

## Before Starting the CoC Application

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

The Collaborative Applicant is responsible for reviewing the following:

1. The FY 2019 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2019 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.
6. Questions marked with an asterisk (\*), which are mandatory and require a response.

## 1A. Continuum of Care (CoC) Identification

### Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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**1A-1. CoC Name and Number:** NY-512 - Troy/Rensselaer County CoC

**1A-2. Collaborative Applicant Name:** CARES of NY, Inc.

**1A-3. CoC Designation:** CA

**1A-4. HMIS Lead:** CARES of NY, Inc.

## 1B. Continuum of Care (CoC) Engagement

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

**1B-1. CoC Meeting Participants.**

**For the period of May 1, 2018 to April 30, 2019, applicants must indicate whether the Organization/Person listed:**

- 1. participated in CoC meetings;**
- 2. voted, including selecting CoC Board members; and**
- 3. participated in the CoC’s coordinated entry system.**

Organization/Person	Participates in CoC Meetings	Votes, including selecting CoC Board Members	Participates in Coordinated Entry System
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	No
Law Enforcement	No	No	No
Local Jail(s)	Yes	No	No
Hospital(s)	No	No	Yes
EMS/Crisis Response Team(s)	No	No	No
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	No	Yes
Disability Service Organizations	Yes	Yes	Yes
Disability Advocates	Yes	Yes	No
Public Housing Authorities	Yes	Yes	No
CoC Funded Youth Homeless Organizations	Not Applicable	No	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	No

Youth Advocates	Yes	Yes	No
School Administrators/Homeless Liaisons	Yes	No	No
CoC Funded Victim Service Providers	Yes	Yes	Yes
Non-CoC Funded Victim Service Providers	Not Applicable	No	No
Domestic Violence Advocates	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	No	No
LGBT Service Organizations	Yes	Yes	No
Agencies that serve survivors of human trafficking	No	No	No
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Mental Illness Advocates	Yes	Yes	Yes
Substance Abuse Advocates	Yes	Yes	Yes
<b>Other:(limit 50 characters)</b>			
legal services	Yes	Yes	Yes
faith based organizations	Yes	Yes	Yes
VA	Yes	Yes	Yes

**1B-1a. CoC’s Strategy to Solicit/Consider Opinions on Preventing/Ending Homelessness.**

**Applicants must describe how the CoC:**

- 1. solicits and considers opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;**
- 2. communicates information during public meetings or other forums the CoC uses to solicit public information;**
- 3. takes into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness; and**
- 4. ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats, e.g., PDF. (limit 2,000 characters)**

The CoC uses specific strategies to solicit and consider opinions from a broad array of organizations & individuals with knowledge of/interest in preventing and ending homelessness. Input is solicited from knowledgeable stakeholders (e.g. those with lived experience, housing providers, health/mental & behavioral health providers, law enforcement, faith-based orgs, government agencies). Strategies to solicit opinions include peer-to-peer community outreach, web-based forums (e.g. interactive webinars, email listservs) and annual interviews with current program clients. Info is shared & opinions gathered year-round through direct community interaction (e.g. CoC Membership meetings held eight times/year). The Collaborative Applicant (CA) leads an in-person workshop series developed to solicit feedback & spark dialogue among a wide range of agencies/persons on topics relevant to the community (e.g, confronting discrimination; youth homelessness; sex offender housing) which reaches interested parties across the community through live web-streaming/archived

video. Info gathered in public meetings/forums are considered by the CoC to develop new approaches to prevent/end homelessness (e.g. forming the Youth Committee to address the needs of homeless youth in the committee, which came from opinions expressed during public forums for the CoC's strategic planning). Minutes taken at every public meeting provide the CoC Board with opinions/topics to consider how further work may be assigned to one of six standing committees. Committees update the Board on findings and suggested next steps; and all developments are shared during full Membership meetings. The CA ensures effective communication with all individuals across the CoC, including those with disabilities, by sharing important info (e.g. meeting dates, agendas, minutes) on their website that is responsive to screen-reader software (e.g. accessibility tags to PDF documents) and by sharing info via email listservs.

### **1B-2. Open Invitation for New Members.**

**Applicants must describe:**

- 1. the invitation process;**
  - 2. how the CoC communicates the invitation process to solicit new members;**
  - 3. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats;**
  - 4. how often the CoC solicits new members; and**
  - 5. any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.**
- (limit 2,000 characters)**

The formal CoC invitation process for new members is transparent, occurs on an annual basis, and requires interested parties to complete a New Member Application. The CoC communicates the invitation process to solicit new members via the CoC's website and listservs, announcements at full Membership meetings, as well as phone and in-person conversations with important systems partners focusing on the benefits and responsibilities of CoC membership. The CA ensures effective communication with individuals with disabilities by sharing invitations and applications in a variety of accessible electronic formats, including the CoC webpage, which is responsive to screen-reader software (e.g. accessibility tags to PDF documents) and email listservs. Though the CoC solicits new members annually, the Membership Application is posted year-round on the CoC's website and applications are accepted on a rolling basis. The CoC conducts special outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC. Special outreach is ongoing and conducted by members of the CoC Board and the Capital Region Advisory Committee on Youth Homelessness. For example, the Capital Region Advisory Committee on Youth Homelessness has identified and engaged youth with lived experience to actively participate on the Committee. Other targeted outreach focuses on non-traditional systems partners (e.g., affordable housing providers, hospitals, managed health care organizations, education and higher education institutions, employment agencies and employers), and is led by the Systems Committee.

### **1B-3. Public Notification for Proposals from Organizations Not Previously**

**Funded.**

**Applicants must describe:**

- 1. how the CoC notifies the public that it is accepting project application proposals, and that it is open to and will consider applications from organizations that have not previously received CoC Program funding, as well as the method in which proposals should be submitted;**
- 2. the process the CoC uses to determine whether the project application will be included in the FY 2019 CoC Program Competition process;**
- 3. the date(s) the CoC publicly announced it was open to proposal;**
- 4. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats; and**
- 5. if the CoC does not accept proposals from organizations that have not previously received CoC Program funding or did not announce it was open to proposals from non-CoC Program funded organizations, the applicant must state this fact in the response and provide the reason the CoC does not accept proposals from organizations that have not previously received CoC Program funding.**  
**(limit 2,000 characters)**

The CoC notified the public about accepting project application proposals, including those from non-CoC funded organizations via a listserv email announcement and public posting on the CoC's website on 7/17/19. A new project training webinar was posted on the CA website on 7/19/19 and remained throughout the application period. On 7/25, an invitation via email explicitly invited non-CoC funded organizations, community stakeholders and the general public to participate in an in-depth discussion (in-person and remotely via webinar) about CoC funding opportunities available this year on 7/31/19. The invitation specifically referenced 'a particular focus on organizations not previously receiving CoC-funding'. All communications made clear that proposals must be submitted via email to the CA using the New Project and/or DV Bonus Project Application posted on the CA website. The 7/31/19 workshop/webinar detailed the application process, including eligibility, and ensured all parties understood the method for submitting proposals. Experienced CA staff were also readily available throughout the process to field any questions from the public. The CoC determines whether project/s will be included in the listing using a CoC-created and approved review and ranking process that includes criteria to score all new projects based on local community need and HUD best practices, such as the agency's experience administering projects that serve underserved populations; ability of the project to meet stated CoC goals; extent to which a project would meet HUD priorities; program type; and agency fiscal capacity. Additional points are awarded to non-CoC funded agencies. Membership reviews all projects within the Priority Listing and provides final approval for all new projects. The CA ensured effective communication with individuals with disabilities by posting content and documents on its website that are responsive to screen-reader software (ie: accessibility tags to PDF documents).

## 1C. Continuum of Care (CoC) Coordination

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**1C-1. CoCs Coordination, Planning, and Operation of Projects.**

**Applicants must select the appropriate response for each federal, state, local, private, other organizations, or program source the CoC included in the planning and operation of projects that serve individuals experiencing homelessness, families experiencing homelessness, unaccompanied youth experiencing homelessness, persons who are fleeing domestic violence, or persons at risk of homelessness.**

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Funding Collaboratives	Yes
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

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**1C-2. CoC Consultation with ESG Program Recipients.**

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

The CoC actively consulted in the planning & allocation of ESG funds with the two ESG recipients within the CoC's geographic area: the New York State Office of Temporary & Disability Assistance (OTDA) & the City of Troy (City). The CoC consulted via phone & email with OTDA to review & comment on Applicant projects proposed within the geographic area. The State requested CoC Board support in funding proposed projects via letters of support. The CoC consulted monthly via in-person meetings & email with City staff & was asked to formally note support for proposed projects prior to allocation. In addition to consulting in the planning & allocation of funds, the CoC played an integral role in evaluating & reporting on ESG Program subrecipient performance. The CoC provided OTDA & the City with PIT & HMIS/DV data; & assisted in the development & review of ESG performance standards. The CoC's Data & Goals Committee, responsible for overseeing the CoC's consultation with OTDA & the City, ensured CAPER information & jurisdiction-level PIT data was shared each quarter. The Data & Goals Committee, also responsible for evaluating outcomes of ESG projects, worked in close collaboration with the City to conduct onsite ESG subrecipient project monitoring on a rolling basis. The Committee, which includes Collaborative Applicant Planning & HMIS staff, also provided technical assistance to agencies which were identified as requiring assistance with the monitoring process. The CoC's NOFA Committee consulted with the City to streamline the annual City ESG RFP process & application documents. ESG-specific performance standards were reviewed, presented to the CoC Board, then shared with full Membership for approval. In order to ensure local homelessness information is regularly communicated & addressed in Consolidated Plan updates, the CoC provided HMIS-derived CAPER information & other relevant information noted during monitoring to OTDA for review & evaluation.

**1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions.** Yes to both

**Applicants must indicate whether the CoC provided Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area.**

**1C-2b. Providing Other Data to Consolidated** Yes



### **Plan Jurisdictions.**

**Applicants must indicate whether the CoC ensured local homelessness information is communicated to Consolidated Plan Jurisdictions within its geographic area so it can be addressed in Consolidated Plan updates.**

#### **1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.**

**Applicants must describe:**

- 1. the CoC's protocols, including protocols for coordinated entry and the CoC's emergency transfer plan, that prioritize safety and incorporate trauma-informed, victim-centered services; and**
- 2. how the CoC, through its coordinated entry, maximizes client choice for housing and services while ensuring safety and confidentiality. (limit 2,000 characters)**

The CoC provides individuals & families fleeing domestic violence access to housing & trauma-informed, victim-centered services that prioritize the survivor's safety needs, accommodates their unique circumstances, & maximizes client choice by: adopting an emergency transfer plan, ensuring an inclusive & confidential Coordinated Entry System, & learning from agencies that utilize a trauma-informed approach & victim-centered services. The CoC's emergency transfer plan protocols prioritize safety & incorporate trauma-informed & victim-centered services by: defining eligible households; listing required documentation; defining confidentiality protections; & detailing how a transfer takes place. In addition, the Plan provides guidance on safety & security. The CoC took additional steps to prioritize safety & maximize client choice by approving DV specific protocol within the CE Policy & Procedure Manual. The CoC uses de-identifying PII to place individuals experiencing DV on the priority list. This is the only information shared with the mainstream CE list. Once a housing option is identified a warm hand-off takes place between the DV agency & the Housing provider. CoC/ESG/VAWA funded agencies within the CoC play an integral role within the implementation of the CE system, which offers survivors housing options that use a trauma informed & victim centered approach. In concert with the adopted protocols, the CoC has developed a mechanism through training & education to maximize client choice for housing & services while ensuring safety & confidentiality. The CoC educates mainstream providers on the importance of safety planning & incorporated the TBRA Rule into the CE process. For example, the CoC's Collaborative Applicant hosted & recorded a Safety Planning training for CoC & CE staff.

#### **1C-3a. Training–Best Practices in Serving DV Survivors.**

**Applicants must describe how the CoC coordinates with victim services providers to provide training, at least on an annual basis, for:**

- 1. CoC area project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in**

**2. Coordinated Entry staff that addresses safety and best practices (e.g., Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence. (limit 2,000 characters)**

The CoC coordinates with victim services providers to offer trainings for CoC area project and Coordinated Entry staff to address best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. In coordination with local and regional victim services providers the Collaborative Applicant developed a webinar focused on the Mobility Rule, safety planning, and connecting DV and mainstream housing services for households regardless of where they present for service. The webinar also focused on how to best support clients in need of victim services through trauma-informed screening and care. The webinar was posted on the CoC’s website for public viewing and was publicized at both the CoC and Coordinated Entry meetings. In addition, the CoC coordinated with Unity House, a CoC funded DV provider to create a specific protocol for victims of domestic violence within the Coordinated Entry Policies and Procedures Manual and to create the CoC’s Emergency Transfer Plan. Both policies were created through a trauma-informed, victim-centered lens, and ensure confidentiality and safety while maximizing housing options. CE staff regularly review and refer to such policies with victim services providers during the monthly CE case conferencing meetings in order to make appropriate placements. For example, Unity House advises the CE committee on sensitively screening for DV issues and how to make a warm hand-off to DV services in a trauma-informed manner that emphasizes safety planning and confidentiality, without retraumatizing the household. The participation of victim services providers within the CE process has proven effective in enabling CE staff and housing providers to become knowledgeable on best practices and procedures when working with victims of domestic violence.

**1C-3b. Domestic Violence–Community Need Data.**

**Applicants must describe how the CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)**

Providers who serve survivors of domestic violence, dating violence, sexual assault and stalking within the CoC area recently began using AWARDS as a comparable database. The following deidentified aggregate information is collected annually from local DV providers, who pull the information from their comparable database: gender, race, age, family type, household size. In addition, on a quarterly basis, the Coordinated Entry (CE) Lead provides a report on the number of persons who sought housing and services through the CE list, broken down by household type, identified disability, and subpopulation. This report includes persons with a history of domestic violence and accessed housing and services through CE. Data collected from the comparable database annually and through CE quarterly is utilized by the CoC to assess trends and special needs related to victims of domestic violence, which in turn informs Strategic Planning and local needs listed in the Rank and Review process. Moving forward, the CoC will work with local victim service providers to provide deidentified, aggregate data from the comparable database on a semi-annual basis, including gender, race, age, family type, household size, number

of episodes homeless, income, employment status, identified disability, and exit destination. The CoC believes this process will allow the CoC to gain an even clearer understanding of the scale and demographics of the population and the tailored interventions needed to address the special needs of this population.

**\*1C-4. PHAs within CoC. Attachments Required.**

**Applicants must submit information for the two largest PHAs or the two PHAs with which the CoC has a working relationship within the CoC’s geographic area.**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On
Troy Housing Authority	6.00%	Yes-Both	No
Rensselaer Housing Authority	7.00%	Yes-Both	No

**1C-4a. PHAs’ Written Policies on Homeless Admission Preferences.**

**Applicants must:**

**1. provide the steps the CoC has taken, with the two largest PHAs within the CoC’s geographic area or the two PHAs the CoC has working relationships with, to adopt a homeless admission preference—if the CoC only has one PHA within its geographic area, applicants may respond for one; or**

**2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)**

Within the Rensselaer County Continuum of Care both PHAs currently have a homeless admission preference in their written policies. The CoC conducts outreach via the Systems Committee to encourage the PHAs to become members of the CoC. As a result of the outreach both PHAs have continued their membership & participation, and have partnered with the CoC to create additional housing opportunities for persons who are homeless. For example, in 2018, the CoC collaborated with THA to attain Section 811 Mainstream Vouchers targeted to currently homeless or at-risk households. To support the adoption of the homeless admission preferences the CoC has, through one-on-one meetings & email communication, encouraged PHA staff to participate in the development of the CoC’s strategic planning process, as well as PHA data. Through this process the CoC & PHAs have been able to discuss the current needs of the homeless population using data collected through the planning process. The CoC shares Point-in-Time & Homeless Management Information Systems data with the goal of reviewing preference criteria regularly to ensure that preferences are based on local community needs. The CoC will continue to foster collaboration with these important community partners.

**1C-4b. Moving On Strategy with Affordable Housing Providers.**

**Applicants must indicate whether the CoC has a Moving On Strategy with affordable housing providers in its jurisdiction.**

Yes

**If “Yes” is selected above, describe the type of provider, for example, multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs. (limit 1,000 characters)**

The CoC has a Move On Strategy with affordable housing providers. Specifically, the CoC partners with Troy Housing Authority (THA) to transition households in permanent housing (PH) who no longer require/ request intensive services. THA also recently applied for additional vouchers dedicated to those moving on. The Move On Strategy ensures persons moving on 1) have demonstrated the ability to stably maintain housing 2) will meet screening criteria and 3) understand the decision to move on is voluntary. The CoC’s Strategy recommends that all services are provided using strengths-based/recovery-focused model and that PH providers offer pre-transition/aftercare services. The CoC will use the success of the current Move On model with THA to encourage other low-income housing programs to participate (Community Builders, Troy Rehab. & Improvement Prog., Vecino Group, Habitat). The CoC will also create a standardized assessment for moving on.

**1C-5. Protecting Against Discrimination.**

**Applicants must describe the actions the CoC has taken to address all forms of discrimination, such as discrimination based on any protected classes under the Fair Housing Act and 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing. (limit 2,000 characters)**

The CoC has taken several actions to address all forms of discrimination in housing, including: enhancing the CoC antidiscrimination policy based on best practices, conducting an antidiscrimination training, and monitoring ESG and CoC funded programs for compliance. The CoC edited and enhanced a CoC wide antidiscrimination policy (see Other Attachment 1) that ensures all community (CoC/ESG) programs provide equal access to housing regardless of race, color, national origin, religion, sex, familial status, disability, or gender identity, per the Fair Housing Act and 24 CFR 5.105(a)(2). Specific additions to the policy include referencing all NYS and Federal antidiscrimination statutes; committing to affirmatively marketing housing/services to those least likely to apply; serving individuals with disabilities in the most integrated settings; and requiring each CoC and ESG funded program have their own antidiscrimination policy, publicly post adherence, and annually participate in mandatory trainings. Also, the CoC conducts annual trainings for providers on how to effectively address discrimination based on protected classes under the Fair Housing Act and 24 CFR 5.105(a)(2). This year’s training, held on 6/6/19, included how to implement the final Equal Access to Housing rules, and reiterated (1) housing must be made available without regard to actual or perceived sexual orientation, gender identity, or marital status (2) how agencies can assess their programs for compliance and (3) tools for better implementing equal access. In addition,

the Data and Goals Committee is incorporating an antidiscrimination policy review into the CoC monitoring process, ensuring each funded agency has a program policy addressing Fair Housing and equal access. If a program is found to not have an antidiscrimination policy, the CoC Committee will work to provide language and follow-up to ensure a policy will be implemented.

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

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

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

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

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

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

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

**Applicants must:**

- 1. demonstrate the coordinated entry system covers the entire CoC**

**geographic area;**

**2. demonstrate the coordinated entry system reaches people who are least likely to apply for homelessness assistance in the absence of special outreach; and**

**3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner. (limit 2,000 characters)**

The Coordinated Entry System (CE) is a No Wrong Door system reaching homeless households within the entire CoC geographic area of Rensselaer County. The breadth of the system is captured by the CE waitlist, which documents client location at intake. The CoC targets outreach for populations least likely to seek assistance as outlined in the CE Policies & Procedures Manual, including a policy addressing the needs of individuals/families who are fleeing domestic violence, dating violence, sexual assault, or stalking, but are seeking shelter/services from non-victim specific providers. The CE Marketing Plan also documents how the CE system reaches homeless individuals and families least likely to access homelessness assistance in the absence of special outreach, including hosting outreach staff dedicated to reaching those least likely to apply. Success in this method is demonstrated by the number of unsheltered clients who have actively engaged in obtaining housing via CE through regular street canvassing, developing one-on-one relationships to build trust, and utilizing peer referrals. Through technical assistance with ABT/Cloudburst, the CoC updated their CE process to ensure consistency with the requirements of 24 CFR and CPD-17-01, ensuring prioritization of people most in need of assistance and that assistance is received in a timely manner. The attached Standard Assessment tool demonstrates the CoC's compliance with these HUD requirements. The assessment process prioritizes people most in need of assistance by using a prioritization score (which includes LOT homeless, multiple disabilities and previous involvement with the law). Participant prioritization is demonstrated by reviewing the master community list. Case management discussion occurs monthly at CE meetings, ensuring appropriate and timely placement. Agency representatives discuss clients' special circumstances, history of homelessness, prioritization score and the most appropriate housing options.

# 1D. Continuum of Care (CoC) Discharge Planning

**Instructions:**

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**1D-1. Discharge Planning Coordination.**

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

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

# 1E. Local CoC Competition

## Instructions

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

**Applicants must indicate whether the CoC:**

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

## 1E-2. Project Review and Ranking–Objective Criteria.

**Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2019 CoC Program Competition:**

1. Used objective criteria to review and rank projects for funding (e.g., cost effectiveness of the project, performance data, type of population served);	Yes
2. Included one factor related to improving system performance (e.g., exits to permanent housing (PH) destinations, retention of PH, length of time homeless, returns to homelessness, job/income growth, etc.); and	Yes
3. Included a specific method for evaluating projects submitted by victim services providers that utilized data generated from a comparable database and evaluated these projects on the degree they improve safety for the population served.	Yes

## 1E-3. Project Review and Ranking–Severity of Needs and Vulnerabilities.

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**Applicants must describe:**  
**1. the specific severity of needs and vulnerabilities the CoC considered when reviewing and ranking projects; and**  
**2. how the CoC takes severity of needs and vulnerabilities into account when reviewing and ranking projects.**  
**(limit 2,000 characters)**

The CoC considered the following severity of needs and vulnerabilities when reviewing and ranking projects: Chronic Homelessness, age, and history of domestic violence. Other vulnerable populations considered include households with low income, mental illness, current/past substance abuse disorders, and those with history in the criminal justice system. The CoC takes the above noted severity of needs and vulnerabilities into account in two ways when reviewing and ranking projects: 1) quantitative questions/objective criteria in Part I of the Rank & Review Tool; and 2) qualitative information gathered in Part II. Attachment 1E-1: Summary of Selection Criteria for Review and Ranking of CoC Projects, provides documentation of these two practices. The CoC ensures that projects providing housing and services to the before mentioned hardest to serve populations receive additional points in Part II of the Rank & Review Tool, with the understanding that such programs often yield lower scores in terms of system performance, yet are essential to meeting the needs of the CoC’s most vulnerable. The Tool also applies points to projects adhering to the Housing First approach; ensuring the most vulnerable are not screened out. This year the CoC drafted a specific question in Part II of the Tool for DV providers to explain situations considered positive housing outcomes which do not meet HUD’s traditional definitions; this question allowed for additional points. The CoC considers severity of needs and vulnerabilities each year to ensure effective prioritization and allocation of resources to meet the needs of the hardest to serve.

**1E-4. Public Postings–CoC Consolidated Application. Attachment Required.**

**Applicants must:**  
**1. indicate how the CoC made public the review and ranking process the CoC used for all project applications; or**  
**2. check 6 if the CoC did not make public the review and ranking process; and**  
**3. indicate how the CoC made public the CoC Consolidated Application—including the CoC Application and CoC Priority Listing that includes all project applications accepted and ranked or rejected—which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the FY 2019 CoC Program Competition application submission deadline; or**  
**4. check 6 if the CoC did not make public the CoC Consolidated Application.**

Public Posting of Objective Review and Ranking Process		Public Posting of CoC Consolidated Application including: CoC Application, CoC Priority Listing, Project Listings	
1. Email	<input checked="" type="checkbox"/>	1. Email	<input checked="" type="checkbox"/>
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2. Mail	<input type="checkbox"/>	2. Mail	<input type="checkbox"/>
3. Advertising in Local Newspaper(s)	<input type="checkbox"/>	3. Advertising in Local Newspaper(s)	<input type="checkbox"/>
4. Advertising on Radio or Television	<input type="checkbox"/>	4. Advertising on Radio or Television	<input type="checkbox"/>
5. Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>	5. Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>
6. Did Not Publicly Post Review and Ranking Process	<input type="checkbox"/>	6. Did Not Publicly Post CoC Consolidated Application	<input type="checkbox"/>

**1E-5. Reallocation between FY 2015 and FY 2018.**

**Applicants must report the percentage of the CoC’s ARD that was reallocated between the FY 2015 and FY 2018 CoC Program Competitions.**

**Reallocation: 2%**

**1E-5a. Reallocation–CoC Review of Performance of Existing Projects.**

**Applicants must:**

- 1. describe the CoC written process for reallocation;**
  - 2. indicate whether the CoC approved the reallocation process;**
  - 3. describe how the CoC communicated to all applicants the reallocation process;**
  - 4. describe how the CoC identified projects that were low performing or for which there is less need; and**
  - 5. describe how the CoC determined whether projects that were deemed low performing would be reallocated.**
- (limit 2,000 characters)**

The CoC considers reallocation an important tool to make strategic improvements to the homeless services system and actively reviews performance of projects to determine whether reallocation will meet/better meet a community need. The CoC posted on its website the reallocation process (see Other Attachment 1) for public comment, which was approved by membership. The CoC communicated to all applicants this process, via email. Annually during the Rank and Review process the Rank and Review Team reviews performance of existing CoC Program-funded projects to determine whether to recommend reallocation to the Board. The Team flags projects that demonstrate inadequate financial management, have a history of expending funds on ineligible activities, have a history of returning funds that could have been utilized, and/or projects consistently demonstrating unsatisfactory project performance outcomes and consistently scoring low on the Rank & Review tool (a specific scoring threshold is noted in the Rank and Review Process). Agencies are also encouraged to review their own projects and assess if any funding can be reallocated to ensure homeless services are as efficient and effective as possible. The final decision to reallocate funding to create a new

project is decided by the Board and approved by Membership. Funding is then provided to new project(s) that have been reviewed and ranked in priority order by the Rank and Review Committee and then approved by the Board and Membership. Utilizing this process, between 2015-2018, a cumulative total of \$82,548 has been reallocated; equaling 2.4 percent of the CoC's ARD. Reallocations have resulted in two new projects. Though the CoC has not met the 20 percent reallocation threshold, to date remaining projects are high performing and are of high demand.

## DV Bonus

### Instructions

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### 1F-1 DV Bonus Projects.

**Applicants must indicate whether the CoC is Yes requesting DV Bonus projects which are included on the CoC Priority Listing:**

**1F-1a. Applicants must indicate the type(s) of project(s) included in the CoC Priority Listing.**

1. PH-RRH	<input checked="" type="checkbox"/>
2. Joint TH/RRH	<input type="checkbox"/>
3. SSO Coordinated Entry	<input type="checkbox"/>

**Applicants must click “Save” after checking SSO Coordinated Entry to view questions 1F-3 and 1F-3a.**

### \*1F-2. Number of Domestic Violence Survivors in CoC’s Geographic Area.

**Applicants must report the number of DV survivors in the CoC’s geographic area that:**

Need Housing or Services	327.00
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the CoC is Currently Serving	157.00
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**1F-2a. Local Need for DV Projects.**

**Applicants must describe:**

- 1. how the CoC calculated the number of DV survivors needing housing or service in question 1F-2; and**
  - 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source).**
- (limit 500 characters)**

The CoC calculated the number of survivors needing housing or services using data collected by Unity House, the only DV provider within the CoC. All shelters refer households needing housing or services to Unity House. Unity House of Troy uses ALICE to collect and report on this data. Data is collected in real time via intake and assessment interviews at shelter sites.

**1F-4. PH-RRH and Joint TH and PH-RRH Project Applicant Capacity.**

**Applicants must provide information for each unique project applicant applying for PH-RRH and Joint TH and PH-RRH DV Bonus projects which the CoC is including in its CoC Priority Listing—using the list feature below.**

<b>Applicant Name</b>	<b>DUNS Number</b>
Unity House	826403339

## 1F-4. PH-RRH and Joint TH and PH-RRH Project

### Applicant Capacity

DUNS Number:	826403339
Applicant Name:	Unity House
Rate of Housing Placement of DV Survivors–Percentage:	98.00%
Rate of Housing Retention of DV Survivors–Percentage:	98.00%

#### 1F-4a. Rate of Housing Placement and Housing Retention.

**Applicants must describe:**

- 1. how the project applicant calculated the rate of housing placement and rate of housing retention reported in the chart above; and**
- 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source). (limit 500 characters)**

Unity House calculated the rate of housing placement and housing retention by: dividing the number of individuals who are stayers or exited to a permanent destination by the total number of individuals served in CoC-funded housing. The data source used is HMIS data maintained in the HMIS-comparable database. Unity House considers outcomes other than permanent housing positive if the safety and well-being of the victim is met by another living destination

#### 1F-4b. DV Survivor Housing.

**Applicants must describe how project applicant ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing. (limit 2,000 characters)**

Unity House ensures DV survivors experiencing homelessness were assisted to quickly move into permanent housing by immediately connecting the survivors to safe and permanent housing options. The basic steps in this process include direct outreach (or coordination with other outreach providers), screening for rapid re-housing assistance, program intake, housing barrier assessment, provision of assistance, housing search and placement, links to other supports, reassessment and adjustment, and case closure. Unity House will also work with the CoC to adhere to CE policies while ensuring survivors of DV have safe and confidential access to the CE process. Individual/s and families participating in residential and non-residential domestic violence programs will be immediately and continually assessed for permanent housing needs. Housing First principles and practices will be followed in the program design, assisting households experiencing homelessness by helping them move directly into permanent housing in the community using a combination of financial assistance and housing-focused services needed and desired by the household. This agency has successfully served victims of DV within the CoC, and thus has existing and ongoing relationships with necessary community providers to ensure that households rapidly rehoused will remain safely and

stably housed.

#### **1F-4c. DV Survivor Safety.**

**Applicants must describe how project applicant:**

- 1. ensured the safety of DV survivors experiencing homelessness by:**
  - (a) training staff on safety planning;**
  - (b) adjusting intake space to better ensure a private conversation;**
  - (c) conducting separate interviews/intake with each member of a couple;**
  - (d) working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;**
  - (e) maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant;**
  - (f) keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors; and**
- 2. measured its ability to ensure the safety of DV survivors the project served.**

**(limit 2,000 characters)**

The Applicant ensures the safety of DV survivors experiencing homelessness by providing all newly hired staff safety planning training before they begin their position responsibilities and then regular trainings at staff meetings. Staff assess and reassess safety plans as clients move through agency services. The applicant has made the following adjustments to ensure and maintain confidentiality and safety. The intake space on site was adjusted to ensure a safe, private, space for conversations with clients. Client intakes, interviews and phone calls are conducted in a private office. Appointments are sometimes made offsite at client determined locations where they feel safe. It is agency policy to only serve victims and survivors of domestic violence, so there are no opportunities for perpetrators to receive services or to be included in the victim's housing plan. Staff ask survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance by assessing the following factors during intake with the survivor. Staff will ask survivors: If they are comfortable living in close proximity to neighbors or if they prefer more private living area, do they need rental assistance to live in a house or separate apartment, is the housing exterior well lit, have an intercom entry system only accessible to the one tenant, are there bars on the window if on a first floor, is there a dead bolt on all exterior doors, and is there a landline for emergency calls in case cell phone not working. Assessments are conducted by staff to measure clients' feelings of safety once placed in housing and periodically as they remain in the housing program. Relocation is an option if the client feels current location is no longer safe. This staff assessment process ensures clients' safety is monitored as they progress through the program keeping them safe and when safe able to focus on other life skills and development.

#### **1F-4d. Trauma-Informed, Victim-Centered Approaches.**

**Applicants must describe:**

- 1. project applicant's experience in utilizing trauma-informed, victim-centered approaches to meet needs of DV survivors; and**
- 2. how, if funded, the project will utilize trauma-informed, victim-centered approaches to meet needs of DV survivors by:**

- (a) prioritizing participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;**
- (b) establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;**
- (c) providing program participants access to information on trauma, e.g., training staff on providing program participant with information on trauma;**
- (d) placing emphasis on the participant's strengths, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;**
- (e) centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;**
- (f) delivering opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and**
- (g) offering support for parenting, e.g., parenting classes, childcare.**  
**(limit 4,000 characters)**

The Applicant has been providing trauma-informed and victim centered approaches to meet the needs of DV survivors for over 40 years. Applicant staff are required to complete trainings and receive certifications to ensure they are implementing best practices when working with clients who have experienced traumas, in order to identify resultant barriers/challenges for agency intervention. The Applicant also provides training for its clients on the impact of trauma on strategies to overcome the resulting barriers. Clients choose services in coordination with their case manager/advocate. All clients entering shelter immediately begin a housing plan, exit plan, to secure safe, affordable housing. Clients and staff work together to identify what is best for clients as determined by clients. Staff do not and will not require or force clients to engage in any applicant or community services. The client/staff interactions are always respectful. Resources are available within these support services to look at financial abilities and opportunities, safety planning, mental health and substance abuse triggers and accessibility of support in proximity to housing. Clients receive much information including information on trauma. The Applicant has a licensed L-MSW who provides support groups and individual therapeutic counseling as requested. All staff provide general counseling but not therapeutic counseling. The Applicants offers opportunities for clients to connect to community agencies/resources including mental health, physical health, parenting programs, vocational programs and other services which may be beneficial. If children are in the household, parents will be aware of child resources including child care, counseling, and recreational activities. Applicant utilizes its own "measurement tools" to assess client utilization of services, feedback on how helpful services were (or not), attitudinal changes, and skill development. Case plans/contracts are used to track client progress or change, to demonstrate progress to the client, and help clients move toward greater self-determination and self-sufficiency. The Applicant supports clients in self-determination by educating them on their rights when it comes to housing, employment, or other system in order to avoid discrimination or unfair practices. This training is informed by the Law NY, Empire Justice, and Fair Housing. Clients are also "educated" as to services and opportunities in the area they choose to live in to foster Social and Community engagement. Staff members also attended An Equal Access training hosted by the Collaborative Applicant



on June 6th, 2019. Cultural Diversity, Anti-Oppression, and Inclusivity are integrated into all support services. The Applicant delivers opportunities for program participants to connect through non-traditional and traditional activities on a regular basis. Partnerships have developed in the communities that allow for various group activities on site as well as off-site trips. The Applicant also offers support for parenting DV survivors as well, including referrals to community resources for parenting support and childcare.

**1F-4e. Meeting Service Needs of DV Survivors.**

**Applicants must describe how the project applicant met services needs and ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing while addressing their safety needs, including:**

- **Child Custody**
- **Legal Services**
- **Criminal History**
- **Bad Credit History**
- **Education**
- **Job Training**
- **Employment**
- **Physical/Mental Healthcare**
- **Drug and Alcohol Treatment**
- **Childcare**

**(limit 2,000 characters)**

The Applicant meets the service needs of DV survivors and ensures those who are experiencing homelessness are moved into permanent housing rapidly while addressing their safety needs. Staff incorporate trauma informed care/victim centered case management into their work. Staff identify potential barriers to rapid housing by checking the client's credit history and connecting to legal aid to remedy issues, seek to understand child custody issues to ensure the housing is adequate for dependents and visitation/custody, and discuss any criminal history as it may relate to securing housing or employment. To maintain the secured housing, staff work with the clients on a stability plan by linking clients to vocational and educational services, clients and dependents to their Managed Medicaid Provider to ensure good physical/mental health and begin exploring affordable child care options. To help households obtain permanent housing as quickly as possible, rapid re-housing will provide the following types of assistance; housing identification, rent and move in assistance and rapid rehousing case management and services all individualized to households based on their specific strengths and barriers unique to victims of domestic violence. Families are assessed at program entry to determine where income deficits and other barriers exist that create housing instability. Available housing units in the target area will be assessed to ensure that families are quickly housed and housing is safe and appropriate for program participants, and additional training the family and case manager identify as needed to assist with family self-sufficiency and housing stability. Referrals will be made to employment and training resources with an emphasis on stable employment that offers a path to workplace advancement. Case plans/contracts are modified as progress is made and/or client situations change. If funded, these policies

and procedures will continue to be utilized and enhanced.

## 2A. Homeless Management Information System (HMIS) Implementation

**Intructions:**

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

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**2A-1. HMIS Vendor Identification.** Foothold Technology

**Applicants must review the HMIS software vendor name brought forward from FY 2018 CoC Application and update the information if there was a change.**

**2A-2. Bed Coverage Rate Using HIC and HMIS Data.**

**Using 2019 HIC and HMIS data, applicants must report by project type:**

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	116	32	84	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	25	0	23	92.00%
Rapid Re-Housing (RRH) beds	218	67	139	92.05%
Permanent Supportive Housing (PSH) beds	670	161	509	100.00%
Other Permanent Housing (OPH) beds	0	0	0	

**2A-2a. Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-2.**

**For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-2., applicants must describe:**

**1. steps the CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and  
2. how the CoC will implement the steps described to increase bed coverage to at least 85 percent.  
(limit 2,000 characters)**

N/A

**\*2A-3. Longitudinal System Analysis (LSA) Submission.**

**Applicants must indicate whether the CoC submitted its LSA data to HUD in HDX 2.0.** Yes

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

**Applicants must enter the date the CoC submitted the 2019 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX).  
(mm/dd/yyyy)** 04/26/2019

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

### Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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**2B-1. PIT Count Date.** 01/24/2019

**Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).**

**2B-2. PIT Count Data–HDX Submission Date.** 04/26/2019

**Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).**

**2B-3. Sheltered PIT Count–Change in Implementation.**

**Applicants must describe:**

**1. any changes in the sheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and**

**2. how the changes affected the CoC’s sheltered PIT count results; or**  
**3. state “Not Applicable” if there were no changes.**

**(limit 2,000 characters)**

From 2018 to 2019 the CoC implemented data quality actions to improve the validity of the sheltered PIT count; no methodology changes were made. The data quality changes included 1) tailored technical assistance with non-HMIS providers (i.e. Department of Social Services and DV providers) and 2) improved HMIS training with participating HMIS agencies. These data quality activities improved the validity of the count and played a role in identifying 17 additional persons during the 2019 sheltered PIT count. The CoC facilitated increased training opportunities for the community on PIT requirements and specifically worked with the Departments of Social Services (DSS), DV shelters,

and rehabilitation facilities to ensure a complete count of the census on the night of the PIT. Training focused on ensuring the numbers reported reflect timely data entry and data accuracy from each agency's tracking system. Such training resulted in a reported increase of persons utilizing DSS-funded beds and DV services from 2018. In addition, improved data quality training with HMIS-participating agencies supported improved data collection, resulting in an increase of persons reported from 2018. The Collaborative Applicant in coordination with the HMIS Lead organized and analyzed PIT data reports from the HMIS and held one-on-one phone calls with each provider to ensure timely data entry and data accuracy. Review of intake dates noted within HMIS ensured a proper count of those utilizing shelter services on the night of the count. This review and subsequent data correction by agencies resulted in a more accurate census count.

**\*2B-4. Sheltered PIT Count–Changes Due to Presidentially-declared Disaster.**

**Applicants must select whether the CoC added or removed emergency shelter, transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially-declared disaster, resulting in a change to the CoC's 2019 sheltered PIT count.** No

**2B-5. Unsheltered PIT Count–Changes in Implementation.**

**Applicants must describe:**

- 1. any changes in the unsheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and**
  - 2. how the changes affected the CoC's unsheltered PIT count results; or**
  - 3. state "Not Applicable" if there were no changes.**
- (limit 2,000 characters)**

From 2018 to 2019 the CoC implemented data quality actions to improve the implementation of the unsheltered PIT count; no methodology changes were made. Data quality activities included improved PIT count training and increased awareness of the PIT count. This year the Collaborative Applicant facilitated regional meetings beginning in November that included the unsheltered PIT Lead Agency, VA-funded agencies, and youth providers to ensure a more accurate and complete count. These agencies reviewed and provided feedback on the survey tool, which was then locally revised. Additionally, the Collaborative Applicant and agencies discussed engagement versus observation techniques during the unsheltered count, emphasizing engagement is preferred when possible in order to collect complete and accurate data. The Collaborative Applicant also provided an overview of important definitions (i.e. HUD homeless, youth). The unsheltered PIT Count Leads then trained volunteers to ensure accurate data collection, deduplication and appropriate interviewing techniques. The CoC also increased awareness of the unsheltered PIT count. During this year's regional unsheltered PIT Lead

Agency meetings, the Collaborative Applicant facilitated discussion on how to engage additional service partners (including schools and other human service agencies) to participate in the unsheltered PIT. Additionally, the Lead Agency engaged/trained in advance a wider range of community stakeholders who encounter unsheltered homeless persons, such as local shops, libraries, law enforcement, faith-based organizations, soup kitchens/pantries, and other human services providers. Together, these data quality changes led to a more accurate and complete count.

**\*2B-6. PIT Count–Identifying Youth Experiencing Homelessness.**

**Applicants must:**

**Indicate whether the CoC implemented specific measures to identify youth experiencing homelessness in their 2019 PIT count.** Yes

**2B-6a. PIT Count–Involving Youth in Implementation.**

**Applicants must describe how the CoC engaged stakeholders serving youth experiencing homelessness to:**

- 1. plan the 2019 PIT count;**
  - 2. select locations where youth experiencing homelessness are most likely to be identified; and**
  - 3. involve youth in counting during the 2019 PIT count.**
- (limit 2,000 characters)**

For the 2019 PIT Count, the CoC implemented specific measures to identify homeless youth including: engaging RHY-funded/youth focused agencies w/in the planning process, engaging homeless/formerly homeless youth during the planning process to identify known locations & incentivizing homeless youth to participate in the count. The Capital Region Advisory Board on Youth Homelessness, a group of key youth providers, was consulted during the PIT planning process & provided guidance on the tool, training activities & known locations, based on the Board's experience conducting an annual youth specific count. To ensure locations known to homeless youth were part of the count, youth stakeholders conducted focus groups w/ youth at drop-in centers to select locations for the count. Joseph's House street outreach team led a team of volunteers to count homeless youth in areas identified by the youth stakeholders & the Advisory Board. These teams included volunteer youth themselves, many of whom are interning at local CoC-funded agencies. In order to count youth experiencing homelessness, Subway gift cards were provided to youth surveyed as an incentive during the count. The CoC is recruiting youth peers to participate in conducting the 2020 PIT Count.

**2B-7. PIT Count–Improvements to Implementation.**

**Applicants must describe the CoC's actions implemented in its 2019 PIT count to better count:**

- 1. individuals and families experiencing chronic homelessness;**

**2. families with children experiencing homelessness; and  
3. Veterans experiencing homelessness.  
(limit 2,000 characters)**

The CoC implemented several actions to improve the capability of the CoC to better count the following subpopulations: persons experiencing CH, families w/children, and homeless Veterans in the 2019 PIT Count. Actions included increased coordination with community partners and improved HMIS data analysis. The CoC held a meeting in November 2018 with the CoC PIT lead agencies as well as those agencies that specifically serve each of the subpopulations to identify any potential barriers and discuss strategies to improve the PIT process for 2019, specifically, when focusing on improving the count for the CH subpopulation. To improve the unsheltered PIT count of the CH, Joseph House’s street outreach team better identified and targeted known locations for the CH. To improve the sheltered count of the CH, the HMIS Lead reviewed and analyzed shelter PIT reports and provided one-on-one technical assistance to ensure accurate data quality regarding CH designation. In terms of families, due to NYS’s Right to Shelter legislation, it is rare for families with children in the CoC to be unsheltered. As such, in order to improve the sheltered PIT count of homeless families, the HMIS Lead provided training to the Dept. of Social Services, the main provider of ES services for families within the CoC. Training focused on ensuring accurate intake dates and family composition. To better count Veterans, AHC, Soldier On, and the VA coordinated with the CoC to schedule volunteers to conduct outreach on the night of the PIT at locations where homeless veterans frequent. The CoC will continue to increase coordination with community partners and improve HMIS data analysis to again ensure an accurate count of subpopulations for the 2020 PIT.



## **3A. Continuum of Care (CoC) System Performance**

### **Instructions**

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<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

### **\*3A-1. First Time Homeless as Reported in HDX.**

**Applicants must:**

Report the Number of First Time Homeless as Reported in HDX.	795
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### **3A-1a. First Time Homeless Risk Factors.**

**Applicants must:**

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

The CoC’s process to identify risk factors to identify persons becoming homeless for the first-time involves coordinated data analysis & community discussion. Specifically, the Strategic Planning Committee is now responsible for reviewing HMIS data to identify & consider characteristics of those who are first time homeless. The Strategic Planning Committee will be considering demographics, disabling condition, & cause of homelessness (utilizing a new HMIS form developed by the CoC/HMIS Lead to collect more specific info on cause of homelessness). The Strategic Planning Committee will also lead community conversation on causes of first-time homelessness based on discussion w/prevention providers, emergency shelters, DSS, & faith-based

orgs to identify common factors contributing to first time homelessness. This qualitative information will supplement HMIS data to create a holistic picture on local trends/needs. The CoC has developed three strategies to address households at risk of becoming homeless for the first time. One strategy is to educate community providers who serve vulnerable pops (i.e. prevention providers, food pantries, health clinics) about risk factors and referral protocol. A second strategy to address persons at risk is to target prevention funding and services earlier within a household's housing crisis. Early intervention will more effectively utilize prevention dollars to successfully prevent homelessness. The third strategy is to increase the amount of prevention funding available in the community. Prevention funding & services are essential to ensure households remain housed; increased funding will allow a greater number of households to be served. The CoC advocates & applies for prevention funding through state, local, and private funding sources on an ongoing basis. The Strategic Planning Committee, which reports to the CoC Board, oversees these strategies to reduce & end the number of persons experiencing homelessness for the first time.

**\*3A-2. Length of Time Homeless as Reported in HDX.**

**Applicants must:**

Report Average Length of Time Individuals and Persons in Families Remained Homeless as Reported in HDX.	44
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**3A-2a. Strategy to Reduce Length of Time Homeless.**

**Applicants must:**

- 1. describe the CoC's strategy to reduce the length of time individuals and persons in families remain homeless;**
  - 2. describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and**
  - 3. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.**
- (limit 2,000 characters)**

The CoC's strategy to reduce the LOT persons remain homeless is three-fold: 1) increase the amount of appropriate housing available 2) ensure CoC and program policies reduce barriers to housing and 3) rapidly coordinate housing opportunities through the Coordinated Entry (CE) system. To increase the amount of appropriate housing available the CoC advocates for and supports the increase of permanent housing. For example, the CoC has supported NYS Empire State Supportive Housing Initiative (ESSHI) applications for PSH; and is implementing its Move On Strategy to ensure PSH units are available for the most vulnerable and hardest to serve. To implement policies to reduce barriers to housing, the CoC encourages Housing First policies within all programs by prioritizing Housing First projects through the Rank and Review process. The CE system works to reduce LOT homeless by including LOT as a prioritizing criterion within the CE's prioritization process. The CoC also engages non-CoC funded housing providers (i.e. OMH housing through collaboration with the Mental Health Single Point of Access (SPOA) to increase the amount of

appropriate housing available to those coming through CE. Together, these strategies result in an increase in immediate housing opportunities for those who are homeless and have successfully lowered the average LOT in the community. The CoC identifies, prioritizes and houses individuals and persons in families with the longest LOT homeless through the CE system. During the bi-weekly CE case conferencing meetings, outreach, ES, and PH staff discuss barriers to housing households who have remained homeless the longest. The CE Committee develops creative/alternative solutions to finding the most immediate/appropriate housing for these households. The Data and Goals and CE Committees, which report to the CoC Board, oversee these strategies.

**\*3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX.**

**Applicants must:**

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	45%
2. Report the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	94%

**3A-3a. Exits to Permanent Housing Destinations/Retention of Permanent Housing.**

**Applicants must:**

- 1. describe the CoC’s strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations;**
- 2. provide the organization name or position title responsible for overseeing the CoC’s strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations;**
- 3. describe the CoC’s strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations; and**
- 4. provide the organization name or position title responsible for overseeing the CoC’s strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.**

**(limit 2,000 characters)**

The CoC developed strategies to increase the rate at which households in ES, TH, and RRH exit to permanent destinations, recognizing the FY18 rate of 45% must be improved. Current strategies are: 1) connect unsheltered persons and the most vulnerable in ES to RRH and PSH through an efficient and effective Coordinated Entry (CE) System 2) expand housing opportunities through CE by forging partnerships with non-CoC-funded options, such as OMH housing (i.e. Rensselaer County Dept. of Mental Health) 3) connect households to housing

subsidies (i.e. PHA, Section 8) 4) connect households to community support services and benefits and 5) connect households to education/employment training opportunities to improve income. These strategies together ensure households are linked to affordable housing options, have the necessary income to access that housing, and have support services within the community to ensure ongoing housing stability. The Data and Goals and Coordinated Entry Committees oversee these strategies. Strategies to increase the rate at which households in PH, other than RRH, retain their permanent housing or exit to PH destinations have been more successful with a rate of 94% in FY18. Current strategies are: 1) engage with clients to ensure they are meeting their individualized goals and are stable within housing 2) implement the CoC Move On Strategy by providing pre-transition services such as living skills training, employment, and community integration supports, and strong aftercare supports to ensure a successful transition and (3) partner with affordable housing providers and cultivate relationships with local landlords to maintain an ongoing list of apartment vacancies. These strategies ensure clients in PSH programs are supported in maintaining housing, while fostering opportunities for greater housing independence within the community. The Data and Goals Committee, which reports to the Board, oversees these strategies.

**\*3A-4. Returns to Homelessness as Reported in HDX.**

**Applicants must:**

	Percentage
1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX.	7%
2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX.	4%

**3A-4a. Returns to Homelessness–CoC Strategy to Reduce Rate.**

**Applicants must:**

- 1. describe the strategy the CoC has implemented to identify individuals and persons in families who return to homelessness;**
- 2. describe the CoC’s strategy to reduce the rate of additional returns to homelessness; and**
- 3. provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the rate individuals and persons in families return to homelessness. (limit 2,000 characters)**

The CoC’s implemented strategy to identify individuals and persons in families who return to homelessness is analyzing quantitative data (HMIS) and qualitative information (through Coordinated Entry). Specifically, the CoC has a plan to collaborate with the HMIS Lead to provide quarterly memos on System Performance Measures, in part identifying trends related to returns to homelessness. The Data and Goals Committee will utilize this data to assess potential causes for increases/decreases in returns to homelessness, and report this analysis to the Board. Moving forward, the Data and Goals Committee will also work with the HMIS Lead to conduct deeper dives into the

data, assessing specific traits of those who return to homelessness including: income sources, disabling condition, and cause of homelessness. The CoC also identifies persons who return to homelessness through the Coordinated Entry assessment and case conferencing. Specifically, the CE assessment form inquires about prior episodes of homelessness. During CE case conferencing, case managers discuss common barriers to remaining housed. This conferencing supports successful subsequent placement of households. Trends/common factors related to returns to homelessness will be reported in quarterly reports from the CE Lead to the Board and Membership. The CoC's strategy to reduce the rate of returns to homelessness is to continue to foster strong collaborations with systems partners including eviction prevention providers, education and workforce development agencies, the local Department of Social Services, health/behavioral health care agencies, and DV providers. These collaborations focus on developing linkages and resources in order to provide necessary supports to households who are identified as at risk of returning to homelessness. Overseeing these strategies are the Data and Goals, and Coordinated Entry Committees, which report to the Board.

**\*3A-5. Cash Income Changes as Reported in HDX.**

**Applicants must:**

	Percentage
1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	3%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	38%

**3A-5a. Increasing Employment Income.**

**Applicants must:**

- 1. describe the CoC's strategy to increase employment income;**
  - 2. describe the CoC's strategy to increase access to employment;**
  - 3. describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and**
  - 4. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase jobs and income from employment.**
- (limit 2,000 characters)**

The CoC's strategy to increase employment income is to educate providers on NYS benefits regulations through ongoing dialogue with local Depts of Social Services (DSSs). Specifically, the CoC regularly fosters dialogue between local DSSs & CoC providers on benefits regulations to increase provider, & in turn client, understanding of opportunities to maintain necessary benefits (i.e. TANF, SNAP, Medicaid, & SSI/SSDI) while increasing employment. The CoC's strategy to increase access to employment includes developing programs that create a pipeline from homelessness to employment & systems level engagement with employers. Specifically, several homeless housing & service

providers, including Unity House & the YWCA of the Greater Capital Region, have developed workforce programs that create a direct pipeline to employment by collaborating with major area employers (i.e. Troy Music Hall, hospitals). The CoC also increases access to employment by partnering with mainstream employment organizations, a major tenet of the CoC's Strategic Plan. The CoC makes direct referrals to the following agencies that provide free employment &/or education training: Rensselaer County One Stop Career Center, Commission on Economic Opportunity, Educational Opportunity Center (EOC). Also, the CoC developed MOUs with EOC & the Capital District Workforce Development Board. Specifically, the CoC & workforce agencies will identify characteristics/qualifications of clients in CoC programs who are likely to be successful in workforce programs; create a formal, direct referral process; & create a communication mechanism between PSH case managers & workforce agency staff regarding client progress. The CoC & workforce agencies will annually assess progress of PSH clients' completion of employment programs &/or increase in earned income, utilizing this information to make programmatic improvements. The Systems Committees, which reports to the Board, is responsible for overseeing these strategies.

### **3A-5b. Increasing Non-employment Cash Income.**

**Applicants must:**

- 1. describe the CoC's strategy to increase non-employment cash income;**
- 2. describe the CoC's strategy to increase access to non-employment cash sources;**
- 3. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase non-employment cash income.**

The CoC's strategy to increase non-employment cash income is fostering systems level engagement with non-employment cash income providers. Specifically, the CoC had developed systems level coordination between the local Department of Social Services (DSS) and shelter providers. DSS connects clients with necessary benefits (i.e. TANF, SNAP). Shelter and housing providers advocate on a household's behalf to access all the available non-employment cash income through DSS. This partnership between providers and DSS requires ongoing communication about any changes in DSS regulations or structure, occurring at CoC Membership and Board meetings. Such collaboration results in an increase in non-employment cash income among clients. The CoC's strategy to increase access to non-employment cash income includes promoting access to non-employment cash income providers and trainings on best practices, such as SOAR. Specifically, the CoC promotes access to income providers, such as DSS, by promoting materials that walk both providers and clients through how to access benefits at DSS, as well as clients' rights in accessing those benefits. Additionally, the DSS Commissioner sits on the CoC's Board, allowing for direct communication about any changes impacting access to DSS services. Moreover, the CoC encourages all agencies to utilize nationally recognized best practices, such as SOAR, proven to increase access to cash income. Specifically, the CoC encourages agencies during Membership meetings to access trainings hosted by the regional SOAR TA provider. By promoting an increase in attending SOAR trainings, the CoC has ensured clients throughout the community have access to SOAR trained case managers who increase access to SSI/SSDI. The Strategic Planning Committee, which reports to the Board, oversees these strategies.

**3A-5c. Increasing Employment. Attachment Required.**

**Applicants must describe how the CoC:**

**1. promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and**

**2. is working with public and private organizations to provide meaningful, education and training, on-the-job training, internship, and employment opportunities for residents of permanent supportive housing that further their recovery and well-being.**

**(limit 2,000 characters)**

The CoC has promoted partnerships and access to employment opportunities with private employers and private employment organizations by holding job fairs. Annually, CoC providers (i.e. YWCA of the Greater Capital Region, DSS) host job fairs to connect clients with private employers and employment training programs. Moving forward, the CoC will track these job fairs, including what providers and employers participate, to assess how the CoC can further enhance partnerships with employers. The CoC works with public and private organizations to provide meaningful education and training, internships, and employment opportunities for residents of Permanent Supportive Housing (PSH) by conducting outreach to employers and employment training programs on clients' behalf. This informal referral network has recently been formalized by MOUs with Educational Opportunity Center (EOC) and the Capital District Workforce Development Board (see attached). Specifically, the CoC and workforce agencies will identify characteristics and qualifications of clients in CoC programs who are likely to be successful in employment training programs; create a formal, direct referral process between PSH clients and workforce agencies; and create a communication mechanism between PSH case managers and workforce agency staff regarding client progress. The CoC and workforce agencies will annually assess progress of PSH clients' completion of employment programs and/or increase in earned income through analyzing HMIS data and qualitative data reported by PSH and workforce agency staff. The CoC and workforce agencies will utilize this information to determine how to increase training/employment opportunities for PSH residents to further client recovery and well-being.

**3A-5d. Promoting Employment, Volunteerism, and Community Service.**

**Applicants must select all the steps the CoC has taken to promote employment, volunteerism and community service among people experiencing homelessness in the CoC's geographic area:**

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

5. The CoC works with organizations to create volunteer opportunities for program participants.	<input type="checkbox"/>
6. The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	<input type="checkbox"/>
7. Provider organizations within the CoC have incentives for employment.	<input type="checkbox"/>
8. The CoC trains provider organization staff on helping program participants budget and maximize their income to maintain stability in permanent housing.	<input type="checkbox"/>

**3A-6. System Performance Measures** 05/29/2019  
**Data–HDX Submission Date**

**Applicants must enter the date the CoCs submitted its FY 2018 System Performance Measures data in HDX. (mm/dd/yyyy)**



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

### Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

**Resources:**

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

### 3B-1. Prioritizing Households with Children.

**Applicants must check each factor the CoC currently uses to prioritize households with children for assistance during FY 2019.**

1. History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
2. Number of previous homeless episodes	<input checked="" type="checkbox"/>
3. Unsheltered homelessness	<input checked="" type="checkbox"/>
4. Criminal History	<input checked="" type="checkbox"/>
5. Bad credit or rental history	<input type="checkbox"/>
6. Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

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

**Applicants must:**

**1. describe how the CoC currently rehouses every household of families with children within 30 days of becoming homeless that addresses both housing and service needs;**

**2. describe how the CoC addresses both housing and service needs to ensure families with children successfully maintain their housing once**

**assistance ends; and**  
**3. provide the organization name or position title responsible for overseeing the CoC’s strategy to rapidly rehouse families with children within 30 days of them becoming homeless. (limit 2,000 characters)**

The CoC has incorporated a two-pronged approach to rapidly rehouse families with children within 30 days. The first approach focuses on households experiencing homelessness due to short-term financial crisis. The strategies include 1) connect households to the Dept of Social Services to access all cash and non-cash benefits (i.e. SNAP, Public Assistance) 2) ensure households complete all housing subsidy apps (i.e. PHA) 3) build relationships with local landlords to negotiate manageable and appropriate lease agreements. The second approach focuses on households who present more stringent needs (i.e. those with limited/no income, survivors of DV, youth led families, those w/a disability). The strategy to rapidly rehouse these families include 1) prioritize chronically homeless families for PSH; 2) ensure a low barrier approach among housing providers; and 3) provide households with a menu of wrap-around services to address household needs (i.e. health/mental health, childcare, DV services, peer support). Similarly, the CoC has a two-pronged approach to address housing and service needs to ensure families maintain housing once assistance ends. For families with low barriers, the CoC makes referrals to community providers to ensure a system of supports that allow families to stabilize. Specific referrals include childcare, medical/mental healthcare, school-age Ed. programs, employment training, budgeting and financial literacy. Harder to serve families are assisted in completing action plans that establish short and long-term goals & are adjusted to mitigate risk post-assistance. The CoC also ensures a warm hand-off to ongoing housing support service programs and/or ongoing intensive case management programs, such as Health Homes (Medicaid-funded intensive case management). The Data and Goals Committee, which reports to the Board, oversees these strategies.

**3B-1b. Antidiscrimination Policies.**

**Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent housing (PSH and RRH)) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on any protected classes under the Fair Housing Act, and consistent with 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing.**

1. CoC conducts mandatory training for all CoC- and ESG-funded housing and services providers on these topics.	<input checked="" type="checkbox"/>
2. CoC conducts optional training for all CoC- and ESG-funded housing and service providers on these topics.	<input type="checkbox"/>
3. CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input checked="" type="checkbox"/>
4. CoC has worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within the CoC geographic area that might be out of compliance and has taken steps to work directly with those facilities to come into compliance.	<input checked="" type="checkbox"/>

**3B-1c. Unaccompanied Youth Experiencing Homelessness–Addressing Needs.**

**Applicants must indicate whether the CoC’s strategy to address the unique needs of unaccompanied youth experiencing homelessness who are 24 years of age and younger includes the following:**

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

**3B-1c.1. Unaccompanied Youth Experiencing Homelessness–Prioritization Based on Needs.**

**Applicants must check all that apply that describes the CoC’s current strategy to prioritize unaccompanied youth based on their needs.**

1. History of, or Vulnerability to, Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
2. Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
3. Unsheltered Homelessness	<input checked="" type="checkbox"/>
4. Criminal History	<input checked="" type="checkbox"/>
5. Bad Credit or Rental History	<input type="checkbox"/>

**3B-1d. Youth Experiencing Homelessness–Housing and Services Strategies.**

**Applicants must describe how the CoC increased availability of housing and services for:**

- 1. all youth experiencing homelessness, including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive; and**
  - 2. youth experiencing unsheltered homelessness including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive.**
- (limit 3,000 characters)**

The CoC’s strategy to provide new resources and/or more effectively use

existing resources to house and provide services for all homeless youth is multi-faceted: 1) increase collaboration with partners to enhance current services, ensuring a youth focus 2) secure additional funding by applying for federal/state resources to house and serve homeless youth and youth aging out of foster care and 3) prioritize youth within the Coordinated Entry (CE) system. The CoC participates in the Capital Region Advisory Board on Youth Homelessness (CRABYH), which conducts an annual Youth PIT Count and develops strategies to address youth homelessness. CRABYH enhances current services to ensure a youth focus through conducting trainings. For example, in May 2019 CRABYH hosted a workshop to emphasize the need to more effectively serve homeless youth (i.e. identified by the 2018 Youth PIT Count results) and support mainstream housing providers in understanding youth specific needs, how to incorporate providing for those needs into existing programs, and how to support homeless youth in navigating the homeless system. The CoC also encourages increased availability of resources for youth by encouraging local agencies to apply for additional funds to address youth homelessness, a major tenant of the CoC's Strategic Plan. For example, the CoC prioritizes youth projects for CoC Bonus funding through the Rank and Review process; and has supported applications for NYS's Empire State Supportive Housing Initiative (ESSHI) that will create additional PSH for youth. The CoC also prioritizes unaccompanied youth experiencing homelessness by awarding extra points to individuals 18-24 years old on the CE assessment, increasing opportunities for permanent housing. In an effort to increase the availability of housing and services for unsheltered youth, the CoC collaborates with street outreach teams to include outreach to areas known to be 'hotspots' for homeless youth.

**3B-1d.1. Youth Experiencing Homelessness—Measuring Effectiveness of Housing and Services Strategies.**

**Applicants must:**

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

In order to measure the noted strategies in question 3B-1d the CoC 1) will track provider participation in youth-focused trainings 2) tracks the amount of funding applied for to create additional youth-specific housing and services 3) tracks youth housing inventory data semi-annually and 4) annually conducts a youth-specific PIT Count. In order to track provider participation at youth-focused trainings hosted by the CoC, the CoC Board will review attendance reports semi-annually. The CoC Board reports monthly the number of grant applications submitted that would fund youth housing and services, tracked through letter of support requests. To calculate the effectiveness of securing additional funding, the CoC collaborates with the HMIS Lead to collect an accurate housing inventory of beds dedicated to homeless youth, as well as youth aging out of foster care, couch-surfing or otherwise unstably housed served by RHY-funded agencies. Finally, the CoC is part of a regional consortium that annually conducts a Youth PIT count to assess the extent of and inform strategies to

address youth homelessness. The measures developed by the CoC to calculate the effectiveness of strategies noted in 3B-1d include using HMIS, CE and PIT (general and youth) data to assess if youth homelessness is decreasing as a result of the CoC's efforts. Specifically, the CoC analyzes overall changes in the number of homeless youth and household composition. Additional analysis focuses on cause of homelessness, housing stability and the number of episodes homeless. The CoC believes these measures are the most appropriate methods for determining the effectiveness of the current strategies because 1) they ensure continued collaboration between youth providers and non-traditional providers and 2) provide real-time quantitative data on the amount of resources dedicated to youth compared to the extent of youth homelessness in the community.

### **3B-1e. Collaboration–Education Services.**

**Applicants must describe:**

- 1. the formal partnerships with:**
  - a. youth education providers;**
  - b. McKinney-Vento LEA or SEA; and**
  - c. school districts; and**
  
- 2. how the CoC collaborates with:**
  - a. youth education providers;**
  - b. McKinney-Vento Local LEA or SEA; and**
  - c. school districts.**

**(limit 2,000 characters)**

The CoC has established formal partnerships with youth education providers (e.g., Project Head Start and BOCES); the McKinney-Vento State Education Agency (SEA) and Local Education Agencies (LEAs) and the City of Troy School District to ensure the continued success of coordinating and identifying persons eligible for both homeless and educational services, and the provision of services. CoC member agency, Commission on Economic Opportunity (CEO) is the County Head Start Administrator and actively participates in all aspects of the CoC, including Membership, Coordinated Entry and Strategic Planning. In addition, the City of Troy McKinney Vento School Liaison attends and participates in the CoC's semi-annual Membership meetings and actively participated in the CoC's Strategic Planning process. Recognizing the vital role other partnerships play to ensure these efforts are successful, the CoC worked to develop relationships with other school district staff during the past year. For example, member agencies, such as St. Paul's Center, work with the local school districts to engage student associations to tutor children in shelter. Additionally, relationships forged between the Capital Region Advisory Board on Youth Homelessness and the school districts' McKinney Vento School Liaisons while conducting the annual youth Point-in-Time and compiling the annual Report on Youth Homelessness in the Capital Region also strengthen the continued efforts in the provision of youth services.

#### **3B-1e.1. Informing Individuals and Families Experiencing Homeless about Education Services Eligibility.**

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

The CoC has adopted policies and procedures within its Written Standards (see Other Attachment 1) to ensure all programs consistently and accurately inform individuals and families experiencing homelessness about available education services and related eligibility. CoC policy requires that providers serving households with children designate a specialized staff person as educational liaison to provide direct support to individuals and families; and to ensure there is no disruption in current education services for those entering shelter or transitioning from shelter into permanent housing. Specifically, educational liaisons are responsible for ensuring that children continue to be enrolled in school and connected to age-appropriate services in the community (e.g., Project Head Start, Individuals with Disabilities Education Act Part C: Infant & Toddler Program, McKinney Vento Education Services). Educational liaisons are expected to connect and work with homeless individuals, families, schools, and education programs to ensure the most appropriate educational services are made available and that families are able to overcome any barriers to accessing those educational services. For example, staff are required to coordinate with McKinney-Vento Liaisons in families' existing school districts to coordinate transportation services and ongoing enrollment. Additionally, shelters and housing providers actively monitor school attendance and whenever possible, arrange for tutoring support.

**3B-1e.2. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.**

**Applicant must indicate whether the CoC has an MOU/MOA or other types of agreements with listed providers of early childhood services and supports and may add other providers not listed.**

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

**3B-2. Active List of Veterans Experiencing Homelessness.**

**Applicant must indicate whether the CoC uses an active list or by-name list to identify all veterans experiencing homelessness in the CoC.** Yes

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

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

**3B-2b. Housing First for Veterans.**

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

**3B-3. Racial Disparity Assessment. Attachment Required.**

**Applicants must:**  
 1. select all that apply to indicate the findings from the CoC’s Racial Disparity Assessment; or  
 2. select 7 if the CoC did not conduct a Racial Disparity Assessment.

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

**3B-3a. Addressing Racial Disparities.**

**Applicants must select all that apply to indicate the CoC’s strategy to address any racial disparities identified in its Racial Disparities Assessment:**

1. The CoC is ensuring that staff at the project level are representative of the persons accessing homeless services in the CoC.	<input type="checkbox"/>
2. The CoC has identified the cause(s) of racial disparities in their homeless system.	<input type="checkbox"/>
3. The CoC has identified strategies to reduce disparities in their homeless system.	<input checked="" type="checkbox"/>
4. The CoC has implemented strategies to reduce disparities in their homeless system.	<input type="checkbox"/>
5. The CoC has identified resources available to reduce disparities in their homeless system.	<input type="checkbox"/>
6: The CoC did not conduct a racial disparity assessment.	<input type="checkbox"/>



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

**Instructions:**

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

**Resources:**

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notice>

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

### 4A-1. Healthcare—Enrollment/Effective Utilization

**Applicants must indicate, for each type of healthcare listed below, whether the CoC assists persons experiencing homelessness with enrolling in health insurance and effectively utilizing Medicaid and other benefits.**

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

#### 4A-1a. Mainstream Benefits.

**Applicants must:**

- 1. describe how the CoC systematically keeps program staff up to date regarding mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within the geographic area;**
- 2. describe how the CoC disseminates the availability of mainstream resources and other assistance information to projects and how often;**
- 3. describe how the CoC works with projects to collaborate with healthcare organizations to assist program participants with enrolling in**

- health insurance;**  
**4. describe how the CoC provides assistance with the effective utilization of Medicaid and other benefits; and**  
**5. provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy for mainstream benefits.**  
**(limit 2,000 characters)**

The CoC systematically keeps program staff up to date regarding mainstream resources available for program participants (e.g. Food Stamps, SSI, TANF, substance abuse programs) by facilitating monthly Membership Meetings where agencies provide resource/programmatic updates. Mainstream community providers are invited to provide program spotlights, increasing the breadth of knowledge of community resources available for clients among CoC providers. Examples of agencies who provide mainstream benefits and are invited to provide program spotlights include: food pantries, DV, youth, and veteran providers, mental health and substance abuse programs, Health Homes/Medicaid Case Management programs, refugee services, and programs addressing sex trafficking. It is through hosting such speakers at monthly Membership Meetings that the CoC disseminates the availability of mainstream resources and other assistance information to projects. The CoC collaborates with healthcare organizations to assist program participants with enrolling in health insurance by hosting Health Homes/Medicaid Case Management programs (i.e. CDPHP) at Membership Meetings where they present on eligibility criteria, plan options, trainings on health literacy, and accessing enrollment/plan support. The CoC provides assistance with the effective utilization of Medicaid and other benefits by 1) conducting system level outreach to the Departments of Social Service (DSS) and 2) promoting the SOAR model. Specifically, the CoC has engaged DSS administration in order to brainstorm methods for better collaboration to ensure clients are able to apply for and receive mainstream benefits, including Medicaid, in an efficient and effective manner. The CoC also actively promotes the SOAR model and trainings hosted by the regional SOAR TA provider during Membership meetings. The Systems Committee, which reports to the Board, is in charge of overseeing the CoC’s strategy for mainstream benefits.

**4A-2. Lowering Barriers to Entry Data:**

**Applicants must report:**

1. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition.	17
2. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	17
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

**4A-3. Street Outreach.**

**Applicants must:**

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

- uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;**  
**2. state whether the CoC’s Street Outreach covers 100 percent of the CoC’s geographic area;**  
**3. describe how often the CoC conducts street outreach; and**  
**4. describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.**  
**(limit 2,000 characters)**

The CoC’s street outreach efforts to ensure all persons experiencing unsheltered homelessness are identified and engaged include 1) quickly and effectively identifying all populations of people experiencing unsheltered homelessness through local provider trainings, outreach and support, 2) utilizing client-centered, trauma-informed approaches when engaging the unsheltered homeless and 3) assisting households to obtain emergency housing and conducting CE assessments. The CoC partners with Joseph’s House’s Street Outreach Team, which conducts outreach to unsheltered homeless individuals, with a focus on the chronically homeless. In addition, the CoC connects with the VA outreach program, Health Care for Homeless Veterans (HCHV), Soldier On and Supportive Services for Veteran’s Families (SSVF). Through a variety of programs, services, and referrals, these outreach teams work to ensure that homeless veterans are identified and connected to VA services. The CoC also has a relationship with County Mental Health who administers the Mobile Crisis Team, which provides street outreach to persons with mental health crises. Through these programs, the CoC provides street outreach throughout 100% of the CoC geographic area but focuses services within the City of Troy. Outreach is conducted daily with fluctuating day/evening hours. The CoC tailors its street outreach to persons least likely to request assistance by 1) hiring staff with lived experience to conduct outreach, 2) determining locations most visited by the unsheltered, 3) building trust over time through consistent engagement, and 4) providing translation services via staff or a translation line to address barriers related to communication.

**4A-4. RRH Beds as Reported in HIC.**

**Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2018 and 2019.**

	2018	2019	Difference
RRH beds available to serve all populations in the HIC	158	218	60

**4A-5. Rehabilitation/Construction Costs–New No Projects.**

**Applicants must indicate whether any new project application the CoC ranked and submitted in its CoC Priority Listing in the FY 2019 CoC Program Competition is requesting \$200,000 or more in funding for housing rehabilitation or new construction.**

**4A-6. Projects Serving Homeless under Other Federal Statutes.** No

**Applicants must indicate whether the CoC is requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other federal statutes.**

## Submission Summary

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

<b>Page</b>	<b>Last Updated</b>
<b>1A. Identification</b>	09/16/2019
<b>1B. Engagement</b>	09/19/2019
<b>1C. Coordination</b>	09/19/2019
<b>1D. Discharge Planning</b>	No Input Required
<b>1E. Local CoC Competition</b>	09/19/2019
<b>1F. DV Bonus</b>	09/23/2019
<b>2A. HMIS Implementation</b>	09/16/2019
<b>2B. PIT Count</b>	09/19/2019
<b>3A. System Performance</b>	09/24/2019
<b>3B. Performance and Strategic Planning</b>	09/19/2019
<b>4A. Mainstream Benefits and Additional Policies</b>	09/19/2019
<b>Submission Summary</b>	No Input Required