

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.

- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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: UFA

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

1B. Coordination and Engagement–Inclusive Structure and Participation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2022 to April 30, 2023:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC’s Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	No	Yes
4.	Disability Service Organizations	Yes	No	Yes
5.	EMS/Crisis Response Team(s)	Yes	No	Yes
6.	Homeless or Formerly Homeless Persons	Yes	Yes	No
7.	Hospital(s)	Yes	Yes	Yes
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
9.	Law Enforcement	Yes	No	Yes
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	No	Yes
11.	LGBTQ+ Service Organizations	Yes	No	Yes
12.	Local Government Staff/Officials	Yes	Yes	Yes
13.	Local Jail(s)	Yes	No	Yes
14.	Mental Health Service Organizations	Yes	Yes	Yes
15.	Mental Illness Advocates	Yes	No	No

16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	No	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	No	No	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	No	No
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	No	Yes
29.	State Domestic Violence Coalition	No	No	No
30.	State Sexual Assault Coalition	No	No	No
31.	Youth Advocates	Yes	No	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.				
35.				

By selecting "other" you must identify what "other" is.

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	
	Describe in the field below how your CoC:	
1.	communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;	
2.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and	
3.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).	

(limit 2,500 characters)

(1) The CoC is open to anyone interested in contributing to and productively shaping the delivery of homelessness services. Membership is always open, and information is continuously accessible on the CoC webpage, in addition to being shared through CoC meetings and partners' distribution lists and contacts. New members receive introductory information regarding the CoC and a point of contact for questions. The CoC's governing board (HAB) accepts new members annually through a nomination process that is publicly posted, distributed via email, and announced at the bi-monthly public CoC meetings. (2) Interpretation and translation services, including ASL, are available as needed for meetings, and meetings are held in ADA compliant locations, including the ability for people with hearing devices to link directly into the audio system. Since the onset of the pandemic, Microsoft Teams has also been used for meetings, with closed captioning and transcriptions available in real time and within meeting recordings. (3) During the annual nomination process, the HAB considers CoC stakeholder involvement and conducts targeted outreach to bolster participation of any group that may be underrepresented. Further, the CoC's administrative lead, DHS, is the County's Department responsible for providing and administering publicly-funded human services to County residents. All DHS services, policies and processes are informed by a commitment to diversity, equity and inclusion, requiring the active and intentional inclusion of people of varying social identities (e.g., race, ethnicity, gender identity and expression, sexual orientation, age, socioeconomic class, ability, religion, citizenship status and country of origin). Through its position and commitment, DHS collaborates closely with a broad array of organizations serving culturally specific communities and leverages these partnerships to support the cultural responsiveness of the system. Example results of these processes and efforts over the past two years include organizations that serve culturally specific communities experiencing homelessness (e.g., black, transgender) joining the CoC, and collaborating with the Hugh Lane Wellness Foundation to provide sexual orientation, gender identity and expression (SOGIE) trainings to system staff to support effectiveness at responding to the needs of LGBTQ+ individuals and families.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section V.B.1.a.(3)	

Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

(1) The CoC is structured to continuously build on stakeholder input. CoC membership is broadly representative, including individuals who are currently or have previously experienced homelessness, service agencies (homeless and non-homeless specific), planning and advocacy bodies, local government, and funders. This representation is also reflected in the governing board (HAB) and its Committees. The HAB engages stakeholders by holding regular meetings, sharing materials in advance of meetings, and collecting feedback both in advance of and during meetings. Both the bi-monthly full HAB meetings and monthly Committee meetings are open to the full CoC and the public. Additional engagement opportunities are scheduled as appropriate. For example, scheduling focus groups or community forums, conducting stakeholder interviews, or open input requests via media outreach. In addition, presentations and trainings are held throughout the year, further engaging other systems, including but not limited to: behavioral health professionals, crisis intervention teams, food assistance providers, health insurance advocates, and aging providers. (2) Communications about meetings, forums and input opportunities occur through multiple channels, including email via the CoC distribution list and partnering groups' lists, posting on the CoC webpage, an e-share information bulletin for CoC providers, and announcement at CoC meetings and through DHS's communication channels. (3) Interpretation and translation services, including ASL, are available as needed for meetings, and meetings are held in ADA compliant locations, including the ability for people with hearing devices to link directly into the audio system. Since the onset of the pandemic, Microsoft Teams has also been used for meetings, with closed captioning and transcriptions available in real time and within meeting recordings. (4) Input is documented and reviewed by the HAB and a public comment period is open prior to HAB voting to ensure public input prior to CoC decision making. The input received is used to guide the priorities and direction of the CoC at both the service and the system level. For example, stakeholder input has guided the design, implementation and ongoing refinement of Coordinated Entry, the CoC's commitment and fidelity to Housing First, and the CoC's strategic planning.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
NOFO Section V.B.1.a.(4)		
Describe in the field below how your CoC notified the public:		
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;	
2.	about how project applicants must submit their project applications—the process;	
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and	
4.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.	

(limit 2,500 characters)

The CoC utilizes an open and competitive procurement process whenever there is an opportunity to add programming to the CoC, regardless of funding source. Proposals are accepted from any eligible entity and are open to organizations who have not previously received CoC Program funding. In situations where the CoC can solicit new programs, a public RFP, open to any eligible organization (e.g., for-profit agencies are excluded for CoC Program funds) is released by DHS, the CoC's administrative lead agency and Collaborative Applicant. The RFP includes detailed instructions regarding who can apply and how to submit. All RFPs are broadly distributed, including publicly posting online at both DHS's website (which is used across the county for all funding through DHS, and is regularly reviewed by service providers) and www.PAbidsystem.com, emailed to service providers across the region and posted in multiple newspapers. Proposals are reviewed by a diverse review committee, including CoC board members, and are scored based on the criteria outlined in the RFP. Criteria include but are not limited to: organizational experience and capacity, implementation strategy, ability to implement Housing First and plans to meet program standards including working with coordinated entry and HMIS. Based on the score results and analysis of local needs, the review committee puts forth a recommendation to County leadership, who then review the recommendation and justification and make a final decision on projects to fund. When the CoC's board has authority over the funds available, for example CoC Program Funds, the above process is maintained, plus the full board votes on the allocation following a CoC public comment period. To ensure effective communication with individuals with disabilities, all materials are available in PDF format; in addition, interpretation and translation services, including ASL, are available.

1C. Coordination and Engagement

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC's geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	No
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	

Describe in the field below how your CoC:	
1.	consulted with ESG Program recipients in planning and allocating ESG Program funds;
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and
4.	provided information to Consolidated Plan Jurisdictions to address homelessness within your CoC's geographic area so it could be addressed in the Consolidated Plan update.

(limit 2,500 characters)

(1) The CoC has 2 ESG recipients, Pittsburgh City Planning Department and the Allegheny County Department of Human Services (DHS). DHS is the CoC's Collaborative Applicant/UFA, and administrative lead, and is therefore fully immersed and integrated into CoC planning and allocation activities. Pittsburgh City Planning Department is an active collaborator within the CoC, including serving as Co-Chair of the CoC's Analysis and Planning Committee. ESG recipients and sub-recipients participate in a bi-monthly planning meeting used for real-time review of ESG program performance and planning. As such, ESG is incorporated into CoC planning-at-large and the CoC is incorporated into ESG specific planning. This results in collaborative and mutually reinforcing planning for funds across the CoC, whether CoC Program or ESG funded. (2) A key responsibility of the Analysis and Planning Committee (co-chaired by an ESG recipient) is developing the annual performance reviews and ranking tool. The same tool is used for both ESG sub-recipients and CoC program sub-recipients, utilizing data from HMIS. The DHS analytics team also pulls the data for the CAPER reports needed by ESG. As such the CoC is fully involved in the evaluation and performance reporting of ESG Program Recipients. Further, there is cross-funding representation on the evaluation committees that review and rate CoC projects and make final ESG funding decisions. (3,4) PA-600 has four Consolidated Plan jurisdictions—Pittsburgh City Planning Department, Allegheny County Department of Economic Development, McKeesport, and Penn Hills. The CoC provides PIT, HIC and HMIS data on projects by area to all four Con Plans. All four jurisdictions have representatives on the CoC's board (the HAB) and actively participate in committees. The existing CoC governance structure and the collaborative structure of work between the entities, facilitates strong communication and ensures the Consolidated Plans' updates reflect local homeless information and the CoC vision.

1C-3.	Ensuring Families are not Separated.	
	NOFO Section V.B.1.c.	

Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported sexual orientation and gender identity:

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	No

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

Select yes or no in the chart below to indicate the entities your CoC collaborates with:

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

Describe in the field below the formal partnerships your CoC has with at least one of the entities where you responded yes in question 1C-4.

(limit 2,500 characters)

Within the CoC’s geographic region, the LEAs are the school districts, and the SEA has a contract with the Allegheny Intermediate Unit (AIU) to support schools around homelessness and education. With that noted, the CoC has robust and multifaceted partnerships with youth education providers, school districts/LEAs and the SEA through the AIU. The CoC’s voting body has representatives from both a youth education provider and the AIU; as such these entities are directly engaged in CoC planning. The CoC requires all homeless programs that serve families with children to have an Education Liaison on staff to ensure the educational and developmental needs of preschoolers and school-aged children are met. The CoC also mandates that all homeless families with infants and toddlers are offered referrals to assess the child’s development in accordance with state law. The CoC’s Coordinated Entry is also the centralized access point for home visiting programs that serve pregnant families and children ages 0-6, creating the opportunity to offer any family reaching out for homeless assistance to also access Early Intervention programs including Early Head Start. Similarly, every LEA has a Homeless Liaison on staff, who consults with the AIU/SEA to ensure children are enrolled in school and to assist with transportation, paperwork, immunizations, and other school requirements. In addition to these formal partnerships, regular and ongoing collaboration occurs across the entities. With support from the National Center for Homeless Education, the CoC and AIU brought together LEAs/school districts, higher education entities, workforce development, providers and community agencies to inform the Coordinated Community Plan for the CoC’s YHDP and participate in subsequent community calls on addressing needs of older unaccompanied youth. Additionally, the CoC participates in the long-standing Homeless Education Network (HEN), a community of nonprofits, higher education institutions, medical providers, foundations, school districts, Homeless and Education Liaisons, government and community leaders who are committed to addressing youth homelessness by meeting the housing, educational and wellness needs of youth. They host quarterly HEN meetings focused on policies and procedures to ensure that homeless children have access to school, pre-school, and after school activities. Meetings also include trainings on rights of homeless children and best practices to foster school connections

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
NOFO Section V.B.1.d.		

Describe in the field below written policies and procedures your CoC uses to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 characters)

Families are informed of education services at several points during CoC involvement: at diversion, assessment, initial referral to and enrollment in CoC program, as well as at post-involvement transition to community. All Coordinated Entry (CE) staff are trained to connect all homeless families with the homeless liaison for the school district in which they are residing and educate them on how to best connect children to education. CE makes referrals for Home Visiting and linkages to community-based family support centers. Additionally, the CoC requires every program that provides housing or services to families to designate a staff person to be a Homeless Liaison. CoC staff (homeless liaisons, CE staff, Homeless Supports and Services Coordinators) provide advocacy for: school re-enrollment or registration; referral to additional supportive educational services; and support in continuation of schooling and transportation to school upon exit from program. Families with youth under age 5 are offered developmental assessments and support from the early intervention programs. Some programs also have on-site early learning classrooms to offer additional educational services. CE staff assist families to reconnect to their school of origin or enroll in a new feeder school and help parents access additional assistance for transportation and relevant concrete goods (e.g., uniforms). Supporting these processes, the CoC's Family Shelter Standards of Care details the expectations of shelters to: provide linkages to development screening for children experiencing homelessness; ensure staff have basic knowledge about Head Start, Early Head Start, early intervention, preschool, child care subsidy programs, preschool, and other early care and learning programs; publicly post enrollment materials and encourage participation in educational programs; and be knowledgeable regarding the rights of children and youth experiencing homelessness under McKinney-Vento.

1C-4c.	Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section V.B.1.d.	

Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	Yes	Yes
2.	Child Care and Development Fund	Yes	Yes
3.	Early Childhood Providers	Yes	Yes
4.	Early Head Start	Yes	Yes
5.	Federal Home Visiting Program—(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	Yes	Yes
6.	Head Start	Yes	Yes
7.	Healthy Start	Yes	Yes
8.	Public Pre-K	Yes	Yes
9.	Tribal Home Visiting Program	No	Yes
	Other (limit 150 characters)		
10.			

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Collaboration with Federally Funded Programs and Victim Service Providers.
	NOFO Section V.B.1.e.

In the chart below select yes or no for the organizations your CoC collaborates with:

	Organizations	
1.	state domestic violence coalitions	Yes
2.	state sexual assault coalitions	Yes
3.	other organizations that help this population	Yes

1C-5a.	Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

The CoC maintains a robust partnership with the county’s four VAWA-funded service agencies, and these service agencies collaborate with the PA Coalition Against Domestic Violence, the PA Coalition Against Rape, and Pittsburgh Action Against Rape. Regular and on-going collaboration informs CoC-wide policies and training pertinent to providing housing and services to survivors of domestic violence, dating violence, sexual assault and stalking (collectively referred to as DV). Foundationally, each of the DV agencies are actively engaged in the CoC, participating in CoC meetings. Further, the CoC’s board includes a representative from one of the agencies, who is thus a voting member directly responsible for CoC planning and administration. Regarding processes and policies, the CoC’s Coordinated Entry (CE) teams coordinate directly with the DV organizations to review and update processes, language and engagement strategies around survivors. For all households who self-disclose experiencing DV, a direct connection to one of the DV service providers is offered to assist with accessing supports and services for safety planning and longer term supports, while concurrently offering the CoC’s full array of housing and service options. Similarly, for those needing RRH that specifically serves survivors, direct coordination with the DV lead agency, Alle-Kiski HOPE Center, ensures safe and efficient coordination. Regarding training, case managers across the CoC provider agencies are required to complete Core Competency trainings within a year of the start of their employment, including Trauma Informed Care. In addition, the CoC partnered with one of the DV providers, Women’s Center and Shelter (WC&S) on a year-long pilot initiative: IPV Prevention, Intervention, and Support for Allegheny County Adult and Youth Homeless Providers. The pilot aimed to enhance 12 adult and youth homeless provider organizations, so they are better able to recognize and serve individuals or families who are at the intersection of IPV and homelessness. Within this initiative, WC&S specialists offered training, consultation, and coaching for homeless provider staff. DHS, the CoC’s lead agency, evaluated the pilot, including a pre-post survey of core practices, a training pre-post-test, a scale that measures survivor safety, and open-ended interviews with the organizations participating in the pilot. Preliminary results from the evaluation identified that participating organizations institute

1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

(limit 2,500 characters)

(1) Professional development of homeless services staff is essential to ensuring that those experiencing homelessness receive the best care possible. Such care requires a trauma-informed, client-centered, harm reduction approach, infused with a drive to continually develop better service delivery. Preparing homeless services providers in the CoC to take on these tasks requires orientation to the fundamental models of care and ongoing mentoring and professional development in effectively addressing the needs of vulnerable population, including survivors of domestic violence, dating violence, sexual assault and stalking (collectively referred to as DV). To ensure mastery of core competencies, case managers in the CoC must complete all the following Core Competency trainings within a year of the start of their employment: Case Management 101; Motivational Interviewing; Crisis Management/De-escalation; Trauma Informed Care. To support the homeless services agencies and their staff in mastering these skills, the CoC's lead agency, DHS, organizes Core Competency Trainings semi-annually, providing multiple opportunities for participation. Additionally, DV providers offer trainings, specialized counseling and work collaboratively with non-victim service providers to support clients accessing housing. This relationship not only utilizes the expertise of the DV providers, but also expands the opportunity for non-victim service provider staff to see and learn from that expertise. In addition, and as described in the previous response, the CoC partnered with WC&S on a year-long pilot initiative to enhance the culture within 12 adult and youth homeless provider organizations to better recognize and serve individuals or families who are at the intersection of IPV and homelessness. Within this initiative, WC&S specialists offer training, consultation, and coaching for homeless provider staff. Evaluation results are being finalized now and will be used to inform future training and planning across the CoC. (2) In addition to the above described training array, all CE staff are specially trained on DV safety issues as they pertain to the assessment and referral processes of the CoC. This includes protecting client confidentiality and privacy, the location of DV facilities, and any information collected about the individuals or family, including ensuring ongoing communication is agreed upon when planning for safety.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC's coordinated entry includes:	
1.	safety planning protocols; and	
2.	confidentiality protocols.	

(limit 2,500 characters)

The CoC prioritizes safety and trauma-informed, victim-centered services across the system, with client choice incorporated into the assessment, program matching, and housing preferences processes. Coordinated Entry staff conduct a brief initial screening of risk or potential harm perpetrated on participants as a result of domestic violence, sexual assault, stalking, or dating violence. While survivors can choose to be referred to victim service programs, CoC wide programs, or both, if risk is deemed to be present, the participant is offered connection to one of the victim service providers, via a warm transfer, to assist with accessing supports and services for safety planning and longer term supports. The victim service providers use a trauma-informed approach designed to address the specific service needs of survivors of abuse, neglect, and violence. Further supporting service delivery best practice for survivors, CE staff are trained to protect client confidentiality and privacy, the location of survivor housing and services facilities, and any information collected about the individuals or family, including ensuring ongoing communication is agreed upon when planning for safety. CE staff ensure the client can share information safely and are transparent about information collection and storage. All CE data is stored in secure, access limited databases, regardless of DV status, with further data lockdown options when safety risks do exist.

1C-5d.	Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below:

1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and	
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.	

(limit 2,500 characters)

The CoC has four VAWA-funded domestic violence service providers which provide emergency shelter, rapid rehousing and support services for singles and families affected by domestic violence, dating violence, sexual assault and stalking (collectively referred to as DV). (1) These providers enter client level data into an HMIS-comparable database and provide de-identified aggregate data to the CoC and HMIS lead agency (DHS) for additional analysis. Linkages to and collaboration with DV providers is conducted via warm transfers, working outside of the IT system and program data is tracked using HMIS-comparable databases. Additionally, CE staff are trained on confidentiality, and all CE data is stored in secure, access limited databases, regardless of DV status, with further data lockdown options when safety risks do exist. (2) Facilitating the analysis of data is DHS’s dedicated analytic unit focused on homelessness and housing, and the CoC Analysis and Planning Committee—a committee of the CoC’s board (HAB) that meets monthly and provides ongoing analysis to support the planning of the CoC, at both the provider and system level. DV, HMIS and CE data are reviewed to better understand the needs of this population. This includes examining household composition, additional supportive services this population is receiving and employment needs. The analyses also identify gaps in service for this population. This involves quantifying the volume of households experiencing domestic violence and their needs for longer term housing and the rate at which units become available to meet the demand. This information informs CoC planning for this population. This analysis, along with discussion with DV providers, allowed the CoC to accurately quantify the unmet need for rapid rehousing services for this target population. This information informed the planning and application for a DV-specific CoC Bonus project during a previous competition year, for which the CoC was awarded and has continued to apply for as renewal (DV Unified Project).

1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
1.	whether your CoC has policies and procedures that include an emergency transfer plan;	
2.	the process for individuals and families to request an emergency transfer; and	
3.	the process your CoC uses to respond to individuals’ and families’ emergency transfer requests.	

(limit 2,500 characters)

The CoC has implemented standardized processes and communication channels to effectively administer emergency transfer plans. Through Coordinated Entry (CE), households are informed of the services and supports available and the processes to expect moving forward. Once connected to a housing program and through enrollment, households are again informed of processes. All CE staff receive training and have supervisory oversight to ensure they are consistently conducting their duties and communicating accurately and effectively with households during CE. CoC policies, procedures and practices are captured and shared with providers via contract documents, specification manuals, and policy documents. The CoC provides support and oversight to provider agencies via monthly meetings, bi-weekly office hours and annual programmatic monitoring. All of the above include both the communication of emergency transfer plans, and the plan policies and procedures themselves. In terms of the policies and processes for emergency transfer plans: When an emergency transfer plan is needed, the provider or client notifies CE and parties work together to respond to the immediate safety needs to develop a plan, with placement taking priority over other households until resolution. If the family plan includes separation and relocation, CE will make accommodations for new units for each eligible member. Once a transfer unit is identified, the lease for the tenant’s current unit will be terminated without penalty. These processes are congruent with VAWA, and DV provider crisis lines are available 24/7 to provide immediate support to survivors, significant others, and allied professionals.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC:

1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC’s geographic area; and
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.

(limit 2,500 characters)

(1) The CoC prioritizes safety and trauma-informed, victim-centered services across the system, with client choice incorporated into the assessment, program matching, and housing preferences processes. Through Coordinated Entry (CE), individuals and families who experienced/are experiencing domestic violence, dating violence, sexual assault, or stalking (collectively referred to as DV hereafter) can choose to be referred to only DV service agencies (via a warm transfer), non-DV service agencies (via HMIS), or both. CE staff discuss safety relating to participation in the assessment process and the program matching process. The CoC has 3 DV emergency shelters and a fourth VAWA-funded provider that all collaborate to provide shelter, RRH and support services. Inclusion of both DV-specific and non-DV-specific RRH programs within the CoC maximizes the client’s choice of housing while still ensuring safety and maintaining confidentiality. Additionally, shelters work directly with law enforcement and use a lethality assessment to ensure safety of those most at risk of violence/harm when presenting for service. (2) Regular and on-going collaboration informs CoC-wide policies and procedures pertinent to providing housing and services to survivors of DV. DV providers regularly gather input from their service participants regarding service-delivery, policies and program design. In turn, each of the DV agencies are actively engaged in the CoC, participating in CoC meetings and coordinating with the CoC’s lead agency on system processes and services. Further, the CoC’s board includes a representative from one of the agencies, who is thus a voting member directly responsible for CoC planning and administration. As an example of identifying needs and adapting the homeless response system, new positions were established to respond to needs of survivors. This included a Substance Use & Recovery Specialist on one of the DV shelters, and a Systems Manager to identify and provide specialized care and individualized system advocacy for clients at the highest level of danger.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC:	
	1. ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and	
	2. accounted for the unique and complex needs of survivors.	

(limit 2,500 characters)

The CoC's four VAWA-funded providers are essential to the development and delivery of services responsive to the unique and complex needs of survivors. Providers serving individuals and families who experienced/are experiencing domestic violence, dating violence, sexual assault, or stalking (collectively referred to as DV hereafter), regularly collect input and feedback from their service participants. This done through both extensive anonymous surveys and through the solicitation of direct participant feedback. This participant input is combined with system performance measurement information to further assess how well policies, services and program designs are responding to the needs of survivors. In addition to the reflective feedback of service participants, the DV agencies provide individualized service-delivery that is strengths-based, solution-focused, trauma-informed, and designed by the assessed and expressed needs of each participant. This person-centered and individualized approach supports a service delivery system that is responsive to the unique needs of survivors.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+--Anti-Discrimination Policy and Training.	
	NOFO Section V.B.1.f.	

	1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
	2. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
	3. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

1C-6a.	Anti-Discrimination Policy--Updating Policies--Assisting Providers--Evaluating Compliance--Addressing Noncompliance.	
	NOFO Section V.B.1.f.	

Describe in the field below:

1.	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;
2.	how your CoC assisted housing and services providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy;
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

The CoC’s administrative lead, DHS, is the County’s Department responsible for providing and administering publicly funded human services to residents. All DHS services, policies and processes are informed by a commitment to diversity, equity and inclusion, requiring the active and intentional inclusion of people of varying social identities. DHS collaborates closely with a broad array of organizations serving culturally specific communities and leverages these partnerships to support the cultural responsiveness of the system. (2) DHS sub-recipients are contracted providers and must abide by DHS’s requirements. Included in all contracts is anti-discrimination policy and adherence to DHS’s Standards of Practice (SOP), including SOP addressing sexual orientation, gender identity and expression (SOGIE). These Standards were developed and are regularly reviewed and maintained through DHS’s Office of Equity and Engagement (OEE). OEE collaborates with key stakeholders, including people with lived experience, advocates, and provider agencies on the development and updating of Standards. Quarterly SOGIE trainings were held for homeless service providers and TA was offered to programs as needed when implementing the SOP. A collaboration with the Hugh Lane Foundation provides continual access to an array of ongoing SOGIE trainings for homeless service staff. (3) DHS programmatic and fiscal specialists monitor all aspects of each program, including compliance with anti-discrimination policies. DHS also monitors program admissions to ensure the provision of housing and supportive services to persons regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status or disability. Denying or terminating services based on the client’s gender or sexual identity is prohibited, in accordance with the Fair Housing Act. In addition, individuals may register concerns and complaints through the DHS Director’s Action Line, and a specialist will research and respond.(4) When out of compliance, providers are required to submit a corrective action plan detailing how the issue will be addressed and brought to compliance. If the plan is unsatisfactory, not followed through on, or noncompliance continues, the project is deemed high-risk and 90-day probationary period beings, within which additional & enhanced TA is provided. If noncompliance continues DHS and the HAB determine action, which may include partial or complete reallocation

1C-7.	Public Housing Agencies within Your CoC’s Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy.	
	NOFO Section V.B.1.g.	

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC’s geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Allegheny County Housing Authority	12%	Yes-HCV	Yes
Housing Authority of the City of Pittsburgh	13%	Yes-HCV	Yes

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	
	Describe in the field below:	
1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or	
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.	

(limit 2,500 characters)

The CoC has an established homeless admission preference through the Housing Choice Voucher program with the two largest housing authorities in the geographic area—Allegheny County Housing Authority and Housing Authority of the City of Pittsburgh. Both PHAs sit on the CoC governance board (HAB), allowing for a close working relationship. The Homeless Admission Preferences were created eight years ago and are an important part of the CoC Move On strategy. The CoC also collaborates with both PHAs on other voucher types including Emergency Housing Vouchers, Mainstream Vouchers, Family Unification Program, and Fostering Youth to Independence vouchers. The preference allows participants of PSH, RRH, and transitional programs that will require a housing subsidy to maintain stability to move to the top of the HCV waiting list. The CoC makes referrals on an on-going basis to these two housing authorities so that program participants can have access to affordable, subsidized housing options. These preferences have enabled the CoC to open the back door of the homeless system into permanent housing, and create space in the system for newly identified homeless individuals and families to take their place. The CoC is also actively coordinating with the PHAs to assess the impact of new processes and incentives used within the EHV program to identify opportunities to further strength the collaboration between the CoC and PHAs around the future utilization of subsidized housing. This includes, but is not limited to, assessing pre-screening and eligibility review for HCV, application and housing search assistance, aftercare, and more effective communication to ensure a higher success rate in people obtaining and leasing up with vouchers.

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored—For Information Only	

Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

1.	Multifamily assisted housing owners	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section V.B.1.g.	

In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	Yes
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	Yes
8.	Other Units from PHAs:	

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section V.B.1.g.	

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	EHV, FYI, FUP, Housing Mobility Demo Project

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	
	NOFO Section V.B.1.g.	

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored—For Information Only	

Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.

PHA
Housing Authority...
Allegheny County ...

1C-7e.1. List of PHAs with MOUs

Name of PHA: Housing Authority of the City of Pittsburgh

1C-7e.1. List of PHAs with MOUs

Name of PHA: Allegheny County Housing Authority

1D. Coordination and Engagement Cont'd

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1.	Discharge Planning Coordination.	
	NOFO Section V.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section V.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	35
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	35
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.

	Describe in the field below:
1.	how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
3.	how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

(1)The CoC formally committed to Housing First in 2017, including reallocating almost all transitional housing to permanent housing and requiring service providers to: (a) eliminate criteria that prevent or terminate an otherwise eligible individual or family (minimum criteria of homeless and with a disability) from receiving services, and to (b) connect participants quickly to housing without any additional preconditions and barriers to entry, such as requiring sobriety, employment, or participation in other services. DHS, the CoC’s administrative agency, reviews program requirement documentation for compliance with Housing First, monitors all referrals to services in the CoC through Coordinated Entry (CE), and reviews and makes final determination on any denial of service. If the reason for denial is not consistent with Housing First, and/or is not consistent with Fair Housing, the referral is sent back to the provider and the client is required to be served. (2,3) DHS Program Monitors, who are specialized staff trained in HUD, Pennsylvania Homeless Assistant Program (HAP) and CoC requirements, conduct monitoring visits at each sub-recipient’s site at least annually, and more often when issues are identified or when quality assurance plans have been implemented and are being monitored. During the visits, monitors conduct their review in accordance with the Program Monitoring Tool, which includes consistency with Housing First. DHS reviews program agreements, program rules, and intake and termination procedures to ensure that: program access is not contingent on sobriety, drug & alcohol treatment, income, criminal record, credit rating, financial or rental history; participating in offered programming or services, or drug testing are not conditions of continued service delivery; and that service plans and case notes are client focused and client driven. DHS also tracks and reviews service denials and involuntary terminations to ensure they were not incongruent with Housing First.

1D-3.	Street Outreach—Scope.	
	NOFO Section V.B.1.j.	

	Describe in the field below:
1.	your CoC’s street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
2.	whether your CoC’s Street Outreach covers 100 percent of the CoC’s geographic area;
3.	how often your CoC conducts street outreach; and
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

(1) The CoC’s street outreach effort is led by a strong network of 7 publicly and privately funded teams. The network includes specialty teams to ensure needs presented can be met, including: medical street outreach (e.g., Dr. Jim Withers of Operation Safety Net is internationally recognized for his work in street medicine), outreach that incorporates harm reduction strategies; and outreach responsive to health related social needs. In addition to regular visits of camps, abandoned buildings, cars and hidden locations across the county, outreach teams receive information on where people are located from BigBurgh (a web-app for homeless services), Coordinated Entry (CE), 311, emergency response and law enforcement entities, and community groups. Street Outreach also engages people at drop-in centers, shelters, food lines and other locations where people who might otherwise not be connecting to homelessness services may be. The CoC facilitates a weekly provider meeting to review a by-name list of unsheltered individuals and to strategize effective engagement approaches, and the Homeless Outreach Coordinating Committee (HOCC), a subcommittee of the CoC’s advisory board, convenes to strategize how teams can better identify, engage, and support those who are unsheltered. (2) The network of street outreach teams covers 100% of the CoC’s geographic area, and collaboration through the weekly case conferencing meetings facilitates the identification and coverage of specific or new locations to prioritize. The HOCC has also sought to identify areas of the region where enhanced collaboration with community organizations and businesses may help facilitate further engagement with individuals experiencing homelessness in those areas. (3) Teams are out every day of the week. Certain areas where homeless populations are known to congregate and live are visited multiple times each week. (4) Outreach is tailored to engage unsheltered populations who are unlikely to ask for help by using evidence-based practices such as Motivational Interviewing, Trauma Informed Care, and Peer Support. All outreach workers strive to engage individuals by meeting their basic human needs, developing trust, and fostering personal connections. Additionally, our CoC’s CE includes a specialized Field Unit which provides the full array of street outreach support while also providing mobile access to CE so individuals can be assessed for services wherever they are.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section V.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC’s geographic area:

	Your CoC’s Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	No
3.	Engaged/educated local business leaders	Yes	No
4.	Implemented community wide plans	No	No
5.	Other:(limit 500 characters)		

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.	
	NOFO Section V.B.1.i.	

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	885	879

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section V.B.1.m.	

Indicate in the chart below whether your CoC trains program staff annually on the following mainstream benefits available for program participants within your CoC's geographic area:

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF–Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section V.B.1.m	

Describe in the field below how your CoC:

- systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, SSDI, TANF, substance abuse programs) within your CoC's geographic area;
- works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
- works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

The CoC uses multiple avenues to keep program staff up to date on mainstream resources, linkages to assistance with health insurance enrollment and SOAR certification. The CoC’s CE staff provide a variety of webinars on available resources to program providers and attend resource fairs and other community events to further raise awareness of resources. The CoC partners with PA MEDI, a State Insurance Assistance Program, to host an educational series on eligibility, application, and coordination processes for Medicaid and Medicare, offers regular trainings on accessing subsidized housing programs, and publishes an electronic bulletin for program staff and stakeholders on mainstream benefits. In addition, the CoC Lead Agency has monthly provider meetings with information on mainstream resources including how to assist with housing searches, employment, and basic needs. The CoC also provides direct linkages to mainstream resources to clients. Through CE, clients are connected to health navigators for health insurance enrollment assistance; to a local anti-hunger agency for assistance in accessing Food Stamps, SSI, and TANF; and to local SOAR specialists for SSI/SSDI. The CoC has done substantial work to collaborate with healthcare organizations, including SUD and MH treatment, and make services available and accessible to households experiencing homelessness. Of significance, the CoC’s lead agency, DHS, is the County administrator of the public behavioral health system. Through this integrated system, access to MH residential services can be leveraged when appropriate. Other examples of important integration of healthcare services within the homeless response system include: development of specialized targeted case management to provide behavioral health service navigation and support to individuals experiencing homelessness with BH needs; medical respite programs to support individuals transitioning out of inpatient care; nationally recognized street medicine; co-located health clinics in emergency shelters; and data sharing agreements with health plans to support members in shelter by supporting coordinated care and targeted, individualized supports.

1D-7.	Increasing Capacity for Non-Congregate Sheltering.	
	NOFO Section V.B.1.n.	

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.

(limit 2,500 characters)

The CoC continuously assesses its continuum of services and the most appropriate array of shelter options. Several non-congregate shelter options are currently in place and are designed to meet the needs of some of the CoC’s most vulnerable households. Home2020 is a 17-bed, low barrier shelter that pairs housing supports and intensive case management (ICM) to move clients out of homelessness quickly and effectively. Located in a shared house setting, Home 2020 has enhanced the shelter capacity of the CoC and has established an important bridge to housing for people who are reluctant to enter housing programs. It provides a first step into housing, coupled with ICM to further establish trust and provide linkages to supports, including for behavioral health needs. Wood Street Commons and Homeless Assistance Program (HAP) Crisis units also provide non-congregate shelter space for individuals identified by the Street Outreach teams, but without the intensive level of case management support provided at Home2020. In addition, the McKeesport emergency shelter, in a financially struggling area far from downtown Pittsburgh, also provides emergency shelter space in a non-congregate facility setting, and townhome units are available for families in need of emergency shelter. Finally, this past summer the CoC opened a new 30-unit shelter, employed with peer specialists to help support the needs of residents. As such, the CoC has an array of non-congregate units available that can be responsive to the household composition and level and type of case management need. Of additional note, DHS, the CoC’s lead agency, just released a RFP for operations of a new, low barrier, shared house setting shelter in the southern area of the Pittsburgh, where there is currently no emergency shelter option. Expanding on this, another RFP will be released to identify additional small-size, low-barrier shelter space across the CoC. Partnership with the County and City HOME ARP plans are part of this process to coordinate and seek the most effective use of non-congregate dollars. This approach is expected to enable individuals to find shelter in their communities of choice, avoid concentrating individuals in areas they do not identify as their own communities, manage the provision of support services so that shelter stayers can receive effective and individualized housing planning, and enable the system to be more agile in maintaining a level of shelter capacity that is appropriate.

ID-8.	Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

The CoC partnered with the Allegheny County Health Department (ACHD), area healthcare networks, FQHCs, homeless service providers and others to implement an array of service and system level changes to respond to future public health emergencies, including infectious disease outbreaks. Foundationally, the CoC has put in place communication mechanisms that are responsive to rapidly changing information. This is detailed further in the next question. Additionally, a number of CoC-wide and service specific policies and procedures have been developed and administered. Continuity plans are established, and pathways are in place for: overflow and quarantining space; continued support service engagement through virtual modalities; and supply distribution, including PPE. For example, mobile telehealth technology was purchased and added to every emergency shelter. Through the technology and partnerships with local health providers, particularly area FQHCs, telehealth appointments can be delivered at the shelters. The CoC is also coordinating with ACHD to work directly with emergency shelters on utilizing the telehealth technology effectively and identifying best practices to share across the CoC. These pathways position the CoC to respond to future outbreaks in a manner that continues the delivery of care while seeking to minimize spread. ACHD collaboration also included planning, implementing, and disseminating safety protocols and practices across settings, including the emergency shelters and the Safe Haven isolation and quarantine facility, which will be leveraged for any future outbreaks' preparedness and response. The CoC's close coordination with ACHD and healthcare providers, including FQHCs, has positioned the CoC to effectively respond to future emergencies, including quickly setting up health clinics or vaccination pods, while also strengthening the CoC's present responsiveness to the physical health needs of people experiencing homelessness, including access to physical and behavioral health care on site at emergency shelters.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC:	
1.	shared information related to public health measures and homelessness, and	
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

Effective communication mechanisms that are responsive to rapidly changing information have been foundational to the CoC’s COVID-19 response, and the preparation for further public health events. The communication strategy leverages the resources and networks of the Allegheny County Department of Human Services (DHS), which is the CoC’s administrative lead, but more broadly is the agency responsible for providing and administering human services to County residents. In response to COVID-19, DHS quickly implemented daily provider briefings (now held quarterly), enabling consistent sharing of emerging information and plans, and identifying needs to support the ongoing delivery of quality human services. An online platform was also created to house all briefing materials, as well as guidance on service operations, COVID safety, resources, and FAQs. In addition to the DHS-wide outreach, homeless service briefings occurred weekly, ensuring a standing point of contact with CoC providers and local officials. This included Health Department representatives and epidemiologists to review and discuss safety protocols (inclusive of suspected and positive COVID reporting protocols), the effective implementation of such protocols, and conduct any necessary troubleshooting to ensure protocols were being appropriately implemented. Now held monthly, but with the ability to return to weekly in response to need, this mechanism provides regular and consistent communication with all subrecipients. These standing briefings supplement the already established and ongoing CoC programmatic and fiscal monitoring activities, which provide regular oversight of all CoC programs, including regular annual visits and additional service reviews when issues are identified or quality assurance plans are being monitored. In addition to these well-established information avenues, the collaboration with the Health Department and healthcare entities, including FQHCs, has strengthened the direct partnership between those health-related agencies and homeless service providers. These partnerships can be effectively leveraged for future needs, including, but not limited to: the direct delivery of health care; setting up health clinics and/or vaccination pods; understanding disease information; and identifying and implementing mitigation strategies.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section V.B.1.p.	

Describe in the field below how your CoC’s coordinated entry system:	
1.	covers 100 percent of your CoC’s geographic area;
2.	uses a standardized assessment process; and
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.

(limit 2,500 characters)

(1) The CoC employs a centralized approach to Coordinated Entry (CE) that covers the entire CoC geographic area. CE can be accessed in multiple ways: by phone (25,000+ calls/year), walking into the office in downtown Pittsburgh (1,000+/year), by email (970+/year), or through a mobile Field Unit that meets homeless individuals wherever they are (4,000+ contacts/year). Other call centers and community service providers (e.g. 211, Aging SeniorLine, food pantries) also assist connecting households to CE through warm transfers, emails, and connection to the Field Unit. (2) The CoC administers a standardized assessment process that prioritizes based upon chronic homeless status, vulnerability, and length of time homeless. Vulnerability is assessed using a decision support tool that uses administrative data from Allegheny County’s data warehouse (a national model for bringing together and integrating person and service data from sources both internal and external to human services) to predict the likelihood of key indicators of harm occurring (MH inpatient stays, jail bookings, 4+ ER visits) if a person remains un-housed. This predictive risk assessment results in the people most in need of assistance being prioritized, while being far more accurate and equitable than the previous actuarial tool used. Since it doesn’t rely upon self-reported data, it doesn’t require the time or trauma associated with asking sensitive questions at the time of housing crisis. (3) The CoC’s Coordinated Entry Policies and Procedures are reviewed annually by the CoC and its board, the HAB. In addition to integrating lessons learned throughout the service year, the annual review includes a document review by the CoC’s administrative lead and CE operator, DHS, and collection of public comment regarding the policies and procedures. The annual review period is announced starting in the fall, and public comment is captured through January. At the January CoC meeting all comments are reviewed, and the updates are voted on by the HAB.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
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NOFO Section V.B.1.p.

Describe in the field below how your CoC’s coordinated entry system:

1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
2.	prioritizes people most in need of assistance;
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and
4.	takes steps to reduce burdens on people using coordinated entry.

(limit 2,500 characters)

The CoC seeks to make Coordinated Entry (CE) accessible via its centralized, but multi-modal entry points (including phone, walk-in, email, or through a mobile Field Unit), and through warm transfers, emails and connections by other call centers and community service providers. The Field Unit is particularly effective at reaching people who are otherwise unlikely to call for assistance. It consists of skilled field service coordinators who provide direct support to adults experiencing homelessness. They provide flexible access to CE at various locations throughout the community, including drop-in centers, shelters, encampments, and anywhere else that people experiencing homelessness might be, at both recurring scheduled times, and as needed. They partner closely with other professionals working in outreach, shelters, and housing programs, as well as other support providers. In addition to CE access, they provide flexible case management and service coordination, prioritizing the indicated goals, needs, and preferences of the person served. The percentage of people enrolled in RRH or PSH that reported “place not meant for human habitation” as their prior living arrangement increased from 10% in 2015, when the Field Unit was established, to 25% in 2022. The CE assessment process prioritizes based upon chronic homeless status, vulnerability, and length of time homeless. Vulnerability is assessed using a decision support tool that uses administrative data from Allegheny County’s data warehouse to predict the likelihood of key indicators of harm occurring if a person remains un-housed. This results in the people most in need of assistance being prioritized, while being far more accurate and equitable than the previous actuarial tool used and doesn’t require the time or trauma associated with asking sensitive questions at the time of housing crisis. Timely receipt of service for those most in need is additionally supported through a vacancy matching process, facilitated by a Housing Resource Coordinator who locates the highest priority individuals when services are available and reviews program details, documentation needs, and program contacts with them. Additionally, referrals are monitored in HMIS for timeliness in contacting participants and enrollment. A commitment to continuous quality improvement has been vital to the development and ongoing refinement of CE and has informed the implementation of the processes discussed above.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry—Reporting Violations.	
	NOFO Section V.B.1.p.	

Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC’s geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

(limit 2,500 characters)

(1) The CoC’s Coordinated Entry (CE) is the integrated, multi-modal access point for housing and services provided within the CoC. The Allegheny Link is the one-stop access point for Coordinated Entry and serves the entire geographic region and can be accessed in-person, by phone or email. The Allegheny Link is marketed throughout the CoC’s geographic region via public space advertisements, web postings, providers and partners sharing, and during resource fairs. Additionally, the region’s other call centers and community service entities make referrals and warm transfers to Allegheny Link, with the Link being the number one referral for the area’s 2-1-1 system. Of particular significance to reaching all persons experiencing homelessness is that the CoC’s CE includes the Field Unit. Fully described in the previous question, the Field Unit consists of skilled field service coordinators who provide flexible access to CE anywhere that people experiencing homelessness might be. The Field Unit is particularly effective at reaching people who are otherwise unlikely to call for assistance. (2) All households who access CoC housing programs are connected via CE. Program agreements have been reviewed within the CoC’s monitoring processes, and include participants’ rights and remedies available under federal, state, and local fair housing and civil rights laws. Program agreements are reviewed with each participant and must be signed affirming the review of the agreement. These signed program agreements are again reviewed during annual monitoring. (3) Multiple processes are in place to provide oversight and reporting of actions inconsistent with fair housing choice. All program denials and terminations are reviewed for allowability and cannot be done without the reviewed action in HMIS. DHS, the CoC’s administrative lead, operates a Director’s Action Line (DAL), which any individual may use to register concerns, complaints, or requests with any DHS related service, which includes CoC Program funded services. Received concerns are reviewed and responded to within three days. Finally, all Consolidated Plan jurisdictions are represented on the CoC’s board, and the CoC has an active Local Housing Options Team (LHOT) comprised of a diverse group of both housing and service provider professionals who meet monthly for cross-sector collaborative housing projects and planning activities for all in need of safe, affordable and/or accessible housing in Allegheny County.

1D-10.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	09/01/2023

1D-10a.	Process for Analyzing Racial Disparities—Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section V.B.1.q.	

Describe in the field below:

1.	your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
2.	what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

(1) The CoC conducts racial disparities analyses to assess if racial disparities exist with respect to: persons seeking services, at key decision points, and client outcomes. For these analyses, the CoC is able to leverage the data collection and analysis specialties of its administrative and HMIS lead agency, DHS. The DHS Data Warehouse brings together and integrates person and service data from a wide variety of sources both internal and external to the county. It was created by consolidating publicly-funded human services data, including HMIS data, and, over time, expanded to include data from other sources. It now includes 21 categories of data. Through this data, the CoC analyzes: racial composition of Allegheny County and persons served in the homeless system; the services received by race, placements into different levels of housing support by race, exits to permanent housing destination by race, length of stay in programs by race, and returns to homelessness by race. Of note is that Allegheny County's racial distribution, as of the 2021 ACS Survey, which was used as a comparison base, was 76% white, 12% Black. (2) The CoC's Racial Disparities Assessment found significant racial disproportionality with respect to those who experience homelessness and seek public resources for assistance. Black people are overrepresented, at a rate at least 4 times the rate of their representation in the general populations across homeless program types. The assessment also found that the homelessness system is placing people into homelessness service programs and achieving positive outcomes at rates almost identical to that of the population seeking services, meaning there does not appear to be racial disproportionality once connected to the system. For example, from 2018-2022, we see the percentage of black participants exiting to PH destinations being slightly higher than the percentage of white participants exiting to PH destinations (from homeless prevention it's equally 96%, from short-term homeless programs its 42% compared to 30%; and from permanent housing programs its 68% compared to 63%). Finally, returns to homelessness after successful exit were near identical within 6 months, and within 2 years, was 2.6% for Black participants compared to 3.7% for white participants.

1D-10b.	Implemented Strategies that Address Racial Disparities.	
	NOFO Section V.B.1.q.	

Select yes or no in the chart below to indicate the strategies your CoC is using to address any racial disparities.

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	No
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes

6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	No
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

1D-10c.	Implemented Strategies that Address Known Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below the steps your CoC is taking to address the disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The CoC’s administrative and lead agency, DHS, has a core value that all services, policies and processes will be informed by a commitment to diversity, equity and inclusion. To fully realize this value, DHS joined the Government Alliance for Racial Equity and adopted their framework to eliminate racial inequities and improve outcomes for all racial groups. In practice, the application of this model includes three key phases. Phase 1 is “Normalize” and is focused on establishing racial equity as a key value by developing a shared understanding of key concepts across the entire agency and creating a sense of urgency to make changes. Phase 2 is “Organize”, building staff and organizational capacity, skills, and competencies through training while also building infrastructure to support the work, like internal organizational change teams and external partnerships with other institutions and community. The third phase, “Operationalize”, puts theory into action by implementing new tools for decision-making, measurement, and accountability, such as a Racial Equity Tool and development a Racial Equity Action Plan. A part of the framework, DHS additionally established Racial Equity Core Teams, responsible for driving the racial equity work in each office, inclusive of homeless services. At the CoC level, Coordinated Entry (CE) uses a decision support tool (called AHA) that uses data to predict the likelihood of key indicators of harm occurring if a person remains un-housed. This results in the people most in need of assistance being prioritized, while being far more accurate and equitable than the previous actuarial tool used and doesn’t require the time or trauma associated with asking sensitive questions at the time of housing crisis. In developing, testing and assessing the ethical effectiveness of the tool it was found that the group that would gain the most allocation of additional referrals in using the AHA over the previous tool was Black singles, a group that our racial disparities analysis identified as seeking homeless services at a significantly disproportionate rate. An analysis of our CE data revealed that use of the AHA tool for service prioritization has in fact led to improved outcomes for Black clients since the tool was introduced in 2020. Higher risk Black clients are more likely to be served in permanent housing programs since the AHA tool was introduced.

1D-10d.	Tracked Progress on Preventing or Eliminating Disparities.	
	NOFO Section V.B.1.q.	
	Describe in the field below:	
	1. the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and	
	2. the tools your CoC uses.	

(limit 2,500 characters)

Through the collection and analysis of HMIS data, as well as data from DHS’s Data Warehouse, which brings together and integrates person and service data from a wide variety of sources both internal and external to the county, the CoC is able to regularly track data around disparities in the provision and outcomes of homeless assistance. Particular measures that are analyzed include: composition of persons served in the homeless system, disproportionality metric for persons served in the homeless system compared to the county population, disproportionality metric for persons served across each type of homeless service program, racial breakdown of persons seeking and enrolling in each type of homeless service program, median length of stay for people enrolled in homeless service programs, exits to permanent housing destinations across all homeless services and broken down by homeless program type, and returns to homelessness by race. With these measures, the CoC is able to track outcomes at a point in time, and more meaningfully, trends over years. Additionally, the CoC is able to look at these measures for single projects, across projects types, and for the system as a whole.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC’s Outreach Efforts.	
	NOFO Section V.B.1.r.	

Describe in the field below your CoC’s outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.

(limit 2,500 characters)

The CoC believes the expertise of people with lived experience is critical in creating and effectively administering a responsive homelessness system. The CoC regularly seeks public input, including people with lived experience, to inform planning and decision making. Broad outreach avenues include community outreach through media and social media postings, community meetings, and leveraging CoC and partner organizations contact lists, inclusive of homeless service organizations sharing with current and past service participants. These avenues are utilized at multiple times throughout the year, including for CoC’s bi-monthly public meetings, within specific planning initiatives, and in preparation for applying for funding. When conducting such outreach, the CoC leverages expert guidance from DHS’s Office of Equity and Engagement to use language that is accessible and would encourage feedback from the broadest base of community members. The CoC is additionally working on more systematically integrating people with lived experience into the planning, administration, and evaluation of the CoC. Service participant surveying has been tested in several different formats, including via automated text messaging, through focus groups, and as point-in-time initiatives. Enhancing active representation within the CoC and on its board and Committees is another avenue the CoC is using to engage those with lived experience of homelessness in leadership roles and decision making processes. Two members of the HAB, the CoC’s board, led an effort beginning in March 2022 to initiate the Consortium of Recognizing Experience (CORE). CORE began meeting as a forum for people with lived experienced with homelessness or housing instability to voice their experience and directly inform the system of services and supports intended to help those in need. Outreach has been conducted through social media, public postings via flyers and social meeting, CoC homeless service providers; engagement of their participants, and connecting directly with people experiencing homelessness at drop-in centers, meal services, and through street outreach.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	2	1
2.	Participate on CoC committees, subcommittees, or workgroups.	3	1
3.	Included in the development or revision of your CoC’s local competition rating factors.	2	1
4.	Included in the development or revision of your CoC’s coordinated entry process.	3	1

1D-11b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

The CoC convenes the Employment and Training Advisory Board (ETAB), comprised of homeless services providers and workforce services providers, through which providers are made aware of various workforce resources including training and apprenticeship programs, how to access mainstream employment services and resources for individuals with barriers to employment such as justice system involvement. Providers then connect their service participants to professional development and employment opportunities. Additionally, the CoC provides professional development and employment opportunities within the CoC to people with lived experience within the CoC. The CoC's lead agency, DHS, has a nationally recognized Youth Support Partners (YSP) unit. YSPs are young adult professionals who have personal experience in some area of the human services, whom through their employment with DHS, are positioned to share their insights with youth currently in the system, advocate for them and mentor them. YSPs take part in ongoing professional trainings to expand their expertise, with a heavy emphasis on skill-building, coaching, training, supervising, and team-building. Similarly, many of the provider agencies across the CoC currently employ people with lived experience of homelessness, with pathways for advancement and promotion. Organizations also maintain employment policies that recognize lived experience as an expertise and publishes equivalencies for different levels of education and experience so that applicants with lived experience can see how their unique background fits into positions posted. CoC agencies also provide professional development, including seminars, trainings, certification programs, and attending and presenting at conferences.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

Describe in the field below:

- | | |
|----|---|
| 1. | how your CoC routinely gathers feedback from people experiencing homelessness; |
| 2. | how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and |
| 3. | the steps your CoC has taken to address challenges raised by people with lived experience of homelessness. |

(limit 2,500 characters)

(1,2) The CoC is structured to continuously build on stakeholder input, and people with lived experience are recognized as a key stakeholder group within the CoC. The HAB, the CoC’s board, engages stakeholders by holding regular meetings, sharing materials in advance of meetings, and collecting feedback both in advance of and during meetings. Both the bi-monthly full HAB meetings and monthly Committee meetings are open to the full CoC and the public. Additional engagement opportunities are scheduled as needed and include focus groups, community forums, interviews, and open input requests via media outreach. Service participant surveying has been tested in several different formats, including via text messaging, focus groups, and as point-in-time initiatives. Enhancing active representation within the CoC is another avenue the CoC is seeking to meaningfully gather and respond to feedback from people with lived experience. The CoC has an active Youth Action Board, inclusive of youth who have experienced or are currently experiencing homeless. In 2022, the CoC also started piloting the Consortium of Recognizing Experience (CORE). CORE began meeting as a forum for people with lived experienced with homelessness to voice their experience and directly inform the system intended to help those in need. After an initial pilot year, the CoC is assessing how to continue forward most effectively. The CoC participated in HUD’s workshop on partnering with people with lived experience to further inform potential directions and applying best practices towards this goal. Examples of steps the CoC has taken to address challenges raised by people with lived experience include: adjusting emergency shelter access protocols to ease entry; operating a year-round, low-barrier shelter to be responsive to the needs and wants of participants, including the ability to keep partners together and bring pets, individuals determining which sleeping room is best for them, and access to amnesty lockers; seeking opportunities to enhance access to reliable and affordable transportation and public bathroom facilities; and continuing to developed practices and procedures that humanize and respectfully engage individuals experiencing a housing crisis in Allegheny County.

1D-12.	Increasing Affordable Housing Supply. NOFO Section V.B.1.t.	
Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC’s geographic area regarding the following:		
1.	reforming zoning and land use policies to permit more housing development; and	
2.	reducing regulatory barriers to housing development.	

(limit 2,500 characters)

The CoC has engaged with city, county and state government around a number of different policies and regulations to support housing development and access that would support the households served. At the local level, the CoC coordinates with the City of Pittsburgh on its strategies to support affordable housing supply through land use and development policies. As part of its 2022 Housing Needs Assessment, the following strategies were identified for consideration through 2024: reducing the required lot size per dwelling unit in certain areas to encourage medium to high density residential development; expanding multifamily residential zoning districts within close proximity of transit stations along the light rail system and busways; reducing off-street parking requirements for multifamily developments that are in walkable neighborhoods and within a half-mile of transit stations; permitting by-right duplexes for all residential zoning categories in the city; and easing or removing minimum lot, parking, and setback requirements for infill development. At the State level, the CoC's administrative lead, DHS, has been approved to use Reinvestment Funds to create new housing for people experiencing homelessness by establishing development funds to support strategies to increase development, such as capital investments in 9% LITHC developments, capitalized rent/operating reserves to leverage private debt in 4% LITHC/Preservation developments, and capital investment and rent guarantees for affordable housing-friendly landlords to acquire new/renovate existing buildings.

1E. Project Capacity, Review, and Ranking–Local Competition

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice. NOFO Section V.B.2.a. and 2.g. You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
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1.	Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	08/11/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	08/11/2023

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes

5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	No

1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.
 Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	110
2.	How many renewal projects did your CoC submit?	36
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	

Describe in the field below:

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,500 characters)

(1) Data for all CoC projects are collected in HMIS or a comparable database for DV projects. The CoC's HMIS is also integrated with the Coordinated Entry System, and therefore the CoC can access and analyze data from a household's initial touch through system exit. (2) CoC data measures include, but are not limited to: date of first touch, date of program enrollment, date of successful housing, date of exit, and exit destination. These measures combined provide information on how long it takes for households to navigate through each stage of the system, including the goal of permanent housing. (3) The CoC's review, ranking and rating of projects considered the following severity of needs and vulnerabilities: chronic homelessness; multiple disabilities; zero income; and living in places not meant for human habitation. These severities of needs were incorporated into the performance-based, data-driven process used to review, rate, and rank projects. Each year, a performance evaluation outcome tool (the Ranking Tool) is used to review, rate and rank all renewal projects. The tool is developed through the Analysis and Planning Committee (a Committee of the CoC's governing body) and informed by an assessment of score statistics from previous ranking tools, a review of system performance across measures, and input from CoC stakeholders to make point values reflect CoC performance benchmarks and priorities. The 2022 Ranking Tool reviewed and rated projects on objective metrics around: utilization; housing performance; income, health and non-cash benefits; program time; recidivism; data quality and timeliness; fiscal administration and effectiveness; programmatic monitoring results. In addition, the final section of the tool attributes points to projects based on the percentage of particularly vulnerable consumers they served. (4) Based on entry assessment data in HMIS and comparable DV databases, projects received additional points based on the percentage of households served that: were chronically homeless; had person(s) with 2 or more disabilities; had adults with zero income; and came from places not meant for human habitation. This incorporation of particularly vulnerable service participants into the ranking tool allows the CoC to place an objective rating on each program that considers both performance and the severity of client needs.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	

Describe in the field below:	
1.	how your CoC used the input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and
3.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.

(limit 2,500 characters)

(1) The CoC’s Analysis and Planning Committee employs an annual, multi-month process to review and recommend the rating factors used in the CoC’s data-driven, performance-based review and ranking process. The Committee is open, has active participation from a large array of stakeholder groups, and meets monthly. While the racial composition of the CoC’s board and the Analysis and Planning Committee are consistent with that of the county (79% White, 14% Black), Black people are over-represented in the homelessness population. The CoC continues to pursue increasing the diversity of its members through targeted outreach and engagement activities, with racial diversity included in the consideration of new board members each year. The establishment of the CoC’s rating factors is an iterative process, as each year the data-driven, performance-based ranking tool is reassessed and adjusted, building on lessons learned and current system contexts. Each factor included in the tool is reviewed and discussed. Any questions or comments about the factor, including its inclusion, weight and how it is measured is open for adjustment. By striving to increase representation so that the Committee itself better reflects the population being served, and by continuing a democratic decision-making process, the Committee explicitly builds these perspectives into the ranking tool. (3) Evaluation Committees are convened to review, select and rank projects. The CoC aims to capture diverse perspectives, including sector representation, lived experience and gender and racial diversity in the Committees. To this end, DHS, the CoC’s administrative lead, has implemented an Evaluation Committee Worksheet to intentionally assess the diversity of each Evaluation Committee reviewing project proposals across the characteristics cited above. (4) CoC funded programs receive participants via the CoC’s Coordinated Entry process, with all denials for services reviewed for appropriateness. With these system processes in place, individual programs are not controlling the racial distribution of their participants, and there are no indicators of racial variations across specific programs. As such, the CoC did not incorporate the degree to which program participants mirror the homeless population demographics into the rate and ranking process, while continuing to be committed to identifying and implementing new/effective approaches to operating a socially just homelessness response system.

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	NOFO Section V.B.2.f.	

Describe in the field below:

1.	your CoC’s reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC’s local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

(1) With UFA status, the CoC approved its Funding Adjustment Process in May 2019, fully implemented the process for FY20-21, and has used it thereafter. The process uses monthly financial monitoring to identify underspending trends in the 1st quarter. DHS, the CoC’s UFA and lead administrative agency, works with identified projects to fully assess spending levels and service utilization rates, while concurrently tracking projects that are on schedule to expend funds, have no outstanding programmatic or fiscal issues, and have capacity to effectively utilize more funds. Funding levels are reassessed at 5 months and underspent funds are reallocated. Funding adjustments can also be made in response to significant service issues as documented through fiscal and programmatic monitoring. The CoC also uses a performance-based and data-driven review and ranking process as part of the local competition. The Renewal Project Performance Outcome Tool is organized around key performance measures (e.g., unit utilization; housing performance; recidivism; data quality; etc.) and is populated with data from HMIS, fiscal data, and monitoring results. Point values are set through an analysis by the CoC’s Analysis and Planning Committee, which include a review of score statistics from previous ranking tools, a review of system performance across measures, and input from CoC stakeholders. The Ranking Tool is objective and consistent across projects, enabling the CoC to systematically identify low performing projects. This process enables the CoC to identify the lowest performing projects, assess the degree of performance and context for performance, and then use that information for reallocation decisions. (2,3) In addition to reallocating funds within the grant year, via UFA, the CoC process identified one low performing project and is seeking to reallocate those project funds to a higher performing project. The lowest performing project is a RRH project serving families. The CoC is seeking to reallocate these funds to a higher performing project. The project selected to expand with these reallocated funds was selected based on a combination of factors, including high performance, capacity to expand, maintain RRH units from the original project, and serving a broad population of family households experiencing homelessness (e.g., not serving only veterans or youth).

1E-4a.	Reallocation Between FY 2018 and FY 2023.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	Yes
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No

3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/07/2023

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/13/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	<p>Does your attachment include:</p> <ol style="list-style-type: none"> 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank–if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds. 	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	<p>Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website–which included:</p> <ol style="list-style-type: none"> 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings. 	09/22/2023
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/25/2023
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2A. Homeless Management Information System (HMIS) Implementation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2A-1.	HMIS Vendor.	
	Not Scored–For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.	Green River
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC’s HMIS coverage area.	Single CoC
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/28/2023
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2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

	In the field below:
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases;
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database–compliant with the FY 2022 HMIS Data Standards; and

(limit 2,500 characters)

The CoC has complete bed coverage in HMIS across all project types

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2023 PIT count.	01/24/2023
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/28/2023
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2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

	Describe in the field below how your CoC:	
	1. engaged unaccompanied youth and youth serving organizations in your CoC’s most recent PIT count planning process;	
	2. worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC’s most recent PIT count planning process; and	
	3. included youth experiencing homelessness as counters during your CoC’s most recent unsheltered PIT count.	

(limit 2,500 characters)

(1)The CoC has a strong and active group of youth-serving organizations, including the CoC’s one-stop drop-in center for homeless youth and the RHY funded youth street outreach team. In addition, the CoC’s administrative lead, DHS, is the county department responsible for administrating a wide range of human services and resources for children, youth and families, and is well connected to organizations, stakeholders and advocates seeking to meet the needs of youth. These stakeholders were engaged though CoC meetings, including Analysis and Planning Committee meetings dedicated to the PIT plans and processes, to inform the design and implementation of the PIT. (2) The CoC got direct input from youth experiencing/formerly experiencing homelessness when planning and implementing the PIT through the CoC’s Youth Action Board. Comprised of youth who have experience with varying service systems, including the homeless system, this board meets monthly, led the development of the CoC’s YHDP Coordinated Community Plan, and provides ongoing guidance on the homelessness system. (3) The CoC relied on the expertise of our participating organizations to identify locations where youth experiencing homelessness were most likely to be counted. This expertise includes a youth-dedicated street outreach team, that is devoted to building positive, trusting relationships with runaway, homeless and street youth. This team conducts weekly outreach efforts and is directly linked to Pittsburgh’s National Safe Place program, both of which position the team to plan key location points for the count. The expertise also included youth-dedicated Homeless Services and Supports Coordination unit, a support and coordination team specializing in engagement for adults under 25 experiencing homelessness.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points. NOFO Section V.B.5.a and V.B.7.c.	
In the field below:		
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;	
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and	
3.	describe how the changes affected your CoC’s PIT count results; or	
4.	state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2023.	

(limit 2,500 characters)

(1)The CoC’s PIT sheltered count is generated from HMIS, with DV projects providing data from their comparable reporting systems. Over the years the CoC has implemented measures to support data quality, including establishing a dedicated staff member who reviews data quality monthly and works with providers to meet data quality standards. This includes the accurate documentation of CH, household composition, and veteran status. These processes were consistent between the 2022 and 2023 PIT. (2) The unsheltered count methodology has continued to be strengthened since 2019. The CoC has implemented a number of on-going practices to strengthen the identification and documentation of those who are experiencing homelessness and are CH, families with children and/or veterans: The CoC’s street outreach teams meet weekly to discuss case conferencing for the most vulnerable individuals, including those that are CH, and develop engagement and housing plans, providing TA and training around effectively documenting CH. For the 2023 unsheltered PIT, the CoC fully utilized the Street Outreach teams, leveraging their year-round engagement and documentation of people experiencing unsheltered homelessness. The Street Outreach teams led the unsheltered PIT, prioritizing the areas known to be locations where people stay, and then further locating individuals through their existing engagement. (3) We believe the CoC’s 2023 PIT to be the most fully encompassing of unsheltered PITs conducted in the CoC, while also recognizing that the PIT count results have been impacted by the pandemic. Our community has experienced an increase in unsheltered homelessness due to a number of factors, including the end of the eviction moratorium, a tightening housing market, and impacts of the opioid epidemic. The CoC’s improved unsheltered count methodology and weekly street outreach case conferencing has helped to better identify and enumerate our unsheltered population, which has resulted in our unsheltered count being 105 in 2022 and increasing to 155 in 2023.

2C. System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	
	In the field below:	
	1. describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;	
	2. describe your CoC’s strategies to address individuals and families at risk of becoming homeless; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time	

(limit 2,500 characters)

(1) The CoC is committed to continuing to strengthen its homeless prevention capacity. Currently, the CoC works closely with other systems and institutions to identify those at risk of homelessness and develop discharge planning protocols to help them avoid becoming homeless. For example, child welfare caseworkers are trained to note risk factors such as families behind on rent or utilities and being precariously doubled-up. Additionally, Allegheny County is actively working to establish a stronger and more comprehensive crisis response system, including targeted work to improve discharge planning from the jail and hospitals that includes housing planning and the procurement of additional reentry housing for those leaving the jail. (2) The CoC strategy to address risk factors is multi-faceted. Cross-system efforts seek to support the housing stability of individuals and families receiving human services. The CoC has implemented a homeless prevention service specific to families active in child welfare to address housing stability early and avoid homelessness, and a mobile Housing Specialist to work with families in the community so they can address housing issues before they become crises. The CoC also has a Housing Navigation Unit that assists with referrals to affordable housing and a Diversion Specialist that provides direct assistance to participants in emergency shelter and helps them exit to permanent housing rapidly. Finally, the CoC funds a robust array of services designed to prevent homelessness (and evictions) including rental assistance, landlord mediation, legal assistance, support staff at eviction hearings to help connect tenants to resources, budget counseling, public benefit navigation, subsidized childcare, and early intervention programs. The CoC also partners closely with the local housing authorities to prevent evictions from subsidized housing. The CoC led a large and highly successful ERA program during the pandemic that kept 20,888 households stably housed through \$130 million of direct rent and utility payments. With the ending of ERAP funds, the CoC worked to combine funding from three sources to expand and coordinate the above-mentioned prevention resources. (3) DHS, the CoC's lead administrative agency and home of CE, oversees these strategies.

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:

1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	No

2C-2.	Length of Time Homeless—CoC's Strategy to Reduce.	
	NOFO Section V.B.5.c.	

In the field below:

1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and

3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.
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(limit 2,500 characters)

(1) To reduce LOT homeless, the CoC is committed to a robust diversion effort, a strong RRH strategy, and coordinated landlord outreach to expand access to affordable housing. With these strategies the CoC saw a reduction from 144 to 105 days. While we previously experienced an increase of the system's LOT homeless due the temporary shut down and slowdown of many services, increased barriers to employment, delays in application processes and a sharp increase in rental prices, we believe the strategies that led to the decreased in LOT prior to the pandemic are still strong and have helped the CoC reduce LOT this past year. Specific efforts include: monitoring performance to the CoC's goal of a median of 30 days in shelter; providing intensive case management in family shelters and a Diversion Specialist in singles shelter to help connect to housing and related services; using ESG-CV to expand RRH resources; and improving the capacity of all programs to complete faster housing searches by conducting a CoC-wide landlord engagement campaign including a Risk Mitigation fund, building the CoC's Housing Navigation Unit which provides centralized support to programs in finding landlords and building/maintaining strong relationships with them, and utilizing HCV, EHV, FUP, FYI and Mainstream voucher programs to move people onto stable housing. (2) Using shelter performance data, Coordinated Entry identifies long stayers in shelters and conducts regular case conferences to work through barriers to rehousing. Similarly, the CE field unit and street outreach workers conduct case-conferencing multiple times a month, in which they review a by-name list of individuals on the street for potential case conferencing and reassessment. The CE process includes LOT in prioritization, so the long-time homeless individuals/families are referred to a housing program before a household with similar vulnerabilities but less time on the street or in shelter. Chronic homeless are prioritized above everyone for housing. (3) DHS, the CoC's lead administrative agency and home of CE, oversees these strategies.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing—CoC's Strategy	
	NOFO Section V.B.5.d.	

In the field below:

1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

(limit 2,500 characters)

(1) The Covid-19 pandemic and rising housing costs have significantly impacted exits to PH destinations in the CoC. However, the CoC continues to prioritize this area, with strategies that include: case conferencing for long-term stayers in family shelter to provide specialized plans for successful exits to PH; Housing Solutions Specialists who provide direct assistance to single shelter participants to become document ready, locate housing, and exit to PH; and implementation of a process for reassessment of RRH participants to identify those that could benefit from different and/or additional supports to maintain housing stability (case management, PSH or HCV). The successful implementation of EHV is also part of the CoC strategy. Of the 284 EHV's available through the City and County Housing Authorities, 207 are leased up. (2) The CoC has been extremely successful at making sure individuals and families in PSH retain their housing or exit to PH destinations. Of PSH households, 97% of retained or exited to permanent housing. This is due mostly to staffing and training strategies that provide for effective case management in these programs. Staff are trained in Motivational Interviewing and Trauma Informed Care, helping participants to increase income and non-cash benefits and to link to community supports for mental health, substance abuse, physical health, employment and childcare. The CoC has implemented Moving On initiatives to identify households that no longer need their current level of homelessness system housing support and connecting them to housing choice vouchers through the homeless preference or other subsidized housing options in the community. We continue to strengthen our Move On strategy by providing pre-screening and eligibility reviews, application and housing search assistance, aftercare, and more effective communication to increase success in obtaining and leasing up with vouchers. (3) DHS, the CoC's lead administrative agency oversees these strategies.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	
	In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;	
2.	describe your CoC's strategy to reduce the rate of additional returns to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

(1) Prior to the pandemic, the CoC had exceptionally low rates of return for those who exited to a permanent destination. HUD System Performance data from 2017-2020 shows that when the national average for returns within 24 months was around 19%, our CoC’s highest rate was 8.2% in 2020. The CoC is now seeing an increase in the rates of returns. Using HMIS data and administrative data from DHS, the CoC’s HMIS lead, we have identified common factors of those who return. Of those who returned: 46% had exited from shelter; 52% returned within the first 6 months; and 63% have experienced behavioral health challenges. (2) The CoC works to ensure that people exiting shelter and PH do not return to homelessness by supporting people in their transition to permanent housing. Prior to exit, case management is provided and linkages to community services and supports such as subsidized housing, employment resources, health services, childcare subsidies and other public benefits are provided. Families with young children are offered home visiting programs that support child development as well as connections to local Family Support and Early Learning Resource Centers. Strategies in shelters also include additional housing-specific case management, engaging households in shelter and continuing to work with them in the community. The CoC also offers financial assistance to help with security deposits and first month rent through RA programs. Collaboration with the local housing authorities, and their commitment to homeless preference vouchers, mainstream vouchers, FUP and FYI vouchers, and EHV has enabled us to sustain access to affordable housing. Finally, in recognizing the common occurrence of behavioral health challenges, in particular the increasing prevalence and acuity of substance use disorders, the CoC is engaged in several efforts to more effectively align BH and housing supports. This includes establishing easier pathways across BH and homeless system housing supports and developing an expansion of Acute Service Coordination (ASC) to emergency shelters. ASC is a form of Targetted Case Management in PA that includes more assertive and intensive engagement with individuals who have not been successful with traditional case management models. Our adaptation is designed for individuals experiencing homelessness to better support these individuals as they transition into housing (3) DHS, the CoC’s lead administrative agency, oversees this strategy.

2C-5.	Increasing Employment Cash Income–CoC’s Strategy.	
	NOFO Section V.B.5.f.	

In the field below:	
1.	describe your CoC’s strategy to access employment cash sources;
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase income from employment.

(limit 2,500 characters)

(1) The CoC uses a multi-faceted strategy to increase employment income for homeless service participants. At the system level, the CoC has collaborated with providers and workforce development professionals to improve integration between the homeless and employment systems, directly identify job opportunities and benefits access, and create networking opportunities to establish further linkages across the systems. This work aids CoC providers in having the knowledge, resources and connections to support service participants in increasing employment income and access. At the housing program level, the CoC’s service providers work closely with clients on their employment goals, assist with building a résumé, connecting to job placement/training programs, and conducting mock interviews, and provide employment life skills such as time management, effective communication, etc. Once employment is obtained, programs support clients with building additional skills to help them turn their desired job into a career. The CoC’s provider agencies are also the administrators of employment services. For example, in addition to providing homeless housing programs, Auberle runs the Employment Institute, offering 13 nationally recognized certification programs, employment opportunities, life skills and work readiness training, education services and employment exposure/search services. With 130 employing partners and 100 referral agencies throughout the region, The Employment Institute is a highly respected and award-winning workforce development program that helps individuals find a good paying and sustainable career. (2) Mainstream employment organizations are directly involved in the CoC’s work to increase cash income and employment. Partner4Work, the local workforce development board, offers tours, info sessions, and customized tools for CoC providers at the local one-stop American Job Center, PA CareerLink. This led to more effective utilization of PA CareerLink by individuals experiencing homelessness. (3) DHS, the CoC’s administrative organization, is responsible for overseeing the strategy to increase jobs and income from employment.

2C-5a.	Increasing Non-employment Cash Income—CoC’s Strategy	
	NOFO Section V.B.5.f.	
	In the field below:	
	1. describe your CoC’s strategy to access non-employment cash income; and	
	2. provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase non-employment cash income.	

(limit 2,500 characters)

(1) The CoC strategy to increase non-employment cash income and sources targets systemic and individual interventions. At the individual level, DHS, the administrative lead for the CoC, coordinates with the County Assistance Office, operated by the Commonwealth of Pennsylvania, to ensure that CoC clients connect with necessary TANF benefits. Additionally, DHS has a direct referral relationship with SNAP via a local community-based advocacy organization, Just Harvest, that allows us to connect clients directly with services. At the system level, homeless service provider staff are trained to assist clients with determining eligibility and applying for public benefits that can increase both non-employment cash income and sources. The CoC also promotes awareness of non-employment cash income providers and offers trainings on best practices, including SOAR. In addition, the CoC works with AHEDD which provides employment services throughout Pennsylvania to people with disabilities. Many people receiving Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI) are interested in exploring work opportunities and increasing their earnings but are concerned about losing their benefits and health care. While these benefits support millions of persons with disabilities, they have evolved as a new obstacle in the search for gainful employment and participation in community living. AHEDD helps clients so that they can utilize work incentives available through the Social Security Administration, in order to achieve their employment goals and attain greater financial independence. It is of significance to note that in 2019, Pennsylvania unfortunately ended its General Assistance program, which was an important source of non-employment cash income for homeless individuals. (2) DHS, the CoC's lead administrative agency and collaborative applicant, oversees the strategy.

3A. Coordination with Housing and Healthcare

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3A-1.	New PH-PSH/PH-RRH Project–Leveraging Housing Resources.	
	NOFO Section V.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
--	--	-----

3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
--	--	-----

3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.

Project Name	Project Type	Rank Number	Leverage Type
Good Start Expansion	PH-RRH	35	Both

3A-3. List of Projects.

1. What is the name of the new project? Good Start Expansion

2. Enter the Unique Entity Identifier (UEI):

3. Select the new project type: PH-RRH

4. Enter the rank number of the project on your CoC's Priority Listing: 35

5. Select the type of leverage: Both

3B. New Projects With Rehabilitation/New Construction Costs

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.s.	

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
--	----

3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.s.	

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD’s implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

N/A

3C. Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
--	--	----

3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

If you answered yes to question 3C-1, describe in the field below:

1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.

(limit 2,500 characters)

N/A

4A. DV Bonus Project Applicants for New DV Bonus Funding

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1.	New DV Bonus Project Applications.	
	NOFO Section I.B.3.I.	

	Did your CoC submit one or more new project applications for DV Bonus Funding?	No
Applicant Name		
This list contains no items		

4B. Attachments Screen For All Application Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1. You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2. You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3. We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4. Attachments must match the questions they are associated with.
5. Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6. If you cannot read the attachment, it is likely we cannot read it either.
 - . We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
 - . We must be able to read everything you want us to consider in any attachment.
7. After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8. Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PA 600's 2 larges...	09/22/2023
1C-7. PHA Moving On Preference	No	PA 600's 2 larges...	09/22/2023
1D-11a. Letter Signed by Working Group	Yes		
1D-2a. Housing First Evaluation	Yes	PA 600's annual m...	09/22/2023
1E-1. Web Posting of Local Competition Deadline	Yes	PA 600 applicatio...	09/22/2023
1E-2. Local Competition Scoring Tool	Yes	PA 600 utilizes a...	09/22/2023
1E-2a. Scored Forms for One Project	Yes	PA 600's most com...	09/22/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	PA 600 rejected o...	09/22/2023
1E-5a. Notification of Projects Accepted	Yes	PA 600 notificati...	09/22/2023
1E-5b. Local Competition Selection Results	Yes	PA 600 project se...	09/22/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		

1E-5d. Notification of CoC-Approved Consolidated Application	Yes	PA 600 notificati...	09/22/2023
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	PA 600's HDX Comp...	09/22/2023
3A-1a. Housing Leveraging Commitments	No	PA 600 Housing Le...	09/22/2023
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PA 600's 2 largest PHAs (ACHA and HACP) have homeless preferences as cited in the attached documents

Attachment Details

Document Description: PA 600's 2 largest PHAs (ACHA and HACP) have move on preferences as cited in the attached administrative plans

Attachment Details

Document Description:

Attachment Details

Document Description: PA 600's annual monitoring includes Housing First compliance. The attachment speaks to how Housing First commitment is assessed and shows a completed annual monitoring tool

Attachment Details

Document Description: PA 600 applications for CoC Program Funding was due August 11, 2023

Attachment Details

Document Description: PA 600 utilizes a performance-based, data-driven evaluation tool to assess and rank projects--that tool is attached

Attachment Details

Document Description: PA 600's most common project type is PSH; the attached is a completed evaluation tool for a PSH renewal project

Attachment Details

Document Description: PA 600 rejected one application as a result of the performance based, data driven review and ranking project. Attached is the notification to that project on September 7, 2023

Attachment Details

Document Description: PA 600 notification to all projects accepted on September 13, 2023

Attachment Details

Document Description: PA 600 project selection results, provided as the complete lists required by HUD (renewal, new, YHDP, YHDP adjustment, Planning and UFA) inclusive of accepted/rejected/reduced status, score, ranking, and funding level

Attachment Details

Document Description:

Attachment Details

Document Description: PA 600 notification to the CoC about the CoC Approved Consolidated Application being posted. In addition an announcement was made at the CoC meeting on September 26, 2023

Attachment Details

Document Description: PA 600's HDX Competition Report for FY2023

Attachment Details

Document Description: PA 600 Housing Leveraging for housing costs for 25% of households served through the new project (Good Start Expansion)

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

SECTION 8 ADMINISTRATIVE PLAN TABLE OF CONTENTS

1.0	EQUAL OPPORTUNITY	1
1.1	FAIR HOUSING	1
1.2	REASONABLE ACCOMMODATION	2
1.3	COMMUNICATION	3
1.4	SERVICES FOR LIMITED ENGLISH PROFICIENCY PERSONS AND PARTICIPANTS	3
1.5	FAMILY/OWNER OUTREACH	3
1.6	RIGHT TO PRIVACY	4
1.7	REQUIRED POSTINGS	5
2.0	ALLEGHENY COUNTY HOUSING AUTHORITY/OWNER RESPONSIBILITY/OBLIGATION OF THE FAMILY	5
2.1	ALLEGHENY COUNTY HOUSING AUTHORITY RESPONSIBILITIES	5
2.2	OWNER RESPONSIBILITY	7
2.3	OBLIGATIONS OF THE PARTICIPANT	8
3.0	ELIGIBILITY FOR ADMISSION	12
3.1	INTRODUCTION	12
3.2	ELIGIBILITY CRITERIA	12
4.0	MANAGING THE WAITING LIST	19
4.1	OPENING AND CLOSING THE WAITING LIST	20
4.2	TAKING APPLICATIONS	20
4.3	ORGANIZATION OF THE WAITING LIST	22
4.4	FAMILIES NEARING THE TOP OF THE WAITING LIST	23
4.5	MISSED APPOINTMENTS	23
4.6	PURGING THE WAITING LIST	23
4.7	REMOVAL OF APPLICANTS FROM THE WAITING LIST	24
4.8	GROUND FOR DENIAL	24
4.9	NOTIFICATION OF NEGATIVE ACTIONS	30
4.10	INFORMAL REVIEW	30
5.0	SELECTING FAMILIES FROM THE WAITING LIST	31
5.1	WAITING LIST ADMISSIONS AND SPECIAL ADMISSIONS	31
5.2	PREFERENCES	31
5.2.1	<i>FEDERAL DISASTERS</i>	32
5.3	SELECTION FROM THE WAITING LIST	33
	ASSIGNMENT OF BEDROOM SIZES (SUBSIDY STANDARDS)	34
6.1	BRIEFING	35
6.2	PACKET	37
6.3	ISSUANCE OF VOUCHER; REQUEST FOR APPROVAL OF TENANCY	41
6.4	TERM OF THE HOUSING CHOICE VOUCHER	41

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.

Introduction

ABOUT THE REFERENCES CITED IN THE MODEL ADMINISTRATIVE PLAN

Chapter 1

OVERVIEW OF THE PROGRAM AND PLAN

PART I:	THE PHA.....	1-1
	1-I.A. Overview.....	1-1
	1-I.B. Organization and Structure of the PHA.....	1-1
	1-I.C. PHA Mission	1-2
	1-I.D. The PHA's Programs.....	1-2
	1-I.E. The PHA's Commitment to Ethics and Service	1-2
PART II:	THE HOUSING CHOICE VOUCHER (HCV) PROGRAM.....	1-4
	1-II.A. Overview and History of the Program.....	1-4
	1-II.B. HCV Program Basics.....	1-5
	1-II.C. The HCV Partnerships.....	1-5
	The HCV Relationships:.....	1-6
	What Does HUD Do?	1-7
	What Does the PHA Do?.....	1-7
	What Does the Owner Do?	1-7
	What Does the Family Do?.....	1-8
	1-II.D. Applicable Regulations.....	1-9
PART III:	THE HCV ADMINISTRATIVE PLAN.....	1-9
	1-III.A. Overview and Purpose of the Plan.....	1-9
	1-III.B. Contents of the Plan (24CFR 982.54).....	1-9
	Mandatory vs. Discretionary Policy	1-11
	1-III.C. Organization of the Plan	1-11
	1-III.D. Updating and Revising the Plan	1-11

Administrative Plan -Table of Contents

**Chapter 2
FAIR HOUSING AND EQUAL OPPORTUNITY**

PART I:	NONDISCRIMINATION.....	2-1
	2-I.A. Overview.....	2-1
	2-I.B. Nondiscrimination	2-2
	Providing Information to Families and Owners	2-3
	Discrimination Complaints	2-3
PART II:	POLICIES RELATED TO PERSONS WITH DISABILITIES	2-3
	2-II.A. Overview.....	2-3
	2-II.B. Definition of Reasonable Accommodation	2-4
	Types of Reasonable Accommodations.....	2-4
	2-II.C. Request for an Accommodation	2-5
	2-II.D. Verification of Disability.....	2-5
	2-II.E. Approval/Denial of a Requested Accommodation [Joint Statement of the Departments of HUD and Justice: Reasonable Accommodations under the Fair Housing Act, Notice PIH 2010-26].....	2-6
	2-II.F. Program Accessibility for Persons with Hearing or Vision Impairments	2-8
	2-II.G. Physical Accessibility.....	2-10
	2-II.H. Denial or Termination of Assistance	2-10
PART III:	IMPROVING ACCESS TO SERVICES FOR PERSONS WITH LIMITED ENGLISH PROFICIENCY (LEP).....	2-11
	2-III.A. Overview.....	2-11
	2-III.B. Oral Interpretation	2-12
	2-III.C. Written Translation.....	2-12
	2-III.D. Implementation Plan.....	2-13
Exhibit 2-1:	Definition of a Person with a Disability Under Federal Civil Rights Laws [24 CFR Parts 8.3, and 100.201].....	2-14

Administrative Plan - Table of Contents

**Chapter 3
ELIGIBILITY**

PART I:	DEFINITIONS OF FAMILY AND HOUSEHOLD MEMBERS.....	3-1
3-I.A.	Overview.....	3-1
3-I.B.	Family and Household [24 CFR 982.201(c); HUD-50058 IB, p. 13; FR Notice 02/03/12]	3-2
	Family	3-2
	Household	3-2
3-I.C.	Family Breakup and Remaining Member of Tenant Family.....	3-2
	Family Breakup [24 CFR 982.315]	3-2
	Remaining Member of a Tenant Family [24 CFR 5.403]	3-3
3-I.D.	Head of Household [24 CFR 5.504(b)]	3-3
3-I.E.	Spouse, Cohead, and Other Adult	3-4
3-I.F.	Dependent [24 CFR 5.603].....	3-4
	Joint Custody of Dependents	3-4
3-I.G.	Full-Time Student [24 CFR 5.603, HVC GB, p. 5-29]	3-5
3-I.H.	Elderly and Near-Elderly Persons, and Elderly Family [24 CFR 5.100 and 5.403, FR Notice 02/03/12].....	3-5
	Elderly Persons	3-5
	Near-Elderly Persons	3-5
	Elderly Family	3-5
3-I.I.	Persons with Disabilities and Disabled Family [24 CFR 5.403, FR Notice 02/03/12]	3-5
	Persons with Disabilities.....	3-5
	Disabled Family.....	3-5
3-I.J.	Guests [24 CFR 5.100]	3-6
3-I.K.	Foster Children and Foster Adults	3-6
3-I.L.	Absent Family Members.....	3-6
	Definitions of Temporarily and Permanently Absent.....	3-7
	Absent Students	3-7
	Absences Due to Placement in Foster Care [24 CFR 5.403].....	3-7
	Absent Head, Spouse, or Cohead	3-7
	Family Members Permanently Confined for Medical Reasons [HCV GB, p. 5-22]	3-7
	Return of Permanently Absent Family Members	3-8
3-I.M.	Live-In Aide.....	3-8

Administrative Plan -Table of Contents

PART II:	BASIC ELIGIBILITY CRITERIA.....	3-9
3-II.A.	Income Eligibility and Targeting.....	3-9
	Income Limits.....	3-9
	Definitions of the Income Limits [24 CFR 5.603(b)].....	3-9
	Using Income Limits for Eligibility [24 CFR 982.201].....	3-10
	Using Income Limits for Targeting [24 CFR 982.201].....	3-10
3-II.B.	Citizenship or Eligible Immigration Status [24 CFR 5, Subpart E].....	3-10
	Declaration [24 CFR 5.508].....	3-11
	Mixed Families.....	3-13
	Ineligible Families [24 CFR 5.514(d), (e), and (f)].....	3-13
	Timeframe for Determination of Citizenship Status [24 CFR 5.508(g)].....	3-13
3-II.C.	Social Security Numbers [24 CFR 5.216 and 5.218, Notice PIH 2012-10].....	3-14
3-II.D.	Family Consent to Release of Information [24 CFR 5.230; HCV GB, p. 5-13].....	3-14
3-II.E.	Students Enrolled In Institutions of Higher Education [24 CFR 5.612, FR Notice 4/10/06].....	3-15
	Definitions.....	3-15
	Determining Student Eligibility.....	3-17
PART III:	DENIAL OF ASSISTANCE.....	3-18
3-III.A.	Overview.....	3-18
	Forms of Denial [24 CFR 982.552(a)(2); HCV GB, p. 5-35].....	3-18
	Prohibited Reasons for Denial of Program Assistance [24 CFR 982.202(b), 24 CFR 5.2005(b)].....	3-18
3-III.B.	Mandatory Denial of Assistance [24 CFR 982.553(a)].....	3-19
3-III.C.	Other Permitted Reasons for Denial of Assistance.....	3-19
	Criminal Activity [24 CFR 982.553].....	3-20
	Previous Behavior in Assisted Housing [24 CFR 982.552(c)].....	3-21
3-III.D.	Screening.....	3-22
	Screening for Eligibility.....	3-22
	Screening for Suitability as a Tenant [24 CFR 982.307].....	3-26
3-III.E.	Criteria for Deciding to Deny Assistance.....	3-27
	Evidence [24 CFR 982.553(c)].....	3-27
	Consideration of Circumstances [24 CFR 982.552(c)(2)].....	3-27
	Removal of a Family Member's Name from the Application.....	3-28
	Reasonable Accommodation [24 CFR 982.552(c)(2)(iv)].....	3-28
3-III.F.	Notice of Eligibility or Denial.....	3-28

Administrative Plan -Table of Contents

3-III.G. Prohibition Against Denial of Assistance to Victims of Domestic Violence, Dating Violence, and Stalking	3-29
Notification	3-29
Documentation.....	3-30
Exhibit 3-1: Detailed Definitions Related to Disabilities	3-31
Person with Disabilities [24 CFR 5.403].....	3-31
Individual with Handicaps [24 CFR 8.3].....	3-32
Exhibit 3-2: Definition of Institution of Higher Education [20 U.S.C 1001 and 1002]	3-33
Eligibility of Students for Assisted Housing Under Section 8 of the U.S. Housing Act of 1937; Supplementary Guidance; Notice [Federal Register, April 10, 2006]	3-33

Administrative Plan -Table of Contents

Chapter 4

APPLICATIONS, WAITING LIST AND TENANT SELECTION

PART I:	THE APPLICATION PROCESS	4-2
4-I.A.	Overview.....	4-2
4-I.B.	Applying for Assistance [HCV GB, pp. 4-11 – 4-16, Notice PIH 2009-36].....	4-2
4-I.C.	Accessibility of the Application Process	4-2
	Elderly and Disabled Populations [24 CFR 8 and HCV GB, pp. 4-11 – 4-13]	4-2
	Limited English Proficiency	4-3
4-I.D.	Placement on the Waiting List.....	4-3
	Ineligible for Placement on the Waiting List.....	4-3
	Eligible for Placement on the Waiting List	4-3
PART II:	MANAGING THE WAITING LIST.....	4-3
4-II.A.	Overview.....	4-3
4-II.B.	Organization of the Waiting List [24 CFR 982.204 and 205]	4-4
4-II.C.	Opening and Closing the Waiting List [24 CFR 982.206]	4-5
	Closing the Waiting List.....	4-5
	Reopening the Waiting List.....	4-5
4-II.D.	Family Outreach [HCV GB, pp. 4-2 to 4-4]	4-5
4-II.E.	Reporting Changes in Family Circumstances.....	4-6
4-II.F.	Updating the Waiting List [24 CFR 982.204]	4-6
	Purging the Waiting List.....	4-6
	Removal from the Waiting List	4-7
PART III:	SELECTION FOR HCV ASSISTANCE	4-8
4-III.A.	Overview.....	4-8
4-III.B.	Selection and HCV Funding Sources	4-8
	Special Admissions [24 CFR 982.203]	4-8
	Targeted Funding [24 CFR 982.204(e)]	4-8
	Regular HCV Funding.....	4-9
4-III.C.	Selection Method	4-9
	Local Preferences [24 CFR 982.207; HCV p. 4-16]	4-9
	Income Targeting Requirement [24 CFR 982.201(b)(2)].....	4-13
	Order of Selection.....	4-14
4-III.D.	Notification of Selection.....	4-14
4-III.E.	The Application Interview	4-15
4-III.F.	Completing the Application Process	4-16
4-III.G.	Final Eligibility Determination.....	4-17

City of Pittsburgh Housing Authority



2. 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:

- A) 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.
- B) 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.
- C) 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.

3. EMPLOYMENT/ELDERLY & DISABLED PREFERNECE

A) Employment Head of Household

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

- i. Any head of household, spouse or co-head of household legally employed by an employer in a full-time capacity*

The head of household, spouse or co-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, spouse or co-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 the 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

SECTION 8 ADMINISTRATIVE PLAN TABLE OF CONTENTS

1.0 EQUAL OPPORTUNITY..... 1

1.1 FAIR HOUSING 1

1.2 REASONABLE ACCOMMODATION 2

1.3 COMMUNICATION 3

1.4 SERVICES FOR LIMITED ENGLISH PROFICIENCY PERSONS AND PARTICIPANTS 3

1.5 FAMILY/OWNER OUTREACH 3

1.6 RIGHT TO PRIVACY 4

1.7 REQUIRED POSTINGS 5

2.0 ALLEGHENY COUNTY HOUSING AUTHORITY/OWNER RESPONSIBILITY/OBLIGATION OF THE FAMILY..... 5

2.1 ALLEGHENY COUNTY HOUSING AUTHORITY RESPONSIBILITIES 5

2.2 OWNER RESPONSIBILITY 7

2.3 OBLIGATIONS OF THE PARTICIPANT 8

3.0 ELIGIBILITY FOR ADMISSION 12

3.1 INTRODUCTION 12

3.2 ELIGIBILITY CRITERIA 12

4.0 MANAGING THE WAITING LIST 19

4.1 OPENING AND CLOSING THE WAITING LIST 20

4.2 TAKING APPLICATIONS 20

4.3 ORGANIZATION OF THE WAITING LIST 22

4.4 FAMILIES NEARING THE TOP OF THE WAITING LIST 23

4.5 MISSED APPOINTMENTS 23

4.6 PURGING THE WAITING LIST 23

4.7 REMOVAL OF APPLICANTS FROM THE WAITING LIST 24

4.8 GROUNDS FOR DENIAL 24

4.9 NOTIFICATION OF NEGATIVE ACTIONS 30

4.10 INFORMAL REVIEW 30

5.0 SELECTING FAMILIES FROM THE WAITING LIST 31

5.1 WAITING LIST ADMISSIONS AND SPECIAL ADMISSIONS 31

5.2 PREFERENCES 31

5.2.1 *FEDERAL DISASTERS* 32

5.3 SELECTION FROM THE WAITING LIST 33

ASSIGNMENT OF BEDROOM SIZES (SUBSIDY STANDARDS) 34

6.1 BRIEFING 35

6.2 PACKET 37

6.3 ISSUANCE OF VOUCHER; REQUEST FOR APPROVAL OF TENANCY 41

6.4 TERM OF THE HOUSING CHOICE VOUCHER 41

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.

Introduction

ABOUT THE REFERENCES CITED IN THE MODEL ADMINISTRATIVE PLAN

Chapter 1

OVERVIEW OF THE PROGRAM AND PLAN

PART I:	THE PHA.....	1-1
	1-I.A. Overview.....	1-1
	1-I.B. Organization and Structure of the PHA.....	1-1
	1-I.C. PHA Mission	1-2
	1-I.D. The PHA's Programs.....	1-2
	1-I.E. The PHA's Commitment to Ethics and Service	1-2
PART II:	THE HOUSING CHOICE VOUCHER (HCV) PROGRAM.....	1-4
	1-II.A. Overview and History of the Program.....	1-4
	1-II.B. HCV Program Basics.....	1-5
	1-II.C. The HCV Partnerships.....	1-5
	The HCV Relationships:.....	1-6
	What Does HUD Do?	1-7
	What Does the PHA Do?.....	1-7
	What Does the Owner Do?	1-7
	What Does the Family Do?.....	1-8
	1-II.D. Applicable Regulations.....	1-9
PART III:	THE HCV ADMINISTRATIVE PLAN.....	1-9
	1-III.A. Overview and Purpose of the Plan.....	1-9
	1-III.B. Contents of the Plan (24CFR 982.54).....	1-9
	Mandatory vs. Discretionary Policy	1-11
	1-III.C. Organization of the Plan	1-11
	1-III.D. Updating and Revising the Plan	1-11

Administrative Plan -Table of Contents

**Chapter 2
FAIR HOUSING AND EQUAL OPPORTUNITY**

PART I:	NONDISCRIMINATION.....	2-1
	2-I.A. Overview.....	2-1
	2-I.B. Nondiscrimination	2-2
	Providing Information to Families and Owners	2-3
	Discrimination Complaints	2-3
PART II:	POLICIES RELATED TO PERSONS WITH DISABILITIES	2-3
	2-II.A. Overview.....	2-3
	2-II.B. Definition of Reasonable Accommodation	2-4
	Types of Reasonable Accommodations.....	2-4
	2-II.C. Request for an Accommodation	2-5
	2-II.D. Verification of Disability.....	2-5
	2-II.E. Approval/Denial of a Requested Accommodation [Joint Statement of the Departments of HUD and Justice: Reasonable Accommodations under the Fair Housing Act, Notice PIH 2010-26].....	2-6
	2-II.F. Program Accessibility for Persons with Hearing or Vision Impairments	2-8
	2-II.G. Physical Accessibility.....	2-10
	2-II.H. Denial or Termination of Assistance	2-10
PART III:	IMPROVING ACCESS TO SERVICES FOR PERSONS WITH LIMITED ENGLISH PROFICIENCY (LEP).....	2-11
	2-III.A. Overview.....	2-11
	2-III.B. Oral Interpretation	2-12
	2-III.C. Written Translation.....	2-12
	2-III.D. Implementation Plan.....	2-13
Exhibit 2-1:	Definition of a Person with a Disability Under Federal Civil Rights Laws [24 CFR Parts 8.3, and 100.201].....	2-14

Administrative Plan - Table of Contents

**Chapter 3
ELIGIBILITY**

PART I: DEFINITIONS OF FAMILY AND HOUSEHOLD MEMBERS..... 3-1

- 3-I.A. Overview..... 3-1
- 3-I.B. Family and Household [24 CFR 982.201(c); HUD-50058 IB, p. 13;
FR Notice 02/03/12] 3-2
 - Family 3-2
 - Household 3-2
- 3-I.C. Family Breakup and Remaining Member of Tenant Family..... 3-2
 - Family Breakup [24 CFR 982.315] 3-2
 - Remaining Member of a Tenant Family [24 CFR 5.403] 3-3
- 3-I.D. Head of Household [24 CFR 5.504(b)] 3-3
- 3-I.E. Spouse, Cohead, and Other Adult 3-4
- 3-I.F. Dependent [24 CFR 5.603]..... 3-4
 - Joint Custody of Dependents 3-4
- 3-I.G. Full-Time Student [24 CFR 5.603, HVC GB, p. 5-29] 3-5
- 3-I.H. Elderly and Near-Elderly Persons, and Elderly Family
[24 CFR 5.100 and 5.403, FR Notice 02/03/12]..... 3-5
 - Elderly Persons 3-5
 - Near-Elderly Persons 3-5
 - Elderly Family 3-5
- 3-I.I. Persons with Disabilities and Disabled Family [24 CFR 5.403,
FR Notice 02/03/12] 3-5
 - Persons with Disabilities..... 3-5
 - Disabled Family..... 3-5
- 3-I.J. Guests [24 CFR 5.100] 3-6
- 3-I.K. Foster Children and Foster Adults 3-6
- 3-I.L. Absent Family Members..... 3-6
 - Definitions of Temporarily and Permanently Absent..... 3-7
 - Absent Students 3-7
 - Absences Due to Placement in Foster Care [24 CFR 5.403]..... 3-7
 - Absent Head, Spouse, or Cohead 3-7
 - Family Members Permanently Confined for Medical Reasons
[HCV GB, p. 5-22] 3-7
 - Return of Permanently Absent Family Members 3-8
- 3-I.M. Live-In Aide..... 3-8

Administrative Plan -Table of Contents

PART II:	BASIC ELIGIBILITY CRITERIA.....	3-9
3-II.A.	Income Eligibility and Targeting.....	3-9
	Income Limits.....	3-9
	Definitions of the Income Limits [24 CFR 5.603(b)].....	3-9
	Using Income Limits for Eligibility [24 CFR 982.201].....	3-10
	Using Income Limits for Targeting [24 CFR 982.201].....	3-10
3-II.B.	Citizenship or Eligible Immigration Status [24 CFR 5, Subpart E].....	3-10
	Declaration [24 CFR 5.508].....	3-11
	Mixed Families.....	3-13
	Ineligible Families [24 CFR 5.514(d), (e), and (f)].....	3-13
	Timeframe for Determination of Citizenship Status [24 CFR 5.508(g)].....	3-13
3-II.C.	Social Security Numbers [24 CFR 5.216 and 5.218, Notice PIH 2012-10].....	3-14
3-II.D.	Family Consent to Release of Information [24 CFR 5.230; HCV GB, p. 5-13].....	3-14
3-II.E.	Students Enrolled In Institutions of Higher Education [24 CFR 5.612, FR Notice 4/10/06].....	3-15
	Definitions.....	3-15
	Determining Student Eligibility.....	3-17
PART III:	DENIAL OF ASSISTANCE.....	3-18
3-III.A.	Overview.....	3-18
	Forms of Denial [24 CFR 982.552(a)(2); HCV GB, p. 5-35].....	3-18
	Prohibited Reasons for Denial of Program Assistance [24 CFR 982.202(b), 24 CFR 5.2005(b)].....	3-18
3-III.B.	Mandatory Denial of Assistance [24 CFR 982.553(a)].....	3-19
3-III.C.	Other Permitted Reasons for Denial of Assistance.....	3-19
	Criminal Activity [24 CFR 982.553].....	3-20
	Previous Behavior in Assisted Housing [24 CFR 982.552(c)].....	3-21
3-III.D.	Screening.....	3-22
	Screening for Eligibility.....	3-22
	Screening for Suitability as a Tenant [24 CFR 982.307].....	3-26
3-III.E.	Criteria for Deciding to Deny Assistance.....	3-27
	Evidence [24 CFR 982.553(c)].....	3-27
	Consideration of Circumstances [24 CFR 982.552(c)(2)].....	3-27
	Removal of a Family Member's Name from the Application.....	3-28
	Reasonable Accommodation [24 CFR 982.552(c)(2)(iv)].....	3-28
3-III.F.	Notice of Eligibility or Denial.....	3-28

Administrative Plan -Table of Contents

3-III.G. Prohibition Against Denial of Assistance to Victims of Domestic
Violence, Dating Violence, and Stalking 3-29
 Notification 3-29
 Documentation..... 3-30

Exhibit 3-1: Detailed Definitions Related to Disabilities 3-31
 Person with Disabilities [24 CFR 5.403]..... 3-31
 Individual with Handicaps [24 CFR 8.3]..... 3-32

Exhibit 3-2: Definition of Institution of Higher Education [20 U.S.C 1001 and 1002] 3-33
 Eligibility of Students for Assisted Housing Under Section 8
 of the U.S. Housing Act of 1937; Supplementary Guidance;
 Notice [Federal Register, April 10, 2006] 3-33

Administrative Plan -Table of Contents

Chapter 4

APPLICATIONS, WAITING LIST AND TENANT SELECTION

PART I:	THE APPLICATION PROCESS	4-2
4-I.A.	Overview.....	4-2
4-I.B.	Applying for Assistance [HCV GB, pp. 4-11 – 4-16, Notice PIH 2009-36].....	4-2
4-I.C.	Accessibility of the Application Process	4-2
	Elderly and Disabled Populations [24 CFR 8 and HCV GB, pp. 4-11 – 4-13]	4-2
	Limited English Proficiency	4-3
4-I.D.	Placement on the Waiting List.....	4-3
	Ineligible for Placement on the Waiting List.....	4-3
	Eligible for Placement on the Waiting List	4-3
PART II:	MANAGING THE WAITING LIST.....	4-3
4-II.A.	Overview.....	4-3
4-II.B.	Organization of the Waiting List [24 CFR 982.204 and 205]	4-4
4-II.C.	Opening and Closing the Waiting List [24 CFR 982.206]	4-5
	Closing the Waiting List.....	4-5
	Reopening the Waiting List.....	4-5
4-II.D.	Family Outreach [HCV GB, pp. 4-2 to 4-4]	4-5
4-II.E.	Reporting Changes in Family Circumstances.....	4-6
4-II.F.	Updating the Waiting List [24 CFR 982.204]	4-6
	Purging the Waiting List.....	4-6
	Removal from the Waiting List	4-7
PART III:	SELECTION FOR HCV ASSISTANCE	4-8
4-III.A.	Overview.....	4-8
4-III.B.	Selection and HCV Funding Sources	4-8
	Special Admissions [24 CFR 982.203]	4-8
	Targeted Funding [24 CFR 982.204(e)]	4-8
	Regular HCV Funding.....	4-9
4-III.C.	Selection Method	4-9
	Local Preferences [24 CFR 982.207; HCV p. 4-16]	4-9
	Income Targeting Requirement [24 CFR 982.201(b)(2)].....	4-13
	Order of Selection.....	4-14
4-III.D.	Notification of Selection.....	4-14
4-III.E.	The Application Interview	4-15
4-III.F.	Completing the Application Process	4-16
4-III.G.	Final Eligibility Determination.....	4-17

City of Pittsburgh Housing Authority



2. 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:

- A) 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.
- B) 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.
- C) 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.

3. EMPLOYMENT/ELDERLY & DISABLED PREFERNECE

A) Employment Head of Household

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

- i. Any head of household, spouse or co-head of household legally employed by an employer in a full-time capacity*

The head of household, spouse or co-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, spouse or co-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 the 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

Housing First Evaluation PA-600

PA-600 formally committed to Housing First in 2017, including reallocating almost all transitional housing to permanent housing and requiring service providers to: (a) eliminate criteria that prevent or terminate an otherwise eligible individual or family (minimum criteria of homeless and with a disability) from receiving services, and to (b) connect participants quickly to housing without any additional preconditions and barriers to entry, such as requiring sobriety, employment, or participation in other services.

To ensure this ongoing compliance with Housing First:

- All referrals to services in the CoC go through Coordinated Entry
 - Any denial or termination of service is reviewed. If not consistent with Housing First, and/or is not consistent with Fair Housing, the referral is sent back to the provider and the client is required to be served. If the situation should arise that the relationship between the client and the provider is damaged in a manner that is not conducive to the client's effective functioning, case conference is conducted to repair the relationship or find an alternative provider so the client can be appropriately served.
- DHS Program Monitors, who are specialized staff trained in HUD, Pennsylvania Homeless Assistant Program (HAP) and CoC requirements, conduct monitoring visits at each sub-recipient's site at least annually, and more often when issues are identified or when quality assurance plans have been implemented and are being monitored.
 - During the visits, monitors conduct their review in accordance with the Program Monitoring Tool, which includes consistency with Housing First. In order to be deemed in-compliance with Housing First, DHS reviews:
 - program agreements, program rules, and intake and termination procedures to ensure that: program access is not contingent on sobriety, drug & alcohol treatment, income, criminal record, credit rating, financial or rental history; participating in offered programming or services, or drug testing are not conditions of continued service delivery
 - that service plans and case notes are client focused and client driven
 - All referral denials and client terminations are reviewed and assessed
 - DHS's Director's Action Line (DAL) is available for individuals to register concerns and/or complaints or request information about aspects of DHS, include the provision of any service through a DHS contracted provider (service participants). Any DAL submissions regarding homeless services go to the Program Monitors for review and response

The following pages contain a completed annual Program Monitoring tool, followed by the Monitoring Guide for Subrecipients, which outlines that these reviews are conducted at least annually.



ALLEGHENY COUNTY

CONTINUUM OF CARE PROGRAM

MANAGEMENT

Sub-recipient Monitoring Checklist

Allegheny County Continuum of Care Program Grant Management

Program Monitor: Marrie Griffin

Date of Audits: April 24, 2023

Agency: Sojourner House

Program Name: MOMS II

Program Dates: July 1, 2023 – June 30, 2023

Agency Staff Present: Kyona Newsome

Scattered Site and/or *Facility*

Program Serves (select all that apply)

Individuals *Both Individuals/Families* *Single Women with*

Children

Families *Single Males with Children* *Couples without*

Children

Previous Finding and Concerns: Desk Review/Receives funding for CYF Case

Management.

Allegheny County Continuum of Care Program Grant Management

Part 1: Administrative Performance Survey:

Questions:	Provider Comments:	Yes	No
1. Have all your staff members been given a written job description?			
2. When was the last time your organization's job descriptions were updated?	Date:	N/A	N/A
3. Are all client files stored in a locked/secured area?		x	
4. Are client files stored for a minimum of 5 years?		x	
5. Do all your staff members have an Act 33/34 clearances.	For <u>Family Programs</u> only (N/A if not applicable)	x	
6. Does your organization have an Education Liaison? If so, Who?	Staff: The FSS staff are assigned some of these duties.		x
a. Does the Education Liaison make referrals? (i.e., AIU, Home Visiting, Early Head Start, etc.)		x	
7. Have your staff members completed Professional Training in the following specialized areas:		x	
• Mental Health First Aid	Majority of the staff	x	
• Trauma Informed Care		x	
• Harm Reduction		x	
• Motivational Interviewing		x	
• Other:	DEI and LGBTQ 101	x	
b. Which staff members have taken part in Specialized Trainings?			
• Executive Directors	Staff: Denetta Benjamin-Miller	x	
• Supervisors	Staff: Kyona Newsome and Latresa Zak	x	
• Case Managers	Staff: Rita Hill, Enjoligue Garland , Stephenia Leavy	x	

Allegheny County Continuum of Care Program Grant Management

• Overnight Staff	Staff: N/A		
8. Does your organization have a written Intake Procedure?		X	
9. Does your organization have an Internal Grievance Procedure?		X	
a. Is this outlined in your Program Agreement?		X	
10. Who handles sending out Unusual Incident Reports (UIR)?	Staff:	N/A	N/A
a. Does your organization regularly send out Unusual Incident Reports?		X	
11. Does your organization have a Safety Plan?		X	
Does your organization have a Safety Plan for the following:			X
• Active Shooter			
• Natural Disaster		X	
• Fire		X	
• Mental Health Crisis		X	
12. Has your staff taken part in an Opioid Use Disorder Training?		X	
a. If so, is Narcan/Naloxone available for overdose reversal?		X	
13. Are services given using a Harm Reduction Philosophy?		X	
14. Who handles Termination and Appeal paperwork submission? Who supplies them to the client?	Staff: Kyona Newsome and Latresa Zak		
a. How many termination submissions has your organization had?	Amount:	N/A	N/A
b. Was the termination appeal paperwork given to client?		X	
c. How many appeal hearings has your organization had?	Amount:	N/A	N/A

Allegheny County Continuum of Care Program Grant Management

d. How many appeal overturns has your organization had?	Amount:	N/A	N/A
14. How many DAL reports has your organization had? (N/A if not applicable)	Amount:	N/A	N/A
a. Were any of the DAL reports concerning the following:		x	
• Staff	Name: Kyona Newsome and overall program operations concerns		
• Living Environment		x	
• Program Support/Case Management		x	
15. Does your organization follow the Housing First Model?		x	

Part II: Permanent Supportive Housing File Review

Client 1 : REDACTED FOR CLIENT PRIVACY

Enrollment Date : REDACTED

Program Entry Eligibility Requirements:			
	Yes or No	Points Awarded	Possible Points
1. Is there a completed Intake Assessment Form on file?		N/A	1
2. Are clients moving into permanent housing units within 30 days of program enrollment?		N/A	1
3. Is there a Category of Homeless Form (Category 1 or 4 only)?	Is the name of the client and category 1 or 4 selected?	2	2
4. Is there a copy of Disability Verification on file?	Yes or No	2	2
a. If yes, is there documentation of Disability in the file? b. SSI Benefit Award Statement c. HUD Approved Letter	Choose one of the following:		
5. Is there a copy of Homelessness Verification?	Yes or No	2	2
a. Letter from referring agency b. Self-Certification c. HMIS Printout	Choose one of the following:		

Allegheny County Continuum of Care Program Grant Management

<p>6. Is there a Chronic Homelessness Verification on file (If Applicable)?</p> <p>a. Letter from referring agency b. Self-Certification c. HMIS Printout</p>	<p>Choose one of the following:</p>	<p>1</p>	<p>1</p>
<p>7. Is there proper Identification on file?</p>	<p>Yes or No</p>	<p>1</p>	<p>1</p>
<p>a. Passport b. Driver's License c. State Issued ID d. SS Card/Birth Certificate e. Work/School ID</p>	<p>Choose one of the following:</p>		
<p>8. Is the Income Verification on file? If not, is a Zero Income Statement on file?</p> <p>a. Paystub (s) b. SSI/SSDI Benefit Award Statement c. Other Income</p>	<p>Zero Income Statement: yes/no</p> <p>Choose one of the following: No income as of 2/23/2023. Receives SNAP</p>	<p>1</p>	<p>1</p>
<p>TOTAL POINTS EARNED:</p>		<p>9</p>	<p>9</p>

Allegheny County Continuum of Care Program Grant Management

Program Agreement:			
9. Is a Program Agreement on file that outlines the Program Expectations?	Yes or No	Points Awarded	Possible Points
		1	1
a. Client Rights and Responsibility	If one of the following are missing/incomplete, do not give point.	1	1
b. Program Violation (30-day Contract to Stay)		1	1
c. DHS Termination and Appeal Process		1	1
d. Release of Information		1	1
e. Confidentiality Statement		1	1
f. HMIS Privacy Statement		1	1
g. Mandated Reporter Statement (For Family Programs Only)		1	1
h. Voter's Registration		1	1
TOTAL POINTS EARNED:		9	9

Occupancy Fee/Leasing Agreement:			
10. Is there an Occupancy Fee Agreement outlined in the client file?	Yes or No	Points Awarded	Possible Points
	Facility-Based program agreement is their lease agreement	1	1
a. Rental Agreement	If one of the following are missing/incomplete, do not give point.	1	1
b. Rental Reasonableness Form		1	1
c. Rental Calculation Worksheet		1	1
d. Housing Goal Plan/Participation Worksheet		1	1
Is there a current Leasing Agreement on file?	Yes or No	2	2
-12-month lease or month-to-month language, once expired	If one of the following is missing/incomplete, do not give point.	1	1
-Lead Based Paint Statement		1	1
-Initial and Annual HQS Form		1	1
TOTAL POINTS EARNED:		10	10

Allegheny County Continuum of Care Program Grant Management

Service/Goal Plan and Case Management:			
11. Is there an Initial Service Plan within 30-days of enrollment in the client's file?	Yes or No	Points Awarded	Possible Points
a. Are Service Plans being completed quarterly?	If one of the following are missing/incomplete, do not give point.	2	2
b. Are Progress Notes being completed at least monthly?		1	1
c. Are resources and referrals being made using a tracking sheet?		1	1
		1	1
TOTAL POINTS EARNED:		5	5

Part II: Permanent Supportive Housing File Review

Client 2: REDACTED FOR CLIENT PRIVACY

Enrollment Date: REDACTED

Program Entry Eligibility Requirements:			
12. Is there a completed Intake Assessment Form on file?	Yes or No	Points Awarded	Possible Points
13. Are clients moving into permanent housing units within 30 days of program enrollment?	***Bonus Point***		1
14. Is there a Category of Homeless Form (Category 1 or 4 only)?	Is the name of the client and category 1 or 4 selected?	2	2
15. Is there a copy of Disability Verification on file?	Yes or No	2	2
d. If yes, is there documentation of Disability in the file?	Choose one of the following:		
e. SSI Benefit Award Statement			
f. HUD Approved Letter			
16. Is there a copy of Homelessness Verification?	Yes or No	2	2
d. Letter from referring agency	Choose one of the following:		
e. Self-Certification			

Allegheny County Continuum of Care Program Grant Management

f. HMIS Printout	Alle-Kiski Hope Center		
17. Is there a Chronic Homelessness Verification on file (If Applicable)? d. Letter from referring agency e. Self-Certification f. HMIS Printout	Choose one of the following:	0	0
18. Is there proper Identification on file?	Yes or No	1	1
f. Passport g. Driver's License h. State Issued ID i. SS Card/Birth Certificate j. Work/School ID	Choose one of the following:		
19. Is the Income Verification on file? If not, is a Zero Income Statement on file? d. Paystub (s) e. SSI/SSDI Benefit Award Statement f. Other Income	Zero Income Statement: yes/no Choose one of the following: No income as of 2/23/2023.	1	1
TOTAL POINTS EARNED:		8	10

Program Agreement:			
20. Is a Program Agreement on file that outlines the Program Expectations?	Yes or No	1	1
i. Client Rights and Responsibility	If one of the following are missing/incomplete, do not give point. *DHS term paperwork handed to client*	1	1
j. Program Violation (30-day Contract to Stay)		1	1
k. DHS Termination and Appeal Process		1	1
l. Release of Information		1	1
m. Confidentiality Statement		1	1
n. HMIS Privacy Statement		1	1
o. Mandated Reporter Statement (For Family Programs Only)			
p. Voter's Registration			
TOTAL POINTS EARNED:		9	

			9
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Occupancy Fee/Leasing Agreement:			
21. Is there an Occupancy Fee Agreement outlined in the client file?	Yes or No	1	1
e. Rental Agreement	If one of the following are missing/incomplete, do not give point.	1	1
f. Rental Reasonableness Form		1	1
g. Rental Calculation Worksheet		1	1
h. Housing Goal Plan/Participation Worksheet		1	1
Is there a current Leasing Agreement on file?	Yes or No	2	2
-12-month lease or month-to-month language, once expired	If one of the following is missing/incomplete, do not give point. *Facility Based Provider*	1	1
-Lead Based Paint Statement		1	1
-Initial and Annual HQS Form		1	1
TOTAL POINTS EARNED:		10	10

Service/Goal Plan and Case Management:			
22. Is there an Initial Service Plan within 30-days of enrollment in the client's file?	Yes or No	2	2
d. Are Service Plans being completed quarterly?	If one of the following are missing/incomplete, do not give point	1	1
e. Are Progress Notes being completed at least monthly?		1	1
f. Are resources and referrals being made using a tracking sheet?		0	1
TOTAL POINTS EARNED:		4	5

Part II: Permanent Supportive Housing File Review

Client 3 : REDACTED FOR CLIENT PRIVACY

Enrollment Date : REDACTED

Program Entry Eligibility Requirements:			
		Points Awarded	Possible Points
23. Is there a completed Intake Assessment Form on file?	Yes or No *Intake was not requested for Desk Review*		1
24. Are clients moving into permanent housing units within 30 days of program enrollment?	***Bonus Point***		1
25. Is there a Category of Homeless Form (Category 1 or 4 only)?	Is the name of the client and category 1 or 4 selected?	2	2
26. Is there a copy of Disability Verification on file?	Yes or No	2	2
g. If yes, is there documentation of Disability in the file? h. SSI Benefit Award Statement i. HUD Approved Letter	Choose one of the following:		
27. Is there a copy of Homelessness Verification?	Yes or No	2	2
g. Letter from referring agency h. Self-Certification i. HMIS Printout	Choose one of the following WSE		
28. Is there a Chronic Homelessness Verification on file (If Applicable)? g. Letter from referring agency h. Self-Certification i. HMIS Printout	Yes or No Choose one of the following:	2	2
29. Is there proper Identification on file?	Yes or No	1	1
k. Passport l. Driver's License m. State Issued ID n. SS Card/Birth Certificate o. Work/School ID	Choose one of the following:		
30. Is the Income Verification on file? If not, is a Zero Income Statement on file? g. Paystub (s)	Zero Income Statement: yes/no Choose one of the following: TANF: \$209. Receives SNAP	1	1

Allegheny County Continuum of Care Program Grant Management

h. SSI/SSDI Benefit Award Statement			
i. Other Income			
TOTAL POINTS EARNED:		10	12

Program Agreement:			
31. Is a Program Agreement on file that outlines the Program Expectations?	Yes or No	1	1
q. Client Rights and Responsibility	If one of the following are missing/incomplete, do not give point. DHS term paperwork; there was a program violation notice in file.		1
r. Program Violation (30-day Contract to Stay)		1	1
s. DHS Termination and Appeal Process		1	1
t. Release of Information		1	1
u. Confidentiality Statement		1	1
v. HMIS Privacy Statement		1	1
w. Mandated Reporter Statement (For Family Programs Only)		1	
x. Voter's Registration		1	
TOTAL POINTS EARNED:		9	9

Occupancy Fee/Leasing Agreement:			
32. Is there an Occupancy Fee Agreement outlined in the client file?	Yes or No	1	1
i. Rental Agreement	If one of the following are missing/incomplete, do not give point.	1	1
j. Rental Reasonableness Form		1	1
k. Rental Calculation Worksheet		1	1
l. Housing Goal Plan/Participation Worksheet		1	1
Is there a current Leasing Agreement on file?	Yes or No	2	2
-12-month lease or month-to-month language, once expired	If one of the following are missing/incomplete, do not give point.	1	1
-Lead Based Paint Statement		1	1
-Initial and Annual HQS Form		1	

Allegheny County Continuum of Care Program Grant Management

TOTAL POINTS EARNED:		10	10
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Service/Goal Plan and Case Management:			
33. Is there an Initial Service Plan within 30-days of enrollment in the client's file?	Yes or No	2	2
g. Are Service Plans being completed quarterly?	If one of the following are missing/incomplete, do not give point.	1	1
h. Are Progress Notes being completed at least monthly?		1	1
i. Are resources and referrals being made using a tracking sheet?			1
TOTAL POINTS EARNED:		4	5

Part II: Permanent Supportive Housing File Review

Client 4: REDACTED FOR CLIENT PRIVACY

Enrollment Date: REDACTED

Program Entry Eligibility Requirements:			
		Points Awarded	Possible Point
34. Is there a completed Intake Assessment Form on file?	Yes or No		
35. Are clients moving into permanent housing units within 30 days of program enrollment?	***Bonus Point***		1
36. Is there a Category of Homeless Form (Category 1 or 4 only)?	Is the name of the client and category 1 or 4 selected?	2	2
37. Is there a copy of Disability Verification on file?	Yes or No	2	2
j. If yes, is there documentation of Disability in the file?	Choose one of the following:		
k. SSI Benefit Award Statement l. HUD Approved Letter			
38. Is there a copy of Homelessness Verification?	Yes or No	2	2
j. Letter from referring agency	Choose one of the following		

Allegheny County Continuum of Care Program Grant Management

k. Self-Certification l. HMIS Printout m. Street Outreach Letter			
39. Is there a Chronic Homelessness Verification on file (If Applicable)? j. Letter from referring agency k. Self-Certification l. HMIS Printout m. Street Outreach Letter	Yes or No Choose one of the following:	2	2
TOTAL POINTS GRANTED:			
40. Is there proper Identification on file?	Yes or No	1	1
p. Passport q. Driver's License r. State Issued ID s. SS Card/Birth Certificate t. Work/School ID	Choose one of the following:		
41. Is the Income Verification on file? If not, is a Zero Income Statement on file? j. Paystub (s) k. SSI/SSDI Benefit Award Statement l. Other Income	Zero Income Statement: yes/no Choose one of the following: TANF: \$316 Receives SNAP, WIC	1	1
TOTAL POINTS EARNED:		10	12

Program Agreement:			
	Yes or No	Points Awarded	Possible Points
42. Is a Program Agreement on file that outlines the Program Expectations?	Yes or No	1	1
y. Client Rights and Responsibility	If one of the following are missing/incomplete, do not give point.	1	1
z. Program Violation (30-day Contract to Stay)		1	1
aa. DHS Termination and Appeal Process		1	1
bb. Release of Information		1	1
cc. Confidentiality Statement		1	1
dd. HMIS Privacy Statement		1	1

Allegheny County Continuum of Care Program Grant Management

ee. Mandated Reporter Statement (For Family Programs Only)			
ff. Voter's Registration			
TOTAL POINTS EARNED		9	9

Occupancy Fee/Leasing Agreement			
43. Is there an Occupancy Fee Agreement outlined in the client file?	Yes or No	Points Awarded	Possible Points <u>1</u>
m. Rental Agreement	If one of the following are missing/incomplete, do not give point.	1	1
n. Rental Reasonableness Form		1	1
o. Rental Calculation Worksheet		1	1
p. Housing Goal Plan/Participation Worksheet		1	1
Is there a current Leasing Agreement on file?	Yes or No	2	2
-12-month lease or month-to-month language, once expired	If one of the following is missing/incomplete, do not give point.	1	1
-Lead Based Paint Statement		1	1
-Initial and Annual HQS Form		1	1
TOTAL POINTS EARNED:		9	10

Service/Goal Plan and Case Management:			
44. Is there an Initial Service Plan within 30-days of enrollment in the client's file?	Yes or No	2	2
j. Are Service Plans being completed quarterly?	If one of the following are missing/incomplete, do not give point.	1	1
k. Are Progress Notes being completed at least monthly?		1	1
l. Are resources and referrals being made using a tracking sheet?		1	1
TOTAL POINTS EARNED:		5	5

Allegheny County Continuum of Care Program Grant Management

36 out of 36=100%	Client 1: REDACTED	33	36
33 out of 36=90%	Client 2: REDACTED	31	36
29 out of 36=80%	Client 3: REDACTED	33	36
26 out of 36=70%	Client 4: REDACTED	34	36
22 out of 36=60%	Client 5:		
FINAL SCORE:	ALL ITEMS REQUESTED FROM CLIENT FILES WERE SUBMITTED	90%	

Programmatic Ranking Score:				
5 to 4: Low Risk Program		100% to 90%		
3 to 2: Medium Risk Program		80% to 70%		
2 to 1: High Risk Program		60% and Below		

Allegheny County Continuum of Care (PA-600) Monitoring Guide for Sub-recipients

Overview.....	1
Programmatic Monitoring Plan	2
Data Monitoring and Performance Management Plan.....	3
Monitoring Follow-up.....	4
Monitoring Follow-up for Non-Compliant Plan of Action	4
Non-Compliant Plan of Action for High-Risk Sub-Recipients	5
Fiscal Monitoring Plan	5
Monitoring and the Annual Review and Ranking.....	6
<i>Attachment A: Programmatic Monitoring Tool</i>	
<i>Attachment B: Fiscal Monitoring Tool</i>	

Overview

Allegheny County Department of Human Services (DHS) is the Lead Agency, or Infrastructure Organization (IO), for the Allegheny County Continuum of Care (CoC). This designation has been annually approved by the Homeless Advisory Board (HAB), which serves as the guiding body for the CoC. Within its IO role, DHS is the designated grantee for all HUD CoC grants. DHS formerly accepts the HUD award, enters into contract with HUD and manages the distribution of funding to sub-recipients. As such, DHS conducts the programmatic and fiscal HUD sub-recipient monitoring.

DHS’s Bureau of Homeless Services employs programmatic and fiscal specialists, responsible for monitoring. DHS monitors and reviews all aspects of each service provider's program to ensure accountability for the expenditure of funds, to promote program effectiveness and efficiency and to ensure safety of clients through quality service delivery.

The CoC has a detailed plan for programmatic and fiscal monitoring of all recipient and sub-recipients. DHS monitors review for programmatic compliance using an evaluation tool based on HUD, HAP and CoC standards. Regulatory compliance, performance benchmarks, client files, data and unit/facility inspections are reviewed at least annually. Fiscal compliance is reviewed monthly through the invoice process and annually of graduated billing programs. Meeting or exceeding the standards outlined in the tools indicates successful performance. The results of the reviews are shared with the CoC Homeless Advisory Board and analyzed overall to evaluate compliance and outcomes across the CoC. If a recipient or sub-recipient is not in compliance with the standards a corrective action plan is required, and technical assistance is provided. If the sub-recipient continues to be noncompliant a process is in place for determining probation or reallocating funds.

The CoC and DHS’s policy is to contract with high-performing agencies that meet or exceed HUD, CoC and County programmatic and fiscal standards and to work with agencies to ensure their performance meets or exceeds programmatic and fiscal standards.

Programmatic Monitoring Plan

Program monitors, who are specialized staff members from DHS's Bureau of Homeless Services that are trained in HUD, Pennsylvania Homeless Assistant Program (HAP) and CoC requirements, conduct monitoring for each project at least annually, and more often as needed. Monitors conduct their review in accordance with the Program Monitoring Tool. The various components that make up the full monitoring tool may be monitored in different modalities (e.g., on-site at the sub-recipients service location or remotely) and at different times (e.g., HQS on-site reviews are regularly scheduled at distinct times than employee record reviews), to support efficiency. Additionally, the CoC does adjust which components are directly reviewed in a given year based on a program type rotations and current standing of projects, again to support efficiency. Sub-recipients may see the evaluation tool template upon their request at any time and are informed of the specific tool components being monitored prior to any monitoring. Using the tool, monitors ensure that sub-recipients are compliant with HUD, HAP and Allegheny County contracting requirements.

Through the tool, monitors ensure that sub-recipients are:

- Complying with policy and administrative requirements
 - Employee and Client records
 - All staff positions have written job descriptions
 - Staff have appropriate clearances
 - Client records are secure and stored properly
- Maintaining client files to meet requirements
 - Verification of Homelessness upon entrance into program
 - Verification of Chronic Homeless Status
 - Verification of Disability (if applicable)
 - Date of client acceptance, enrollment and residential move-in to program
 - Income Verification
 - Non-Cash Benefits and Medical Insurance
 - Statement of confidentiality
 - Program agreement in compliance with Housing First Policies, HUD regulations and signed by consumer
 - Client driven service plans with action steps, measurable short/long term goals, and goals that incorporate a holistic approach to serving families that support child development and parent-child relationships
- Referring clients to supportive services
 - Permanent Housing options
 - Job training
 - Employment Assistance
 - Education
 - Family Support
 - Healthcare
 - Other specialized services
- Housing clients in facilities that comply with HUD Housing Quality Standards:
 - Room standards (i.e. foundation is not cracked, door locks are in proper working order)
 - Health and Safety (i.e. smoke detectors are present on every floor, exits marked are non-obstructed)
 - Windows (i.e. all bedrooms have at least 1 fully functional window)
 - Kitchen (i.e. kitchen sink has running hot and cold water)
 - Bathroom (i.e. bathroom toilet is in working condition)
 - Compliance with Lead-Based Paint Requirements

Programmatic performance is based on the sub-recipient's compliance with the items detailed in the monitoring tool and with the performance standards. Sub-recipients are engaged throughout the monitoring process, and results are provided in writing at the completion of the visit. The results are additionally shared with the HAB, who take it under consideration when determining rankings for renewals.

Data Monitoring and Performance Management Plan

Data that is entered into the Homeless Management Information System is monitored on a rolling basis as a part of the Performance Management Plan and Data Monitoring. The Performance Management plan is charged with developing annual benchmarks based on the previous calendar year's program performance, and maintain quarterly, cumulative reports to monitor the performance of programs as an aggregate and individually. These reports are then published on the Allegheny County Homeless Advisory Board website. In order to then utilize this report for individual program performance, Allegheny County Department of Human Services conducts its ongoing data monitoring process. The data monitoring process includes transferring the report into a visual representation of their program performance. The visual, a copy of the Performance Management Plan, and a data quality report are all then all sent to the programs with any follow-up explanations or actions that may be required.

Programs that are consistently performing below expectations receive specialized one-on-one technical assistance to remedy the issues. Additionally, one-on-one or group technical assistance is also offered to any program that may request it.

The benchmarks that projects are measured against are put forth and agreed upon by the Continuum of Care Analysis & Planning Committee (CoCAPC) that is a Committee of the Homeless Advisory Board (HAB). These benchmarks align with federal, state and local requirements as well as with the Standards of Practice put forth by the local Homeless Service Communities of Practice.

The quarterly reports are pulled on the following schedule:

1st Quarter = January – March 31: Presented at the May CoCAPC meeting

2nd Quarter = January 1 – June 30: Presented at the August CoCAPC meeting

3rd Quarter = January 1 – September 30: Presented at the November CoCAPC meeting

4th Quarter = January 1 – December 31: Presented at the February CoCAPC meeting

The following is a schedule of the rolling data monitoring that occurs:

- Emergency Shelters (single and family): Monthly
- Rapid Rehousing Programs: Bi-monthly
- Permanent Supportive Housing Programs: Quarterly
- Bridge Housing Programs: Quarterly
- Rental Assistance and Prevention Programs: Quarterly

In addition to rolling monitoring, the data monitor meets with sub-recipients annually to ensure that they are meeting, and are making a good faith effort to meet, performance standards. During the annual monitoring visit, an overview of the year's progress, overall performance and data trends are reviewed. The annual data review includes a comparison to the benchmarks as well as strengths, recommendations or findings for each program. This information is reviewed with each sub-recipient to collaborate on a goal plan for the upcoming year and to determine the action steps needed to boost benchmarks and program performance. If there are outstanding data issues they will be addressed during the annual monitoring visit. At the completion of the annual data monitoring season, the data monitor collaborates with the homeless analytics team to review system performance, system goals, data trends and provide any additional updates to the team.

Additionally, all data trends are presented to the CoCAPC to inform the following calendar years benchmarks for the Performance Management Plan.

Monitoring Follow-up

Once the programmatic and data monitoring is completed, the sub-recipient will receive a Monitoring Overview. The Monitoring Overview consists of program successes, data trends, recommendations for program improvement, recommendations for technical assistance and a request for a corrective action plan, if applicable. The overview is intended to provide support for the sub-recipient as well as build accountability for data quality, program improvement and technical assistance to increase benchmarks. If there is no corrective action plan requested, the sub-recipient will receive a monitoring sign off letter to formally complete monitoring. If there is a corrective action plan requested that has not been resolved sufficiently, please see the section on *Monitoring Follow-up for Non-Compliant Plan of Action*.

To prevent sub-recipients from being out of compliance, DHS offers preventive technical assistance tailored to the sub-recipient's needs. Technical assistance can be requested by the sub-recipient but if necessary DHS will require technical assistance if the program is operating at a performance level that borders on non-compliance. Once assistance is provided and if the monitors find that sub-recipients are still not in compliance with standards, despite DHS's preventative technical assistance the sub-recipient will be flagged as being High-Risk. Please see the section on *Non-Compliant Plan of Action for High-Risk Sub-Recipients*.

Monitoring Follow-up for Non-Compliant Plan of Action

If the program or data monitors are requesting the sub-recipient to submit a corrective action plan for deficiencies noted during monitoring, they follow the subsequent procedures for bringing non-compliant sub-recipients into compliance:

- 1.) Monitors send the monitoring overview to the sub-recipient that notify them of the area(s) of non-compliance, make recommendations for improvement, make recommendations for technical assistance and request a submission of a corrective action plan within 30 days. Monitors are available to consult with the sub-recipient via phone calls, emails, and/or meetings as needed to provide guidance for the corrective action plan.
- 2.) The sub-recipient drafts a corrective action plan and sends it to the monitor within the 30-day follow-up period. The sub-recipient may also submit other supporting documents as needed. This includes but is not limited to additional back-up documentation, any missing verification for homelessness, disability, chronic homeless status, and any other documentation to support the corrective action plan.
- 3.) Monitors review the corrective action plan (and additional documentation where applicable) and either approves it or returns the corrective plan to the sub-recipient for revisions. If revisions are needed, the monitors recommend a phone call or meeting to discuss why the plan was not approved and action steps moving forward. If the plan is returned to the sub-recipient, the monitor will provide a new date, within the next 30 days, for submission of changes to the plan. If there are outstanding housing quality standard deficiencies, a re-visit to the unit is required. A re-visit to the sub-recipient may be necessary as part of the corrective action plan or on-going technical assistance.

DHS offers preventive technical assistance tailored to the sub-recipient's needs. If technical assistance is required through the corrective action plan, DHS will provide the assistance needed. Once assistance is provided, the corrective action is put in place and the sub-recipient is re-visited, if the monitors find that sub-recipients are still

not in compliance with standards, the sub-recipient will be flagged as being High-Risk. Please see the section on *Non-Compliant Plan of Action for High-Risk Sub-Recipients*.

Non-Compliant Plan of Action for High-Risk Sub-Recipients

If a sub-recipient submits an unsatisfactory corrective action plan, does not follow-up with technical assistance requested or is unable to increase program performance in a satisfactory timeframe, the sub-recipient will be considered “High-Risk.” To ensure that High-Risk sub-recipients additional oversight, guidance and monitoring the action steps below are followed:

- 1.) The sub-recipient is considered “High-Risk” and is placed on a 90-day probationary period, during which the monitor recommends areas of improvement and approves the formal corrective action plan.
- 2.) During the 90 days, the monitor provides technical assistance and monitors, monthly, to ensure that the corrective action plan is being implemented.
 - a. Technical assistance can include but is not limited to, consultation on business process, administration of HMIS, referrals to training opportunities for professional development, and/or reviews of program performance with data analysis.
- 3.) After the 90-day probationary period ends, the monitor follows-up with the sub-recipient to ensure full adherence to and completion of the BHS approved corrective action plan.
 - a. If all findings from the corrective action plan are remedied, the sub-recipient will be removed from “High-Risk” status.
 - b. If findings are still open and the sub-recipient is still under-performing, BHS will inform the Homeless Advisory Board of the sub-recipient’s High-Risk status.
- 4.) Once BHS informs the Homeless Advisory Board (HAB) of the ongoing performance issue, the HAB recommends a course of action, which may include actions up to and including a vote for reallocation.

Fiscal Monitoring Plan

A full description of the fiscal oversight provided across CoC Program sub-recipients can be found in the *Financial Management Systems Policies and Procedures* document. Regarding monitoring specifically, DHS requires detailed monthly expense documentation. A fiscal monitor, a staff member of DHS’ Bureau of Homeless Services trained in HUD fiscal regulations, reviews and approves each invoice for accuracy prior to submission for reimbursement and monitors sub-recipients for compliance with HUD fiscal regulations. Each month, all sub-recipients submit detailed invoices to the fiscal monitor for review of compliance with HUD eligibility rules as detailed in the HEARTH Act along with back-up documentation to support the invoices. Any issues with invoices must be resolved before an invoice is approved for payment.

If sub-recipients have completed one year of billing without deficiency or issue and demonstrate a firm understanding of HUD fiscal regulations, as evidenced by past performance, then they may be moved to graduated status. Only those organizations with exemplary billing accuracy selected for graduated status, which means they submit a monthly detailed invoice, but are not required to submit backup documentation to support the request. They must maintain the back-up documentation internally and make it available for review by the fiscal monitor at any time. Annually, the fiscal monitor will visit all graduate sites and a select number of non-graduate sites for fiscal review. These reviews include a random sample of expenses, accounting records, and other documentation to ensure compliance with HUD regulations. (See Appendix B: Fiscal Monitoring Tool).

Any fiscal monitoring by the Bureau of Homeless Services within DHS is in addition to regularly scheduled audits conducted by DHS's Office of Administrative and Information Management Services (AIMS)—the Department's designated authority for financial management, budgets, contracts and compliance, human resources, and information systems.

DHS determines performance based on the sub-recipient's fiscal compliance with the items detailed in the monitoring tool. DHS shares the results of reviews with the HAB who take it under consideration when determining rankings for renewals.

Monitoring and the Annual Review and Ranking

As part of the CoC's commitment to data-driven performance and person-centered decision making, the annual review, ranking and reallocation process is centered on a performance based evaluation tool that utilizes data from multiple system sources, including HMIS and Coordinated Entry. While the utilization of these performance standards is important during the annual ranking and reallocation process, the standards are also incorporated into the ongoing oversight of each program throughout the year. The metrics have been integrated into the monitoring processes, ensuring that each project has multiple points at which performance is reviewed. Additionally, by building the metrics into data and program monitoring, the CoC is afforded the opportunity to identify the need for technical assistance and administer that assistance throughout the year. In addition to the coordination of performance targeting, monitoring results are utilized by the HAB during planning decisions, such as ranking projects for the annual application, determining appropriate reallocation of funds, and revising standards.

Allegheny County Continuum of Care Evaluation

2023 Renewal Application Project

Performance Outcomes

Agency: _____
 Project Name: _____
 Evaluation Data Review Period: **1/1/2022** to **12/31/2022**
 Total HUD 2022 Grant Award: \$ _____
 Type of Program: **Permanent Supportive Housing**

Households Exits to PH

Housing Programs: No. of Units
 Subpopulation Target A Served:

No. of Beds
 Subpopulation Target B Served:

Summary of Persons Served during Evaluation Period:

Households without Children		Households with Children	
Total Households Served :	Number of Households without Children		Number of Households with Children
	Adults		Adults
			Children
Leavers		Stayers	
Total Persons:	Leavers		Stayers
Households:	Exiting Households		Households Staying
Total Adults:	Exiting		Staying

All Performance Measures are generated from HMIS for the purpose of reviewing and ranking 2020 renewal projects. The tool was developed by the Continuum of Care Analysis and Planning Committee and approved by the Homeless Advisory Board to be utilized for the HUD CoC on (date).

a. Unit Utilization

	Average number of households in units throughout the year	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
Average Utilization of Units	25	100	5	3	15	15%	5 = 100% and Above 4 = 90.20 - 99.99% 3 = 84.60 - 90.19% 2 = 73.80 - 84.59% 1 = 0 - 73.79%

b. Housing Performance

	Specific Measure by Program Type	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
PSH: Consumers remaining in PSH	#DIV/0!		5	1	5	5%	5 = 100%
PSH: Consumers exiting to any HUD-defined PH option	#DIV/0!		5	2	10	10%	5 = 80% and Above 4 = 64.00 - 79.99% 3 = 32.82 - 63.99% 2 = .01 - 32.81% 1 = 0%

c. PSH Income, Employment, Health Insurance & Non Cash Benefits (Leavers and Stayers)

1. ADULT consumers who maintain or increase income from all sources

2. ADULT consumers become or remain employed during program

3. ADULT & CHILD consumers who have health insurance

4. ADULT consumers who maintain or increase non-cash benefits

Specific Outcome Measure	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
	#DIV/0!	5	0.75	15	15%	5 = 61.08% and Above 4 = 55.37 - 61.07% 3 = 48.95 - 55.36% 2 = 37.88 - 48.94% 1 = 0 - 37.87%
	#DIV/0!	5	0.75			5 = 21.57% and Above 4 = 15.04 - 21.56% 3 = 10.45 - 15.03% 2 = 6.83 - 10.44% 1 = 0 - 6.82%
	#DIV/0!	5	0.75			5 = 100% 4 = 96.57 - 99.99% 3 = 94.77 - 96.55% 2 = 90.44 - 94.76% 1 = 0 - 90.43%
	#DIV/0!	5	0.75			5 = 88.82% and Above 4 = 80.71 - 88.81% 3 = 72.07 - 80.70% 2 = 64.34 - 72.06% 1 = 0 - 64.33%

d.PSH Length of Time (Move in)

Average Length of time from program enrollment to move in date (30 days)(This measure is for only persons moving into program during 2022)

Specific Measure by Program Type	% of Total Served	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
	N/A	5	1	5	5%	5 = 80th Percentile and Above 4 = 60th-79th Percentile 3 = 40th-59th Percentile 2 = 20th - 39th Percentile 1 = 0 - 19th Percentile

e. Project Serving Hard to Serve Participants

Participants	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
Participants with 2 or more disabilities at entry	#DIV/0!	5	0.5	10	100%	5 = 63.30% and Above 4 = 50.53 - 63.29% 3 = 38.27 - 50.52% 2 = 27.24 - 38.26% 1 = 0 - 27.23%
Adults with zero income at entry	#DIV/0!	5	0.5			5 = 64.72% and Above 4 = 53.97 - 64.71% 3 = 46.67 - 53.96% 2 = 40.15 - 46.66% 1 = 0 - 40.14%
All Persons living in places not meant for human habitation prior to entry	#DIV/0!	5	0.5			5 = 61.41% and Above 4 = 37.47 - 61.40% 3 = 20.53 - 37.46% 2 = 6.65 - 20.52% 1 = 0 - 6.64%
All Chronic Homeless at entry	#DIV/0!	5	0.5			5 = 82.58% and Above 4 = 54.00 - 82.57% 3 = 37.02 - 53.99% 2 = 26.91 - 37.01% 1 = 0 - 26.90%

f. Recidivism

Specific Outcome by Program	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Consumers exiting from a program to PH destination but return to homeless system (street outreach or ES or TH) in 6 months	#DIV/0!	5.00	1	5	5%	5 = 0%

g. Data Quality

Program had no data quality missing values

Data Quality: Errors

- Name
- Social Security Number
- Date of Birth
- Race
- Ethnicity
- Gender
- Veteran Status (at entry) ADULT
- Relationship to Head of Household
- Client Location
- Disabling Condition
- Destination at Exit
- Income and Sources at Entry
- Income and Sources at Annual
- Income and Sources at Exits
- Chronic Homelessness (missing)

Number of HMIS Records with Errors as Defined by HUD	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
						5 = 15 /15 fields have less than 5% missing data 4.5 = 14/15 fields have less than 5% missing data 4 = 13 /15 fields have less than 5% missing data 3.5 = 12/15 fields have less than 5% missing data 3 = 11 /15 fields have less than 5% missing data 2.5 = 9-10/15 fields have less than 5% missing data 2= 7-8 /15 fields have less than 5% missing data 1.5 = 5-6/15 fields have less than 5% missing data 1= 3-4/15 fields have less than 5% missing data 0.5 =1- 2/15 fields have less than 5% missing data 0 = 0/15fields have less than 5% missing data
	#DIV/0!	5	1	5	5%	
	#DIV/0!					
	#DIV/0!					
	#DIV/0!					
	#DIV/0!					
	#DIV/0!					
	#DIV/0!					
	#DIV/0!					
	#DIV/0!					
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	#DIV/0!					
	#DIV/0!					
	#DIV/0!					
	#DIV/0!					

h. Data Quality: Timeliness

Data Quality:PSH Exits

Data Quality: PSH Annuals

PSH/RRH Number of Records 3 days or less for Exits PSH=Annuals 60 day window	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
						5 = 100% 4 = N/A 3 = 84.15 - 99.99% 2 = 44.27 - 84.14% 1 = 0 - 44.26%
	#DIV/0!	5	1	5	5%	
	#DIV/0!	5	1	5	5%	5 = 90.79% and Above 4 = 86.06 - 90.78% 3 = 62.90 - 86.05% 2 = 52.50 - 62.89% 1 = 0 - 52.49%

**i. Monitoring & Housing First
:Both RRH & PSH**

Monitoring Scorecard tab completed (for 2022 monitoring season)

Score From Monitoring Tool	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
0	0%	5	2	10	10%	See Monitoring Scorecard for score details.

j. Fiscal

Grant expended all funding (Amount Returned in last HUD grant)

Billing reports are submitted timely during 2022

Amount / Number	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
\$ -	#DIV/0!	5	1	10	10%	5 = 0-3% return of funds 4 = 4-7% return of funds 3 = 8-12% return of funds 2 = 13-18% return of funds 1 = 19-25% return of funds 0 = > 26% return of funds
0	0%	5	1			5 = All billings submitted correctly w/ support documentation & on time or one billing submitted late. 4 = 2-3 billings submitted late and/or required minor documentation changes 3 = 4-6 billings submitted late and/or required documentation changes 2 = 7-9 billings submitted late and/or required major documentation changes 1 = 10-11 billings submitted late and/or required major documentation changes 0 = All billings late and/or incorrect requiring major changes & adjustments

k. Cost Effectiveness of Program

Cost per successful exit and stayers for PSH

Amount	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
#DIV/0!	n/a	5	2	10	10%

Point Spread

- 5 = < \$14,000
- 4 = > \$14,000 / < \$28,000
- 3 = > \$28,000 / < \$42,000
- 2 = > \$42,000 / < \$56,000
- 1 = > \$56,000 / < \$70,000
- 0 = > \$70,000

TOTALS

	Points per Category	Percentage of Total Points per Category
Score Excluding Bonus (PSH programs)	100.00	100%
Bonus Score (PSH programs)	10.00	100%
Total Score (PSH programs)	110.00	110%

Project Response to Performance Outcomes on Ranking Tool

Name of Person Reviewing Outcomes:

Date of Review:

Did the program receive maximum or near maximum points in all the Performance Measures?

Yes

No

The project may comment on their performance below by category. Be brief and concise.

1. Comments on Performance

Performance	Explanation/Comments
a. Unit Utilization	
b. Housing Performance	
c1. Income	
c2. Employment	
c3. Health Insurance	
c4. Non-Cash Benefits	
d. Move in Date/ Length of Time	
e. Project Serving Hard to Serve Clients at Entry	This category cannot be increased by reviewers or explained by project since all projects receive referrals from Coordinated Entry. This is scored purely on the data reflected HMIS on client entry information.
f. Recidivism	
g. Data Quality: Elements	
h. Data Quality Timeliness	
i. Monitoring + Housing First	
j. Fiscal	
k. Cost Effectiveness	

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

Allegheny County CoC HUD Monitoring Scorecard

Provider:

Program Name:

Project Type:

Number of files Reviewed:

Date:

Number of UNIT INSPECTIONS:

Category of Review	Number of Files		Rubric for scoring:	
	Passing Review	Percentage	Score	
Completed Program Agreement: # of Files where Program Agreement is signed and dated by client		#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Homeless Verification: Number of files where Third party or self-certification is included.		#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Disability Verification (PSH Only): # of files where there is a HUD approved disability verification letter (SSI).		#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Goal/Service Plan: Within first 30 days, reviewed at least quarterly *Reviewed at least Quarterly for RRH and Annually for PSH*		#DIV/0!		100% = 2 point 75% to 99 % = 1.5 50% to 74 % = 1 25% to 49% = .5 0 to 24% = 0%
Consistent Case Notes: # of files where Provider documents monthly contacts with client(s) in case notes.		#DIV/0!		100% = 2 point 75% to 99 % = 1.5 50% to 74 % = 1 25% to 49% = .5 0 to 24% = 0%
Income Verification & Calculation: # of files containing both income verification and a rent calculation worksheet and calculations include all sources of income.		#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
Habitability Standards: # of Units passing Habitability Standards/ Findings from Monitors during annual Housing Quality Standards inspections.		#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%

Involuntary Terminations: # of Submitted termination files as a proportion terminations according to HMIS.	Submitted:	#DIV/0!		100% = 1 point 75% to 99 % = .75 50% to 74 % = .5 25% to 49% = .25 0 to 24% = 0%
	HMIS:			

TOTAL/Percentage of Points

0%	0
----	---

**Allegheny County Continuum of Care Evaluation
2022 Renewal Application Project
Fiscal Scorecard**

Agency:	0
Project Name:	0
Project Type:	PSH
Contract Executed Amount	
Amount Received from January - December 2022	100000
Units	0
Contracted Cost per Unit	#DIV/0!
Beds	0
Contracted Cost per Bed	#DIV/0!
PSH = Adult Stayers plus successful outcomes	0
Actual Expenditures Cost/Successful Outcome	#DIV/0!
Amount of Funds Returned under HUD 2022	
Percentage of Grant Returned:	#DIV/0!
Timeliness of Billing	On time? Late?
January	
February	
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	
Total	0 0

Allegheny County Continuum of Care Evaluation

2023 Renewal Application Project

Performance Outcomes

Agency: Chartiers Center
Project Name: Hestia Project
Evaluation Data Review Period: 1/1/2022 to 12/31/2022
Total HUD 2022 Grant Award: \$ 1,019,974.00
Type of Program: Permanent Supportive Housing

Households Exits to PH 5

Housing Programs: No. of Units 83 **No. of Beds** 100
Subpopulation Target A Served: **Subpopulation Target B Served:**

Summary of Persons Served during Evaluation Period:

		Households without Children		Households with Children	
Total Households Served :	Number of Households without Children	83		Number of Households with Children	17
	Adults	97		Adults	23
Total Persons Served:				Children	25
		Leavers		Stayers	
Total Persons:	Leavers	17		Stayers	124
Households:	Exiting Households	8		Households Staying	89
Total Adults:	Exiting	12		Staying	104

All Performance Measures are generated from HMIS for the purpose of reviewing and ranking 2022 renewal projects. The tool was developed by the Continuum of Care Analysis and Planning Committee and approved by the Homeless Advisory Board to be utilized for the HUD CoC on (date).

a. Unit Utilization

	Average number of households in units throughout the year	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
Average Utilization of Units	95	114%	5	3	15	19%	5 = 100% and Above 4 = 98 - 99.99% 3 = 91.8 - 97.99% 2 = 80.40 - 91.79% 1 = 0 - 80.39%

b. Housing Performance

	Specific Measure by Program Type	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
PSH: Consumers remaining in PSH	89	100%	5	1	5	6%	5 = 100%
PSH: Consumers exiting to any HUD-defined PH option	5	63%	3	2	6	8%	5 = 80% and Above 4 = 64.00 - 79.99% 3 = 32.82 - 63.99% 2 = .01 - 32.81% 1 = 0%

c. PSH Income, Employment, Health Insurance & Non Cash Benefits (Leavers and Stayers)

	Specific Outcome Measure	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
1. <u>ADULT</u> consumers who maintain or increase income from all sources	45	39%	2	0.75	9	11%	5 = 61.08% and Above 4 = 55.37 - 61.07% 3 = 48.95 - 55.36% 2 = 37.88 - 48.94% 1 = 0 - 37.87%
2. <u>ADULT</u> consumers become or remain employed during program	3	3%	1	0.75			5 = 21.57% and Above 4 = 15.04 - 21.56% 3 = 10.45 - 15.03% 2 = 6.82 - 10.44% 1 = 0 - 6.81%
3. <u>ADULT & CHILD</u> consumers who have health insurance	138	98%	4	0.75			5 = 100% 4 = 96.56 - 99.99% 3 = 94.75 - 96.55% 2 = 90.44 - 94.74% 1 = 0 - 90.43%
4. <u>ADULT</u> consumers who maintain or increase non-cash benefits	113	97%	5	0.75			5 = 88.82% and Above 4 = 80.71 - 88.81% 3 = 72.07 - 80.70% 2 = 64.34 - 72.06% 1 = 0 - 64.33%

d.PSH Length of Time (Move in)

Average Length of time from program enrollment to move in date (30 days)(This measure is for only persons moving into program during 2022)

Specific Measure by Program Type	% of Total Served	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
26	N/A	4	1	4	5%	5 = 0 Days (and have HoH move-ins) 4 = 1 - 39 Days 3 = 40 - 49 Days (or if project had no new HoH move ins) 2 = 50 - 59 Days 1 = 60 Days or More

e. Project Serving Hard to Serve Participants

	Participants	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	
Participants with 2 or more disabilities at entry	62	43%	3	0.5	6.5	100%	5 = 63.3% and Above 4 = 50.53 - 63.29% 3 = 38.27 - 50.52% 2 = 27.24 - 38.26% 1 = 0 - 27.23%
Adults with zero income at entry	78	65.0%	5	0.5			5 = 64.72% and Above 4 = 53.97 - 64.71% 3 = 46.67 - 53.96% 2 = 40.15 - 46.66% 1 = 0 - 40.14%
All Persons living in places not meant for human habitation prior to entry	28	19%	2	0.5			5 = 61.41% and Above 4 = 37.47 - 61.40% 3 = 20.53 - 37.46% 2 = 6.65 - 20.52% 1 = 0 - 6.64%
All Chronic Homeless at entry	72	50%	3	0.5			5 = 82.58% and Above 4 = 54 - 82.57% 3 = 37.02 - 53.99% 2 = 26.91 - 37.01% 1 = 0 - 26.90%

f. Recidivism

	Specific Outcome by Program	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Consumers exiting from a program to PH destination but return to homeless system (street outreach or ES or TH) in 6 months	0	0%	5.00	1	5	6%	5 = 0% 1 = Above Zero

g. Data Quality

Program had no data quality missing values

Data Quality: Errors

Name
Social Security Number
Date of Birth
Race
Ethnicity
Gender

Veteran Status (at entry) ADULT

Relationship to Head of Household
Client Location
Disabling Condition
Destination at Exit
Income and Sources at Entry
Income and Sources at Annual
Income and Sources at Exits

Chronic Homelessness (missing)

Number of HMIS Records with Errors as Defined by HUD

HUD	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
0	100%	5	1	5	6%	5 = 15 /15 fields have less than 5% missing data 4.5 = 14/15 fields have less than 5% missing data 4 = 13 /15 fields have less than 5% missing data 3.5 = 12/15 fields have less than 5% missing data 3 = 11 /15 fields have less than 5% missing data 2.5 = 9-10/15 fields have less than 5% missing data 2= 7-8 /15 fields have less than 5% missing data 1.5 = 5-6/15 fields have less than 5% missing data 1= 3-4/15 fields have less than 5% missing data 0.5 =1- 2/15 fields have less than 5% missing data 0 = 0/15fields have less than 5% missing data
	0%					
2	1%					
	0%					
	0%					
	0%					
	0%					
	0%					
	0%					
	0%					
	0%					
	0%					
	0%					
	0%					

h. Data Quality: Timeliness

Data Quality: PSH Exits

Data Quality: PSH Annuals

PSH/RRH Number of Records 3 days or less for Exits PSH=Annuals 60 day window

PSH/RRH Number of Records 3 days or less for Exits PSH=Annuals 60 day window	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
8	47.06%	2	1	2	3%	5 = 100% 4 = N/A 3 = 84.15 - 99.99% 2 = 44.27 - 84.14% 1 = 0 - 44.26%
60	85.7%	3	1	3	4%	5 = 90.79% and Above 4 = 86.06 - 90.78% 3 = 62.90 - 86.05% 2 = 52.50 - 62.89% 1 = 0 - 52.49%

**i. Monitoring & Housing First
:Both RRH & PSH**

Monitoring Scorecard tab completed (for 2022 monitoring season)

Score From Monitoring Tool	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
8	80%	4	2	8	10%	See Monitoring Scorecard for score details. (Points are based off percentage score from Monitoring tool).

j. Fiscal

Grant expended all funding (Amount Returned in last HUD grant)

Billing reports are submitted timely during 2022

Amount / Number	%	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
\$ -	0.00%	5	1	10	13%	N/A
12	100%	5	1			5 = All billings submitted correctly w/ support documentation & on time or one billing submitted late. 4 = 2-3 billings submitted late and/or required minor documentation changes 3 = 4-6 billings submitted late and/or required documentation changes 2 = 7-9 billings submitted late and/or required major documentation changes 1 = 10-11 billings submitted late and/or required major documentation changes 0 = All billings late and/or incorrect requiring major changes & adjustments

k. Cost Effectiveness of Program

	Amount	Individual Points	Weighted Points	Total Points for Category	Percentage of Total Points	Point Spread
Cost per successful exit and stayers for PSH	\$ 9,404.66	n/a	4	2	8	10%
5 = Under \$8,783 4 = \$8,783 - \$10,668 3 = \$10,667 - \$12,028 2 = - \$12,027 - \$18,195 1 = \$18,196 - \$30,000						

TOTALS

	Points per Category	Percentage of Total Points per Category
Score Excluding Bonus (PSH programs)	80.00	80%
Bonus Score (PSH programs)	6.50	65%
Total Score (PSH programs)	86.50	87%

Project Response to Performance Outcomes on Ranking Tool

Name of Person Reviewing Outcomes:

Date of Review:

Did the program receive maximum or near maximum points in all the Performance Measures? Yes No

The project may comment on their performance below by category. Be brief and concise.

1. Comments on Performance

Performance	Explanation/Comments
a. Unit Utilization	
b. Housing Performance	
c1. Income	
c2. Employment	
c3. Health Insurance	
c4. Non-Cash Benefits	
d. Move in Date/ Length of Time	
e. Project Serving Hard to Serve Clients at Entry	This category cannot be increased by reviewers or explained by project since all projects receive referrals from Coordinated Entry. This is scored purely on the data reflected HMIS on client entry information.
f. Recidivism	
g. Data Quality: Elements	
h. Data Quality Timeliness	
i. Monitoring + Housing First	
j. Fiscal	
k. Cost Effectiveness	

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

Allegheny County CoC HUD Monitoring Scorecard

Provider:

Chartiers Center

Program Name:

Hestia Project

Project Type:

PSH

Number of files Reviewed:

4

Date:

Number of UNIT INSPECTIONS:

1

Category of Review

Number of Files
Passing Review

Percentage

Score

Rubric for scoring:

Category of Review	Number of Files Passing Review	Percentage	Score	Rubric for scoring:
Completed Program Agreement: # of Files where Program Agreement is signed and dated by client	4	100%	1	100% = 1 point 75% to 99% = .75 50% to 74% = .5 25% to 49% = .25 0 to 24% = 0%
Homeless Verification: Number of files where Third party or self-certification is included.	4	100%	1	100% = 1 point 75% to 99% = .75 50% to 74% = .5 25% to 49% = .25 0 to 24% = 0%
Disability Verification (PSH Only): # of files where there is a HUD approved disability verification letter (SSI).	4	100%	1	100% = 1 point 75% to 99% = .75 50% to 74% = .5 25% to 49% = .25 0 to 24% = 0%
Goal/Service Plan: Within first 30 days, reviewed at least quarterly *Reviewed at least Quarterly for RRH and Annually for PSH*	1	25%	0.5	100% = 2 point 75% to 99% = 1.5 50% to 74% = 1 25% to 49% = .5 0 to 24% = 0%
Consistent Case Notes: # of files where Provider documents monthly contacts with client(s) in case notes.	4	100%	2	100% = 2 point 75% to 99% = 1.5 50% to 74% = 1 25% to 49% = .5 0 to 24% = 0%
Income Verification & Calculation: # of files containing both income verification and a rent calculation worksheet and calculations include all sources of income.	3	75%	0.75	100% = 1 point 75% to 99% = .75 50% to 74% = .5 25% to 49% = .25 0 to 24% = 0%
Habitability Standards: # of Units passing Habitability Standards/ Findings from Monitors during annual Housing Quality Standards inspections.	1	100%	1	100% = 1 point 75% to 99% = .75 50% to 74% = .5 25% to 49% = .25 0 to 24% = 0%

Involuntary Terminations: # of Submitted termination files as a proportion terminations according to HMIS.	Submitted: 3	75%	0.75	100% = 1 point 75% to 99% = .75 50% to 74% = .5 25% to 49% = .25 0 to 24% = 0%
	HMIS: 4			

TOTAL/Percentage of Points

80%

8

**Allegheny County Continuum of Care Evaluation
2022 Renewal Application Project
Fiscal Scorecard**

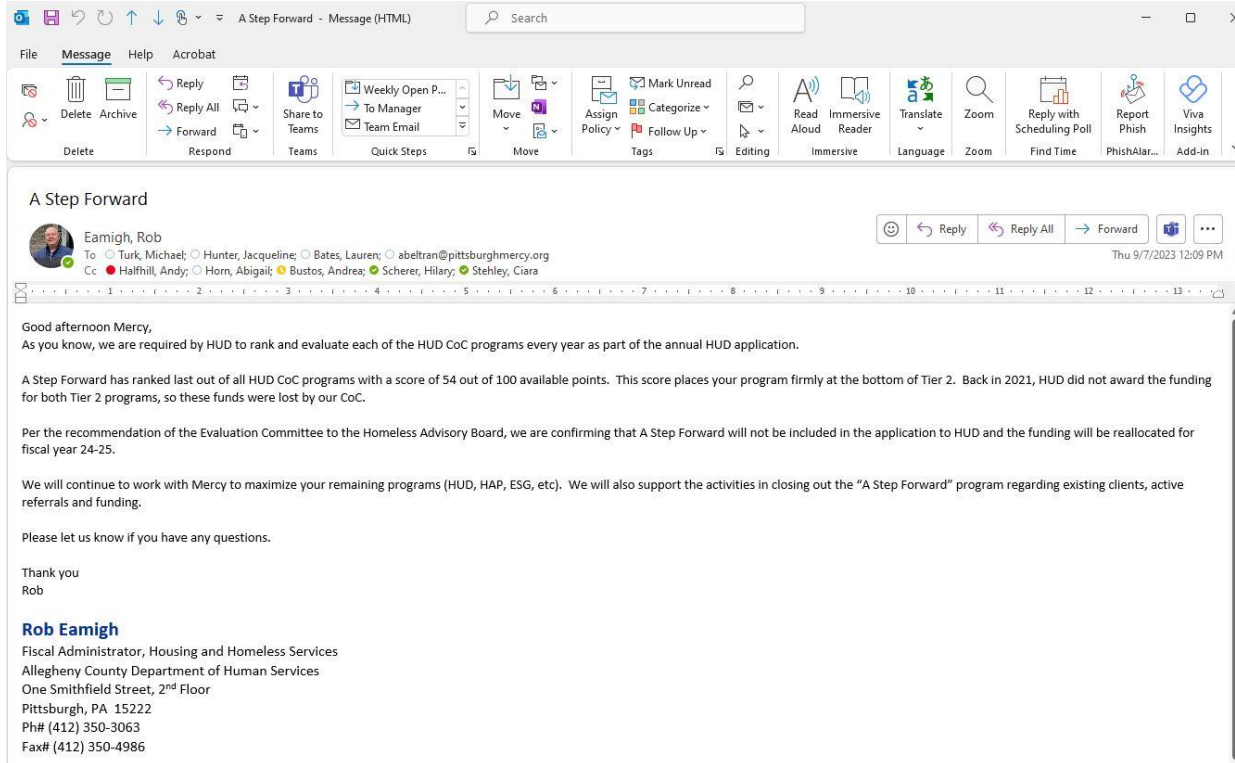
Agency:	Chartiers
Project Name:	Hestia Project
Project Type	PSH

Contract Executed Amount	\$1,019,974
Amount Received from January - December 2022	\$1,025,108
Units	83
Contracted Cost per Unit	\$ 12,288.84
Beds	100
Contracted Cost per Bed	\$ 10,199.74
PSH = Adult Stayers plus successful outcomes	109
Actual Expenditures Cost/Successful Outcome	\$ 9,404.66
Amount of Funds Returned under HUD 2022	0
Percentage of Grant Returned:	0%

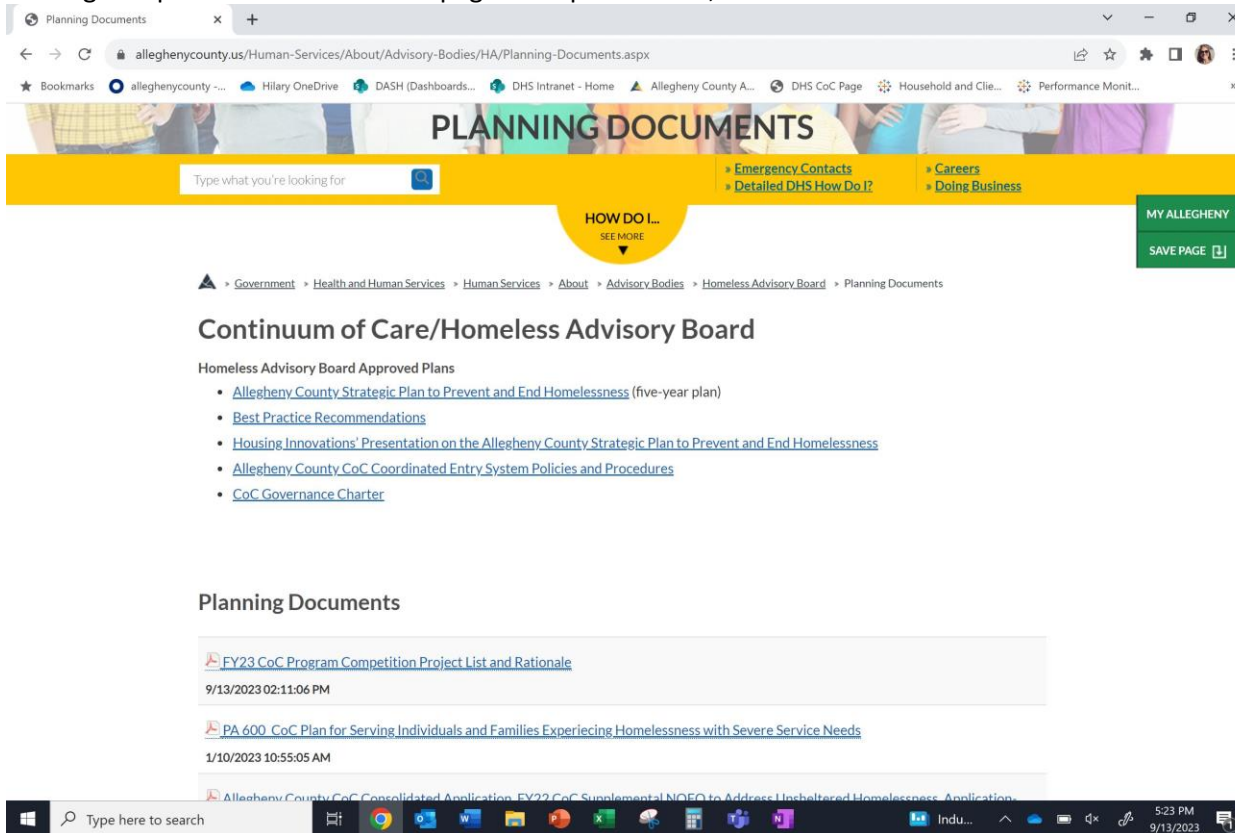
Timeliness of Billing	On time?	Late?
January	1	
February	1	
March	1	
April	1	
May	1	
June	1	
July	1	
August	1	
September	1	
October	1	
November	1	
December	1	
Total	12	0

Notification of Projects Rejected or Reduced PA 600

Notification email sent on September 7, 2023 (one project rejected, no projects reduced)

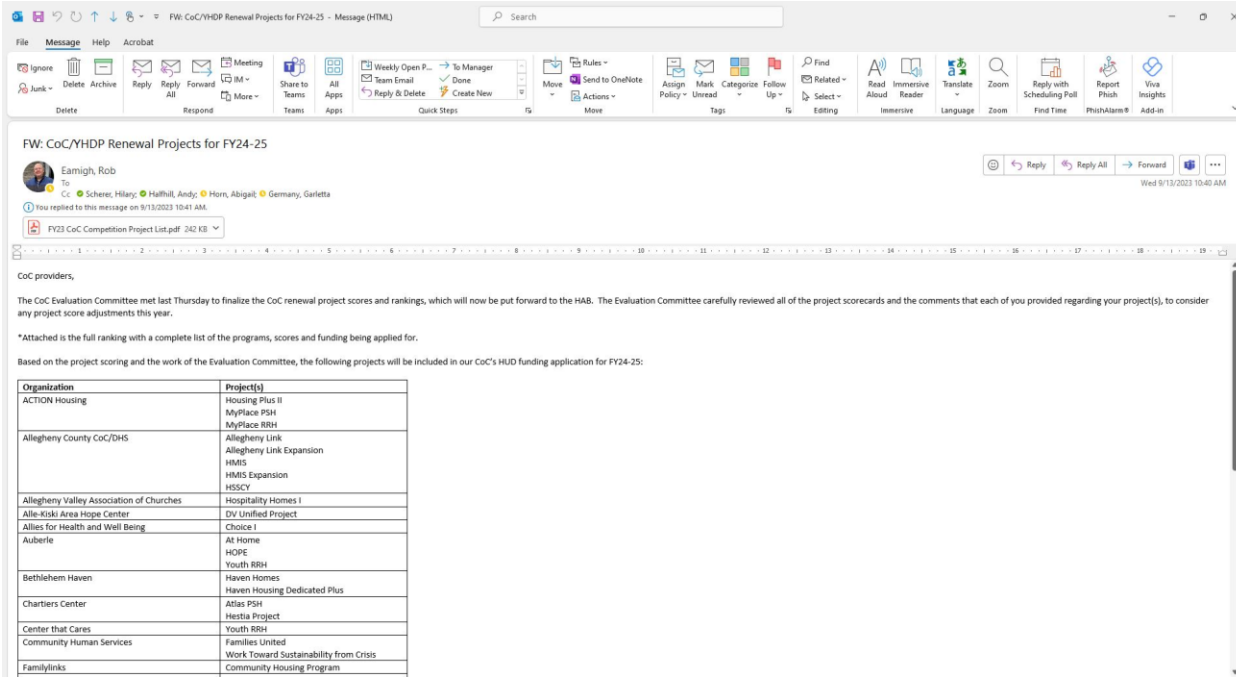


In addition, the project listing which included all project applications, accepted/rejected/reduced status, ranking, and funding was posted on the CoC web page on September 13, 2023:

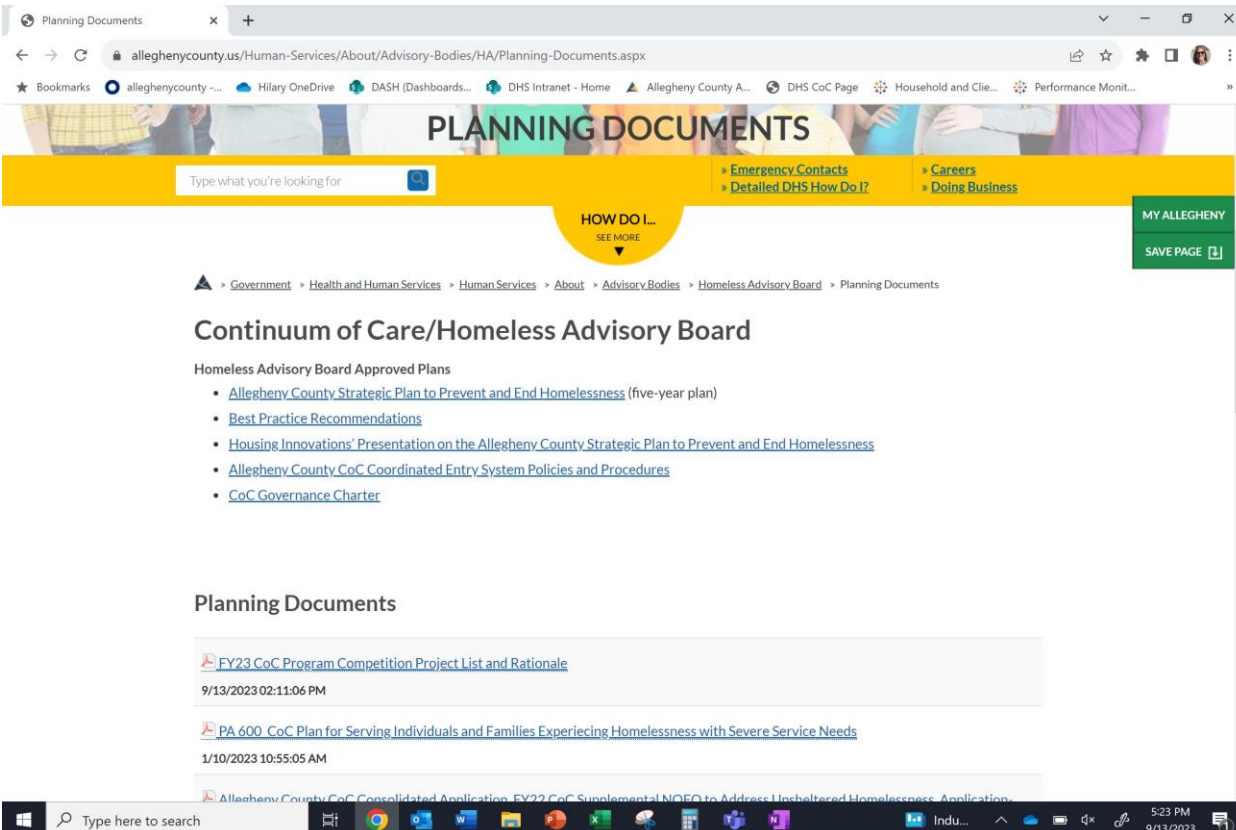


Notification of Projects Accepted PA 600

Notification email sent on September 13, 2023:



In addition, the project listing which included all project applications, accepted/rejected/reduced status, ranking, and funding was posted on the CoC web page on September 13, 2023:



Renewal Project List (Ranked)										
Rank No.	Status	Agency	Project	Type of Program	UNITS	Housing Sites	Household Type	Final Score	Funding Amount	Running Total
1	accepted	Alle-Kiski Area Hope Center	DV UP / Safe at Home	RRH	82	Scattered Site	Mixed	101.5	\$ 1,399,621.00	\$ 1,399,621.00
2	accepted	UPMC Presbyterian Shadyside	Flex 50	PSH	113	Scattered Site	Families	93.25	\$ 1,665,499.00	\$ 3,065,120.00
3	accepted	Veterans Leadership Program	Constitution RRH	RRH	18	Scattered Site	Singles	89.75	\$ 234,104.00	\$ 3,299,224.00
4	accepted	Chartiers Center	Hestia Project	PSH	99	Scattered Site	Mixed	86.5	\$ 1,050,826.00	\$ 4,350,050.00
5	accepted	UPMC Presbyterian Shadyside	Neighborhood Living Program (NLP)	PSH	111	Scattered Site	Mixed	86.4	\$ 1,399,944.00	\$ 5,749,994.00
6	accepted	Community Human Services	Families United	PSH	25	Scattered Site	Mixed	85.75	\$ 826,854.00	\$ 6,576,848.00
7	accepted	Chartiers Center	Atlas PSH	PSH	46	Scattered Site	Singles	85	\$ 809,857.00	\$ 7,386,705.00
8	accepted	Allies for Health and Well Being	Choice I	PSH	39	Scattered Site	Mixed	82	\$ 484,828.00	\$ 7,871,533.00
9	accepted	Bethlehem Haven	Haven Housing Dedicated Plus	PSH	20	Scattered Site	Singles	80.25	\$ 296,776.00	\$ 8,168,309.00
10	accepted	UPMC Presbyterian Shadyside	Flex 51	PSH	161	Combination	Singles	80.25	\$ 2,255,049.00	\$ 10,423,358.00
11	accepted	Community Human Services	Work Towards Sustainability from Crisis	PSH	47	Combination	Singles	79.25	\$ 563,961.00	\$ 10,987,319.00
12	accepted	ACTION	MyPlace PSH	PSH	5	Scattered Site	Singles	78.75	\$ 69,256.00	\$ 11,056,575.00
13	accepted	Auberle	At Home	RRH	10	Scattered Site	Mixed	78.05	\$ 138,513.00	\$ 11,195,088.00
14	accepted	Goodwill	Harbor II RRH	RRH	45	Scattered Site	Singles	77.9	\$ 609,879.00	\$ 11,804,967.00
15	accepted	Gaudenzia	Village Phase I	PSH	16	Scattered Site	Mixed	77	\$ 258,454.00	\$ 12,063,421.00
16	accepted	Allegheny Valley Association of Churches	Hospitality Homes I	PSH	20	Scattered Site	Mixed	76.75	\$ 328,112.00	\$ 12,391,533.00
17	accepted	Goodwill	Good Start	RRH	20	Scattered Site	Families	75.9	\$ 361,621.00	\$ 12,753,154.00
18	accepted	Mercy Life Center	A River to Home	PSH	41	Scattered Site	Singles	74.25	\$ 567,901.00	\$ 13,321,055.00
19	accepted	UPMC Presbyterian Shadyside	Soteria	RRH	17	Scattered Site	Mixed	73.75	\$ 246,855.00	\$ 13,567,910.00
20	accepted	Veterans Leadership Program	Victory	PSH	48	Scattered Site	Mixed	73.5	\$ 734,951.00	\$ 14,302,861.00
21	accepted	Familylinks	Community Housing Program	PSH	12	Scattered Site	Mixed	73.25	\$ 145,500.00	\$ 14,448,361.00
22	accepted	Sisters Place	Sunrise	PSH	25	Combination	Families	70.75	\$ 488,722.00	\$ 14,937,083.00
23	accepted	Sojourner Moms	Moms II	PSH	36	Facility	Families	70	\$ 870,602.00	\$ 15,807,685.00
24	accepted	ACTION	Housing Plus II	PSH	11	Scattered Site	Singles	69.75	\$ 199,162.00	\$ 16,006,847.00
25	accepted	ACTION	MyPlace RRH	RRH	65	Scattered Site	Mixed	69.25	\$ 916,163.00	\$ 16,923,010.00
26	accepted	Mercy Life Center	Path to New Life	PSH	74	Scattered Site	Singles	68.5	\$ 650,023.00	\$ 17,573,033.00
27	accepted	Bethlehem Haven	Haven Homes	PSH	16	Facility	Singles	66.25	\$ 282,536.00	\$ 17,855,569.00
28	accepted	Goodwill	Goodwill Supportive Housing	PSH	11	Scattered Site	Singles	65.75	\$ 138,438.00	\$ 17,994,007.00
29	accepted	UPMC Presbyterian Shadyside	Neighborhood Living Program (NLP) Expansion	PSH	50	Scattered Site	Mixed	N/A	\$ 700,000.00	\$ 18,694,007.00
30	accepted	YWCA	YW Bridges RRH	RRH	23	Scattered Site	Mixed	64.3	\$ 701,243.00	\$ 19,395,250.00
31	accepted	DHS	Allegheny Link Expansion	SSO-CE	N/A	N/A	N/A	N/A	\$ 512,582.00	\$ 19,907,832.00
32	accepted	DHS	Allegheny Link	SSO-CE	N/A	N/A	N/A	N/A	\$ 68,761.00	\$ 19,976,593.00
33	accepted	DHS	HMIS	HMIS	N/A	N/A	N/A	N/A	\$ 198,942.00	\$ 20,175,535.00
34	accepted	DHS	HMIS Expansion	HMIS	N/A	N/A	N/A	N/A	\$ 152,250.00	\$ 20,327,785.00
not ranked	rejected	Mercy Life Center	A Step Forward	RRH	12	Scattered Site	Families	54	\$ -	\$ 20,327,785.00

New Project List (Ranked)										
Rank No.	Status	Agency	Project	Type of Program	UNITS	Housing Sites	Household Type	Final Score	Funding Amount	Running Total
35	accepted	Goodwill	Good Start Expansion	RRH	12	Scattered Site	Families	N/A	\$ 194,330.00	\$ 20,522,115.00

**YHDP Renewal Projects
(Not Ranked)**

Rank No.		Agency	Project	Type of Program	UNITS	Housing Sites	Household Type	Final Score	Funding Amount	Running Total
N/A	accepted	Allegheny County Department of Human Services	Homelessness Services & Support Coordinators for Youth	SSO	N/A	N/A		N/A	\$ 345,506.00	\$ 20,867,621.00
N/A	accepted	Auberle and Center That CARES	Youth Rapid Re-Housing	RRH	55			N/A	\$ 939,482.00	\$ 21,807,103.00
N/A	accepted	Auberle	HOPE	SSO	N/A	N/A		N/A	\$ 479,160.00	\$ 22,286,263.00

**YHDP Replacement Projects
(Not Ranked)**

Rank No.		Agency	Project	Type of Program	UNITS	Housing Sites	Household Type	Final Score	Funding Amount	Running Total
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

**CoC Planning
(Not Ranked)**

Rank No.		Agency	Project	Type of Program	UNITS	Housing Sites	Household Type	Final Score	Funding Amount	Running Total
N/A	accepted	Allegheny County Department of Human Services	CoC Planning Grant	N/A	N/A	N/A	N/A	N/A	\$ 1,402,506.00	\$ 23,688,769.00

**UFA
(Not Ranked)**

Rank No.		Agency	Project	Type of Program	UNITS	Housing Sites	Household Type	Final Score	Funding Amount	Running Total
N/A	accepted	Allegheny County Department of Human Services	UFA Grant	N/A	N/A	N/A	N/A	N/A	\$ 841,504.00	\$ 24,530,273.00

Notification of CoC-Approved Consolidated Application PA 600

CoC/HAB Bi-Monthly meeting: September 26, 2023: Meeting Access and Materials

Scherer, Hilary
To: Scherer, Hilary
Bcc: ali.abdullah@hacp.org; sarah.aglio@aui3.net; Albert, Rosie; alena.anderson@unitedwaywpa.org; aarmstrong@absolutecare.com; john.axtell@verizon.net; mbalsamico@pennhills.org; bgregg@blockbyblock.com; Batterton, Jenn; Becton, Twarz; Reneel.Bell@gmail.com; Benjamin-Miller, De'Netta; kent.bey@plcpg.org; caster.binion@hacp.org; mbond@akthopecenter.org; sharon@outreachedarms.org; jennifer.bosack@goodwillswpa.org; Boyd, Ann; abradley@recoveryunitedpittsburgh.com; Brogdon, Shannon; Britt, Barbara; +216 others

Attachments: Coc-HAB BiMonthly Meeting_9.26.2023_Agenda.pdf (147 KB), Philly 2018.pdf (4 MB), MoCoMD 2020.pdf (217 KB), HomelesstolHomesPlan2010 Cincinnati.pdf (388 KB)

Good afternoon CoC members,
The next CoC/HAB Bi-Monthly Meeting is scheduled for **Tuesday, September 26, 2023, from 10:00am to 12:00pm**. You can access the meeting **via Teams** or **by attending in person in the Liberty Conference Room**, located on the lower level of the Human Services Building (1 Smithfield Street, Downtown Pittsburgh, 15222).

Meeting materials are attached—including the agenda and 3 other CoC's strategic plans. Tuesday's meeting will include discussions regarding the approach/format for the CoC's next plan and these plans provide examples of varying approaches. If you are not familiar with the Allegheny County CoC's last plan, it can be found on the CoC/HAB's Planning Documents page: <https://www.alleghenycounty.us/Human-Services/About/Advisory-Bodies/HAB/Planning-Documents.aspx> (first link under "Homeless Advisory Board Approved Plans").

Please also note that by Tuesday, September 26th, the CoC's FY2023 CoC Competition Consolidated Application will also be posted on the same Planning Documents page. As a reminder, each year the CoC must apply to HUD for CoC Program Funds. Prior to submitting our application we post it on the Planning Documents page.

If you attend the meeting in person, you will see visitor registration kiosks in the lobby. When you arrive at 1 Smithfield Street you will use the kiosk and select "New Registration" in the bottom right corner. You will enter your contact information and then select "Other" and you identify for you reason for visit as attending the CoC/HAB meeting. A temporary visitor's sticker will print at the Security Guard desk. Pick up the sticker and come on down to the Liberty Room.

For CoC members attending via Teams, the access information is below:

Microsoft Teams meeting
Join on your computer, mobile app or room device
[Click here to join the meeting](#)
Meeting ID: 250 935 886 762
Passcode: aEZvbG
[Download Teams](#) | [Join on the web](#)
Or call in (audio only)
[+1 267-368-7515](tel:+12673687515), [9540772854](tel:+19540772854) United States, Philadelphia
Phone Conference ID: 954 077 285#
[Find a local number](#) | [Reset PIN](#)
[Learn More](#) | [Meeting options](#)

If you have any questions or comments ahead of next week's meeting, please let me know.

Thank you.

In addition to the announcement via email, the notification was made at the CoC meeting held on September 26m 2023

2023 HDX Competition Report

PIT Count Data for PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	887	692	880	1026
Emergency Shelter Total	575	509	631	758
Safe Haven Total	8	5	12	11
Transitional Housing Total	141	113	132	102
Total Sheltered Count	724	627	775	871
Total Unsheltered Count	163	65	105	155

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	183	48	284	215
Sheltered Count of Chronically Homeless Persons	137	9	195	125
Unsheltered Count of Chronically Homeless Persons	46	39	89	90

2023 HDX Competition Report

PIT Count Data for PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	76	60	75	69
Sheltered Count of Homeless Households with Children	76	60	75	69
Unsheltered Count of Homeless Households with Children	0	0	0	0

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	225	106	62	85	106
Sheltered Count of Homeless Veterans	215	96	60	82	99
Unsheltered Count of Homeless Veterans	10	10	2	3	7

*For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

2023 HDX Competition Report

HIC Data for PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year-Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year-Round Beds	Total Year-Round, Current VSP Beds in an HMIS Comparable Database	Total Year-Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	813	718	718	100.00%	95	95	100.00%	813	100.00%
SH Beds	12	12	12	100.00%	0	0	NA	12	100.00%
TH Beds	160	160	160	100.00%	0	0	NA	160	100.00%
RRH Beds	879	643	701	91.73%	178	178	100.00%	821	93.40%
PSH Beds	1,985	1,635	1,985	82.37%	0	0	NA	1,635	82.37%
OPH Beds	40	40	40	100.00%	0	0	NA	40	100.00%
Total Beds	3,889	3,208	3,616	88.72%	273	273	100.00%	3,481	89.51%

2023 HDX Competition Report

HIC Data for PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

2023 HDX Competition Report

HIC Data for PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

Notes

*For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

**For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	1057	1123	1113	1065

Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	158	160	187	178

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	854	722	885	879

2023 HDX Competition Report

HIC Data for PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.

Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	2356	2553	107	86	-21	37	37	0
1.2 Persons in ES, SH, and TH	2559	2837	144	105	-39	44	43	-1

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

2023 HDX Competition Report
FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	2699	2951	543	487	-56	203	178	-25
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	2861	3250	577	547	-30	219	191	-28

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	55	1	2%	5	9%	10	18%	16	29%
Exit was from ES	689	53	8%	37	5%	57	8%	147	21%
Exit was from TH	78	3	4%	3	4%	5	6%	11	14%
Exit was from SH	3	0	0%	0	0%	0	0%	0	0%
Exit was from PH	396	16	4%	7	2%	27	7%	50	13%
TOTAL Returns to Homelessness	1221	73	6%	52	4%	99	8%	224	18%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	692	880	188
Emergency Shelter Total	509	631	122
Safe Haven Total	5	12	7
Transitional Housing Total	113	132	19
Total Sheltered Count	627	775	148
Unsheltered Count	65	105	40

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	2638	2874	236
Emergency Shelter Total	2433	2635	202
Safe Haven Total	7	15	8
Transitional Housing Total	250	261	11

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1197	1066	-131
Number of adults with increased earned income	94	80	-14
Percentage of adults who increased earned income	8%	8%	0%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1197	1066	-131
Number of adults with increased non-employment cash income	427	401	-26
Percentage of adults who increased non-employment cash income	36%	38%	2%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1197	1066	-131
Number of adults with increased total income	499	461	-38
Percentage of adults who increased total income	42%	43%	1%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	384	532	148
Number of adults who exited with increased earned income	41	80	39
Percentage of adults who increased earned income	11%	15%	4%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	384	532	148
Number of adults who exited with increased non-employment cash income	132	138	6
Percentage of adults who increased non-employment cash income	34%	26%	-8%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	384	532	148
Number of adults who exited with increased total income	167	211	44
Percentage of adults who increased total income	43%	40%	-3%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	2232	2475	243
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	507	531	24
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	1725	1944	219

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	2711	3036	325
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	637	769	132
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	2074	2267	193

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in FY2022 (Oct 1, 2021 - Sept 30, 2022) reporting period.

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

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	50	276	226
Of persons above, those who exited to temporary & some institutional destinations	13	54	41
Of the persons above, those who exited to permanent housing destinations	21	76	55
% Successful exits	68%	47%	-21%

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

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1986	2486	500
Of the persons above, those who exited to permanent housing destinations	974	1087	113
% Successful exits	49%	44%	-5%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	2098	2005	-93
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	2046	1950	-96
% Successful exits/retention	98%	97%	-1%

2023 HDX Competition Report

FY2022 - SysPM Data Quality

PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	436	465	556	159	169	161	2315	2194	2184	698	551	705			
2. Number of HMIS Beds	436	465	556	159	169	161	1938	1844	1834	650	531	662			
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	100.00	83.71	84.05	83.97	93.12	96.37	93.90			
4. Unduplicated Persons Served (HMIS)	2359	2449	2553	297	249	261	2271	2260	2135	1150	1202	1395	325	254	583
5. Total Leavers (HMIS)	1720	2098	2266	200	124	132	368	357	411	495	446	642	214	39	276
6. Destination of Don't Know, Refused, or Missing (HMIS)	654	647	411	18	15	8	16	10	9	21	16	32	37	8	109
7. Destination Error Rate (%)	38.02	30.84	18.14	9.00	12.10	6.06	4.35	2.80	2.19	4.24	3.59	4.98	17.29	20.51	39.49

2023 HDX Competition Report
FY2022 - SysPM Data Quality

2023 HDX Competition Report

Submission and Count Dates for PA-600 - Pittsburgh, McKeesport, Penn Hills/Allegheny County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/24/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/28/2023	Yes
2023 HIC Count Submittal Date	4/28/2023	Yes
2022 System PM Submittal Date	2/24/2023	Yes

COUNTY OF  ALLEGHENY
RICH FITZGERALD
COUNTY EXECUTIVE

September 21, 2023

HUD Headquarters
US Department of Housing and Urban Development
Robert C Weaver Building
Room 7270, Office of Community Planning and Development
451 Seventh Street, SW
Washington, D.C. 20410

RE: GoodStart RRH-Expansion Housing Leveraging

To Whom It May Concern:

Please be advised that Allegheny County Department of Human Services (AC DHS) will provide housing subsidy funds to serve 25% of the program participants served through the GoodStart RRH Expansion for the grant funding period of July 1, 2024 to June 30, 2025. HUD CoC Program funds will be used to house and serve an anticipated 12 households through the grant term. An additional 4 households will have their housing costs paid through AC DHS funding from the State.

Sincerely,



Erin Dalton
Director

ERIN DALTON, DIRECTOR
DEPARTMENT OF HUMAN SERVICES
EXECUTIVE OFFICE

HUMAN SERVICES BUILDING • ONE SMITHFIELD STREET • SUITE 400 • PITTSBURGH, PA 15222
PHONE (412) 350-5701 • FAX (412) 350-4004 • EMAIL DHS-INFORMATION@ALLEGHENYCOUNTY.US