



**FY2018 HUD COC PROGRAM COMPETITION
RENEWAL PROJECT APPLICATION
HOUSING PROJECTS**

| AGENCY PROFILE | |
|-----------------------|--|
| Legal Name of Agency | Channel Housing Ministries, Inc./dba OCEANA'S HOME Partnership |
| Project Name | Stability and Beyond |
| Project Start Date | 02/01/2020 |
| Contact Person | Kittie Tuinstra |
| Title | Executive Director |
| Address | 204 Washington Street, Hart, MI 49420 |
| Email | kittie@oceanashome.org |
| Phone | 231.873.2222 |

Check one:

- ☐ Permanent Supportive Housing
- ☒ Rapid Re-Housing
- ☐ Joint Transitional Housing / Permanent Housing – Rapid Re-Housing

Renewal Application Option (check one):

- ☒ Standard Renewal (no change from FY17)
- ☐ Consolidation (must complete New Project Application in addition)
- ☐ Transition (must complete New Project Application in addition)
- ☐ Expansion (must complete New Project Application in addition)

Authorized Representative: *I hereby certify that the information contained in this proposal is true and accurate. Any falsification of information will render the application void, and the application will not be accepted. This application has been reviewed and authorized for submission by the agency's board of directors as of the date indicated.*

| | |
|--|---------------------------|
| Name: <i>Kitty Twinsten, Kitty Twinsten</i> | Title: Executive Director |
| Date of Board/Local Planning Body Authorization: | |
| Date of Anticipated Board/Local Planning Body Authorization: | 8/6/2018 |

All projects requesting renewal must demonstrate they have met minimum project eligibility, capacity, timeliness, and performance standards to be considered for funding.

GENERAL PROJECT INFORMATION

1a. Provide a narrative describing how the project's performance met the plans and goals established in the current project's application, the project's performance in assisting program participants to achieve and maintain independent living, and record of success. (Include target populations and preferences as specified and/or allowed by the Notice of Funding Availability (NOFA) under which the project was initially funded.) If the renewing project has not yet started, provide a narrative of anticipated performance in these same areas based on experience with other related projects. (1000 word limit)

The Stability and Beyond Program (SAB) just completed its first year of operation. This first year was under FY15 funds and operating from 2/1/17-1/31/18. We are currently operating under our FY16 funds. During the FY15 project year, we assisted 13 individuals in 6 households. Only one household left the program during the operating year, and they exited to a positive housing destination. All other households remained in the project at year end and were successfully engaged in case management. Of the two adults that exited, one was able to increase their income. This first year of operation presented several challenges, especially since this project is our organization's first direct-from-HUD grant and therefore our first time administering a project according to their requirements. In December 2017, over three-quarters of the way through the project year, we received a phone call from the HUD-CPD office in which they told us that they were not aware of our being granted funds and that as a new recipient we had not been provided the support that should have been provided by their office. This communication explained some of our organization's challenges with this first project year. On multiple occasions we had reached out to HUD to request guidance on issues such as supporting documentation required for drawing down funds, in-kind match, documentation of program income, and allowable program activities. On these occasions we received little or no guidance from their office on how we should proceed. In April 2018, we had a monitoring by a representative from the Detroit CPD office, at which time we did receive guidance on some of the questions and issues that we had. We also received some assurance that we were largely performing according to their requirements, with the exception of how much of our allocation we expended. However, please note that we have not received a final Monitoring Report from that visit so we cannot firmly state whether HUD had any findings from our project operation. The Monitoring Report was originally due to our office within 60 days of the completion of the monitoring, though our recent communication with HUD has informed us that it may be several weeks before we get the report, which will be close to 120 days since their visit to our organization. There are several challenges that impacted our ability to expend funds fully. One challenge is the availability of quality rental housing in the service area. We found that it took on average 60-90 days to locate housing that would meet the program requirements and these delays had a significant impact on how much of our funding could be expended, especially since each household could have otherwise had an additional 2-3 months of rent paid under FY15. One other challenge to expending our funds was that we were not given approval by HUD to start our project until late February 2017; however, they informed us that our Start Date would be back-dated to February 1, 2017, which meant that we effectively lost 1/12 of our operating year in which we had no expenses that could be applied to the project. While there

were significant challenges experienced during the FY15 project year, we have found that our current FY16 project is operating much more smoothly.

1b. Use the last completed grant year APR for this and all other data/outcome measure questions. If the renewing project has not yet started, indicate the planned number of units per county.*

| County | Number of Units | Number of Stayers | Number of Leavers |
|----------------------------------|---------------------------|---------------------------|---------------------------|
| Oceana | 3 | 5 | 4 |
| Mason | 2 | 3 | 0 |
| Lake | 1 | 1 | 0 |
| Newaygo | 0 | 0 | 0 |
| Click or tap here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

*Attach additional forms as needed to list all counties.

2. Has the project had any significant changes since the last funding approval?

No If "yes", complete the chart below to indicate the change.

| Check change type | | Previous | New |
|--------------------------|---|----------|-----|
| <input type="checkbox"/> | Decrease in the number of persons served | | |
| <input type="checkbox"/> | Change in number of units | | |
| <input type="checkbox"/> | Change in project site location | | |
| <input type="checkbox"/> | Change in target population | | |
| <input type="checkbox"/> | Change in component type | | |
| <input type="checkbox"/> | Change in grantee/applicant | | |
| <input type="checkbox"/> | Line item or cost category budget changes more than 10% | | |
| <input type="checkbox"/> | Other: Click here to enter text. | | |

If change was made, include as many of the following that apply as attachments to your application:

| | |
|--------------------------|--|
| Attached (check) | |
| <input type="checkbox"/> | Attachment: Written communication to HUD requesting the significant change |
| <input type="checkbox"/> | Attachment: HUD's written approval of the change requested |
| <input type="checkbox"/> | N/A: HUD has not yet provided written approval of the requested change |

SECTION I: Project Effectiveness

3. Does the project serve priority populations (Veterans, Chronically Homeless, Families, Youth, Domestic Violence Survivors)? Enter the number of units dedicated or prioritized for each population at turnover.

The project does not have units that are specifically reserved for priority populations, but these populations may be served within the project through the availability of units to the general population of people experiencing homelessness.

| | Number of Units | | |
|----------------------|-----------------|----------------|-------------|
| | Dedicated | Dedicated Plus | Prioritized |
| Veterans | N/A | N/A | N/A |
| Chronically Homeless | N/A | N/A | N/A |
| Families | N/A | N/A | N/A |
| Youth | N/A | N/A | N/A |
| Domestic Violence | N/A | N/A | N/A |

4. Low Barrier

To earn points as Low Barrier, the project must answer affirmatively to all the following questions.

| | |
|---|-----|
| Does the project ensure that participants are NOT screened out (or denied project entry) due to the following: | |
| Having too little or not enough income | Yes |
| Active substance use or history of substance abuse | Yes |
| Having a criminal record (other than for state-mandated restrictions) | Yes |
| Domestic violence (requiring survivor to take specific actions or demonstrate distance from assailant) | Yes |

5. Housing First

In addition to the answers above, a project must also answer affirmatively to the following questions to qualify as Housing First.

| | |
|--|-----|
| Does the project work to ensure that participants are NOT terminated from the program due to the following: | |
| Failure to participate in supportive services | Yes |
| Failure to make progress on a service plan | Yes |
| Loss of income or failure to improve income | Yes |
| Being a victim of domestic violence | Yes |
| Any other activity not typically covered in a lease agreement but found in the project's geographic area. | Yes |
| | |
| Does the project quickly move participants into permanent housing? | Yes |

6. All recipients of HUD CoC Program funding are required to participate in Coordinated Entry. Did the project take 100% of all referrals from Coordinated Entry in the past grant year or will it once the grant year begins? Yes

7. What is the prioritization process for households referred to this project? How is it determined who is most vulnerable and the best fit for any referrals to this project? Provide detail from policy established by the Local Planning Body. (500 word limit)

The West Michigan Housing Network (WMHN), the LPB for this project's service area, has detailed and adopted a prioritization process for households to be referred to projects within the WMHN. Once households complete the Coordinated Entry process with the Housing Assessment and Resource Agency, they are entered onto a Prioritization List for their county of residence with information such as Client Identifier, Household Size, Type of Household, Income & AMI, Special Population Information, VI-SPDAT scores, and other information that is important in assessing initial eligibility for projects. Vulnerability is determined and reflected by the household's VI-SPDAT scores, with higher scores reflecting greater vulnerability. Households are prioritized for referral into this project on the basis of the highest-vulnerability households (who otherwise meet project eligibility requirements) referred first. Should there be an opening in a project that offers more intensive supports than Stability and Beyond (SAB) at the same time that SAB has a project opening, the household with the highest vulnerability will be referred to the more intensive support project and the second-most vulnerable household will be referred to SAB. A copy of the WMHN Prioritization Policy is included in the attachments for further detail.

Efficient Use of Funding (If the renewing project has not yet started, share information from the last completed year of another HUD funded project or similarly designed project through this agency)

8. What was the project's utilization rate? (Average of Quarterly Point-in-Time Counts in APR 9 divided by total contracted units.) **58.4% (3.5 average units per APR/6 total contracted units during program year)**

9. Expenditure of Funds: Use last **completed** HUD FY year.

| | |
|---|---------------------------|
| a. Total amount authorized within eLOCCS | \$62,172 |
| b. Remaining balance in eLOCCS | \$44,713.14 |
| c. Percentage recaptured Divide answer b. by answer a. and multiply by 100 | 72% anticipated recapture |

10. Were drawdowns made to eLOCCS at least quarterly? (Demonstrated in eLOCCS attachment)

No

HMIS Participation (If the renewing project has not yet started, share information from the last completed year of another HUD funded project or similarly designed project through this agency)

11. Indicate how many APR Data Quality Elements (DQE) have 5% or less null or missing values (APR Q06):

| |
|---|
| Data Quality Element APR 6a.-6d. |
| Number of elements with 5% or less null or missing values |

| DQE 6a. | DQE 6b. | DQE 6c. | DQE 6d. |
|--|---------|---------|---------|
| 4 | 5 | 4 | 3 |
| Total the numbers above, divide by 16, multiply by 100 for a percent: 93.75% (only one domain had over 5% with null or missing values) | | | |

HUD Monitoring

12. a. Does the recipient have any HUD monitoring findings in any of the agency's projects? **Yes/No**

If yes, explain below findings in detail for the Funding Review Panel. Include details on the nature of the finding, resolution and corrective actions taken, if any.

On April 16-18, 2018 our organization and this project were monitored by Ellen Chung of the Detroit HUD-CPD office. Ms. Chung reviewed program records, financial records, client records, and visited program participants in their home. She also conducted an exit interview with a member of our Board of Directors prior to finishing up the monitoring visit. We were informed that we could expect the final Monitoring Report from HUD within 60 days of the monitoring visit; however, even though we are in excess of 90 days since the monitoring, we have not yet received the report. We have reached out to HUD to verify the status of the Monitoring Report, and have been informed that it will be several more weeks until it will be received by our organization. At this time we cannot accurately state whether there have been any findings or not, nor can we provide our response. As soon as the Monitoring Report has been received we will forward it to the MI BOSCO. We are more than happy to discuss this matter further if additional clarification would be beneficial.

b. Has your organization been monitored by HUD in the past three (3) years? **Yes**

If yes, include as attachments: Monitoring report from HUD, your organization's response to any findings, documentation from HUD that finding or concern has been satisfied, and any other relevant documentation.

If no, provide most recent monitoring by an entity other than HUD for federal or state funding (ESG, CDBG, etc) and include as attachments: Monitoring report, your organization's response to any findings, documentation from HUD that finding or concern has been satisfied, and any other relevant documentation.

Impact on Homelessness

13. Is this project the only CoC funded project with dedicated beds to a particular target population?
Answered by Project Evaluation based on all applications submitted for this NOFA.

Not Applicable. This project does not have dedicated beds for a particular target population.

14. Funds that are reallocated may be added to renewal projects to increase the number of households served. If funding is available:

Would this project accept additional funds? ☐ Yes ☒ No

How would additional households be served with these funds?

[Click here to enter text.](#)

Serving High Need Populations – PSH PROJECTS ONLY *(If the renewing project has not yet started, share information from the last completed year of another HUD funded project or similarly designed project through this agency)*

15. What percentage of the households served met “hard to serve” criteria defined as having zero income at start/entry? (APR 23. Add values for No Income and divide by Total in last row):

Not Applicable. Project is Rapid Re-Housing.

16. What percentage of the households served met “hard to serve” criteria defined as having two (2) or more physical or mental health conditions known at start/entry (APR 13.a.2. add totals for two and three or more conditions, then divide by total):

Not Applicable. Project is Rapid Re-Housing.

17. What percentage of the households served were chronically homeless? (APR Q26a. divide total chronically homeless by total households):

Not Applicable. Project is Rapid Re-Housing.

Section II. Project Performance

Performance Data *(If the renewing project has not yet started, share information from the last completed year of another HUD funded project or similarly designed project through this agency)*

18. Length of Stay

a. Permanent Supportive Housing: Calculate the percentage of leavers that remained in project more than 180 days (APR 22a.1)

100%

b. Rapid Re-Housing: Calculate the percentage of participants that took 30 days or less from project entry to lease up (CAPER 22C)

46.2%

19. Exits to Permanent Housing

a. Permanent Supportive Housing: Calculate the percentage of participants who remained in project, or exited to permanent housing destinations. *(Total Persons Exiting to Positive Housing Destinations APR Q23.a.+ Q23b. + Stayers 5.a.8/ [Total Served 5.a.1. – Excluded Q23.a. + Q23.b.]*

Not Applicable. Project is Rapid Re-Housing.

b. Rapid Re-Housing: Calculate the percentage of participants who exited to permanent housing destinations *(Total Persons Exiting to Positive Housing Destinations APR Q23.a.+ Q23b./ [Total Leavers 5.a.5. – Excluded Q23.a. + Q23.b.]*

100%

20. New or Increased Income and Earned Income

a. PSH Only Project Stayers: What percent of project stayers had new or increased earned income with in the project contract year? *APR 19a.1*

Not Applicable. Project is Rapid Re-Housing.

b. PSH Only Project Stayers: What percent of project stayers had new or increased other (non-employment) income? *APR 19a.1*

Not Applicable. Project is Rapid Re-Housing.

c. Project Leavers: What percent of project leavers had new or increased earned income? *APR 19a.2*

0%--2 adult leavers, none exited with new or increased earned income.

d. Project Leavers: What percent of project leavers had new or increased other (non-employment) income? *APR 19a.2*

50%--2 adult leavers, one exited with new or increased other income.

Financial Information

PROJECT BUDGET

| Activity | Requested Funds | % of Requested Funds | Other Funding | Total Project Cost |
|---|-----------------|----------------------|---------------|--------------------|
| Acquisition | 0 | 0 % | | |
| New Construction | 0 | 0 % | | |
| Rehabilitation | 0 | 0 % | | |
| Leasing | 0 | 0 % | | |
| Rental Assistance | 53,628 | 81 % | | |
| Supportive Services | 4,899 | 8 % | | |
| Operating Costs | 0 | 0 % | | |
| HMIS | 1,404 | 2 % | | |
| Project Administration (limited to 10%) | 5,993 | 9 % | | |
| Total Project Cost | 65,924 | | | |

Attachment A

Identify all match and leveraging funds. Only those dollars or non-cash contributions (in-kind) that directly support the project should be listed. This may include federal, state, or local government funds, private funds, grants, and/or other sources, including donations. Worksheet should reflect information in eSnaps application.

Match must be at least 25% of total funding requested. Documentation of match must be provided with the application.

| Resource | Cash or In Kind | Committed or Planned/ Pending | Available (MM/YY) | Amount/ Value | % of HUD Project Award | Serves as CoC Program Match? (Y/N) |
|---|-----------------|-------------------------------|-------------------|---------------|------------------------|------------------------------------|
| | Cash/Kind | C/PP | MM/YY | | % | Yes/No |
| Project Income | Cash | Planned/Pending | 02/20 | 1000 | 01% | Yes |
| Channel Housing Ministries, Inc. | Cash | Committed | 02/20 | 16481 | 25% | Yes |
| | Cash/Kind | C/PP | MM/YY | | % | Yes/No |
| | Cash/Kind | C/PP | MM/YY | | % | Yes/No |
| | Cash/Kind | C/PP | MM/YY | | % | Yes/No |
| | Cash/Kind | C/PP | MM/YY | | % | Yes/No |
| | Cash/Kind | C/PP | MM/YY | | %. | Yes/No |
| Total leveraged from other sources | | | | 17,481 | 26% | |

Attach additional forms as necessary

Attachment B

Attachments listed below are required but unscored. Failure to include any documentation that is required may result in disqualification of the application. *Please number all attachments in accordance with the list below.*

All projects must include:

☒ #1: Annual Progress Report (APR) for the project's most recent completed contract year, *or* the most recently completed contract year for another HUD-funded project or similar project if the renewing project has not yet started.

☒ #2: Line of Credit Control System (LOCCS) report showing drawdowns and final balance

☒ #3: Project Application submitted in *e-snaps*

☒ #4: Documentation of all match

Each applicant must include one of the following two (#5):

- ☐ Monitoring report from US Department of Housing and Urban Development (HUD) - *Not available to date*
- ☐ Monitoring report from an entity other than HUD for federal or state funding (ESG, CDBG, etc)

If relevant include (#6):

- ☐ A: Organization's response to any findings
- ☐ B: Documentation from HUD (or other entity) that finding or concern has been satisfied
- ☒ C: Any other relevant documentation
- ☐ D: Written communication to HUD requesting the significant change indicated in question 2.
- ☐ E: HUD's written approval of the change requested in question 2.

Attachment C

HUD General Section Certificates

The agency certifies to the Balance of State Continuum of Care that it and its principals are in compliance with the following requirements as indicated by checking the box.

☒ *Fair Housing and Equal Opportunity.* See CFR 578.93 for specific requirements related to Fair Housing and Equal Opportunity.

☒ *Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity.* See the Federal Register dated February 1, 2012, Docket No. FR 5359-F-02 and Section V.C.1.f. of the FY 2017 General Section.

☒ *Debarment and Suspension.* See Section III.C.4.c. of the FY 2015 General Section. Additionally, it is the responsibility of the recipient to ensure that all subrecipients are not debarred or suspended. (24 CFR 578.23((3)(c)(4)(v).d. Delinquent Federal Debts. See Section V.B.3. of the FY 2017 General Section.

☒ *Compliance with Fair Housing and Civil Rights.* See Section V.C.1.a. of the FY 2017 General Section.

☒ *Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency (LEP).* See Section V.C.1.d. of the FY 2017 General Section.

☒ *Economic Opportunities for Low- and Very Low-income Persons (Section 3).* See Section V.C.1.c. of the FY 2017 General Section.

☒ *Conducting Business in Accordance with Core Values and Ethical Standards/Code of Conduct.* See Section V.C.15. of the FY 2017 General Section.

☒ *Prohibition Against Lobbying Activities.* See Section V.C.15. of the FY 2017 General Section.

☒ *HUD Habitability Standards inspections* on all units, at a minimum.

☒ *Participation in HUD-Sponsored Program Evaluation.* See Section V.C.5. of the FY 2017 General Section.

☒ *Environmental Requirements.* Notwithstanding provisions at 24 CFR 578.31 and 24 CFR 578.99(a) of the CoC Program interim rule, and in accordance with Section 100261(3) of MAP-21 (Pub. L. 112-141, 126 Stat. 405), activities under this NOFA are subject to environmental review by a responsible entity under HUD regulations at 24 CFR part 58.

☒ *Drug-Free Workplace.* See Section VI.B.9. of the FY 2015 General Section. n. Safeguarding Resident/Client Files. See Section V.C.11 of the FY 2017 General Section.

☒ *Compliance with the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 209-282) (Transparency Act), as amended.* See Section V.C.13. of the FY 2017 General Section.

☒ *Lead-Based Paint Requirements.* For housing constructed before 1978 (with certain statutory and regulatory exceptions), CoC Program recipients must comply with the requirements of the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801, et seq.), as amended by the Residential Lead-Based

☒ *Paint Hazard Reduction Act of 1992* (42 U.S.C. 4851, et seq.); and implementing regulations of HUD, at 24 CFR part 35; the Environmental Protection Agency (EPA) at 40 CFR part 745, or State/Tribal lead rules implemented under EPA authorization; and the Occupational Safety and Health Administration at 29 CFR 1926.62 and 29 CFR 1910.1025.

☒ Attestation that all attachments as required by HUD are uploaded in *e-snaps*. See Notice of Funding Availability for the 2018 Continuum of Care Program Competition FR-6200-N-25.

This list is not exhaustive of all HUD requirements. Applicants are encouraged to review the 2018 General Section, found at:

https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/fundingopps to ensure eligibility.

Agency: Channel Housing Ministries, Inc./dba OCEANA'S HOME Partnership

Acknowledged By: Kittie Tuinstra, 

Title: Executive Director

Date: 7/23/2018

ATTACHMENTS

1. HMIS Annual Progress Report for FY15 (02/1/2017-01/31/2018)
2. eLOCCS Report on Draw Downs
3. eLOCCS Report on Project Balance for FY15
4. Commitment of Match Letters
5. West Michigan Housing Network Prioritization Policy

Report Options

| | | |
|----------------------|---|--|
| Provider Type | <input type="radio"/> Provider <input checked="" type="radio"/> Reporting Group | |
| Reporting Group * | OHP-Stability and Beyond | |
| Q4a Provider * | OHP-Oceana-Stability and Beyond (11378) | |
| Program Date Range * | 02/01/2017 to 01/31/2018 | |
| Entry/Exit Types * | <input type="checkbox"/> Basic <input type="checkbox"/> Basic Center Program <input checked="" type="checkbox"/> HUD <input type="checkbox"/> PATH <input type="checkbox"/> Quick <input type="checkbox"/> RHY <input type="checkbox"/> Standard <input type="checkbox"/> Transitional Living <input type="checkbox"/> VA <input type="checkbox"/> HPRP (Retired) | |

Coc-APR Report Results

4a - Project Identifiers in HMIS

| | |
|---|---------------------------------|
| Organization Name | OCEANA'S HOME Partnership |
| Organization ID | 2842 |
| Project Name | OHP-Oceana-Stability and Beyond |
| Project ID | 11378 |
| HMIS Project Type | PH - Rapid Re-Housing (HUD) |
| Method of Tracking ES | |
| If HMIS Project ID = 6 (S Only) | |
| Is the Services Only (HMIS Project Type 6) affiliated with a residential project? | |
| If 2.4, Dependent A = 1 | |
| Identify the Project ID's of the housing projects this project is affiliated with | |
| 5a - Report Validations Table | |
| Report Validations Table | |
| 1. Total Number of Persons Served | 13 |
| 2. Number of Adults (age 18 or over) | 8 |
| 3. Number of Children (under age 18) | 5 |
| 4. Number of Persons with Unknown Age | 0 |
| 5. Number of Leavers | 4 |
| 6. Number of Adult Leavers | 2 |

| | | |
|---|--|---|
| 7. Number of Adult and Head of Household Leavers | | 2 |
| 8. Number of Stayers | | 9 |
| 9. Number of Adult Stayers | | 6 |
| 10. Number of Veterans | | 0 |
| 11. Number of Chronically Homeless Persons | | 2 |
| 12. Number of Youth Under Age 25 | | 0 |
| 13. Number of Parenting Youth Under Age 25 with Children | | 0 |
| 14. Number of Adult Heads of Household | | 6 |
| 15. Number of Child and Unknown-Age Heads of Household | | 0 |
| 16. Heads of Households and Adult Stayers in the Project 365 Days or More | | 0 |

6a - Data Quality: Personally Identifiable Information

| Data Element | Client Doesn't Know / Client Refused | Information Missing | Data Issues | % of Error Rate |
|---------------------|--------------------------------------|---------------------|-------------|-----------------|
| Name (3.1) | 0 | 0 | 0 | 0% |
| SSN (3.2) | 0 | 0 | 2 | 15% |
| Date of Birth (3.3) | 0 | 0 | 0 | 0% |
| Race (3.4) | 0 | 0 | | 0% |
| Ethnicity (3.5) | 0 | 0 | | 0% |
| Gender (3.6) | 0 | 0 | | 0% |
| Overall Score | 0 | 0 | | 15% |

6b - Data Quality: Universal Data Elements

| Data Element | Error Count | % of Error Rate |
|--|-------------|-----------------|
| Veteran Status (3.7) | 0 | 0% |
| Project Start Date (3.10) | 0 | 0% |
| Relationship to Head of Household (3.15) | 0 | 0% |
| Client Location (3.16) | 0 | 0% |
| Disabling Condition (3.8) | 0 | 0% |

6c - Data Quality: Income and Housing Data Quality

| Data Element | Error Count | % of Error Rate |
|---|-------------|-----------------|
| Destination (3.12) | 0 | 0% |
| Income and Sources (4.2) at Start | 0 | 0% |
| Income and Sources (4.2) at Annual Assessment | 0 | 0% |
| Income and Sources (4.2) at Exit | 0 | 0% |

6d - Data Quality: Chronic Homelessness

| Entering into project type | | Count of total records | Missing time in institution (3.917.2) | Missing time in housing (3.917.2) | Approximate Date started (3.917.3) DK/R/missing | Number of times (3.917.4) DK/R/missing | Number of months (3.917.5) DK/R/missing | % of records unable to calculate |
|--|--|------------------------|---------------------------------------|-----------------------------------|---|--|---|----------------------------------|
| ES, SH, Street Outreach | | 0 | | | 0 | 0 | 0 | 0% |
| TH | | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| PH(all) | | 8 | 0 | 0 | 0 | 0 | 0 | 0% |
| Total | | 8 | | | | | | 0% |
| 6e - Data Quality: Timeliness | | | | | | | | |
| Time For Record Entry | | | | | Number of Project Start Records | Number of Project Exit Records | | |
| 0 days | | | | | 0 | 0 | | |
| 1 - 3 days | | | | | 0 | 0 | | |
| 4 - 6 days | | | | | 0 | 0 | | |
| 7 - 10 days | | | | | 0 | 0 | | |
| 11+ days | | | | | 13 | 4 | | |
| 6f - Data Quality: Inactive Records: Street Outreach and Emergency Shelter | | | | | | | | |
| | | # of Records | | # of Inactive Records | % of Inactive Records | | | |
| Contact (Adults and Heads of Household in Street Outreach or ES - NBN) | | 0 | | 0 | 0% | | | |
| Bed Night (All clients in ES - NBN) | | 0 | | 0 | 0% | | | |
| 7a - Number of Persons Served | | | | | | | | |
| | | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type | | |
| Adults | | 8 | 2 | 6 | | 0 | | |
| Children | | 5 | | 5 | 0 | 0 | | |
| Client Doesn't Know/Client Refused | | 0 | 0 | 0 | 0 | 0 | | |
| Data not collected | | 0 | 0 | 0 | 0 | 0 | | |
| Total | | 13 | 2 | 11 | 0 | 0 | | |
| 7b - Point-In-Time Count of Persons on the Last Wednesday | | | | | | | | |
| | | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type | | |
| January | | 11 | 2 | 9 | 0 | 0 | | |
| April | | 7 | 1 | 6 | 0 | 0 | | |
| July | | 7 | 1 | 6 | 0 | 0 | | |
| October | | 8 | 1 | 7 | 0 | 0 | | |
| 8a - Number of Households Served | | | | | | | | |
| | | Total | Without | With Children | With Only | Unknown | | |

| | | Children | and Adults | Children | Household Type |
|--|-------|------------------|--------------------------|--------------------|------------------------|
| Total Households | 6 | 2 | 4 | 0 | 0 |
| 8b - Point-in-Time Count of Households on the Last Wednesday | | | | | |
| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| January | 5 | 2 | 3 | 0 | 0 |
| April | 3 | 1 | 2 | 0 | 0 |
| July | 3 | 1 | 2 | 0 | 0 |
| October | 3 | 1 | 2 | 0 | 0 |

| | | | | |
|----------------------------------|-----------------------|---|---|--|
| 9a - Number of Persons Contacted | | | | |
| | All Persons Contacted | First Contact - NOT staying on the Streets, ES, or SH | First contact - WAS staying on Streets, ES, or SH | First contact - Worker unable to determine |
| Once | 0 | 0 | 0 | 0 |
| 2-5 Times | 0 | 0 | 0 | 0 |
| 6-9 Times | 0 | 0 | 0 | 0 |
| 10+ Times | 0 | 0 | 0 | 0 |
| Total Persons Contacted | 0 | 0 | 0 | 0 |

| | | | | |
|--------------------------------|-----------------------|---|---|--|
| 9b - Number of Persons Engaged | | | | |
| | All Persons Contacted | First Contact - NOT staying on the Streets, ES, or SH | First contact - WAS staying on Streets, ES, or SH | First contact - Worker unable to determine |
| Once | 0 | 0 | 0 | 0 |
| 2-5 Times | 0 | 0 | 0 | 0 |
| 6-9 Times | 0 | 0 | 0 | 0 |
| 10+ Times | 0 | 0 | 0 | 0 |
| Total Persons Engaged | 0 | 0 | 0 | 0 |
| Rate of Engagement | 0% | 0% | 0% | 0% |

| | | | | |
|---|-------|------------------|--------------------------|------------------------|
| 10a - Gender of Adults | | | | |
| | Total | Without Children | With Children and Adults | Unknown Household Type |
| Male | 2 | 1 | 1 | 0 |
| Female | 6 | 1 | 5 | 0 |
| Trans Female (MTF or Male to Female) | 0 | 0 | 0 | 0 |
| Trans Male (FTM or Female to Male) | 0 | 0 | 0 | 0 |
| Gender Non-Conforming (i.e. not exclusively male or female) | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 |

Data not collected

Subtotal

| | | | |
|---|---|---|---|
| 0 | 0 | 0 | 0 |
| 8 | 2 | 6 | 0 |

10b - Gender of Children

Male

| Total | With Children and Adults | With Only Children | Unknown Household Type |
|-------|--------------------------|--------------------|------------------------|
| 5 | 5 | 0 | 0 |

Female

| | | | |
|---|---|---|---|
| 0 | 0 | 0 | 0 |
|---|---|---|---|

Trans Female (MTF or Male to Female)

| | | | |
|---|---|---|---|
| 0 | 0 | 0 | 0 |
|---|---|---|---|

Trans Male (FTM or Female to Male)

| | | | |
|---|---|---|---|
| 0 | 0 | 0 | 0 |
|---|---|---|---|

Gender Non-Conforming (i.e. not exclusively male or female)

| | | | |
|---|---|---|---|
| 0 | 0 | 0 | 0 |
|---|---|---|---|

Client Doesn't Know/Client Refused

| | | | |
|---|---|---|---|
| 0 | 0 | 0 | 0 |
|---|---|---|---|

Data not collected

| | | | |
|---|---|---|---|
| 0 | 0 | 0 | 0 |
|---|---|---|---|

Subtotal

| | | | |
|---|---|---|---|
| 5 | 5 | 0 | 0 |
|---|---|---|---|

10c - Gender of Persons Missing Age Information

Male

| Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|-------|------------------|--------------------------|--------------------|------------------------|
| 0 | 0 | 0 | 0 | 0 |

Female

| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|

Trans Female (MTF or Male to Female)

| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|

Trans Male (FTM or Female to Male)

| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|

Gender Non-Conforming (i.e. not exclusively male or female)

| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|

Client Doesn't Know/Client Refused

| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|

Data not collected

| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|

Subtotal

| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|

11 - Age

| Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|-------|------------------|--------------------------|--------------------|------------------------|
|-------|------------------|--------------------------|--------------------|------------------------|

Under 5

| | | | | |
|---|--|---|---|---|
| 0 | | 0 | 0 | 0 |
|---|--|---|---|---|

5 - 12

| | | | | |
|---|--|---|---|---|
| 4 | | 4 | 0 | 0 |
|---|--|---|---|---|

13 - 17

| | | | | |
|---|--|---|---|---|
| 1 | | 1 | 0 | 0 |
|---|--|---|---|---|

18 - 24

| | | | | |
|---|---|---|--|---|
| 1 | 0 | 1 | | 0 |
|---|---|---|--|---|

25 - 34

| | | | | |
|---|---|---|--|---|
| 3 | 0 | 3 | | 0 |
|---|---|---|--|---|

35 - 44

| | | | | |
|---|---|---|--|---|
| 1 | 1 | 0 | | 0 |
|---|---|---|--|---|

45 - 54

| | | | | |
|---|---|---|--|---|
| 3 | 1 | 2 | | 0 |
|---|---|---|--|---|

55 - 61

| | | | | |
|---|---|---|--|---|
| 0 | 0 | 0 | | 0 |
|---|---|---|--|---|

62 +

| | | | | |
|---|---|---|--|---|
| 0 | 0 | 0 | | 0 |
|---|---|---|--|---|

Client Doesn't Know/Client Refused

| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|

Data not collected

| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|

| | | | | | |
|--|----------------------|-------------------------|---------------------------------|---------------------------|-------------------------------|
| Total | 13 | 2 | 11 | 0 | 0 |
| 12a - Race | | | | | |
| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| White | 12 | 1 | 11 | 0 | 0 |
| Black or African American | 0 | 0 | 0 | 0 | 0 |
| Asian | 0 | 0 | 0 | 0 | 0 |
| American Indian or Alaska Native | 0 | 0 | 0 | 0 | 0 |
| Native Hawaiian or Other Pacific Islander | 0 | 0 | 0 | 0 | 0 |
| Multiple races | 1 | 1 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 13 | 2 | 11 | 0 | 0 |
| 12b - Ethnicity | | | | | |
| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| Non-Hispanic/Non-Latino | 10 | 2 | 8 | 0 | 0 |
| Hispanic/Latino | 3 | 0 | 3 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 13 | 2 | 11 | 0 | 0 |
| 13a1 - Physical and Mental Health Conditions at Start | | | | | |
| | Total Persons | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| Mental Health Problem | 1 | 0 | 1 | 0 | 0 |
| Alcohol Abuse | 0 | 0 | 0 | 0 | 0 |
| Drug Abuse | 0 | 0 | 0 | 0 | 0 |
| Both Alcohol and Drug Abuse | 0 | 0 | 0 | 0 | 0 |
| Chronic Health Condition | 1 | 0 | 1 | 0 | 0 |
| HIV/AIDS | 0 | 0 | 0 | 0 | 0 |
| Development Disability | 0 | 0 | 0 | 0 | 0 |
| Physical Disability | 1 | 0 | 1 | 0 | 0 |
| 13b1 - Physical and Mental Health Conditions at Exit | | | | | |
| | Total Persons | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| Mental Health Problem | 0 | 0 | 0 | 0 | 0 |
| Alcohol Abuse | 0 | 0 | 0 | 0 | 0 |

| | | | | | |
|-----------------------------|---|---|---|---|---|
| Drug Abuse | 0 | 0 | 0 | 0 | 0 |
| Both Alcohol and Drug Abuse | 0 | 0 | 0 | 0 | 0 |
| Chronic Health Condition | 0 | 0 | 0 | 0 | 0 |
| HIV/AIDS | 0 | 0 | 0 | 0 | 0 |
| Development Disability | 0 | 0 | 0 | 0 | 0 |
| Physical Disability | 0 | 0 | 0 | 0 | 0 |

13c1 - Physical and Mental Health Conditions of Stayers

| | Total Persons | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|-----------------------------|---------------|------------------|--------------------------|--------------------|------------------------|
| Mental Health Problem | 1 | 0 | 1 | 0 | 0 |
| Alcohol Abuse | 0 | 0 | 0 | 0 | 0 |
| Drug Abuse | 0 | 0 | 0 | 0 | 0 |
| Both Alcohol and Drug Abuse | 0 | 0 | 0 | 0 | 0 |
| Chronic Health Condition | 1 | 0 | 1 | 0 | 0 |
| HIV/AIDS | 0 | 0 | 0 | 0 | 0 |
| Development Disability | 0 | 0 | 0 | 0 | 0 |
| Physical Disability | 1 | 0 | 1 | 0 | 0 |

13a2 - Number of Conditions at Start

| | Total Persons | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|------------------------------------|---------------|------------------|--------------------------|--------------------|------------------------|
| None | 12 | 2 | 10 | 0 | 0 |
| 1 Condition | 0 | 0 | 0 | 0 | 0 |
| 2 Conditions | 0 | 0 | 0 | 0 | 0 |
| 3+ Conditions | 1 | 0 | 1 | 0 | 0 |
| Condition Unknown | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 13 | 2 | 11 | 0 | 0 |

13b2 - Number of Conditions at Exit

| | Total Persons | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|------------------------------------|---------------|------------------|--------------------------|--------------------|------------------------|
| None | 4 | 0 | 4 | 0 | 0 |
| 1 Condition | 0 | 0 | 0 | 0 | 0 |
| 2 Conditions | 0 | 0 | 0 | 0 | 0 |
| 3+ Conditions | 0 | 0 | 0 | 0 | 0 |
| Condition Unknown | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |

| | | | | | |
|---|----------------------|-------------------------|---------------------------------|---------------------------|-------------------------------|
| Total | 4 | 0 | 4 | 0 | 0 |
| 13c2 - Number of Conditions for Stayers | | | | | |
| None | Total Persons | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| 1 Condition | 8 | 2 | 6 | 0 | 0 |
| 2 Conditions | 0 | 0 | 0 | 0 | 0 |
| 3+ Conditions | 0 | 0 | 0 | 0 | 0 |
| Condition Unknown | 1 | 0 | 1 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 9 | 2 | 7 | 0 | 0 |
| 14a - Domestic Violence History | | | | | |
| Yes | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| No | 4 | 1 | 3 | 0 | 0 |
| Client Doesn't Know/Client Refused | 4 | 1 | 3 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 8 | 2 | 6 | 0 | 0 |
| 14b - Persons Fleeing Domestic Violence | | | | | |
| Yes | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| No | 1 | 0 | 1 | 0 | 0 |
| Client Doesn't Know/Client Refused | 3 | 1 | 2 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 4 | 1 | 3 | 0 | 0 |
| 15 - Living Situation | | | | | |
| Homeless Situations | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| Emergency shelter, including hotel or motel paid for with emergency shelter voucher | 2 | 1 | 1 | 0 | 0 |
| Transitional housing for homeless persons (including homeless youth) | 2 | 1 | 1 | 0 | 0 |
| Place not meant for habitation | 2 | 0 | 2 | 0 | 0 |
| Safe Haven | 0 | 0 | 0 | 0 | 0 |
| Interim Housing | 0 | 0 | 0 | 0 | 0 |

| Subtotal | 6 | 2 | 4 | 0 | 0 |
|--|---|---|---|---|---|
| Institutional Settings | | | | | |
| Psychiatric hospital or other psychiatric facility | 0 | 0 | 0 | 0 | 0 |
| Substance abuse treatment facility or detox center | 0 | 0 | 0 | 0 | 0 |
| Hospital or other residential non-psychiatric medical facility | 0 | 0 | 0 | 0 | 0 |
| Jail, prison, or juvenile detention facility | 0 | 0 | 0 | 0 | 0 |
| Foster care home or foster care group home | 0 | 0 | 0 | 0 | 0 |
| Long-term care facility or nursing home | 0 | 0 | 0 | 0 | 0 |
| Residential project or halfway house with no homeless criteria | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Other Locations | | | | | |
| Permanent Housing (other than RRH) for formerly homeless persons | 0 | 0 | 0 | 0 | 0 |
| Owned by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Owned by client, with ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with VASH housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with other housing subsidy (including RRH) | 0 | 0 | 0 | 0 | 0 |
| Hotel or motel paid for without emergency shelter voucher | 0 | 0 | 0 | 0 | 0 |
| Staying or living in a friend's room, apartment or house | 0 | 0 | 0 | 0 | 0 |
| Staying or living in a family member's room, apartment or house | 2 | 0 | 2 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 2 | 0 | 2 | 0 | 0 |
| Total | 8 | 2 | 6 | 0 | 0 |
| 16 - Cash Income - Ranges | | | | | |
| | | | | | |
| No Income | | | | | |
| \$1 - 150 | | | 4 | 0 | 1 |
| \$151 - \$250 | | | 0 | 0 | 0 |
| \$251 - \$500 | | | 0 | 0 | 0 |
| \$501 - \$1000 | | | 0 | 0 | 0 |
| \$1001 - \$1500 | | | 2 | 0 | 1 |
| \$1501 - \$2000 | | | 0 | 0 | 0 |
| \$2001 + | | | 0 | 0 | 0 |

Client Doesn't Know/Client Refused

Data not collected

Number of adult stayers not yet required to have an annual assessment

Number of adult stayers without required annual assessment

Total Adults

0 0 0

0 0 0

6 0

8 6 2

17 - Cash Income - Sources

Earned Income

Unemployment Insurance

Supplemental Security Income (SSI)

Social Security Disability Insurance (SSDI)

VA Service - Connected Disability Compensation

VA Non-Service Connected Disability Pension

Private Disability Insurance

Worker's Compensation

Temporary Assistance for Needy Families (TANF)

General Assistance (GA)

Retirement Income from Social Security

Pension or retirement income from a former job

Child Support

Alimony and other spousal support

Other Source

Adults with Income Information at Start and Annual Assessment/Exit

| | Income at Start | Income at Latest Annual Assessment for Stayers | Income at Exit for Leavers |
|--|-----------------|--|----------------------------|
| Earned Income | 1 | 0 | 0 |
| Unemployment Insurance | 2 | 0 | 1 |
| Supplemental Security Income (SSI) | 0 | 0 | 0 |
| Social Security Disability Insurance (SSDI) | 0 | 0 | 0 |
| VA Service - Connected Disability Compensation | 0 | 0 | 0 |
| VA Non-Service Connected Disability Pension | 0 | 0 | 0 |
| Private Disability Insurance | 0 | 0 | 0 |
| Worker's Compensation | 0 | 0 | 0 |
| Temporary Assistance for Needy Families (TANF) | 1 | 0 | 0 |
| General Assistance (GA) | 1 | 0 | 0 |
| Retirement Income from Social Security | 0 | 0 | 0 |
| Pension or retirement income from a former job | 0 | 0 | 0 |
| Child Support | 1 | 0 | 0 |
| Alimony and other spousal support | 0 | 0 | 0 |
| Other Source | 0 | 0 | 0 |
| Adults with Income Information at Start and Annual Assessment/Exit | | 0 | 1 |

18 - Client Cash Income Category - Earned/Other Income Category - by Start and Annual Assessment/Exit Status**Number of Adults by Income Category**

Adults with Only Earned Income (i.e., Employment Income)

Adults with Only Other Income

Adults with Both Earned and Other Income

Adults with No Income

Adults with Client Doesn't Know/Client Refused Income Information

Adults with Missing Income Information

Number of adult stayers not yet required to have an annual assessment

| | Number of Adults at Start | Number of Adults at Annual Assessment (Stayers) | Number of Adults at Exit (Leavers) |
|---|---------------------------|---|------------------------------------|
| Adults with Only Earned Income (i.e., Employment Income) | 1 | 0 | 0 |
| Adults with Only Other Income | 3 | 0 | 1 |
| Adults with Both Earned and Other Income | 0 | 0 | 0 |
| Adults with No Income | 4 | 0 | 1 |
| Adults with Client Doesn't Know/Client Refused Income Information | 0 | 0 | 0 |
| Adults with Missing Income Information | 0 | 0 | 0 |
| Number of adult stayers not yet required to have an annual assessment | | 6 | |

Number of adult stayers without required annual assessment

Total Adults

1 or More Source of Income

Adults with Income Information at Start and Annual Assessment/Exit

| | | |
|---|---|---|
| | 0 | |
| 8 | 6 | 2 |
| 4 | 0 | 1 |
| | 0 | 1 |

19a1 - Client Cash Income Change - Income Source - by Start and Latest Status

| Income Change by Income Category (Universe: Adult Stayers with Income Information at Start and Annual Assessment) | Had Income Category at Start and Did Not Have It at Annual Assessment | Retained Income Category But Had Less \$ at Annual Assessment Than at Start | Retained Income Category and Same \$ at Annual Assessment as at Start | Retained Income Category and Increased \$ at Annual Assessment | Did Not Have the Income Category at Start and Gained the Income Category at Annual Assessment | Did Not Have the Income Category at Start or at Annual Assessment | Total Adults (Including those with No Income) | Performance Measure: Adults who Gained or Increased Income from Start to Annual Assessment, Average Gain | Performance Measure: Percent of Persons who Accomplished this Measure |
|---|---|---|---|--|---|---|---|--|---|
| Number of Adults with Earned Income (i.e., Employment Income) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| Average Change in Earned Income | 0 | 0 | | 0 | 0 | | | 0 | |
| Number of Adults with Other Income | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| Average Change in Other Income | 0 | 0 | | 0 | | | | 0 | |
| Number of Adults with Any Income (i.e., Total Income) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| Average Change in Overall Income | 0 | 0 | | 0 | 0 | | | 0 | |

19a2 - Client Cash Income Change - Income Source - by Start and Exit

| Income Change by Income Category (Universe: Adult Leavers with Income Information at Start and Exit) | Had Income Category at Start and Did Not Have It at Exit | Retained Income Category But Had Less \$ at Exit Than at Start | Retained Income Category and Same \$ at Exit as at Start | Retained Income Category and Increased \$ at Exit | Did Not Have the Income Category at Start and Gained the Income Category at Exit | Did Not Have the Income Category at Start or at Exit | Total Adults (Including those with No Income) | Performance Measure: Adults who Gained or Increased Income from Start to Exit, Average Gain | Performance Measure: Percent of Persons who Accomplished this Measure |
|--|--|--|--|---|--|--|---|---|---|
| Number of Adults with Earned Income (i.e., Employment Income) | 0 | 0 | 0 | 0 | 0 | 2 | 2 | 0 | 0% |
| Average Change in Earned Income | 0 | 0 | | 0 | 0 | | | 0 | |
| Number of Adults | 0 | 0 | 0 | 1 | 0 | 1 | 2 | 1 | 50% |

| | Benefit at Start | Benefit at Latest Annual Assessment for Stayers | Benefit at Exit for Leavers |
|------------------------------------|------------------|---|-----------------------------|
| No Sources | 3 | 0 | 1 |
| 1 + Source(s) | 5 | 0 | 1 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 |
| Data not collected | 0 | 6 | 0 |
| Total | 8 | 6 | 2 |

21 - Health Insurance

| | At Start | At Annual Assessment for Stayers | At Exit for Leavers |
|---|----------|----------------------------------|---------------------|
| MEDICAID | 9 | 0 | 3 |
| MEDICARE | 0 | 0 | 0 |
| State Children's Health Insurance Program | 0 | 0 | 0 |
| Veteran's Administration (VA) Medical Services | 0 | 0 | 0 |
| Employer-Provided Health Insurance | 0 | 0 | 0 |
| Health Insurance obtained through COBRA | 0 | 0 | 0 |
| Private Pay Health Insurance | 0 | 0 | 0 |
| State Health Insurance for Adults | 0 | 0 | 0 |
| Indian Health Services Program | 0 | 0 | 0 |
| Other | 0 | 0 | 0 |
| No Health Insurance | 4 | 0 | 1 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 |
| Number of stayers not yet required to have an annual assessment | | 9 | |
| 1 Source of Health Insurance | 9 | 0 | 3 |
| More than 1 Source of Health Insurance | 0 | 0 | 0 |

22a1 - Length of Participation - CoC Projects

| | Total | Leavers | Stayers |
|-----------------------------|-------|---------|---------|
| 30 days or less | 1 | 0 | 1 |
| 31 to 60 days | 0 | 0 | 0 |
| 61 to 90 days | 0 | 0 | 0 |
| 91 to 180 days | 5 | 0 | 5 |
| 181 to 365 days | 7 | 4 | 3 |
| 366 to 730 Days (1-2 Yrs) | 0 | 0 | 0 |
| 731 to 1,095 Days (2-3 Yrs) | 0 | 0 | 0 |

| | | | | | |
|-------------------------------|--|-----------|----------|----------|---|
| 1,096 to 1,460 Days (3-4 Yrs) | | 0 | 0 | 0 | 0 |
| 1,461 to 1,825 Days (4-5 Yrs) | | 0 | 0 | 0 | 0 |
| More than 1,825 Days (>5 Yrs) | | 0 | 0 | 0 | 0 |
| Data not collected | | 0 | 0 | 0 | 0 |
| Total | | 13 | 4 | 9 | |

22b - Average and Median Length of Participation in Days

| | Leavers | Stayers |
|----------------|---------|---------|
| Average Length | 208 | 180 |
| Median Length | 208 | 167 |

22c - RRH Length of Time between Project Start Date and Housing Move-in Date

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|---------------------------|-----------|------------------|--------------------------|--------------------|------------------------|
| 7 days or less | 3 | 0 | 3 | 0 | 0 |
| 8 to 14 days | 2 | 0 | 2 | 0 | 0 |
| 15 to 21 days | 0 | 0 | 0 | 0 | 0 |
| 22 to 30 days | 1 | 1 | 0 | 0 | 0 |
| 31 to 60 days | 4 | 0 | 4 | 0 | 0 |
| 61 to 180 days | 3 | 1 | 2 | 0 | 0 |
| 181 to 365 days | 0 | 0 | 0 | 0 | 0 |
| 366 to 730 Days (1-2 Yrs) | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 13 | 2 | 11 | 0 | 0 |

23a - Exit Destination - More than 90 days

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|--|-------|------------------|--------------------------|--------------------|------------------------|
|--|-------|------------------|--------------------------|--------------------|------------------------|

Permanent Destinations

| | | | | | |
|--|---|---|---|---|---|
| Moved from one HOPWA funded project to HOPWA PH | 0 | 0 | 0 | 0 | 0 |
| Owned by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Owned by client, with ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with VASH housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with other ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Permanent Housing (other than RRH) for formerly homeless persons | 0 | 0 | 0 | 0 | 0 |
| Staying or living with family, permanent tenure | 0 | 0 | 0 | 0 | 0 |
| Staying or living with friends, permanent tenure | 4 | 0 | 4 | 0 | 0 |
| Rental by client, with RRH or equivalent subsidy | 0 | 0 | 0 | 0 | 0 |

| | | | | | |
|---|----------|----------|----------|----------|----------|
| Subtotal | 4 | 0 | 4 | 0 | 0 |
| Temporary Destinations | | | | | |
| Emergency shelter, including hotel or motel paid for with emergency shelter voucher | 0 | 0 | 0 | 0 | 0 |
| Moved from one HOPWA funded project to HOPWA TH | 0 | 0 | 0 | 0 | 0 |
| Transitional housing for homeless persons (including homeless youth) | 0 | 0 | 0 | 0 | 0 |
| Staying or living with family, temporary tenure (e.g., room, apartment or house) | 0 | 0 | 0 | 0 | 0 |
| Staying or living with friends, temporary tenure (e.g., room apartment or house) | 0 | 0 | 0 | 0 | 0 |
| Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside) | 0 | 0 | 0 | 0 | 0 |
| Safe Haven | 0 | 0 | 0 | 0 | 0 |
| Hotel or motel paid for without emergency shelter voucher | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Institutional Settings | | | | | |
| Foster care home or foster care group home | 0 | 0 | 0 | 0 | 0 |
| Psychiatric hospital or other psychiatric facility | 0 | 0 | 0 | 0 | 0 |
| Substance abuse treatment facility or detox center | 0 | 0 | 0 | 0 | 0 |
| Hospital or other residential non-psychiatric medical facility | 0 | 0 | 0 | 0 | 0 |
| Jail, prison, or juvenile detention facility | 0 | 0 | 0 | 0 | 0 |
| Long-term care facility or nursing home | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Other Destinations | | | | | |
| Residential project or halfway house with no homeless criteria | 0 | 0 | 0 | 0 | 0 |
| Deceased | 0 | 0 | 0 | 0 | 0 |
| Other | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data Not Collected (no exit interview completed) | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Total | 4 | 0 | 4 | 0 | 0 |
| Total persons exiting to positive housing destinations | 4 | 0 | 4 | 0 | 0 |
| Total persons whose destinations excluded them from the calculation | 0 | 0 | 0 | 0 | 0 |
| Percentage | 100% | 0% | 100% | 0% | 0% |
| 23b - Exit Destination - 90 Days or Less | | | | | |
| Permanent Destinations | | | | | |
| Moved from one HOPWA funded project to HOPWA PH | 0 | 0 | 0 | 0 | 0 |
| Owned by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Owned by client, with ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Rental by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with VASH housing subsidy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with other ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Permanent Housing (other than RRH) for formerly homeless persons | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Staying or living with family, permanent tenure | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Staying or living with friends, permanent tenure | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with RRH or equivalent subsidy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Temporary Destinations | | | | | | | | | |
| Emergency shelter, including hotel or motel paid for with emergency shelter voucher | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Moved from one HOPWA funded project to HOPWA TH | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Transitional housing for homeless persons (including homeless youth) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Staying or living with family, temporary tenure (e.g., room, apartment or house) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Staying or living with friends, temporary tenure (e.g., room apartment or house) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Safe Haven | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Hotel or motel paid for without emergency shelter voucher | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Institutional Settings | | | | | | | | | |
| Foster care home or foster care group home | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Psychiatric hospital or other psychiatric facility | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Substance abuse treatment facility or detox center | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Hospital or other residential non-psychiatric medical facility | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Jail, prison, or juvenile detention facility | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Long-term care facility or nursing home | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Other Destinations | | | | | | | | | |
| Residential project or halfway house with no homeless criteria | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Deceased | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Other | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Data Not Collected (no exit interview completed) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

| | | | | |
|---|----|----|----|----|
| Total persons exiting to positive housing destinations | 0 | 0 | 0 | 0 |
| Total persons whose destinations excluded them from the calculation | 0 | 0 | 0 | 0 |
| Percentage | 0% | 0% | 0% | 0% |

25a - Number of Veterans

| | Total | Without Children | With Children and Adults | Unknown Household Type |
|------------------------------------|-------|------------------|--------------------------|------------------------|
| Chronically Homeless Veteran | 0 | 0 | 0 | 0 |
| Non-Chronically Homeless Veteran | 0 | 0 | 0 | 0 |
| Not a veteran | 8 | 2 | 6 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 |
| Total | 8 | 2 | 6 | 0 |

25b - Number of Veteran Households

| | Total | Without Children | With Children and Adults | Unknown Household Type |
|------------------------------------|-------|------------------|--------------------------|------------------------|
| Chronically Homeless Veteran | 0 | 0 | 0 | 0 |
| Non-Chronically Homeless Veteran | 0 | 0 | 0 | 0 |
| Not a veteran | 6 | 2 | 4 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 |
| Total | 6 | 2 | 4 | 0 |

25c - Gender - Veterans

| | Total | Without Children | With Children and Adults | Unknown Household Type |
|---|-------|------------------|--------------------------|------------------------|
| Male | 0 | 0 | 0 | 0 |
| Female | 0 | 0 | 0 | 0 |
| Trans Female (MTF or Male to Female) | 0 | 0 | 0 | 0 |
| Trans Male (FTM or Female to Male) | 0 | 0 | 0 | 0 |
| Gender Non-Conforming (i.e. not exclusively male or female) | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 0 |

25d - Age - Veterans

| | Total | Without Children | With Children and Adults | Unknown Household Type |
|---------|-------|------------------|--------------------------|------------------------|
| 18 - 24 | 0 | 0 | 0 | 0 |
| 25 - 34 | 0 | 0 | 0 | 0 |

| | | | | |
|------------------------------------|---|---|---|---|
| 35 - 44 | 0 | 0 | 0 | 0 |
| 45 - 54 | 0 | 0 | 0 | 0 |
| 55 - 61 | 0 | 0 | 0 | 0 |
| 62 + | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 0 |

25e - Physical and Mental Health Conditions - Veterans

| | Conditions at Start | Conditions at Latest Assessment for Stayers | Conditions at Exit for Leavers |
|-----------------------------|---------------------|---|--------------------------------|
| Mental Health Problem | 0 | 0 | 0 |
| Alcohol Abuse | 0 | 0 | 0 |
| Drug Abuse | 0 | 0 | 0 |
| Both Alcohol and Drug Abuse | 0 | 0 | 0 |
| Chronic Health Condition | 0 | 0 | 0 |
| HIV/AIDS | 0 | 0 | 0 |
| Development Disability | 0 | 0 | 0 |
| Physical Disability | 0 | 0 | 0 |

25f - Cash Income Category - Income Category - by Start and Annual/Exit Status - Veterans

| Number of Veterans by Income Category | Number of Veterans at Start | Number of Veterans at Annual Assessment (Stayers) | Number of Veterans at Exit (Leavers) |
|---|-----------------------------|---|--------------------------------------|
| Veterans with Only Earned Income (i.e., Employment Income) | 0 | 0 | 0 |
| Veterans with Only Other Income | 0 | 0 | 0 |
| Veterans with Both Earned and Other Income | 0 | 0 | 0 |
| Veterans with No Income | 0 | 0 | 0 |
| Veterans with Client Doesn't Know/Client Refused Income Information | 0 | 0 | 0 |
| Veterans with Missing Income Information | 0 | 0 | 0 |
| Number of veterans not yet required to have an annual assessment | | 0 | |
| Number of veterans without required annual assessment | | 0 | |
| Total Veterans | 0 | 0 | 0 |

25g - Type of Cash Income Sources - Veterans

| Income at Start | Income at Latest Annual Assessment for Stayers | Income at Exit for Leavers |
|-----------------|--|----------------------------|
|-----------------|--|----------------------------|

| | | | | |
|--|--|---|---|---|
| Earned Income | | 0 | 0 | 0 |
| Unemployment Insurance | | 0 | 0 | 0 |
| Supplemental Security Income (SSI) | | 0 | 0 | 0 |
| Social Security Disability Insurance (SSDI) | | 0 | 0 | 0 |
| VA Service - Connected Disability Compensation | | 0 | 0 | 0 |
| VA Non-Service Connected Disability Pension | | 0 | 0 | 0 |
| Private Disability Insurance | | 0 | 0 | 0 |
| Worker's Compensation | | 0 | 0 | 0 |
| Temporary Assistance for Needy Families (TANF) | | 0 | 0 | 0 |
| General Assistance (GA) | | 0 | 0 | 0 |
| Retirement Income from Social Security | | 0 | 0 | 0 |
| Pension or retirement income from a former job | | 0 | 0 | 0 |
| Child Support | | 0 | 0 | 0 |
| Alimony and other spousal support | | 0 | 0 | 0 |
| Other Source | | 0 | 0 | 0 |
| Veterans with Income Information at Start and Annual Assessment/Exit | | | 0 | 0 |

25h - Type of Non-Cash Benefit Sources - Veterans

| | Benefit at Start | Benefit at Latest Annual Assessment for Stayers | Benefit at Exit for Leavers |
|--|------------------|---|-----------------------------|
| Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps) | 0 | 0 | 0 |
| Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) | 0 | 0 | 0 |
| TANF Child Care Services | 0 | 0 | 0 |
| TANF Transportation Services | 0 | 0 | 0 |
| Other TANF-Funded Services | 0 | 0 | 0 |
| Other Source | 0 | 0 | 0 |

25i - Exit Destination - Veterans

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|--|-------|------------------|--------------------------|--------------------|------------------------|
|--|-------|------------------|--------------------------|--------------------|------------------------|

Permanent Destinations

| | | | | | |
|--|---|---|---|---|---|
| Moved from one HOPWA funded project to HOPWA PH | 0 | 0 | 0 | 0 | 0 |
| Owned by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Owned by client, with ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with VASH housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with other ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |

| | | | | | |
|---|----|----|----|----|----|
| Permanent Housing (other than RRH) for formerly homeless persons | 0 | 0 | 0 | 0 | 0 |
| Staying or living with family, permanent tenure | 0 | 0 | 0 | 0 | 0 |
| Staying or living with friends, permanent tenure | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with RRH or equivalent subsidy | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Temporary Destinations | | | | | |
| Emergency shelter, including hotel or motel paid for with emergency shelter voucher | 0 | 0 | 0 | 0 | 0 |
| Moved from one HOPWA funded project to HOPWA TH | 0 | 0 | 0 | 0 | 0 |
| Transitional housing for homeless persons (including homeless youth) | 0 | 0 | 0 | 0 | 0 |
| Staying or living with family, temporary tenure (e.g., room, apartment or house) | 0 | 0 | 0 | 0 | 0 |
| Staying or living with friends, temporary tenure (e.g., room apartment or house) | 0 | 0 | 0 | 0 | 0 |
| Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside) | 0 | 0 | 0 | 0 | 0 |
| Safe Haven | 0 | 0 | 0 | 0 | 0 |
| Hotel or motel paid for without emergency shelter voucher | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Institutional Settings | | | | | |
| Foster care home or foster care group home | 0 | 0 | 0 | 0 | 0 |
| Psychiatric hospital or other psychiatric facility | 0 | 0 | 0 | 0 | 0 |
| Substance abuse treatment facility or detox center | 0 | 0 | 0 | 0 | 0 |
| Hospital or other residential non-psychiatric medical facility | 0 | 0 | 0 | 0 | 0 |
| Jail, prison, or juvenile detention facility | 0 | 0 | 0 | 0 | 0 |
| Long-term care facility or nursing home | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Other Destinations | | | | | |
| Residential project or halfway house with no homeless criteria | 0 | 0 | 0 | 0 | 0 |
| Deceased | 0 | 0 | 0 | 0 | 0 |
| Other | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data Not Collected (no exit interview completed) | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 0 | 0 |
| Total persons exiting to positive housing destinations | 0 | 0 | 0 | 0 | 0 |
| Total persons whose destinations excluded them from the calculation | 0 | 0 | 0 | 0 | 0 |
| Percentage | 0% | 0% | 0% | 0% | 0% |

26a - Chronic Homeless Status - Number of Households w/at least one or more CH person

| Total | Without | With Children | With Only | Unknown |
|-------|---------|---------------|-----------|---------|
|-------|---------|---------------|-----------|---------|

| | | Children | and Adults | Children | Household Type |
|------------------------------------|----------|----------|------------|----------|----------------|
| Chronically Homeless | 1 | 0 | 1 | 0 | 0 |
| Not Chronically Homeless | 5 | 2 | 3 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 6 | 2 | 4 | 0 | 0 |

26b - Number of Chronically Homeless Persons by Household

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|------------------------------------|-----------|------------------|--------------------------|--------------------|------------------------|
| Chronically Homeless | 2 | 0 | 2 | 0 | 0 |
| Not Chronically Homeless | 11 | 2 | 9 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 13 | 2 | 11 | 0 | 0 |

26c - Gender of Chronically Homeless Persons

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|---|----------|------------------|--------------------------|--------------------|------------------------|
| Male | 1 | 0 | 1 | 0 | 0 |
| Female | 1 | 0 | 1 | 0 | 0 |
| Trans Female (MTF or Male to Female) | 0 | 0 | 0 | 0 | 0 |
| Trans Male (FTM or Female to Male) | 0 | 0 | 0 | 0 | 0 |
| Gender Non-Conforming (i.e. not exclusively male or female) | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 2 | 0 | 2 | 0 | 0 |

26d - Age of Chronically Homeless Persons

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|------------------------------------|-------|------------------|--------------------------|--------------------|------------------------|
| 0 - 17 | 1 | | 1 | 0 | 0 |
| 18 - 24 | 0 | 0 | 0 | | 0 |
| 25 - 34 | 0 | 0 | 0 | | 0 |
| 35 - 44 | 0 | 0 | 0 | | 0 |
| 45 - 54 | 1 | 0 | 1 | | 0 |
| 55 - 61 | 0 | 0 | 0 | | 0 |
| 62 + | 0 | 0 | 0 | | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | | 0 |
| Data not collected | 0 | 0 | 0 | | 0 |

| Total | 2 | 0 | 2 | 0 | 0 |
|-------|---|---|---|---|---|
|-------|---|---|---|---|---|

26e - Physical and Mental Health Conditions - Chronically Homeless Persons

| | Conditions at Start | Conditions at Latest Assessment for Stayers | Conditions at Exit for Leavers |
|-----------------------------|---------------------|---|--------------------------------|
| Mental Health Problem | 1 | 1 | 0 |
| Alcohol Abuse | 0 | 0 | 0 |
| Drug Abuse | 0 | 0 | 0 |
| Both Alcohol and Drug Abuse | 0 | 0 | 0 |
| Chronic Health Condition | 1 | 1 | 0 |
| HIV/AIDS | 0 | 0 | 0 |
| Development Disability | 0 | 0 | 0 |
| Physical Disability | 1 | 1 | 0 |

26f - Client Cash Income - Chronically Homeless Persons

| Number of Chronically Homeless Persons by Income Category | Number of Chronically Homeless Persons at Start | Number of Chronically Homeless Persons at Annual Assessment (Stayers) | Number of Chronically Homeless Persons at Exit (Leavers) |
|---|---|---|--|
| Chronically Homeless Persons with Only Earned Income (i.e., Employment Income) | 0 | 0 | 0 |
| Chronically Homeless Persons with Only Other Income | 1 | 0 | 0 |
| Chronically Homeless Persons with Both Earned and Other Income | 0 | 0 | 0 |
| Chronically Homeless Persons with No Income | 0 | 0 | 0 |
| Chronically Homeless Persons with Client Doesn't Know/Client Refused Income Information | 0 | 0 | 0 |
| Chronically Homeless Persons with Missing Income Information | 0 | 0 | 0 |
| Number of Chronically Homeless Persons not yet required to have an annual assessment | | 1 | |
| Number of Chronically Homeless Persons without required annual assessment | | 0 | |
| Total Chronically Homeless Persons | 1 | 1 | 0 |

26g - Type of Cash Income Sources - Chronically Homeless Persons

| | Income at Start | Income at Latest Annual Assessment for Stayers | Income at Exit for Leavers |
|--|-----------------|--|----------------------------|
| Earned Income | 0 | 0 | 0 |
| Unemployment Insurance | 0 | 0 | 0 |
| Supplemental Security Income (SSI) | 0 | 0 | 0 |
| Social Security Disability Insurance (SSDI) | 0 | 0 | 0 |
| VA Service - Connected Disability Compensation | 0 | 0 | 0 |

| | | | |
|--|---|---|---|
| VA Non-Service Connected Disability Pension | 0 | 0 | 0 |
| Private Disability Insurance | 0 | 0 | 0 |
| Worker's Compensation | 0 | 0 | 0 |
| Temporary Assistance for Needy Families (TANF) | 1 | 0 | 0 |
| General Assistance (GA) | 0 | 0 | 0 |
| Retirement Income from Social Security | 0 | 0 | 0 |
| Pension or retirement income from a former job | 0 | 0 | 0 |
| Child Support | 1 | 0 | 0 |
| Alimony and other spousal support | 0 | 0 | 0 |
| Other Source | 0 | 0 | 0 |
| Chronically Homeless Persons with Income Information at Start and Annual Assessment/Exit | | 0 | 0 |

26h - Type of Non-Cash Income Sources - Chronically Homeless Persons

| | Benefit at Start | Benefit at Latest Annual Assessment for Stayers | Benefit at Exit for Leavers |
|--|------------------|---|-----------------------------|
| Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps) | 1 | 0 | 0 |
| Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) | 0 | 0 | 0 |
| TANF Child Care Services | 0 | 0 | 0 |
| TANF Transportation Services | 0 | 0 | 0 |
| Other TANF-Funded Services | 0 | 0 | 0 |
| Other Source | 0 | 0 | 0 |

27a - Age of Youth

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|------------------------------------|-------|------------------|--------------------------|--------------------|------------------------|
| 12 - 17 | 0 | 0 | 0 | 0 | 0 |
| 18 - 24 | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 0 | 0 |

27b - Parenting Youth

| | Total Parenting Youth | Total Children of Parenting Youth | Total Persons | Total Households |
|--------------------------|-----------------------|-----------------------------------|---------------|------------------|
| Parenting youth < 18 | 0 | 0 | 0 | 0 |
| Parenting youth 18 to 24 | 0 | 0 | 0 | 0 |

27c - Gender - Youth

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|--|-------|------------------|--------------------------|--------------------|------------------------|
| | | | | | |

| | | | | | |
|---|---|---|---|---|---|
| Male | 0 | 0 | 0 | 0 | 0 |
| Female | 0 | 0 | 0 | 0 | 0 |
| Trans Female (MTF or Male to Female) | 0 | 0 | 0 | 0 | 0 |
| Trans Male (FTM or Female to Male) | 0 | 0 | 0 | 0 | 0 |
| Gender Non-Conforming (i.e. not exclusively male or female) | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 0 | 0 |

27d - Living Situation - Youth

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|---|-------|------------------|--------------------------|--------------------|------------------------|
| Homeless Situations | | | | | |
| Emergency shelter, including hotel or motel paid for with emergency shelter voucher | 0 | 0 | 0 | 0 | 0 |
| Transitional housing for homeless persons (including homeless youth) | 0 | 0 | 0 | 0 | 0 |
| Place not meant for habitation | 0 | 0 | 0 | 0 | 0 |
| Safe Haven | 0 | 0 | 0 | 0 | 0 |
| Interim Housing | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |

Institutional Settings

| | | | | | |
|--|---|---|---|---|---|
| Psychiatric hospital or other psychiatric facility | 0 | 0 | 0 | 0 | 0 |
| Substance abuse treatment facility or detox center | 0 | 0 | 0 | 0 | 0 |
| Hospital or other residential non-psychiatric medical facility | 0 | 0 | 0 | 0 | 0 |
| Jail, prison, or juvenile detention facility | 0 | 0 | 0 | 0 | 0 |
| Foster care home or foster care group home | 0 | 0 | 0 | 0 | 0 |
| Long-term care facility or nursing home | 0 | 0 | 0 | 0 | 0 |
| Residential project or halfway house with no homeless criteria | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |

Other Locations

| | | | | | |
|--|---|---|---|---|---|
| Permanent Housing (other than RRH) for formerly homeless persons | 0 | 0 | 0 | 0 | 0 |
| Owned by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Owned by client, with ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with VASH housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with other housing subsidy (including RRH) | 0 | 0 | 0 | 0 | 0 |
| Hotel or motel paid for without emergency shelter voucher | 0 | 0 | 0 | 0 | 0 |
| Staying or living in a friend's room, apartment or house | 0 | 0 | 0 | 0 | 0 |

| | | | | | |
|---|---|---|---|---|---|
| Staying or living in a family member's room, apartment or house | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 0 | 0 |

27e - Length of Participation - Youth

| | Total | Leavers | Stayers |
|--------------------------------|-------|---------|---------|
| 30 days or less | 0 | 0 | 0 |
| 31 to 60 days | 0 | 0 | 0 |
| 61 to 90 days | 0 | 0 | 0 |
| 91 to 180 days | 0 | 0 | 0 |
| 181 to 365 days | 0 | 0 | 0 |
| 366 to 730 Days (1-2 Yrs) | 0 | 0 | 0 |
| 731 to 1,095 Days (2-3 Yrs) | 0 | 0 | 0 |
| 1,096 to 1,460 Days (3-4 Yrs) | 0 | 0 | 0 |
| 1,461 to 1,825 Days (4-5 Yrs) | 0 | 0 | 0 |
| More than 1,825 Days (> 5 Yrs) | 0 | 0 | 0 |
| Data not collected | 0 | 0 | 0 |
| Total | 0 | 0 | 0 |

27f - Exit Destination - Youth

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|--|-------|------------------|--------------------------|--------------------|------------------------|
|--|-------|------------------|--------------------------|--------------------|------------------------|

Permanent Destinations

| | | | | | |
|--|---|---|---|---|---|
| Moved from one HOPWA funded project to HOPWA PH | 0 | 0 | 0 | 0 | 0 |
| Owned by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Owned by client, with ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, no ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with VASH housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with other ongoing housing subsidy | 0 | 0 | 0 | 0 | 0 |
| Permanent Housing (other than RRH) for formerly homeless persons | 0 | 0 | 0 | 0 | 0 |
| Staying or living with family, permanent tenure | 0 | 0 | 0 | 0 | 0 |
| Staying or living with friends, permanent tenure | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with RRH or equivalent subsidy | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 |

Temporary Destinations

| | | | | | |
|---|---|---|---|---|---|
| Emergency shelter, including hotel or motel paid for with emergency shelter voucher | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

| | | | | | | |
|---|----|----|----|----|----|----|
| Moved from one HOPWA funded project to HOPWA TH | 0 | 0 | 0 | 0 | 0 | 0 |
| Transitional housing for homeless persons (including homeless youth) | 0 | 0 | 0 | 0 | 0 | 0 |
| Staying or living with family, temporary tenure (e.g., room, apartment or house) | 0 | 0 | 0 | 0 | 0 | 0 |
| Staying or living with friends, temporary tenure (e.g., room apartment or house) | 0 | 0 | 0 | 0 | 0 | 0 |
| Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside) | 0 | 0 | 0 | 0 | 0 | 0 |
| Safe Haven | 0 | 0 | 0 | 0 | 0 | 0 |
| Hotel or motel paid for without emergency shelter voucher | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 | 0 |
| Institutional Settings | | | | | | |
| Foster care home or foster care group home | 0 | 0 | 0 | 0 | 0 | 0 |
| Psychiatric hospital or other psychiatric facility | 0 | 0 | 0 | 0 | 0 | 0 |
| Substance abuse treatment facility or detox center | 0 | 0 | 0 | 0 | 0 | 0 |
| Hospital or other residential non-psychiatric medical facility | 0 | 0 | 0 | 0 | 0 | 0 |
| Jail, prison, or juvenile detention facility | 0 | 0 | 0 | 0 | 0 | 0 |
| Long-term care facility or nursing home | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 | 0 |
| Other Destinations | | | | | | |
| Residential project or halfway house with no homeless criteria | 0 | 0 | 0 | 0 | 0 | 0 |
| Deceased | 0 | 0 | 0 | 0 | 0 | 0 |
| Other | 0 | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 | 0 |
| Data Not Collected (no exit interview completed) | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 0 | 0 | 0 |
| Total persons exiting to positive housing destinations | 0 | 0 | 0 | 0 | 0 | 0 |
| Total persons whose destinations excluded them from the calculation | 0 | 0 | 0 | 0 | 0 | 0 |
| Percentage | 0% | 0% | 0% | 0% | 0% | 0% |



CHANNEL HSG MINISTRIES, INC.

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Grant: MI0462L5F001500 (SNAP) Special Needs Assistance
[General](#) [Budget](#) [Vouchers](#)

| <input checked="" type="checkbox"/> Paid <input checked="" type="checkbox"/> Canceled | | Voucher No | | Entered | | Source | | Amount | | Schedule No | | Est Deposit Date | |
|---|-------------------------------------|------------|--------------|---------|------------|--------|---------------|--------|----------|-------------|--------|------------------|------------|
| 1) | <input checked="" type="checkbox"/> | | 501-00386840 | | 04-18-2018 | | LUANN MITTEER | | 3,321.11 | | LH6564 | | 04-20-2018 |
| 2) | <input checked="" type="checkbox"/> | | 501-00386838 | | 04-18-2018 | | LUANN MITTEER | | 3,321.11 | | | | |
| 3) | <input checked="" type="checkbox"/> | | 501-00386394 | | 04-17-2018 | | LUANN MITTEER | | 4,284.07 | | LH6561 | | 04-19-2018 |
| 4) | <input checked="" type="checkbox"/> | | 501-00332128 | | 08-24-2017 | | LUANN MITTEER | | 9,853.68 | | LH5948 | | 08-28-2017 |

[Back to Top](#)

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CHANNEL HSG MINISTRIES, INC.

Grant Information

[Menu](#) [Auth](#)
[Log Off](#) [Bottom](#)
[Menu](#) [Portfolio](#) [Grant Information](#)
Grant: MI0462L5F001500 (SNAP) Special Needs Assistance
[General](#) [Budget](#) [Vouchers](#)

| Status | Line Item | Name | Authorized | Disbursed | Payments in Process | Balance |
|--------|---------------|---------------------|------------------|------------------|---------------------|------------------|
| | 1040 | Rental Assistance | 50,352.00 | 13,977.11 | 0.00 | 36,374.89 |
| | 1050 | Supportive Services | 4,899.00 | 1,769.90 | 0.00 | 3,129.10 |
| | 1051 | HMIS Costs | 1,404.00 | 35.10 | 0.00 | 1,368.90 |
| | 1060 | Administrative | 5,517.00 | 1,676.75 | 0.00 | 3,840.25 |
| | Totals | | 62,172.00 | 17,458.86 | 0.00 | 44,713.14 |



Back to Top


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OCEANA'S HOME

PARTNERSHIP

July 23, 2018

MI BOSCO
735 E. Michigan Ave
Lansing, MI 48909

Re: Commitment of Match

Board of Directors
Channel Housing
Ministries

Ken Fisher
President

Dave Spitler
Vice President

Paul Inglis
Treasurer/Secretary

Anne McLouth
Trustee

Joe Bizon
Trustee

Sarah Jo Robinson
Trustee

Ross Field
Trustee

Robert Blackmer
Trustee

Executive Director
Kittie Tuinstra


To Whom it May Concern:

This letter is to serve a verification of commitment of match dollars to the FY18 Stability and Beyond Program funded through the HUD CoC Program. Channel Housing Ministries, Inc. is committing to provide \$16,481 in cash match to support the Stability and Beyond program during the FY18 operating year. These match dollars will be used to fund activities allowed under the grant.

If you have any questions or concerns, please do not hesitate to contact me further Monday through Friday from 9 a.m. until 4:30 p.m. at 231.873.2222.

Thank you for your consideration.

Sincerely,


Kittie Tuinstra
Executive Director



a project of
CHANNEL HOUSING MINISTRIES
204 WASHINGTON STREET - HART MICHIGAN 49420
PHONE 231.873.2222 - FAX 231.873.2223
www.oceanashome.org
Facebook| Oceana's Home Partnership





OCEANA'S HOME

PARTNERSHIP

July 23, 2018

MI BOSCOC
735 E. Michigan Ave
Lansing, MI 48909

Re: Commitment of Match

Board of Directors
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Ken Fisher
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Trustee

Joe Bizon
Trustee

Sarah Jo Robinson
Trustee

Ross Field
Trustee

Robert Blackmer
Trustee

Executive Director
Kittie Tuinstra

To Whom it May Concern:

This letter is to serve a verification of commitment of match dollars to the FY18 Stability and Beyond Program funded through the HUD CoC Program. Channel Housing Ministries, Inc. will be collecting Program Income, which will come from the monthly rental co-payments project participants will make during their time in the program. These monthly rental co-payments are calculated to be affordable to participants based upon HUD's tenant pay calculation. We anticipate that there will be \$1000 in Program Income available for match. These match dollars will be used to fund activities allowed under the grant.

If you have any questions or concerns, please do not hesitate to contact me further Monday through Friday from 9 a.m. until 4:30 p.m. at 231.873.2222.

Thank you for your consideration.

Sincerely,

Kittie Tuinstra
Executive Director

a project of

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Homeless Service Programs

Prioritization Policy

For all homeless services and programs, clients are to be served according to the following prioritization plan.

Clients will complete and submit the HARA intake application which will be used to screen for eligibility across all HARA administered homeless and homeless prevention services. Those households that have been confirmed to be homeless will then have either the VI-SPDAT or SPDAT administered for single-person households or the VI-F-SPDAT or F-SPDAT administered for multiple-person households to determine their acuity. The only exception to this prioritization is households that require Emergency Shelter and are not able to be successfully diverted from shelter. Households requiring Emergency Shelter are served when shelter is needed and available.

Below is a general outline of acuity scores and the appropriate interventions that should be offered to households within each of the 3 acuity ranges—Housing Help Supports, Rapid Re-Housing, and Housing First:

| GENERAL HOUSING HELP SUPPORTS | | | |
|-------------------------------|------|------------------------------|--|
| Scoring Range | | Appropriate Interventions | Comments |
| SPDAT | 0-19 | Housing Search Information | Generally individuals are most likely to solve their own homelessness with very light touch supports, as they have shorter periods of homelessness and their needs are not as complex. |
| F-SPDAT | 0-26 | Emergency Shelter | |
| VI-SPDAT | 0-3 | Information & Referral | |
| VI-F-SPDAT | 0-3 | Education | |
| | | Advocacy | |
| | | Landlord Listings | |
| | | Apartment Applications | |
| | | Security Deposits | |
| | | One Month Leasing Assistance | |

RAPID RE-HOUSING

| Scoring Range | | Appropriate Interventions | Comments |
|---------------|-------|--|---|
| SPDAT | 20-34 | Same as General Housing Help Supports plus: Housing Search/Placement Landlord Negotiation & Advocacy 1-6 Months of Leasing Assistance Intensive Case Management Security Deposit | With some supports, though not as intensive as Housing First, the individuals can access and maintain housing. The focus of attention of the supports is more likely going to be on a smaller number of SPDAT components. Support services do not last as long as Housing First supports. |
| F-SPDAT | 27-53 | | |
| VI-SPDAT | 4-7 | | |
| VI-F-SPDAT | 4-8 | | |

| HOUSING FIRST | | | |
|---------------|-------|---|---|
| Scoring Range | | Appropriate Intervention | Comments |
| SPDAT | 35-60 | Same as Rapid Re-Housing plus: 6-12+ Months of Leasing Assistance Intensive Case Management | These are individuals with more complex needs who are likely to benefit from case management supports either through Intensive Case Management or Assertive Community Treatment. Scores in the SPDAT are likely to be higher (3s and 4s) in many of the components. |
| F-SPDAT | 54-80 | | |
| VI-SPDAT | 8+ | | |
| VI-F-SPDAT | 9+ | | |

Within each category, those clients scoring nearer to the top of the threshold are the first priority. For example, if two clients have undergone an intake and one scores a 53 on the SPDAT and the other scores a 49 and there is only one opening on a program caseload, the individual with a 53 is served before the person who scored a 49, regardless of the date of their application.

Upon completion of the intake, the household will be reviewed for eligibility across all HARA administered homeless and homeless prevention programs. In order for households to qualify for service, they must not only meet the eligibility requirements outlined under the specific program of entry but they must also meet the following minimum standards for acuity:

| Program/Service | Intervention Type | | | VI or SPDAT | Score Range |
|-----------------|-------------------|-----|---------------|-------------|-------------|
| | Housing | RRH | Housing First | | |

| | Help | | | | |
|--------------------|------|---|---|-------|----------------------------|
| Motel | X | X | X | VI | All |
| FEMA/EFSP | X | | | VI | VI 0-3; VI-F 0-4 |
| ESG Case Mgmt | X | X | | SPDAT | SPDAT 0-34; F-SPDAT 0-53 |
| ESG Fin. Assist | | X | | SPDAT | SPDAT 27-34; F-SPDAT 40-53 |
| Vet. Initiative | | X | | VI | VI 0-7; VI-F 0-8 |
| SPDAT Case Mgmt | | X | | SPDAT | SPDAT 25-34; F-SPDAT 25-53 |
| Family Re-Housing | | X | X | SPDAT | SPDAT 20+; F-SPDAT 27+ |
| Rapid Re-Housing | | X | X | SPDAT | SPDAT 20+; F-SPDAT 27+ |
| Stability & Beyond | | X | X | SPDAT | SPDAT 30+; F-SPDAT 40+ |
| PATH | | | X | SPDAT | SPDAT 35+; F-SPDAT 54+ |
| SHP Chronic | | | X | SPDAT | SPDAT 35+; F-SPDAT 54+ |
| SHP Family | | | X | SPDAT | SPDAT 35+; F-SPDAT 54+ |
| Shelter + Care | | | X | SPDAT | SPDAT 35+; F-SPDAT 54+ |

When filling a vacancy in any of the above programs (with the exception of an emergency motel voucher), the household that meets the program requirements and has the highest level of acuity must be served first. If there are two or more households that meet program requirements and are tied for the highest acuity and there are not enough program openings to serve them all, the Program Manager and/or Executive Director should exercise judgement in determining which household appears to have the most barriers and greatest need due to other extenuating factors in their situations.

Regardless of the priority sequence and scoring outlined above, there may be instances when particular circumstances may be taken into account in establishing the priority of the clients to be served. This decision rests with the Program Manager and/or Executive Director. It is incumbent upon these decision makers to justify exceptions in service delivery, acknowledging that there can be many reasons for an exception based upon local circumstances at any point in time. It is important that this approach is used infrequently, in limited circumstances, and with sufficient justification.

Prioritizing Chronic Homelessness

According to the

New Chronic Homeless Definition

Effective January 15, 2016

To be considered **chronically homeless**, the adult Head of Household must:

- have a certified disability, AND

- have been living in a place not meant for human habitation, in an emergency shelter, or a safe haven for the last 12 months continuously OR on at least four occasions in the last three years where those occasions cumulatively total at least 12 months

There is not a minimum number of days in which each distinct occasion of homelessness must total but instead, occasions are defined by a break in homelessness of *at least seven days* not residing in an emergency shelter, safe haven, or residing in a place meant for human habitation. Stays in institutions of fewer than 90 days *do not* constitute a break in homelessness and count toward the total time homeless. Transitional Housing does not count toward homelessness.

The Final Rule establishes recordkeeping requirements for documenting chronic homelessness that take into account how providers use Homeless Management Information Systems (HMIS) and that does not require documentation of each day of homelessness but a method that can be more easily implemented.

Certifying Chronic Homelessness:

- A. Disability Certification**—the adult head of household must be disabled. Certification of disability may come from one of the following sources:
 - a. Written statement from a licensed professional
 - b. Written statement from Social Security Administration
 - c. Receipt from a Social Security Administration payment
 - d. Written observation from intake worker of disability with confirmation of disability within 45 days
- B. Homeless History**—the adult head of household must have their homeless history documented to verify chronicity.
 - a. Priority preference given to Third Party Verification, then to Written Observation from case worker, finally to Self-Certification
 - i. Self-certification cannot account for more than 3 months of homeless verification
 - b. If there is one documented instance of homelessness in a month, that whole month is able to be counted toward the total 12 months cumulative required

Prioritization for Permanent Supportive Housing designated for Chronic Homelessness:

The goal of prioritization is to ensure that homeless individuals and families with the most severe service needs receive priority in program admission. Admission to PSH units designated for Chronic Homelessness must be prioritized as follows:

1. First priority is for those who are certified as chronically homeless (as defined above) and who have a SPDAT score of at least 40 for singles or 53 for family units.

2. Second priority is for those who are certified as chronically homeless (as defined above) and who have a SPDAT score of less than 40 for singles or less than 53 for family units.
3. Third priority is for those who are currently homeless (according to HUD Category 1) and who have a cumulative homeless history of at least 6 months during the last 3 years and who also have a SPDAT score of at least 40 for singles or 53 for family units.
4. Fourth priority is for those who are currently homeless (according to HUD Category 1) and who have a cumulative homeless history of at least 3 months during the last 18 months and who also have a SPDAT score of at least 40 for singles or 53 for family units.
5. Fifth priority is for those who are currently homeless (according to HUD Category 1) and who have a cumulative homeless history of at least 30 days during the last year and who have a SPDAT score of at least 36 for singles or 45 for family units.

Homeless histories must be documented according to the standards outlined in the Final Rule and a copy of the SPDAT score sheet must be retained in the client file.