible to verify the person's/family's homeless situation. This information could be from phone conversation or face-to-face conversation with a case worker, intake worker, etc. If an intake/outreach worker is utilized for verification, the report should include

- i. Intake/Outreach worker observation
 - ii. Intake/Outreach worker should validate through observation why they think the person is homeless.
- (3) Consumer Standardized Certification from the person seeking assistance- Self certification by the individual stating they are homeless.

Please be aware that HUD strongly recommends that Third Party Documentation is the preferred method of documentation. Self-Certification is acceptable; however, as a last resort. Agencies/programs should seek either Third Party Documentation or Oral Third Party Documentation before resorting to Self-Certification.

Specific forms have been established to document homelessness according to each checklist. Please note in all cases of documentation, signatures are required on the forms or letters. This information must be in each case record. These forms MUST be utilized across the system in accordance with the HUD regulations and will be reviewed at the time of monitoring visits.

The following tools have been developed and are expected to be utilized by ALL HUD SHP and by all HAP providers who are providing documentation to any HUD providers or are receiving Emergency Solutions Grant funding:

1. Four Checklists of Documenting Homelessness by Category
 - a. Select one of the forms that best relates to the individual's/household's homelessness must be in the consumer's file
 - b. Place the consumer name/family names on the form.
 - c. Select the most appropriate form and utilize the skip pattern within the tool to collect the necessary documentation.
2. Three Checklists for At Risk of Homelessness Documentation by Category
 - a. Select one of the forms that best relates to the individual's/household's homelessness must be in the consumer's file
 - b. Place the consumer name/family names on the form.
 - c. Select the most appropriate form and utilize the skip pattern within the tool to collect the necessary documentation.
3. Third Party Letter to Validate Consumer state of Homelessness
 - a. Must be on Agency Letterhead
 - b. Must state the individual or family household name with names of all of the family members who are homeless
 - c. Must have birth date of individual/household members/Social Security Numbers if known.
 - d. Length of Time homeless
 - e. Dates of stay spent in Emergency Shelter or in this state of homelessness if applicable
 - f. Location of where they were staying if not at the Third Party Agency/ Shelter

- g. Other appropriate information related to proof of homelessness
 - h. Signed and dated by appropriate third party representative. Examples: case manager, director of agency, etc.
 - i. If referral is from the Justice System, the letter must include proof that the person was homeless prior to entering the jail and the person was in jail for 90 days or less. If the jail does verify homelessness prior to entering the jail, then a self-certification form is not needed.
4. Agency Standardized Certification Form
- a. An Agency Standardized Certification Form may be utilized in place of a third party letter.
 - b. All sections of the form must be completed including:
 - i. Agency information
 - ii. Date
 - iii. Consumer name/names, birthdate(s), SSN
 - iv. Length of time homeless
 - v. Dates of Stay in Shelter or in the state of homelessness
 - vi. Location of where they were staying if not at the Third Party Agency Shelter (i.e. car, abandoned building, etc.)
 - vii. Other information related to proof of homelessness
 - viii. Printed name, Signature and dated by appropriate third party representative
5. Letter or Agency Standardized Certification Form must indicate the specific Intake Worker Standardized Observation Form
- a. Form is completed by intake or case management staff to document specific information related to validating a person's state of homelessness. This information is gathered as a result of observations and beliefs by the intake worker that the consumer is homeless.
 - b. Name of the consumer must be stated.
 - c. All sections of the form should be completed and in appropriate detail as to verify any observations that the worker believes validates a person's state of homelessness.
 - d. Form must be signed and dated by intake worker.
6. Consumer Standardized Certification Form
- a. Form is completed by consumer to certify they are homeless.
 - b. All sections of the form must be completed.
 - c. Form must be signed by consumer and witnessed by intake or case management staff at agency
7. Due Diligence Intake Form
- a. Form is completed by intake or case management staff to document attempts and outcomes of trying to verify consumer's homelessness.
 - b. Name of the Consumer as well as the person who you are attempting to contact.
 - c. Form must have specific dates, times, method of contact and outcome by each contact attempt.
 - d. Form must be signed by intake or case management staff.
8. Oral Certification Form

- a. Form is to validate a conversation that the intake worker or case management staff have had with a specific person to validate consumer homeless situation.
 - b. Form is completed by intake worker or case management staff person completing the specific information from the source, documenting their statement.
 - c. Form must be signed by intake or case management staff.
9. Housing Options Documentation Form
- a. Category 2 of the Homeless Definition requires that other Housing Options should be documented. The Housing Option Form should be utilized to document other options of housing.
 - b. Form must be signed by consumer and witnessed by intake or case management staff at agency
10. Housing Option Documentation Form for Domestic Violence (Category 4)
- a. This self-declaration form can be used to validate homelessness for person meeting Category 4 of the definition of Homelessness.
 - b. Form must be signed by consumer and witnessed by intake or case management staff at agency
11. Resources and Support Network Documentation
- a. This form should be utilized to collect information for Categories 2 and 4 of the Homeless Definition. PLEASE NOTE: For Category 4, if the person is in immediate danger, this form does not need to be completed at the time of intake.
 - b. Financial and Support Network information should be collected and recorded.
 - c. Form must be signed by intake or case management staff
12. Definitions of Specific Laws and Regulations related to Category 3 Unaccompanied Youth under 25 Years of Age follow:

Section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a (3))

- (3) Homeless Youth- The term “homeless” used with respect to a youth means an-individual –
- (A) Who is –
 - (i) less than 21 years of age, or, in the case of a youth seeking shelter in a center under Part A, less than 18 years of age or is less than a higher maximum age if the State where the center is located has an applicable State or local law (including a regulation) that permits such higher maximum age in compliance with licensure requirements for child- and youth – serving facilities; and
 - (ii) For the purpose of Part B not less than 16 years of age and either
 - (I) less than 22 years of age; or
 - (II) not less than 22 years of age, as the expiration of the maximum period of stay permitted under section 322(a) (2) if such individual commences such stay before reaching 22 years of age;
 - (B) For who it is not possible to live in a safe environment with a relative; and
 - (C) Who has no other safe alternative living arrangements.

Section 637 (11) of the Head Start Act (42 U.S. C. 9832 (11))

(11) The term “homeless children” has the meaning given the term “homeless children and youths” in section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434 a (2).)

Section 41403 (6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2:

(6) The terms “homeless,” “Homeless individual”, and “Homeless person” _

(A) Mean an individual who lacks a fixed, regular, and

(B) Includes –

(i) An individual who –

(I) Is sharing the housing of other persons due to loss of housing, economic hardship or a similar reason;

(II) Is living in a motel, hotel, trailer park, or campground due to the lack of alternative adequate accommodations;

(III) Is living in an emergency or transitional shelter;

(IV) Is abandoned in a hospital; or

(V) Is awaiting foster care placement;

(ii) An individual who has 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; or

(iii) Migratory children (as defined in Section 6399 of Title 20) who qualify as homeless under this section because the children are living in circumstances described in this paragraph.

Section 330(h) (5) (A) of the Public Health Service Act (42 U.S.C. 2254 b(h)(5)(A)

(A) Homeless individual

The term “Homeless individual” means an individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility that provides temporary living accommodations and an individual who is a resident in transitional housing.

Section 3 (m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012 (m)

(m) “Homeless individual” means –

(1) An individual who lacks a fixed and regular nighttime residence; or

(2) An individual who has a primary nighttime residence that is –

(A) A supervised publicly or privately-operated shelter (including a welfare hotel or congregate shelter) designed to provide temporary living accommodations;

(B) An institution that provides a temporary residence for individuals intended to be institutionalized;

(C) A temporary accommodation for not more than 90 days in the residence of another individual; or

(D) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

Section 17 (b) (15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786 (b) (15)

- (15) “Homeless Individual” means –
- (A) An individual who lacks a fixed and regular nighttime residence; or
 - (B) An individual whose primary nighttime residence is –
- (i) A supervised publicly or privately-operated shelter (including a welfare hotel or congregate shelter) designed to provide temporary living accommodations;
 - (ii) An institution that provides a temporary residence for individuals intended to be institutionalized;
 - (iii) A temporary accommodation of not more than 365 days in the residence of another individual; or
 - (iv) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

Section 725 (2) of the McKinney Vento Homeless Assistance Act (42 U.S.C. 11434a (2) Education for Children and Youth

- 2) The term “homeless children and youths” –
- (A) Means individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of Section 11302(a)(1) of this title); and
 - (B) Includes:
 - (i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement;
 - (ii) children and youths who have 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 (within the meaning of Section 11302 (a) (2) (C) of this title);
 - (iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and
 - (iv) Migratory children (as such term is defined in Section 6399 of Title 20) who qualify as homeless for the purposes of this part because the children are living in circumstances described in clauses (i) through (iii).

Resources

Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH): Defining “Homeless” Final Rule

https://www.hudexchange.info/resources/documents/HEARTH_HomelessDefinition_FinalRule.pdf

Criteria and Recordkeeping Requirements for Definition of Homelessness

https://www.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf

Related Policies

(OPTIONAL)

Other Important Information

On January 4, 2012, HUD regulations were published which established four categories of homelessness. The following are the four categories of homelessness:

- a. **Literally Homeless (HUD Definition):** An individual or family who lacks a fixed, regular and adequate nighttime residence, meaning the individual or family has a primary nighttime residence that is a public or private place not meant for human habitation or is living in a publicly or privately operated shelter designed to provide temporary living arrangements. This category also includes individuals who are exiting an institution where he or she resided for 90 days or less who resided in an emergency shelter or place not meant for human habitation immediately prior to entry into the institution.
- b. **Imminent Risk of Homelessness (HUD Definition):** an individual or family who will imminently lose (within 14 days) their primary nighttime residence provided that no subsequent residence has been identified and the individual or family lacks the resources or support networks needed to obtain other permanent housing.
- c. **Homeless under other Federal Statutes (HUD Definition):** unaccompanied youth (under 25) or families with children and youth who do not otherwise qualify as homeless under this definition and are defined as homeless under another federal statute, have not had permanent housing during the past 60 days, have experienced persistent instability, and can be expected to continue in such status for an extended period of time.
- d. **Fleeing/Attempting to Flee DV (HUD Definition):** any individual or family who is fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

The At Risk definition was also published as final on January 4, 2012. The following are the categories of At Risk of Homeless:

- a. Category 1 Individual /Family: An individual or family who:
 - i. Has an annual income below 30% of median family income for the area; **AND**
 - ii. Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the “homeless” definition; **AND**
 - iii. Meets one of the following conditions:

1. Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; OR
 2. Is living in the home of another because of economic hardship; OR
 3. Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; OR
 4. Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals; OR
 5. Lives in an SRO or efficiency apartment unit in which there resides more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; OR
 6. Is exiting a publicly funded institution or system of care; OR
 7. Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved Con Plan
- b. Category 2: Unaccompanied Children and Youth: A child or youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under another Federal statute
- c. Category 3 Families with Children and Youth: An unaccompanied youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under section 725(2) of the McKinney-Vento Homeless Assistance Act, and the parent(s) or guardian(s) or that child or youth if living with him or her.

Procedure History

This procedure has been in place for all homeless providers of since 2012.

**Allegheny County Department of Human Services
Homeless Verification Checklist
Category 1**

CONSUMER NAME _____

Applies to:	Category of Homelessness Category 1
Street Outreach Emergency Shelter Safe Haven SSO TH PH S+C Rapid Re-housing	Literally Homeless An individual or family who lacks a fixed, regular and adequate nighttime residence, meaning the individual or family has a primary nighttime residence that is a public or private place not meant for human habitation or is living in a publicly or privately operated shelter designed to provide temporary living arrangements (including congregate shelters, transitional housing and hotels/motels paid for by charitable organizations or federal, state or local government program for low income individuals). This category also includes individuals who are exiting an institution where he or she resided for 90 days or less who resided in an emergency shelter or place not meant for human habitation immediately prior to entry into the institution.
Check:	Check List of Documentation for Category 1
	A written referral by another housing or service provider (Written statement on letterhead of agency or Agency Standardized Form) Name of Agency _____ OR
	A written observation by an outreach worker of the conditions where the individual or family was living Name of Outreach Worker _____ (Written statement on letterhead or Agency Standardized Certification form or Oral Third Party Statement Form required) OR
	A certification by the individual or head of household seeking assistance (Consumer Certification form required)
AND For Exiting Institution Check below:	For persons in Category 1 who are exiting an institution where he or she resided for 90 days or less who resided in an emergency shelter or place not meant for human habitation immediately prior to entry into the institution. One of the following documentations must be included:
	Discharge Paperwork OR
	Written or oral referral from a social worker, case manager, or other appropriate official of the institution, stating the beginning and end dates of the time residing at the institution (Written statement on letterhead or Agency Standardized Certification form or Oral Third Party Statement Form required) OR
	Written record of the intake worker's due diligence in attempting to obtain either Discharge Paperwork or Written or Oral referral by social worker, case manager, or other appropriate official of the institution AND A certification by the individual seeking assistance that states he or she is exiting or just exited an institution where he or she resided for 90 days or less. (Due Diligence Intake Form required)

Name of Intake Worker or Case Manager

____/____/____
Date Completed

**Allegheny County Department of Human Services
Homeless Verification Checklist
Category 2**

CONSUMER NAME _____

Applies to:	Category of Homelessness Category 2
Emergency Shelter SSO TH Homeless Prevention	Imminent Risk of Homelessness: Individual or family who will imminently lose their primary nighttime residence, provided that: (1) residence will be lost within 14 days of the date of application for homeless assistance;(2) No subsequent residence has been identified AND (3) The individual or family lacks the resources or support networks needed to obtain other PH.
Check:	Check List of Documentation Required for Category 2
	Have no subsequent residence identified AND Lack resources or support networks needed to obtain other Permanent Housing (Housing Option Documentation and Resources and Support Network Documentation Form). AND one of the following:
	1 Court order resulting from an eviction action that requires the individual or family to leave their residence within 14 days after the date of their application for homeless assistance; OR
	2 Notice of Quit or a Notice to Terminate issued under state law; OR
Exception For Hotel Motel Stays	3 For Individual and families whose primary nighttime residence is a hotel or motel room not paid for by charitable organization or federal, state or local government programs for low-income individuals, the intake worker needs the following: Evidence that the individual or family lacks the resources necessary to reside there for more than 14 days after the date of application for homeless assistance; OR
	4. An oral statement by the individual or head of household that the owner or renter of the housing in which they currently reside will not allow them to stay for more than 14 days after the date of application for homeless assistance (must use Oral Certification Form) AND one of the following:
	a. Written certification by the owner or renter on letterhead stating eviction/loss of housing action with consumer name OR
	b. The intake worker's recording of the owner's or renter's oral statement stating no subsequent residence has been identified and the lack of resources or support networks to obtain PH (Oral Certification Form required) OR
	c. A written certification by the intake worker of his or her due diligence in attempting to obtain the owner's or renter's verification and support documents (Due Diligence Intake Form required) AND the written certification by the individual or head of household seeking assistance that his or her statement was true and complete (Consumer Certification form required).

Name of Intake Worker or Case Manager

____/____/____
Date Completed

**Allegheny County Department of Human Services
Homeless Verification Checklist
Category 3**

CONSUMER NAME _____

Applies to:	Category of Homelessness Category 3
SSO TH Emergency Shelter Homeless Prevention	Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who are defined as homeless under: Section 387 of the Runaway and Homeless Youth Act (42U.S.C. 5732a), Section 637 of the Head Start Act (42 U.S.C. 9832), Section 41403 of the Violence Against Women Act of 1994 (42 U.S. C 14043e-2), Section 330(h) of the Public Health Service Act (42U.S. 254b(h)),Section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012); Section 17 (b) of the Child Nutrition Action of 1966 (42U.S.C. 1786 (b)) or Section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S. C. 11434a)
Check:	Check List of Documentation Required for Category 3
	Certification of homeless status by the local private nonprofit organization or state or local governmental entity responsible for administering assistance for the applicable legislation listed above (Written statement on letterhead of agency or Agency Standardized Form) Name of Agency _____ AND
Has not had a lease, ownership interest or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance AND one of the following three items:	
	1. A written referral by another housing or service provider (Written statement on letterhead of agency or Agency Standardized form) Name of Agency _____ OR
	2. A written observation by an outreach worker of the conditions where the individual or family was living Name of Outreach Worker _____ (Written statement on letterhead of agency or Agency Standardized form with specific details as described in instructions) OR
	3. A certification by the individual or head of household seeking assistance on Consumer Standardized Certification Form
Have experienced persistent instability as measured by two moves or more during the 60 day period immediately preceding the date of applying for homeless assistance AND	
	1. A certification by the individual or head of household seeking assistance on Consumer Standardized Certification Form OR
	2. Recorded statements or records obtained from each owner or renter of housing, provider of shelter or housing or social worker, or other appropriate official of a hospital in which the individual or family resided (Written statement on letterhead of agency or Agency Standardized Form) OR

Check:	Type of Documentation Required for Category 3 (Continued Page 2)
	3. A written certification by the intake worker of his or her due diligence in attempting to obtain statements, records and support documents on Due Diligence Intake form OR
	4. A written certification from the individual or head of household seeking assistance that they were fleeing domestic violence, dating violence, sexual assault, or stalking and they resided at a specific address.(Fleeing Domestic Violence Standardized Form required)
Evidence of Barriers: The condition is expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories or disability or two or more barriers to employment which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment.	
	Written diagnosis from a professional who is licensed by the state to diagnose that condition(Must be on Letterhead of Licensed Professional) OR
	Intake staff-recorded observation of disability that within 45 days of the date of application for assistance is confirmed by a professional who is licensed by the state to diagnose and treat that condition (Must be on Letterhead of Licensed Professional) OR
	Employment records AND/OR
	Department of Correction records AND /OR
	Literacy or English proficiency test AND / OR
	Other reasonable documentation or the conditions required under fleeing or 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 family member.

Name of Intake Worker or Case Manager

____/____/____
Date Completed

**Allegheny County Department of Human Services
Homeless Verification Checklist
Category 4**

CONSUMER NAME _____

Applies to:	Category of Homelessness Category 4
Street Outreach Emergency Shelter SSO TH PH S+C Rapid Re-housing	Fleeing Domestic Violence: Any individual or family who: 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. Has no other residence and lacks the resources or support networks to obtain other permanent housing.
Check:	Check List of Documentation Required for Category 4
	A certification by the individual or head of household seeking assistance on Fleeing Domestic Violence Standardized Form stating they are fleeing DV listed above AND
	Where the safety of the household is not in jeopardy: <ol style="list-style-type: none"> 1. Written observation by intake worker on Standardized Intake Observation form; 2. Written referral by a housing or service provider, social worker or other organization from whom the household has sought assistance for domestic violence (Written statement on letterhead of agency or Agency Standardized Form) Name of Agency _____
	If the individual or family is being admitted to a domestic violence shelter or is receiving services from a victim service provider, the oral statement need only be documented by a certification of the individual or head of household (Oral Documentation Form or by Intake Worker Standardized Observation Form.)
	Documentation of lacking resources or support networks, in non-emergency cases should use the Resources and Social Network Form and Housing Option Documentation Form.
AT NO TIME IF THE PERSON/FAMILY ARE in IMMEDIATE danger should they, the individual or family, be denied access to safe housing because of lack of documentation. A self-certification form should be utilized.	

Name of Intake Worker or Case Manager

____/____/____
Date Completed

Allegheny County Department of Human Services
AT RISK of Homeless Verification Checklist
Category 1

CONSUMER NAME _____

Applies to	Category of At Risk Homelessness Category 1
Individual or Family AT RISK of Homeless	An individual or family who: (i) Has an annual income below 30% of median family income for the area; (ii) Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the “homeless” definition;
Check: One or More Below	Check List of Documentation for Category 1 At Risk of Homeless
	A. Earned Income: Payment statement or statement of income from employer/source of income; AND/OR
	B. Pension/Retirement income: Pension Statement or other payment statement from pension provider; AND/OR
	C. Armed Forces Income: Payment statement or statement of income from government official/agency; AND/OR
	D. Unemployment and Disability Income: Most recent benefit or disability income notice from SSI or statement from SSI; AND/OR
	E. Public Assistance, including TANF; Most recent benefit or income notice from public assistance administrator or Statement from public assistance administrator: AND/OR
	F. Alimony and Child Support: Court order or cancelled checks OR
	G. No income reported: A certification by the individual or head of household seeking assistance. (Consumer Standardized Self Certification Form)
<u>AND</u>	
Must Meet this Criteria:	DOES NOT have sufficient resources or support networks: EXAMPLES: family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter, public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, transitional housing and hotels or motels paid for by a charitable organization or by federal , state, or local government programs for low – income individuals; (Must be Documented on Consumer Standardized Self Certification Form and other related forms)
	Must also be documented by the most reliable evidence that to show that the program participant does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the “homeless” definition. Acceptable evidence includes:
	A. Source documents (e.g. Notice of Termination from Employment, Unemployment Compensation statement, bank statement, health-care bill showing arrears, utility bill showing arrears); OR
	B. To the extent that source documents are unobtainable, a written statement by the relevant third party (e.g. former employer, public administrator , relative) or the written certification by the Lead Agency’s intake staff of the oral verification by the relevant by relevant third party that the applicant does not have sufficient resources or support networks (must use Oral Certification Form); OR

	C. To the extent that source documents and third party verification are unobtainable, a written statement by the Lead Agency’s Intake staff describing the efforts taken to obtain the required evidence (must use Due Diligence Form)
<u>AND</u> Meets one of the following conditions (Consumer Self Certification and Supporting Documentation are REQUIRED for each condition:	
	A. Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; OR (Documentation by self-certification with supporting documents from previous housing/social service provider, letter from tenant/owner and economic reasons demonstrated by completing Consumer Self-Certification Form supported with bills, arrears, utility bills, etc..)
	B. Is living in the home of another because of economic hardship; OR (Documentation: Consumer Self Certification Form supported with other documentation example: Letter from tenant/owner OR a written observation by an intake worker of the conditions where the individual or family was living. AND Consumer Self Certification Form with supporting document such as Notice Of Termination, health care bills arrears, utility bills arrears, etc. :
	C. Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; OR (Documentation: Consumer Self Certification Form supported with Eviction Notice or court order to leave within 21 days. If living with another then an eviction letter from tenant; homeowner is required.)
	D. Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals; OR (Documentation: Consumer Self Certification Form supported with motel bills/receipts, cancelled personal checks, letter from hotel/motel manager).
	E. Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; OR (Documentation: The severely over-crowded conditions are demonstrated with Consumer Self-certification Form supported with other documentation example: lease or unit details from tax assessor’s office. Must document number of rooms in unit and number of individuals living in unit. Or Notice from Landlord of the person they are staying with cannot continue to stay with them. Example: 25 year old staying in a Senior Apartment.) OR a written observation by an intake worker of the conditions where the individual or family was living.)
	F. Is exiting a publicly funded institution or system of care; OR (Documentation: Consumer Self Certification and documented discharge papers, bills, referral letter, etc.
	G. Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient’s approved by Consolidated Plan (Self Certification with documented evidence that it meets the parameters of the consolidated plan that has been approved by HUD for the specific jurisdiction.)

Name of Intake Worker or Case Manager

____/____/_____
Date Completed

Allegheny County Department of Human Services
AT RISK OF Homeless Verification Checklist
Category 2

CONSUMER NAME _____

Applies to:	Category of AT RISK of Homelessness Category 2
Youth without Accompanying Adult	A child or youth who does not qualify as ‘homeless’ under the homeless definition, but qualifies as ‘homeless’ under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e– 2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15))
Check:	Check List of Documentation Required for Category 3
	Certification of homeless status by the local private nonprofit organization or state or local governmental entity responsible for administering assistance for the applicable legislation listed above (Written statement on letterhead of agency or Agency Standardized Form) Name of Agency _____

Name of Intake Worker or Case Manager

____/____/____
Date Completed

Allegheny County Department of Human Services
AT RISK OF Homeless Verification Checklist
Category 3

CONSUMER NAME _____

Applies to:	Category of AT RISK of Homelessness Category 3
Youth WITH Accompanying Adult	A child or youth who does not qualify as “homeless” under this definition of homeless, but qualifies as “homeless” under section 725(2) of the McKinney- Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.
Check:	Check List of Documentation Required for Category 3
	Certification of homeless status by the local private nonprofit organization or state or local governmental entity responsible for administering assistance for the applicable legislation listed above (Written statement on letterhead of agency or Agency Standardized Form) Name of Agency _____

Intake Worker/Case Manager

____/____/____
Date Completed

Written Documentation of Homeless from an Third Party Agency Verification on Letter

Letter to Validate Consumer Homelessness from a third party agency must meet the following Criteria:

- +Must be on Agency Letterhead
- +Must state the individual or family household name with names of all of the family members
- +Must have birth date of individual/household members
- +Length of Time homeless
- +Date of stay in Emergency Shelter if applicable
- +Location of where they were staying if not at the Third Party Agency Shelter
- +Other appropriate information related to proof of homelessness
- +Signed and dated by appropriate third party representative. Examples: case manager, director of agency, etc.

If referral is from the Justice System, the letter must include that the person was homeless prior to entering the jail and the person was in jail for 90 days or less.

**Allegheny County Department of Human Services
Agency Standardized Certification Form**

Agency Name:
Agency Address:
Agency Phone:
Date:

I hereby certify that
Name of Consumer or list all Family members) _____
Birth Date(s) ___/___/_____
SSN (if known) ____/___/____

Has been homeless from (specific dates) _____

The individual/ family has been staying at (location or conditions) _____ for the period of
time (specific dates or time frame i.e. June 1 to June 15, 2012) _____.

List other relative information related to homeless situation or lack of resources or social supports:

I hereby certify that this individual/family is known to my agency and that the information listed above is correct.

Signature of Agency Director or Support Staff

Print Name Agency Staff Person

Date ___/___/____

Title _____

Allegheny County Department of Human Services
Agency Name _____
Consumer Standardized Self-Certification Form

Consumer Name (Print) _____

I hereby certify that I (we) do not have housing because of the following:

I further certify that I (we) do not have the resources or social network needed to secure or maintain housing because:

I have provided the program/agency with all the true and correct information. I understand that any misleading information may lead to my discharge from the program.

Signature of Applicant
Date ____/____/____

Signature of Agency Intake/Staff
Date ____/____/____

Allegheny County Department of Human Services
Agency Name _____
Due Diligence Intake Form

Consumer Name (Print) _____

I hereby certify that the following steps were undertaken in order to validate homeless situation.

Person Contacted _____

Relationship to Consumer: _____

Address: _____

Phone: _____

Attempt	Date	Time	Method Of Contact	Outcome of Contact
Attempt 1				
Attempt 2				
Attempt 3				
Attempt 4				

Final Result:

I hereby certify as an employee of _____ that the information presented above is true and correct.

 Signature of Intake Worker
 Date ____/____/____

 Print Name of Intake Worker

Allegheny County Department of Human Services
Agency Name _____
Oral Certification Form

Consumer Name (Print) _____

Oral Statement Made by: _____

Date: ____/____/____ Time _____

Location: (Check One) Phone _____ In Person _____ Other: _____

Relationship to Consumer: _____

Address: _____

Phone: _____

I hereby certify that the following information was presented to me regarding the homeless situation, validation of social network and/or resources: (List Specific Details)

I hereby certify as an employee of _____ that the information presented above is true and correct as orally presented to me.

Signature of Intake Worker
Date ____/____/____

Print Name of Intake Worker

Allegheny County Department of Human Services
Agency Name _____

Housing Option Documentation Homeless Category 2 and At Risk Categories

Consumer Name (Print) _____

Subsequent Housing Options Identified as described under Homeless Category 2, At Risk Categories and Attempted but failed to access other housing option or no longer available option:

Date	Specific Housing Option	Result

I, _____, attest and certify that the above information is an accurate and complete list of the housing search performed and there are no other appropriate housing options available to me or my family.

 Signature of Applicant
 Date ____/____/____

 Signature of Agency Intake/Staff
 Date ____/____/____

Allegheny County Department of Human Services
Agency Name _____
Housing Option Documentation Category 4
Fleeing Domestic Violence Standardize Form

I, _____ (Consumer Name) attest that I do not have any other safe residences to use as an option to flee domestic violence, dating violence, sexual assault or stalking. My primary nighttime residence is: (list address)

My current residence (listed above) is unsafe to return to; and that this truly reflects my current housing conditions.

Signature of Applicant
Date ____/____/____

Signature of Agency Intake/Staff
Date ____/____/____

Allegheny County Department of Human Services
Agency Name _____

Resources and Support Network Documentation

Consumer Name (Print) _____

Resources and Support Networks as described under Homeless Definitions Categories 2 and 4.

Do you or any member of your household presently have any financial resources that could be used towards rental arrears, ongoing rental payments, hotel or motel payments or security deposits?

YES _____ NO _____

If yes, indicate in the table below the resources available, name of the household member whose resource it is and the amount.

Resource	Name of Household Member	Amount
Checking Account		
Savings Account		
Money Market Account		
Stocks or Securities		
Savings Bonds		
Certificates of Deposit		
IRA, Pension, Retirement		
Property		
Child Support/ Alimony		
Other		
Other		
Other		

Does your household presently have any family, friends, church, or other support networks that could assist you in obtaining permanent housing?

YES _____ NO _____

Please list below:

Name of Resource	Reason for Lack of Assistance

I, _____, attest and certify that the above information is an accurate and truthful listing of information regarding my resources and social network.

 Signature of Applicant
 Date ____/____/____

 Signature of Agency Intake/Staff
 Date ____/____/____