

4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

Attachments must match the questions they are associated with.

Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.

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

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	CE Assessment Tool	11/12/2021
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	11/08/2021
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	11/02/2021
1E-1. Local Competition Announcement	Yes	Local Competition...	11/03/2021
1E-2. Project Review and Selection Process	Yes	Project Review an...	11/12/2021
1E-5. Public Posting–Projects Rejected-Reduced	Yes	Public Posting - ...	11/08/2021
1E-5a. Public Posting–Projects Accepted	Yes	Public Posting–Pr...	11/01/2021
1E-6. Web Posting–CoC-Approved Consolidated Application	Yes	Web Posting-CoC A...	11/09/2021
3A-1a. Housing Leveraging Commitments	No	Housing leveragin...	11/03/2021
3A-2a. Healthcare Formal Agreements	No	Healthcare formal...	11/03/2021
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: CE Assessment Tool

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Local Competition Announcement

Attachment Details

Document Description: Project Review and Selection Process

Attachment Details

Document Description: Public Posting - Projects Rejected & Reduced

Attachment Details

Document Description: Public Posting–Projects Accepted

Attachment Details

Document Description: Web Posting-CoC Approved Consolidated Application

Attachment Details

Document Description: Housing leveraging agreement

Attachment Details

Document Description: Healthcare formal agreements

Attachment Details

Document Description:

1C-14: Centralized or Coordinated Entry System–Assessment Tool.

This attachment details the Coordinated Entry (CE) Intakes for NY-608. It includes the following:

1. CE Intake: This is the Individual CE Assessment and Intake Form used by NY-608.
2. CE Policies and Procedures: This document governs the CE program, including the prioritization and outreach plan to reach those persons least likely to apply.
3. NY-608's Written Standards, Coordinated Entry Prioritization Section: This document details how the CE program prioritizes people most in need of assistance.

1C-14: Centralized or Coordinated Entry System-Assessment Tool.

1. **CE Intake:** This is the CE Assessment and Intake Form used by NY-608.

ULSTER CONTINUUM OF CARE FULL ASSESSMENT

ARE YOU SEEKING HOUSING SERVICES? <input type="checkbox"/> No <input type="checkbox"/> Yes	HAVE YOU PREVIOUSLY COMPLETED AN APPLICATION FOR ASSISTANCE THROUGH COORDINATED ENTRY? <input type="checkbox"/> No <input type="checkbox"/> Yes
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IF CLIENT IS NOT SEEKING HOUSING SERVICES, A HOUSING ASSESSMENT DOES NOT NEED TO BE COMPLETED

STAFF MEMBER COMPLETING ASSESSMENT		AGENCY NAME
STAFF MEMBER'S EMAIL		PHONE NUMBER
		FAX NUMBER
CLIENT PHONE NUMBER		

PREVENTION STOP HERE – REFER CLIENT TO APPROPRIATE PREVENTION SERVICES AND SEND THIS FORM TO THE APPROPRIATE CE COORDINATOR

HMIS INFORMATION

*INTAKE DATE / /		*FIRST NAME	*LAST NAME (and Suffix)
*NAME DATA QUALITY <input type="checkbox"/> Full Name Reported <input type="checkbox"/> Partial Name, Street Name or Code Name Reported <input type="checkbox"/> Data Not Collected <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused		ALIAS	
*SOCIAL SECURITY NUMBER (enter "9" for any missing numbers in an Approximate or Partial SSN) - - - - - - - - - -		*SSN DATA QUALITY <input type="checkbox"/> Full SSN Reported <input type="checkbox"/> Approximate or Partial SSN Reported <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
*GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Trans Male(FTM) <input type="checkbox"/> Trans Female(MTF) <input type="checkbox"/> Gender Non-Conforming <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected			
*BIRTHDATE / /		*BIRTHDATE DATA QUALITY <input type="checkbox"/> Full DOB Reported <input type="checkbox"/> Approximate or Partial DOB Reported <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
*ETHNICITY <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Data Not Collected <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused			
*RACE (choose all that apply) <input type="checkbox"/> American Indian/Native Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Data Not Collected <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White			
*DO YOU HAVE A PHONE NUMBER AT WHICH YOU CAN BE REACHED? <input type="checkbox"/> No <input type="checkbox"/> Yes (SEE RIGHT) IF YES: PLEASE PROVIDE YOUR PHONE NUMBER WITH AREA CODE () - - - - -			

*PRIOR LIVING SITUATION

Based on the client's living situation **the night before project entry**, record responses in **one (1)** section:
Homeless Situation, Institutional Situation, Transitional/Permanent Situation, OR Unknown (**only** if necessary)

HOMELESS SITUATIONS:	
TYPE OF RESIDENCE (THE NIGHT BEFORE PROJECT ENTRY) <input type="checkbox"/> Place not meant for human habitation (vehicle, abandoned building, bus/train/subway station etc) <input type="checkbox"/> Emergency shelter , including hotel or motel paid for with emergency shelter voucher <input type="checkbox"/> Safe Haven <input type="checkbox"/> Interim Housing	*LENGTH OF STAY IN PREVIOUS PLACE <input type="checkbox"/> 1 night or less <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> 2 to 6 nights <input type="checkbox"/> Client Refused <input type="checkbox"/> 1 week or more, but less than 1 month <input type="checkbox"/> Data Not Collected <input type="checkbox"/> 1 month or more, but less than 90 days <input type="checkbox"/> 90 days or more, but less than 1 year <input type="checkbox"/> 1 year or longer
*APPROXIMATE DATE HOMELESSNESS STARTED: / /	
*REGARDLESS OF WHERE THEY STAYED LAST NIGHT NUMBER OF TIMES ON THE STREETS, IN ES, OR SH IN THE PAST THREE YEARS <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4+ <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	*TOTAL NUMBER OF MONTHS HOMELESS ON THE STREETS, IN ES, OR IN SH IN THE PAST THREE YEARS <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> More than 12 <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected

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OR

INSTITUTIONAL SITUATIONS:		
TYPE OF RESIDENCE (THE NIGHT BEFORE PROJECT ENTRY)		*LENGTH OF STAY IN PREVIOUS PLACE
<input type="checkbox"/> Foster care home or foster care group home <input type="checkbox"/> Hospital or other residential non-psychiatric medical facility <input type="checkbox"/> Jail , prison or juvenile detention facility <input type="checkbox"/> Long-term care facility or nursing home <input type="checkbox"/> Psychiatric hospital or other psychiatric facility <input type="checkbox"/> Substance abuse treatment facility or detox center		<input type="checkbox"/> 1 night or less <input type="checkbox"/> 2 to 6 nights <input type="checkbox"/> 1 week or more, but less than 1 month <input type="checkbox"/> 1 month or more, but less than 90 days <input type="checkbox"/> 90 days or more, but less than 1 year <input type="checkbox"/> 1 year or longer <input type="checkbox"/> <i>Client Doesn't Know</i> <input type="checkbox"/> <i>Client Refused</i> <input type="checkbox"/> <i>Data Not Collected</i>
DID THE CLIENT STAY LESS THAN 90 DAYS		IF YES: THE NIGHT BEFORE THAT, DID THEY STAY ON THE STREETS, ES, or SH?
<input type="checkbox"/> No <input type="checkbox"/> Yes		<input type="checkbox"/> No <input type="checkbox"/> Yes
IF YES TO 'ON THE NIGHT BEFORE DID YOU STAY ON THE STREETS, ES OR SH?' PROVIDE DETAILS OF PREVIOUS HOMELESSNESS:		
*APPROXIMATE DATE HOMELESSNESS STARTED: ____/____/____		
*REGARDLESS OF WHERE THEY STAYED LAST NIGHT NUMBER OF TIMES ON THE STREETS, IN ES, OR SH IN THE PAST THREE YEARS		*TOTAL NUMBER OF MONTHS HOMELESS ON THE STREETS, IN ES, OR IN SH IN THE PAST THREE YEARS
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4+ <input type="checkbox"/> <i>Client Doesn't Know</i> <input type="checkbox"/> <i>Client Refused</i> <input type="checkbox"/> <i>Data Not Collected</i>		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> More than 12 <input type="checkbox"/> <i>Client Doesn't Know</i> <input type="checkbox"/> <i>Client Refused</i> <input type="checkbox"/> <i>Data Not Collected</i>

OR

TRANSITIONAL AND PERMANENT HOUSING SITUATIONS:		
TYPE OF RESIDENCE (THE NIGHT BEFORE PROJECT ENTRY)		*LENGTH OF STAY IN PREVIOUS PLACE
<input type="checkbox"/> Hotel or Motel paid for without emergency shelter voucher <input type="checkbox"/> Owned by client, no ongoing subsidy <input type="checkbox"/> Owned by client WITH ongoing subsidy <input type="checkbox"/> Permanent housing (other than RRH) for formerly homeless persons (PSH, HOPWA) <input type="checkbox"/> Rental by client, no ongoing subsidy <input type="checkbox"/> Rental by client with GPD TIP subsidy <input type="checkbox"/> Rental by client with VASH subsidy		<input type="checkbox"/> 1 night or less <input type="checkbox"/> 2 to 6 nights <input type="checkbox"/> 1 week or more, but less than 1 month <input type="checkbox"/> 1 month or more, but less than 90 days <input type="checkbox"/> 90 days or more, but less than 1 year <input type="checkbox"/> 1 year or longer <input type="checkbox"/> <i>Client Doesn't Know</i> <input type="checkbox"/> <i>Client Refused</i> <input type="checkbox"/> <i>Data Not Collected</i>
<input type="checkbox"/> Rental by client with other housing subsidy (including RRH) <input type="checkbox"/> Residential project or halfway house with no homeless criteria <input type="checkbox"/> Staying or in a family member's room, apartment or house <input type="checkbox"/> Staying or in a friend's room, apartment or house <input type="checkbox"/> Transitional housing for homeless persons (incl. homeless youth)		
DID YOU STAY LESS THAN 7 DAYS?		IF YES: THE NIGHT BEFORE THAT, DID THEY STAY ON THE STREETS, ES, or SH?
<input type="checkbox"/> No <input type="checkbox"/> Yes		<input type="checkbox"/> No <input type="checkbox"/> Yes
IF YES TO 'ON THE NIGHT BEFORE DID YOU STAY ON THE STREETS, ES OR SH?' PROVIDE DETAILS OF PREVIOUS HOMELESSNESS:		
*APPROXIMATE DATE HOMELESSNESS STARTED: ____/____/____		
*REGARDLESS OF WHERE THEY STAYED LAST NIGHT NUMBER OF TIMES ON THE STREETS, IN ES, OR SH IN THE PAST THREE YEARS		*TOTAL NUMBER OF MONTHS HOMELESS ON THE STREETS, IN ES, OR IN SH IN THE PAST THREE YEARS
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4+ <input type="checkbox"/> <i>Client Doesn't Know</i> <input type="checkbox"/> <i>Client Refused</i> <input type="checkbox"/> <i>Data Not Collected</i>		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> More than 12 <input type="checkbox"/> <i>Client Doesn't Know</i> <input type="checkbox"/> <i>Client Refused</i> <input type="checkbox"/> <i>Data Not Collected</i>

OR

UNKNOWN (ONLY IF NECESSARY)		
TYPE OF RESIDENCE (THE NIGHT BEFORE PROJECT ENTRY)		
<input type="checkbox"/> <i>Client doesn't know</i> <input type="checkbox"/> <i>Client refused</i> <input type="checkbox"/> <i>Data not collected</i>		

***CURRENT LIVING SITUATION**

Based on the client's living situation **tonight**, record responses in **one (1)** section:
 Homeless Situation, Institutional Situation, Transitional/Permanent Situation, OR Unknown (**only** if necessary)

HOMELESS SITUATIONS:
TYPE OF RESIDENCE (TONIGHT)
<input type="checkbox"/> Place not meant for human habitation (vehicle, abandoned building, bus/train/subway station etc) <input type="checkbox"/> Emergency shelter , including hotel or motel paid for with emergency shelter voucher <input type="checkbox"/> Safe Haven <input type="checkbox"/> Interim Housing

OR

INSTITUTIONAL SITUATIONS:
TYPE OF RESIDENCE (TONIGHT)
<input type="checkbox"/> Foster care home or foster care group home <input type="checkbox"/> Hospital or other residential non-psychiatric medical facility <input type="checkbox"/> Jail , prison or juvenile detention facility
<input type="checkbox"/> Long-term care facility or nursing home <input type="checkbox"/> Psychiatric hospital or other psychiatric facility <input type="checkbox"/> Substance abuse treatment facility or detox center

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IS CLIENT GOING TO LEAVE WITHIN 14 DAYS? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	HAS A SUBSEQUENT RESIDENCE BEEN IDENTIFIED? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected
DOES INDIVIDUAL OR FAMILY HAVE RESOURCES OR SUPPORT NETWORKS TO OBTAIN OTHER PERMANENT HOUSING? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
HAS THE CLIENT HAD A LEASE OR OWNERSHIP INTEREST IN A PERMANENT HOUSING UNIT IN THE LAST 60 DAYS? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
HAS THE CLIENT MOVED 2 TIMES OR MORE IN THE LAST 60 DAYS? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	

OR

TRANSITIONAL AND PERMANENT HOUSING SITUATIONS:	
TYPE OF RESIDENCE (TONIGHT)	
<input type="checkbox"/> Hotel or Motel paid for without emergency shelter voucher <input type="checkbox"/> Owned by client, no ongoing subsidy <input type="checkbox"/> Owned by client WITH ongoing subsidy <input type="checkbox"/> Permanent housing (other than RRH) for formerly homeless persons (PSH, HOPWA) <input type="checkbox"/> Rental by client, no ongoing subsidy <input type="checkbox"/> Rental by client with VASH subsidy	<input type="checkbox"/> Rental by client with GPD TIP subsidy <input type="checkbox"/> Rental by client with other housing subsidy (including RRH) <input type="checkbox"/> Residential project or halfway house with no homeless criteria <input type="checkbox"/> Staying or in a family member's room, apartment or house <input type="checkbox"/> Staying or in a friend's room, apartment or house <input type="checkbox"/> Transitional housing for homeless persons (incl. homeless youth)
IS CLIENT GOING TO LEAVE WITHIN 14 DAYS? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	HAS A SUBSEQUENT RESIDENCE BEEN IDENTIFIED? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected
DOES INDIVIDUAL OR FAMILY HAVE RESOURCES OR SUPPORT NETWORKS TO OBTAIN OTHER PERMANENT HOUSING? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
HAS THE CLIENT HAD A LEASE OR OWNERSHIP INTEREST IN A PERMANENT HOUSING UNIT IN THE LAST 60 DAYS? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
HAS THE CLIENT MOVED 2 TIMES OR MORE IN THE LAST 60 DAYS? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	

OR

UNKNOWN (ONLY IF NECESSARY) <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data not collected	LIVING SITUATION VERIFIED BY (NAME OF AGENCY)
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***INCOME & SOURCES / NON-CASH BENEFITS**

*INCOME FROM ANY SOURCE <input type="checkbox"/> No <input type="checkbox"/> Yes (SEE BELOW) <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
IF YES: CHECK & FILL IN MONTHLY AMOUNT FOR ALL THAT APPLY	
<input type="checkbox"/> Earned Income \$ _____ <input type="checkbox"/> SSI \$ _____ <input type="checkbox"/> VA Service-Connected Disability Compensation \$ _____ <input type="checkbox"/> Private Disability Insurance \$ _____ <input type="checkbox"/> TANF \$ _____ <input type="checkbox"/> Retirement from SSA \$ _____ <input type="checkbox"/> Child Support \$ _____ <input type="checkbox"/> Other \$ _____	<input type="checkbox"/> Unemployment Insurance \$ _____ <input type="checkbox"/> SSDI \$ _____ <input type="checkbox"/> VA Non-Service Connected Disability Pension \$ _____ <input type="checkbox"/> Worker's Compensation \$ _____ <input type="checkbox"/> General Public Assistance \$ _____ <input type="checkbox"/> Pension or Retirement from former job \$ _____ <input type="checkbox"/> Alimony or Other Spousal Support \$ _____
*NON-CASH BENEFITS FROM ANY SOURCE <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
IF YES: CHECK ALL THAT APPLY	
<input type="checkbox"/> SNAP (Food Stamps) <input type="checkbox"/> Special Supplemental Nutrition Program for Women, Infants and Children <input type="checkbox"/> TANF Child Care Services <input type="checkbox"/> TANF Transportation Service	<input type="checkbox"/> Other TANF Funded Svcs

***HEALTH INSURANCE / DISABLING CONDITIONS**

*COVERED BY HEALTH INSURANCE <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
IF YES: CHECK ALL THAT APPLY	
MEDICAID <input type="checkbox"/> No <input type="checkbox"/> Yes State Children's Health Insurance Program <input type="checkbox"/> No <input type="checkbox"/> Yes Employer provided Health insurance <input type="checkbox"/> No <input type="checkbox"/> Yes Private Pay Health Insurance <input type="checkbox"/> No <input type="checkbox"/> Yes Indian Health Services <input type="checkbox"/> No <input type="checkbox"/> Yes	MEDICARE <input type="checkbox"/> No <input type="checkbox"/> Yes VA Medical Services <input type="checkbox"/> No <input type="checkbox"/> Yes Health ins. Via COBRA <input type="checkbox"/> No <input type="checkbox"/> Yes State Health Ins. Adults <input type="checkbox"/> No <input type="checkbox"/> Yes

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*PHYSICAL DISABILITY		IF YES: EXPECTED TO BE OF LONG-CONTINUED & INDEFINITE DURATION AND SUBSTANTIALLY IMPAIRS ABILITY TO LIVE INDEPENDENTLY?	
<input type="checkbox"/> No <input type="checkbox"/> Yes (SEE RIGHT) <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
*DEVELOPMENTAL DISABILITY			
<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected			
*CHRONIC HEALTH CONDITION		IF YES: EXPECTED TO BE OF LONG-CONTINUED & INDEFINITE DURATION AND SUBSTANTIALLY IMPAIRS ABILITY TO LIVE INDEPENDENTLY?	
<input type="checkbox"/> No <input type="checkbox"/> Yes (SEE RIGHT) <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
*HIV/AIDS			
<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected			
*MENTAL HEALTH PROBLEM		IF YES: EXPECTED TO BE OF LONG-CONTINUED & INDEFINITE DURATION AND SUBSTANTIALLY IMPAIRS ABILITY TO LIVE INDEPENDENTLY?	
<input type="checkbox"/> No <input type="checkbox"/> Yes (SEE RIGHT) <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	
*SUBSTANCE ABUSE PROBLEM		IF YES: EXPECTED TO BE OF LONG-CONTINUED & INDEFINITE DURATION AND SUBSTANTIALLY IMPAIRS ABILITY TO LIVE INDEPENDENTLY?	
<input type="checkbox"/> No <input type="checkbox"/> Yes, Alcohol (SEE RIGHT) <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Yes, Drug (SEE RIGHT) <input type="checkbox"/> Client Refused <input type="checkbox"/> Yes, Both (SEE RIGHT) <input type="checkbox"/> Data Not Collected		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	

*** DV STATUS**

*DOMESTIC ABUSE VICTIM/SURVIVOR			
<input type="checkbox"/> No <input type="checkbox"/> Yes (SEE BELOW) <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected			
IF YES: WHEN EXPERIENCE OCCURRED		IF YES: ARE YOU CURRENTLY FLEEING?	
<input type="checkbox"/> Within the past 3 months <input type="checkbox"/> 3 to 6 months ago	<input type="checkbox"/> From 6 to 12 months ago <input type="checkbox"/> More than a year ago	<input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected
DO YOU NEED A CONFIDENTIAL LOCATION TO STAY?			
<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected			

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VULNERABILITY INDEX SCORING		
	SCORE	SUBTOTAL
Age 18-24	1	
Age over 60	1	
Chronically homeless: Homeless for over one year or, Multiple episodes within last 3 years	0	
Exiting institutional setting	1	
Survivor of Domestic Violence	1	
Fleeing domestic violence	2	
Is a veteran	1	
Limited or No income, (below poverty level)	1	
Criminal history/current probation/parolee/Juvenile justice/Family Court/	1	
Limitations where the person can live due to disabilities	1	
Disabling Condition		
Physical disability	1	
Chronic health condition	1	
Mental health condition	1	
Substance use disorder	1	
Developmental disability	1	
HIV/AIDS	1	
Client has a serious underlying medical condition and may be at higher risk for severe illness from COVID-19 due to the following: chronic lung disease, moderate to severe asthma, severe obesity, diabetes, immunocompromised, chronic kidney disease, and/or liver disease	1	
Local Priorities		
Receiving services from APS/CPS/Foster Care	1	
Household member pregnant	1	
This person is not able to live independently without supports	1	
Signature:	Date:	

---END---

PROCEED CRHMIS INCLUSION DISCLOSURE AND RELEASE OF INFORMATION

CRHMIS CLIENT INCLUSION DISCLOSURE FOR COORDINATED ENTRY PROJECTS

PURPOSE: To inform clients of HMIS data entry and for clients to authorize or modify data sharing preferences within the HMIS for the project listed below:

PROJECT: NY -608 Ulster Coordinated Entry
CONTACT NUMBER:

INSTRUCTIONS: This form must be completed for every independent adult (18 years of age and over) and every unaccompanied minor **PRIOR** to data collection and entry into the HMIS at all CRHMIS-participating providers. This form also covers any household members under the client's guardianship, which includes all minors (persons under 18 years of age) and any incapacitated/disabled adults. The client is to be given pages 1 and 2 after completion.

HMIS PRIVACY NOTICE

This Notice applies to all CRHMIS-Participating Providers and addresses how information about clients may be used and disclosed at Providers as well as client rights over their information. This Notice may be amended at any time, and amendments may affect information obtained before the date of the amendment.

A. HMIS DATA COLLECTION & PURPOSE

A Homeless Management Information System (HMIS) is a local information technology system used to collect data on the housing and services provided to homeless individuals and families and persons at risk of homelessness. Providers participating in an HMIS are required to collect universal data elements from all clients, including Personally Identifying Information, demographic characteristics, and residential history. This information is critical for providers and communities to better understand the extent and nature of homelessness at a local level, evaluate program effectiveness, and improve future housing and service provision. Some providers are also required by their funders to obtain certain additional information to assess services, to determine eligibility, and to monitor outcomes. Most federally-funded homeless service providers are required to participate and record the clients they serve in an HMIS.

This agency is an HMIS-participating homeless service provider ("CRHMIS Provider"), meaning we collect and enter information about the persons we serve in the private and secure CARES Regional HMIS (CRHMIS) database, the local HMIS for this community. There are firm policies and procedures in place to protect against unauthorized disclosure of any personal information collected, and this information is critical to obtain an accurate picture of the homeless population we serve and for this agency to continue to offer you the service(s) you are accessing today. We only collect information deemed appropriate and necessary for program operation or information that is required by law or by the organizations that fund this program. We do not need your consent to enter a record of your visit into the CRHMIS, but you may refuse to have your personal identifying information within this record and still be eligible to receive services.

If you have any concerns or questions about the information provided above, please speak to an intake worker.

B. PERMITTED DATA USES AND DISCLOSURES

The CRHMIS is designed to protect the confidentiality of personal information while allowing for reasonable, responsible, and limited uses and disclosures of data, including Personally Identifying Information (PII is any information that can be used to identify a particular individual, including a client's name, Social Security Number, and Date of Birth). Once collected, we (as a CRHMIS Provider) have obligations about how these data may be used and disclosed (**uses** are internal activities for which providers interact with client PII; **disclosures** occur when providers share PII with an external entity). **CRHMIS Providers are limited to the following circumstances for the use and disclosure of HMIS PII:**

HUD required:

- (1) Client access to their information; and
- (2) Disclosures for oversight of compliance with HMIS privacy and security standards.

HUD permitted:

- (3) To provide or coordinate services to an individual;
- (4) For functions related to payment or reimbursement for services;
- (5) To carry out administrative functions, including but not limited to legal, audit, personnel, oversight and management functions;
- (6) For creating de-identified reporting from PII;
- (7) Uses and disclosures required by law;
- (8) Uses and disclosures to avert a serious threat to health or safety;
- (9) Uses and disclosures about victims of abuse, neglect or domestic violence;
- (10) Uses and disclosures for research purposes; and
- (11) Uses and disclosures for law enforcement purposes.

A client must provide prior written consent for any other use or disclosure of HMIS PII.

CRHMIS Providers must also ensure that **any use or disclosure does not violate other applicable local, state, or federal laws.**

Therefore, some CRHMIS Providers **may have more restrictive privacy policies**, often dependent upon funding source or the nature of a projects. Specific, per-project information regarding data use and disclosure can be obtained upon request.

C. CLIENT CONTROL OVER DATA

The CRHMIS recognizes every independent legal adult (person over 17 years of age) as the owner of all information about themselves, and any parent, legal guardian, or legal power of attorney as the designated owner of all information about any household members under their guardianship (all minors and any incapacitated/disabled adults).

By seeking assistance from this CRHMIS Provider and consenting to your personal information being entered into a record within the CRHMIS, you transfer governance responsibility over your CRHMIS record to us, and we are responsible for handling your record in accordance with CRHMIS privacy policies and any applicable federal, state, or local requirements. You retain ownership of your information within your CRHMIS record, and as owner **you have the following rights, in general:**

- » **Refusal:** to refuse to answer a question you do not feel comfortable with and not have it recorded within the CRHMIS;
- » **Access/Correction:** to request and view a copy of your project information record within the CRHMIS from your provider, including those who have accessed and/or edited your record, and to request corrections to that record;
- » **Grievance:** to ask questions of or submit grievances to your provider regarding privacy and security policies and practices;
- » **Anonymized Record:** to request that your provider anonymize your personal data record within the CRHMIS; and
- » **Optional Data Sharing:** to choose if your information is shared outside of the CRHMIS with researchers and other providers, and to make this decision at each project you receive services from. (Please note that if you decide NOT to data share, it does not prohibit the project from entering your data into the CRHMIS – it prohibits the sharing of your data as outlined on the consent form).

CRHMIS Providers reserve the following exceptions to the above: (1) Provider Right to Deny Review: if information is compiled in reasonable anticipation of litigation or comparable proceedings; if information about another individual other than the participating provider staff would be disclosed; if information was obtained under a promise of confidentiality other than a promise from this provider and disclosure would reveal the sources of the information; or if the disclosure of information would be reasonably likely to endanger the physical safety of any individual; and (2) Provider Right to Deny Access/Correction: in response to repeated or harassing requests.

D. RESPONSIBILITY TO PROTECT DATA

CARES of NY, Inc. (CARES) is the System Administrator of the CRHMIS. The CRHMIS uses Foothold Technology's AWARDS software application and database, which is maintained in compliance with all federal standards set forth in the Health Insurance Portability and Accountability Act (HIPAA) and its subsequent legislation – the standards required to protect medical records – as well as U.S. Department of Housing and Urban Development HMIS standards.

The CARES CRHMIS staff take the protection of client confidentiality and privacy seriously. **The following security measures, among others, are in place to ensure that your information is protected:**

- » **System Security:** HMIS data is encrypted and securely transmitted from Providers to the HMIS database, extensive procedures are in place to prevent unauthorized access, and the entire HMIS system and database is protected at the highest level of security for health data;
- » **Access:** Only CARES CRHMIS staff and staff at providers may receive authorization to access the CRHMIS, and authorization requires comprehensive initial training and annual privacy and security training thereafter;
- » **Confidentiality Agreements:** Every CRHMIS Provider and every person authorized to read or enter information into the CRHMIS signs an agreement every year that includes: (1) commitments to maintain the confidentiality of all CRHMIS information; (2) commitments to comply with all security measures in compliance with federal HMIS requirements and any applicable federal, state, or local laws; and (3) penalties for violation of the agreement;
- » **Monitoring:** Annual monitoring is conducted for CRHMIS providers to ensure compliance with privacy and security policies; and
- » **Reporting:** Published CRHMIS reports are comprised of aggregate data only, and never contain any client-level or identifying (PII) data.

IMPORTANT INFORMATION FOR ALL CLIENTS – PLEASE READ

If you do not understand any of the information within this form, you may ask your intake worker for further explanation or an alternate format.

You may **keep the first 2 pages** of this form (containing the HMIS Privacy Notice) for your records.

You may request a copy of any participating provider or CRHMIS policies from your intake worker. Further information regarding CRHMIS privacy and security is also available in the CRHMIS Policies and Procedures (accessible online at www.caresny.org/).

You may contact your participating provider regarding any of your rights as listed above, including if you feel that any of these rights have been violated. If your provider's response does not satisfy you, you may then contact the CRHMIS directly at hmis@caresny.org or (518) 489-4130.

The CRHMIS has moved from *inferred consent* (a posted sign) to an *inclusion disclosure* for the HMIS. **No consumer consent is required by the CRHMIS to enter consumer data.** This disclosure replaces the posted sign but fulfills the same purpose. Consumers are asked to initial that they received the information. This is in addition to any agency specific or CoC specific forms that may be presented upon intake.

While individual agencies and projects may have their own, overriding policies, refusing to initial the inclusion disclosure does **NOT** indicate a refusal to be included in the HMIS and does not automatically disqualify consumers from receiving services from the agency or project; agency and CoC policy regarding how to handle that situation should still be followed as it has been in past years.

E. ACKNOWLEDGEMENT OF INCLUSION

No client consent is required to enter client data from provider forms into the CRHMIS, including personally identifying information. All Protected Identifying Information (PII) entered into the HMIS for the purpose of Coordinated Entry may be shared with other participating providers through the HMIS to better serve your needs and streamline the intake process. Additional sharing of your PII will not happen without agreeing through the consent below.

To show you are aware of this, we ask you to initial below.

** _____ Please initial to indicate that you have read (or been read) and understand the above information.

Please indicate method by which acknowledgement was received.

- Phone
- In Person

IMPORTANT - CLIENT IS TO BE GIVEN PAGES 1 AND 2

1C-14: Centralized or Coordinated Entry System–Assessment Tool.

2. **CE Policies and Procedures:** This document governs the CE program, including the prioritization and outreach plan to reach those persons least likely to apply.

**Ulster County Continuum of Care
Policies & Procedures for Coordinated Entry**

Published: December 2017

Revised:

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COORDINATED ENTRY SYSTEM

1 INTRODUCTION

The Kingston/Ulster County Continuum of Care (UCCOC) (NY-608) is located in Ulster County and covers 1,161 square miles of mostly rural landscape, including the City of Kingston, which is designated as a Metropolitan Statistical Area (MSA), as well as 23 towns and villages. Ulster County Department of Social Services is the primary access point for homeless emergency housing and placement in the county, and Family of Woodstock Inc. (FOW) operates all four shelters and two transitional programs to serve homeless. Due to the largely rural geography of Ulster County, the Coordinated Entry (CE) system will use a decentralized (multiple access points) assessment and intake model. The UCCOC, in consultation with recipients of Emergency Solution (ESG) funds within our geographic area, are responsible to ensure the UCCOC's CE process is consistent with coordinated screening, assessments, and referrals as outlined in the ESG written standards.

The following are the core components of the UCCOC Coordinated Entry & Assessment:

- Affirmatively ensures equal access to housing and support services projects to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, handicap, sexual orientation, gender identity or who are least likely to apply.
- Implements standardized assessments for people seeking emergency housing placement.
- Ensures that people that are most vulnerable and with the most severe needs are prioritized for assistance.
- Develops and maintain an active by-name wait list of people identified as experiencing homelessness.
- Makes shelter and crisis services available until longer-term housing placements that are appropriate for the client are secured.
- Makes referrals to appropriate programs or agencies

1.1 Inform Local Planning: The UCCOC will collect and maintain aggregate data on homeless individuals and families within the CE for local planning purposes. This information will be provided to the UCCOC board, the CE committee and Consolidated Plan Jurisdictions (Con Plan) to facilitate the development of a plan to eliminate homelessness and to assist local planning efforts.

2 ACCESS

The UCCOC requires the same assessment tool including standardized decision-making and definitions at all access points. The system will use multiple access points to facilitate easy accessible by all people experiencing homelessness or at risk of homelessness. Assessments may be conducted at one of the access points or over the phone for participant convenience.

The CE process is available for all persons including those that have been a victim of domestic violence, dating violence, sexual assault or stalking. The Safety Planning section 8.1 of these policies details how this sub-population will be assessed.

2.1 After Hours Access: The UCCOC will utilize Family of Woodstock's 24-hour hotline for those persons seeking emergency services after hours when other coordinated entry's intake and assessment processes are not available. If participants are not able to access emergency or crisis housing placement through the hotline, they will be referred to DSS for emergency housing placement during the next business day.

2.2 Written Standards for Prevention Services: If participants are in need of preventative services because they are at risk of homelessness, they will be referred to agencies that provide prevention resources. The UCCOC has a prevention resource list and when possible assessment staff will contact the preventive agency to provide a more effective referral. A client's safety will be the key determinant for prioritization of prevention services. Participants eligible for prevention services and do not meet HUD's Homeless Definition will not be part of coordinated entry. Participants will be able to access the CE at the time of emergency housing placement if needed.

- Eligibility definition: Those that are at **“Imminent Risk of Homelessness”** which **are defined** means individuals and families that are able to document that they must leave their current nighttime residence within 72 hours, and include household that;
 - Have received a court notice of eviction or foreclosure.
 - Are staying with family or friends AND can document that they must leave within **72 hours**. Documentation must include a third party verification of violation. (For example, a lease that states that anyone other than occupants listed on the lease constitutes a lease violation.)

2.3 Fair and Equal Access: All people in the UCCOC area have equal access to coordinated entry process regardless of where and how they present for services. Access to UCCOC the coordinated entry process is accessible to all people in the county either in person or over the phone.

The coordinated entry process will serve people that speak the languages spoken in the community. UCCOC affirmatively markets housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, handicap, sexual orientation, gender identity or who are least likely to apply in the absence of special outreach.

2.4 Anti-Discrimination Policy: The Ulster County Continuum of Care (UCCOC) aims to reduce and ultimately end homelessness, providing services that increase stabilization of individuals and families, monitoring the progress of existing programs and services for homeless, and advocating for funding to promote decent, safe, and affordable housing for all. UCCOC recognizes that individuals must not be discriminated against on the basis of their sexual orientation or gender

identity when seeking support from its housing programs and services. Thus, in accordance with HUD's "Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs," UCCOC does and shall not discriminate against Lesbian, Gay, Bisexual, Transgender individuals, and families. It is the policy of UCCOC that any discrimination against LGBT individuals and families seeking equal access to all eligible HUD-funded housing programs and services is prohibited.

This policy applies to all UCCOC projects, agencies, and managers of shelters, and other buildings and facilities; and providers of services funded in whole or in part by any HUD program to grant equal access to such facilities, and other buildings and facilities, benefits, accommodations and services to individuals in accordance with the individual's gender identity, and in a manner, that affords equal access to the individual's family.

2.5 Anti-Discrimination Laws: Title VIII of the Civil Rights Act of 1968 (Fair Housing Act), as amended, prohibits discrimination in the sale, rental, and financing of dwellings, and in other housing-related transactions, based on race, color, national origin, religion, sex, familial status (including children under the age of 18 living with parents or legal custodians, pregnant women, and people obtaining custody of children under the age of 18), and disability.

The New York State Human Rights Law prohibits housing discrimination on the basis of several "protected characteristics." It is illegal for someone to discriminate based on race, creed, color, national origin, sex, age, disability, marital status, military status, family status, sexual orientation, gender identity (sex and/or disability discrimination).

This policy applies to all UCCOC grant recipients, sub-recipients, projects, agencies, and employees.

2.6 Marketing Strategies can include direct outreach to people on the streets, as well as through UCCOC member sites, informational flyers left in public locations, announcements at UCCOC and other coalition meetings, and through educational programs. All coordinated entry sites will be accessible to persons with disabilities, and accessible by public transportation wherever available. Participants will be given a comprehensive list of access points and agencies providing prevention services.

2.7 Outreach: UCCOC will ensure that persons encountered by street outreach workers will be offered the same standardized assessment process as person's assessed through site-based access points.

3 ASSESSMENT

3.1 Standardized Assessment Tool The UCCOC will utilize the adopted standardized assessment tool to ensure that all homeless participants will be prioritized by the same vulnerability standards. This tool provides uniform decision criteria based upon vulnerability score.

Factors that determine the severity of needs of participants include chronic homeless designation; those sleeping on the streets or places not meant for human habitation; those experiencing Domestic Violence; the age of the head of household either between 18-24 or 60 or older receiving

a higher score; Veteran status; little or no income, criminal history; physical or other disability with households with more than one disability receiving a higher vulnerability score; pregnancy of household member; history of multiple evictions, utility shut offs or code violations; recent involvement with Justice systems or Foster Care.

3.2 Low-Barrier: All UCCOC HUD-funded projects utilize a low barrier approach and do not screen people out for assistance because of perceived barriers such as:

- Having too little or no income;
- Resistance to receiving services;
- Active or history of substance abuse;
- History of evictions or poor credit;
- Having a criminal record with exceptions for state-mandated restrictions; or
- History of domestic violence (e.g., lack of a protective order, period of separation from an abuser, or law enforcement involvement).

3.3 CE Provider Training: The UCCOC will provide training annually for CE participating agencies and staff that administer assessments. The CE lead is responsible to coordinate annual trainings and will work with the CE committee to update the policies and procedures and the assessment tool to distribute to all CE members. The purpose of the training is to ensure coordination and consistency of the CE assessment process. The training will reinforce the CE written standards and clearly describe the methods by which assessments are conducted. Opportunities for feedback from CE staff will ensure continuous system improvements.

The curriculum will include a review of UCCOC written policies and procedures, including any adopted variations for specific sub-populations. The curriculum will also include requirements on how to use assessment information to determine prioritization and reinforce uniform criteria for decision-making and referrals.

3.4 Person-Centered: UCCOC respects the participant's choices with respect to location, type of housing, services, and other options, allowing participants to be a part of the decision making when possible. Participants have the right to refuse any housing resource available to them. When participants refuse CE housing placement, the UCCOC will maintain the placement of households on the waitlist based on the severity of need and vulnerability score.

3.5 Reasonable Accommodations and Modifications: UCCOC Housing Providers will provide reasonable accommodations and modifications to homeless people with disabilities to ensure equal access to housing. Providers, when possible, will make every effort to accommodate a person with a disability to use and enjoy a dwelling. Providers are not required to undergo an undue financial hardship to provide accommodation or make changes to a program.

3.6 Privacy Protection: CARES Inc. is the Homeless Management Information System (HMIS) Lead for the UCCOC. CARES Inc. has a policy and procedure manual that is updated annually. The written standards of protection of client information are included in that manual. HMIS agencies sign MOU agreements with CARES Inc. annually and all HMIS users are required to sign

off on privacy procedures with the HMIS Lead. Data from the domestic violence population is not included in HMIS. Participants entering the CE have options may choose to share the information with other partner agencies via the HMIS Computer System. Participants have the right to revoke authorization for the sharing of information at any time. Information shared is limited and for the purpose of Ulster County coordinated entry waitlist. The UCCOC will not require the disclosure of specific disabilities and diagnoses. Specific information regarding the participants' disability and diagnoses will only be obtained for purposes of determining program eligibility or to make appropriate referrals.

4 ASSESSMENT PROCESS

The UCCOC will assess households that meet the HUD definition of homelessness as cited in the key terms section of this document. The assessment will take place in person at site based CE access points or by phone. **The assessment will be completed within ten business days of emergency shelter placement. The scoring of the assessment determines the prioritization of individuals and families for transitional or permanent supportive housing placement.**

4.1 CE Lead: The CE Lead will be designated by the UCCOC board of directors on an annual basis. The UCCOC will utilize an open competitive process based upon qualifications and neutrality.

The CE lead will have the following responsibilities:

- Responsible to update and maintain the UCCOC CE housing inventory within HMIS and track information on program vacancies and openings.
- Update program eligibility guidelines and contact information so staff can make the best referrals possible
- Follow up with the staff of referring agency to confirm whether the referral is accepted, declined by provider or client, is pending, or if the provider is unable to make contact within the established timeframe.
- Responsible to coordinate CE committee meetings and monthly case conferences.
- Monitor all points of entry are using the same assessment tool, data collection forms, policies on eligibility verification and referral/information sharing systems on an annual basis.
- Responsible to ensure HMIS data is being maintained by providers and monitored with assistance from HMIS Vendor.
- Responsible to work with access point agencies to seek client level feedback on suggestions and improvements to the intake and assessment process.

4.2 Provider Responsibilities

- All providers receiving funding through HEARTH or a HUD-funded program are required to participate in the coordinated entry process.
- Providers (except domestic violence) must use the HMIS system, and they must maintain HMIS data entry standards set by the HMIS Lead and the UCCOC Board of Directors.
- Providers must provide written documentation to the Coordinated Entry committee

within **10 business** days on why an applicant was denied entry into a program.

- Providers must ensure that staff is using the same assessment tool, data collection forms, policies on eligibility verification and referral/information sharing systems.
- Providers are responsible to ensure HMIS data is being maintained and monitored with assistance from HMIS Vendor.
- Providers are responsible to work with the CE Lead to seek client level feedback on suggestions and improvements to the intake and assessment process.
- Providers must have an appeal process for those applicants who have been denied service or entry into a program.

4.3 Provider Denials: CE Providers shall accept all referrals of eligible households if there are vacancies or openings within their program(s). Providers are responsible for ensuring referred households are eligible for the program, and gathering all required documentation. Referred households may be returned to the waitlist for the following:

- The household does not meet the project's eligibility requirements established by the funder.
- Household fails to engage and complete the provider's intake process.

The provider must notify the housing referral source and CE Lead within 5 business days if the referral is denied, and the referring source may call the provider to understand the circumstances.

4.4 Client Appeal Process: Any client that is denied placement may appeal the decision. The client will first complete the appeal process at the agency level. If the appeal is not successful at the agency level, the client can submit an appeal in writing to the CE lead stating the agency reason for denial and any extenuating circumstances to be considered within 5 business days of the agency appeal decision. The CE Case Conference Committee will act as the Appeals Committee, with an abstention from the agency that denied the referral. The CE Case Conference Committee will review the request and make a determination. Clients will be notified in writing of the outcome of their appeals within two days of the Appeals Committee's decision. The Appeals Committee decision is final.

4.5 Case Conferencing: UCCOC funded agencies are required to participate in case conferencing to prioritize housing placement for persons on the by-name waitlist. The focus of the case conferences to fill vacancies and openings in HUD-funded programs for the most vulnerable with the highest needs and the greatest barriers. The goal of the case conference is to provide a coordinated, and integrated approach that ensures the most vulnerable homeless participants receive appropriate housing placement.

The Case Conference Committee will be comprised of all CoC funded agencies, ESG recipients and other stakeholders such as agencies representing SPOA, Veteran, and DSS. The Case Conference committee reviews the list for referrals monthly, but if a program needs referrals between meetings, there is someone designated to provide those referrals.

Since the priority of CE is to house the most vulnerable and vacancies in PSH and RRH are extremely limited, only those with vulnerability scores above 7 will be reviewed for referrals. Also, those with no contact information after provider review will be discharged from the CE list.

Those that have an intake date over 18 months will be contacted to see if housing is still needed, if there is no contact that household will be discharged.

5 PRIORITIZATION WRITTEN STANDARDS

Ulster County CE prioritizes homeless persons within the Ulster County geography ensuring that homeless participants with the most severe service needs and the highest level of vulnerability are prioritized for housing. The UCCOC prioritization requirements are consistent with CoC and ESG written standards under 24 CFR 578(a)(9) and 24 CFR 576.4. The UCCOC prioritizes placement of households experiencing chronic homelessness for permanent supportive housing consistent with HUD Notice on Prioritizing Persons Experiencing Chronic Homelessness and other Vulnerable Homeless Persons in Permanent Supportive Housing.

The UCCOC will use the following additional HUD criteria to prioritize individuals and families for housing and homeless assistance:

- Chronic homeless designation
- Sleeping on the streets or places not meant for human habitation
- Fleeing Domestic Violence
- Head of household Age - 18-24 or 60 or older
- Having served Active Military
- No income or DSS assistance only
- Criminal history
- Physical or other disability and households with more than one disability
- Pregnancy of household member
- History of multiple evictions, utility shut-offs or code violations
- Recent involvement with Justice System or Foster Care.
- Has not previously lived independently

5.1 Emergency Services: The UCCOC will not limit access to participants seeking emergency shelter or other services allowing for an immediate crisis response. A vulnerability assessment will be conducted when the participant enters the emergency shelter system. The client will give permission for his/her data to be shared through HMIS. Participants will remain in emergency housing until an appropriate housing placement is available.

The Ulster County Coordinated Entry System prioritizes for HUD-funded rapid re-housing, transitional housing, and permanent supportive housing.

5.2 Rapid Re-Housing: Rapid re-housing will be prioritized for families and/or individuals that can achieve housing stability with short-term subsidies and case management, less than one year. Rapid Re-housing that is HUD-funded RRH programs (except those serving DV Victims) will be required to participate in the Coordinated Entry system. Additional Rapid Re-Housing resources when available will not be part of the Coordinated Entry waitlist. Support and duration of service will be tailored to meet the needs of each household and the requirements of the funder. Each household has a lease in their name and is connected to mainstream resources in the community in which they reside.

5.2a Income UCCOC Rapid Re-housing (RRH) projects: When there is employment or other income in the household, participants are required to utilize 30% of either the adjusted monthly gross income, entitlements such as SSI or SSDI or the DSS allowance toward rental payments. Clients that enter programs with no income may still be eligible for services, and may receive a full rent subsidy up to HUD fair market rent (FMR).

To be eligible for HUD-funded RRH, households must:

- Be literally homeless as defined by HUD
- Prepare a reasonable plan that shows how they are going to maintain housing once housing assistance ends, a budget, a financial worksheet and/or description of changes in household circumstances that made them homeless.
- Providers will follow individual program guidelines to determine the minimum amount of rent and utility assistance and supportive services that a household will receive to stabilize their housing with the goal of moving toward self-sufficiency. If it becomes clear that the amount and duration of assistance are not enough, the household will be reassessed for placement on the CE waitlist for a more appropriate housing program.
- Efforts will be made to house households within 30 days of acceptance into the program.
- Providers are expected to remain engaged with the household from the first contact to program exit.

5.3 Transitional Housing

Transitional Housing programs should provide housing to individuals and/or families, usually for a period of six to twenty-four months along with supportive services to help them become self-sufficient. In addition to providing a place to live, transitional housing providers should help the participant to increase their life management skills and resolve the problems that have contributed to their homelessness. Household who are homeless and have two or more of the following barriers are appropriate for referral to:

Transitional Housing:

- Domestic Violence victims (require only one barrier: being a victim of domestic violence.)
- No income
- Poor rental history
- Sporadic employment history
- No high school diploma or GED
- History of homelessness
- Poor rental history (i.e current eviction, rent/utility arrears)
- Unaccompanied Youth (18-24)

5.4 Prioritization for Permanent Supportive Housing: Chronic homelessness is not a requirement for placement into permanent supportive housing.

The UCCOC prioritizes housing placement for chronically homeless for PSH placement. Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and

Severe Service Needs that are Chronically Homeless. This is defined as an individual or family that is eligible for UCCOC Program-funded PSH who has experienced four or more episodes totaling 12 months in a three year period, or 12 consecutive months where they have been living in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs.

Order of Priority for Non-Chronically Homeless: In accordance with HUD Notice CPD-16-11, UCCOC Program-funded PSH that is not dedicated or prioritized for chronically homeless will use the following order of priority when selecting participants for housing that is consistent with the agencies current grant agreement. UCCOC uses a vulnerability index score to determine the participant's severity of need.

- **First Priority—Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs.** An individual or family that is eligible for UCCOC Program-funded PSH who has experienced fewer than four occasions where they have been living in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months and has been identified as having severe service needs.
- **Second Priority—Homeless Individuals and Families with a Disability with Severe Service Needs.** An individual or family that is eligible for UCCOC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.
- **Third Priority—Homeless Individuals and Families with a disability living in places not meant for human habitation, Safe Haven, or Emergency Shelter without Severe Service Needs.** An individual or family that is eligible for UCCOC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.
- **Fourth Priority—Homeless Individuals and Families with a Disability coming from Transitional Housing.** An individual or family that is eligible for UCCOC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families

residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

6 REFERRALS

The UCCOC referral protocol provides a uniform and coordinated referral process for all HUD-funded beds, units, and services within Ulster County. UCCOC funded projects will not screen out potential project participants based upon perceived barriers related to housing or services.

UCCOC and ESG programs will use the coordinated entry process as the only referral source from which to consider filling vacancies in housing or services. UCCOC funded projects will admit those that meet the eligibility guidelines for their programs as vacancies occur.

If a household is self-sufficient and wants to find their own housing, case managers may wait several days or a couple weeks before completing an assessment, giving the household time to make connections and exit on their own.

The UCCOC's referral process is informed by Federal, State and Local Fair Housing laws and regulations and ensures participants are not "steered" toward any particular housing facility or neighborhood because of race, color, national origin, religion, sex, age, handicap, sexual orientation, gender identity or the presence of children.

7 DATA MANAGEMENT

UCCOC uses HMIS to collect and manage participant data for the purposes of reporting, assessing, and managing the by-name waitlist for CE. All users receive HIMS training that follow CARES Inc. CHRHMIS Policy and Procedure Manual outlined in section 7.2 of this manual.

- Participant refusal to participate in data sharing in no way impacts the ability of the project to serve the participant, it simply prohibits the sharing of data with other participating agencies.
- HIV/AIDS, DV, Behavioral Health and notes/logs are NEVER shared via the HMIS. This is to protect the privacy of participants.
- The signed authorization to release information must match the participant preference as recorded in the HMIS and be kept in the participant file (electronic or physical) for monitoring purposes.

7.1 Participant Consents: UCCOC has a protocol for obtaining participant consent to share and store participant information in HMIS for the CE. The UCCOC utilizes the "Ulster County Coordinated Entry Client Release of Information" form which is signed by the participant at the time of assessment. See Appendix A, "Ulster County Coordinated Entry Client Release of Information"

This release of information give participants entering the CE options as to the amount of information that will be shared through the HMIS. Participants have the right to refuse or revoke authorization for the sharing of information at any time. HMIS information is used to maintain a coordinated entry housing waitlist and ultimately to the housing agency that determining eligibility for housing placement. The UCCOC does not require the disclosure of specific disabilities and diagnoses. Specific information regarding the participants' disability and diagnoses will only be obtained for purposes of determining program eligibility to make appropriate referrals. Substance Abuse, Mental Health, Runaway Homeless Youth (RHY) and HIV specific projects are NOT allowed to participate in data sharing at this time. In those cases, the authorization will prohibit the sharing of information in HMIS.

7.2 Privacy Protection: The UCCOC HMIS vendor and HMIS Lead is CARES, Inc., which has established a policy and procedure manual that is updated annually. HUD funded agencies are required to sign MOU agreements with CARES, and data entry users are required to attend training and review and sign off on privacy procedures on an annual basis. The CARES HMIS Policies and Procedures Manual provides the adopted written standards of protection of client information. Data from the domestic violence population is not included in HMIS and not shared.

7.3 Security: Electronic security precautions are required of all user of CARES Regional Homeless Management Information System (CRHMIS) as per the CRHMIS Policies and Procedures Manual, CRHMIS requires users to: “install and maintain a firewall on the user's computer or the agency network; password protected screensavers set at no more than 5 minute intervals; automatically updating antivirus software installed and maintained on every internet-accessible computer; require the installation of the latest security devices on the operating system at each HMIS access computer terminal; requires all users to attend a formal training prior to being assigned a username and password in the database to ensure users have proper training on security, policies, and procedure that have been established for all users in the database. The CRHMIS does not allow sharing of user names and log-ins and is strictly prohibited for security reasons”.

8 DOMESTIC VIOLENCE

8.1 Safety: The UCCOC has specialized services including a hot line and a shelter for those that are trying to flee domestic violence are victims of trafficking, dating violence, sexual assault or stalking. Records on those individuals are not kept in HMIS but kept in an alternative Emergency Health Record (HER) to ensure these individuals are provided confidential access to CE and victim services. The CE system for this sub-population will be a comparable process to the one provided to other homeless persons and families and provide immediate access to emergency services.

9 EVALUATION

9.1 Ongoing planning and stakeholder consultation: The UCCOC CE committee will evaluate and update ongoing efforts to coordinate with CE participating agency staff annually. The UCCOC will utilize surveys, focus groups and other means to get feedback on the CE experience and process from individuals and families experiencing homelessness or recently connected to

housing through the coordinated entry process. This information is used to revise and improve the process.

9.2 Evaluation of the CE: The CE Lead and collaborative applicant will use outcomes metrics of length of time homeless and returns to homeless in the UCCOC's HUD System Performance measures. The CE committee will review the above mentioned outcomes measures to evaluate the CE process and make adjustments as needed. Participant input will be provided by surveys to determine whether the coordinated entry process meets their needs.

10 GRIEVANCES

- a. **Housing Program Grievances** are related to a participant's experiences with a homeless housing provider and will be directed back to the homeless program provider to follow the programs grievance policies and procedures.

- b. **Fair Housing Grievances** are related to discrimination.
To file a formal fair housing complaint, contact:
U.S. Dept. of Housing & Urban Development
http://portal.hud.gov/hudportal/HUD?src=/program_offices/fair_housing_equal_opp
File a complaint online:
http://portal.hud.gov/hudportal/HUD?src=/topics/housing_discrimination
(206) 220-5170 (800.877.0246)
TTY (206) 220-5185

- c. **Coordinated Entry Grievances**
COORDINATED ENTRY GRIEVANCES are related to Coordinated Entry Policies and Procedures, and shall be directed to:
The Continuum of Care Coordinator
RUPCO, Inc
301 Fair Street, Kingston, NY 12401
P: (845) 331-9860 X219 F: (845) 331-9864

Questions about these Coordinated Entry Policies and Procedures may be directed to:

The Continuum of Care Coordinator
RUPCO, Inc
301 Fair Street, Kingston, NY 12401
P: (845) 331-9860 X219 F: (845) 331-9864

11 KEY TERMS

There are a number of key terms and definition associated with UCCOC and coordinated entry.

- **Access Points** – Coordinated Entry Access Points are designated locations within the continuum where individuals or families go for intake and assessment of homeless prevention and housing services.
- **Admission** – Using authority to admit a client into a program

- **Assessment** – Assessment is the process used to reveal a client’s eligibility, needs, barriers and strengths in order to provide appropriate housing and services.
- **Chronic Homelessness**- A chronically homeless individual is someone who has experienced homelessness for at least 12 consecutive months or longer, or who have experienced four or more episodes of homelessness during the last three years which totaled 12 months, and has a disability. A family with an adult member who meets this description would also be considered chronically homeless.
- **Coordinated Assessment** – All providers within the UCCOC using the same assessment tools to connect clients to services as a means for a coordinated entry system.
- **Coordinated Entry Committee** – The group responsible for implementation of the Coordinated Entry System. Members of the coordinated entry committee are UCCOC members and represent organizations that provide housing or services to homeless individuals and families.
- **Coordinated Entry (CE) Lead** – The CE lead is responsible to update and maintain information on program vacancies/openings. This must be done at least monthly regardless of whether there are new openings to report. Regularly update and make current all programs eligibility guidelines and program contact information so staff can make the best referrals possible. Ensure that when a referral is made, staff confirms within two business days whether the referral is accepted, declined by provider, declined by client, or pending, or the provider is unable to contact the client. Bring problems and suggestions to the monthly coordinated entry and Assessment meeting. Oversee provision of homeless diversion, prevention and housing services for eligible clients. Ensure that all points of entry will use the same screening and assessment tool, data collection forms, policies on eligibility verification and referral/information-sharing systems.
- **Coordinated Entry** – A process developed to prioritize assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most can receive it in a timely manner, and that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs.
- **HEARTH** – The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 that includes Emergency Solutions Grant (ESG) and Continuum of Care (CoC) grants.
- **HMIS** – Homeless Management Information System; a centralized database designated to create an unduplicated accounting of homelessness that includes housing and services. Ulster County UCCOC uses CARES Regional HMIS, using the Awards software from Foothold Technology.
- **Homeless** - Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or a place not meant for human habitation immediately before entering that institution; (2) Individuals and families who will imminently lose their primary nighttime residence; (3) Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; or (4) Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the

individual or a family member.

- **Housing First** – is an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent **housing** without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements.
- **HUD** – The Department of Housing and Urban Development; the United States federal department that administers federal program dealing with homelessness. HUD oversees HEARTH-funded programs.
- **Intake** – The general process between the first point of contact and the initial screening for eligibility. This step involves primary assessment of needs, strengths, and resources to refer households into appropriate services
- **Outcome** – The result achieved from a specific activity or service; for coordinated entry, it is the result attained in relation to housing stability.
- **Prevention** – An approach that focuses on homeless prevention by referring or providing services to households at risk of homelessness.
- **Rapid Re-housing** –Rapid re-housing is an intervention designed to help individuals and families quickly exit homelessness and return to permanent housing.
- **Referral** – The formal process of sending a consumer to another agency to provide services.
- **Screening** – Screening the process used to determine eligibility for housing and services at the initial point of contact with the coordinated entry system. Once screening determines eligibility, the intake and referral process follows.
- **Systems Change** – The purpose of system change is to implement practices that have shown to decrease the incidence and length of time in homelessness, with a long-term goal of reducing and ending homelessness.
- **Personalized Programs and Services** – Case management services that work to match appropriate services to the individual or family needs.
- **Verification** – The gathering and review of information to substantiate the applicants/client’s situation and support program eligibility and priority determination.

12 CE Planning Committee

UCCOC understands the importance of a coordinated entry process including policies, procedures, and written standards. A committee was formed consisting of stakeholder representation to plan and implement a process that fits our community. The committee examined best practices that are reported nationally including those available through the National Alliance to End Homelessness to improve the process to provide homeless housing and services for individuals and families.

The following stakeholders are the initial members of the coordinated entry committee to develop and implement a comprehensive coordinated entry system.

- Rhonda Garcia – PEOPLE Inc.
- Margaret Schlasko – UC Mental Health/SPOA
- Michael Berg – Family of Woodstock
- Salvador Altamirano-Segura – Family of Woodstock
- Victoria Read- Family
- Michelle DeRose- Gateway

- Jay Quest- RUPCO
- Kathy Germain- CA
- Christine Novak – WestCOP
- Sue McDonough – Ulster County Department of Social Services
- Sue Palmer – CARES, Inc.
- Allyson Thiessen – CARES, Inc.

For additional Information please contact:

RUPCO
 301 Fair Street
 Kingston, NY 12487
 845-331-9860

Appendix A

Ulster County Continuum of Care

Coordinated Entry Client Release of Information

Coordinated Entry is designed to better assist you in finding permanent housing and supportive services options. We are requesting your permission to share limited information about you with the Coordinated Entry providers in Ulster County. As the owner of your own information within the Coordinated Entry System, you have the right to choose whether or not other users of the system can see any of your personal information and on what level. HIV/AIDS information, Domestic Violence information, Behavioral health (mental illness and substance abuse) and client notes are NOT shared. This consent will be in effect for a minimum of 36 months but may be revoked at any time.

Please check the (1) box below which indicates the level at which you are willing to share your information with the Coordinated Entry system in Ulster County

- 1) I agree to share my name, gender and program enrollment history through HMIS with the Ulster County Coordinated Entry System.
- 2) I agree to share my name, gender, program enrollment history, demographics, income and contact information through the HMIS with other partner homeless services agencies, and with the Ulster County Coordinated Entry System.
- 3) I do NOT agree to share any of my information through the HMIS with the Ulster County Coordinated Entry System.

By signing this form, I agree to share the above level of information with other partner agencies via the HMIS Computer System:

 Print name of Client, Guardian or Power of Attorney

 Print name of Witness

 Signature of Client, Guardian or Power of Attorney

 Signature of Witness

 Date:

 Date:

1C-14: Centralized or Coordinated Entry System–Assessment Tool.

3. NY-608's Written Standards, Coordinated Entry Prioritization Section: This document details how the CE program prioritizes people most in need of assistance.

Prioritization Standards

These Written Standards establish the community-wide expectation of how resources are to be targeted within the community. This is separate from meeting eligibility requirements, and specific to prioritizing assistance to those in need. Project participants must always meet eligibility criteria while all individuals and household types can be prioritized for a type of assistance. As prescribed in the *Coordinated Entry Policies & Procedures*, CoC's prioritize assistance based on vulnerability and severity of service needs to ensure that households needing assistance the most receive it in a timely manner. The CoC's *Coordinated Entry Policies & Procedures* and process are in alignment with HUD guidance and notices, namely:

- [24 CFR Part 578 - Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program \(specifically: 578.3 and 578.7\(a\)\(8\)\)](#)
- [CPD-016-11 - Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing](#)
- [CPD-017-01 - Notice Establishing Additional Requirements for a Continuum of Care Centralized Coordinated Assessment System](#)
- [CPD-20-08- Waivers and Alternative Requirements for the Emergency Solutions Grants \(ESG\) Program Under the CARES Act](#)

The CoC will refer to and implement guidance based on any subsequent notices that update or replace prior notices and guidance.

In accordance with these notices and guidance, populations and households prioritized for assistance include:

- Those prioritized in CoC funded PSH beds **Dedicated** to Persons Experiencing CH or PSH **Prioritized** for Occupancy by CH Persons are, in order of prioritization:
 - First Priority- Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs are
 - Second Priority- Chronically Homeless Individuals and Families with the Longest History of Homelessness are prioritized in CoC funded PSH beds **Dedicated** to Persons Experiencing CH and PSH **Prioritized** for Occupancy by CH Persons
 - Third Priority- Chronically Homeless Individuals and Families with the most severe service needs are prioritized in CoC funded PSH beds **Dedicated** to Persons Experiencing CH and PSH **Prioritized** for Occupancy by CH Persons
 - Fourth Priority- All other Chronically Homeless Individuals and Families
 - Fifth Priority- Non-chronically homeless households, as long as the recipient of CoC Program-funded PSH documents how it was determined that there were no chronically homeless households identified for assistance within the CoC's geographic area at the point at which a vacancy becomes available
- Those prioritized in PSH beds that are **NOT Dedicated** or Prioritized for Persons Experiencing Chronic Homeless, in order of prioritization:
 - First Priority-Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness, fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months, **and** severe service needs.
 - Second Priority - Homeless Individuals and Families with a Disability with Severe Service Needs. No minimum length of time required.

1C-7: Public Housing Agencies within Your CoC's Geographic Area – New Admissions – General/Limited Preference

This attachment contains the following:

1. **Ellenville Housing Authority (EHA)** – PHA
 - a. Administrative Plan – Highlighted Section: Homeless Preference

2. **Saugerties Housing Authority (SHA)** - PHA
 - a. Administrative Plan – Highlighted Section: Homeless Preference

1C-7: Public Housing Agencies within Your CoC's Geographic Area – New Admissions –
General/Limited Homeless Preference

1. **Ellenville Housing Authority (EHA)** – PHA
 - a. Administrative Plan – Highlighted Section: Homeless Preference

Statement of the reason(s) for the decision, and state that the applicant may request an informal review of the decision within 10 business days of denial. The Ellenville Housing Authority will describe how to obtain the informal review. The informal review process is described in Section 16.2 of this plan.

5.0 Selecting Families From The wait list

5.1 Waiting list admissions and Special Admissions

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

IF HUD AWARDS FUNDING THAT IS TARGETED FOR FAMILIES WITH SPECIFIC CHARACTERISTICS OR FOAMILIES LIVING IN SPECIFIC UNITS, THE Ellenville Housing Authority will use the assistance for those families.

5.2 PREFERNCES

The Ellenville Housing Authority will select families based on the following preferences within each bedroom size category:

- A. **Displaced - all others** - living with family/friends (15 points)
- B. **Homeless/Displaced – No Fault** - person(s) individuals or families displaced by government action or whose dwelling has been extensively damaged or destroyed as a result of a declared or otherwise formally recognized pursuant to Federal Disaster Relief Laws, dwelling destroyed by natural disaster/fire, loss of work due to shut-down or out of business. Living in shelter or hotel/motel (500 points)
- C. **Working families.** (15 points)
- D. **Substandard Housing.** (15 points)
- E. **High Rent Burden** (rent is > than 50 percent of your income) (15 POINTS)
- F. **SENIOR, DISABLED, OR HAS DEPENDENT CHILDREN** (60 Points).
- G. **Local Resident** - who live and / or work in the Village of Ellenville or the Town of Wawarsing (40 points)
- H. **UNSUBSIDIZED HOUSING LOCAL** (20 POINTS)
- I. **Veterans** – Must show discharge papers/Military Card (40 Points)
- J. **Domestic Violence Victim** – Must show Order of protection (30 Points)

Housing will be offered to those families with the greatest number of points.

1C-7: Public Housing Agencies within Your CoC's Geographic Area – New Admissions –
General/Limited Preference

2. **Saugerties Housing Authority (SHA)** – PHA
 - a. Administrative Plan – Highlighted Section: Homeless Preference

APPLICATION PROCEDURES

WAITING LIST

The Town of Saugerties PHA maintains a single waiting list for the Housing Choice Voucher Program. The PHA determines the status of the list (open or closed) based on the number of applicants on the list and the availability of Voucher funding.

When the waiting list is open, the PHA accepts preliminary applications in person during the specified period of time. Each preliminary application received is dated and time-stamped in the order in which it was received. Applicant information is then entered into the computerized waiting list database where the data is rank-ordered by date and time of application and any preferences indicated on the application. Applicants are responsible for reporting any changes in information to the PHA in writing.

PROGRAM PRIORITIES AND PREFERENCES

The Town of Saugerties PHA gives preference on the waiting list to applicants who live, work or have been hired to work in the Town of Saugerties. Eligible families who, at the time of application, claim any HUD-defined priorities in effect at the time of application will receive priority on the waiting list. Applicants will be required to prove that, at the time of application they were entitled to any claimed preferences when a voucher becomes available. Applicants who are unable to document their entitlement will be returned to the waiting list without the preference.

Priority is given to families with a residency preference before families without a residency preference. Senior citizens, people with disabilities, applicants with 50% rent burden or greater, veterans, and families whose income is at or below 30% of the current median income of Ulster County based on family size, victims of domestic violence, and homeless applicants will be given priority over other applicants. All other applicants will also be considered provided they meet the current HUD regulations in effect at the time of application or at the time of issuance of a Voucher.

homeless preference

1C-7: Public Housing Agencies within Your CoC's Geographic Area Moving On Strategy

This attachment contains the following:

1. NY-608's Written Standards excerpt that details the CoC's Moving On Strategy.

MOVE ON STRATEGY FOR RECOGNITION OF TENANT INDEPENDENCE

The Ulster County Continuum of Care (UCCOC), the Continuum of Care for Ulster County has created a Move On Strategy to transition households in Supportive Housing (including Permanent Supportive Housing (PSH) and Rapid Rehousing (RRH)) who no longer need intensive services to affordable housing. This strategy is broken into Phase I and Phase II, and sets out the actions UCCOC will take to ensure the community has suitable long-term, affordable housing options for tenants ready to move on, and that tenants have the skills and are empowered to make this decision. The fundamental goal of the Move On Strategy is to promote the highest levels of independence and choice for tenants, as well as to create flow in supportive housing units to ensure these units are available for currently homeless families and individuals with disabilities who need housing combined with services. Promoting economic mobility and self-sufficiency, the Move On Strategy is first and foremost about celebrating growth, recovery and tenant success, and ensures all services are provided using strengths-based language and a recovery-focused model. Below details the CoC's process for identifying tenants who are eligible to move on; documentation needed to request ideal candidates for the strategy; and providing guidance for tenants on safety and security while prioritizing resources where they are most needed. The plan is based on a model Move On strategy discussed by the U.S. Department of Housing and Urban Development (HUD) and the Corporation for Supportive Housing. The UCCOC Board and Education/Outreach Committee will be responsible for providing regular trainings, resources, relationship building, and outcome tracking to support implementation of and monitor the Moving On Strategy.

Recruiting Affordable Housing Providers

The Move On Strategy targets existing tenants in supportive housing who are stable and require only minimal supportive services. These tenants are, with client choice, assisted to transition to a mainstream rent subsidy (typically the Housing Choice Voucher program) or an affordable housing unit, which frees up their subsidy for someone who is chronically homeless and needs the intensive services and long-term subsidies offered in supportive housing. The mainstream rent subsidy may include programs like Public Housing Authorities (PHAs), multifamily assisted housing owners, Low Income Tax Credit (LIHTC) developments, and local low-income housing programs. Phase I of the Move On Strategy is currently being implemented and includes recruiting local affordable housing providers to participate in the program, by setting preferences for tenants moving on from supportive housing. Phase II of the Move On Strategy will include advocating to New York State to incorporate a preference for individuals and families moving on from supportive housing units in the NYS Affordable Housing Corporation Plan.

Identifying Households for Moving On

Housing providers identify households in supportive housing that may be ready to move on through ongoing case management with tenants. Specifically, program staff meet with tenants on an ongoing basis to establish tenant goals and set a plan towards meeting those goals, utilizing strengths-based language and a recovery-focused model. Program staff implement a client-choice model by ensuring tenants know there is a voluntary option to move on. Program staff ensure tenants interested in moving on (1) have demonstrated the ability to live stably and maintain housing, (2) will meet PHA or other affordable housing providers screening criteria, and (3) understand the decision to move on from supportive housing is voluntary. During Phase II of this strategy, a standardized assessment for moving on will be developed and implemented.

Program staff work with tenants to create a formal and comprehensive transition plan that identifies tenant strengths, living skills and the supports necessary to help them meet transition goals. Pre-transition plans

are individualized to meet the specific needs of each household. Some common resources or supports tenants often need and are connected to include employment supports, benefits counseling, activities of daily living skills, community living skills, and connection to community-based services. As households volunteer, housing providers make referrals to the PHA or other affordable housing providers.

Eligibility Considerations for Tenants

Individuals are identified by housing provider program staff who work directly with clients in the housing programs. Clients should meet four basic criteria in order to be recommended to move on: 1) a good rental history of on-time payments, 2) evidence of “good neighbor” behavior without any complaints or property management conflicts, 3) supported progress of quantitative areas and 4) low service needs. Housing providers identify households in supportive housing who may be candidates for moving on by analyzing observations (interviews/survey’s, demonstrated ability to live stably and maintain housing or any other mitigating circumstances) combined with quantitative key areas for assessing tenant capacity, motivation, confidence and emotional readiness. These key quantitative areas include:

- Emotional independence (interest and confidence in moving on),
- Financial Capacity (employment, income, savings, budgeting skills),
- Housing history (housing tenure, rent arrears, past evictions, neighbor/landlord relationships)
- Intensity of service use (need for on-site services),
- Health/behavioral health (substance use, mental health, medication management, treatment engagement, mobility),
- Connection to mainstream resources (rental supports if needed),
- Connection to family or other natural supports,
- Community living skills (self-managing behavior, limit setting relating to drugs, etc.),
- Activities of daily living skills (ability to get meals, keep apartment clean, follow lease), and
- Housing goals (location, size, affordability, live with family/friends).

Transition Services

Housing Providers are required to provide: assistance with locating and securing a housing unit; case management to support transition including but not limited to assistance building linkages to community supports and services, such as mental and physical health services, substance use treatment, stores for groceries and other necessities, recreational activities and public transportation options; and support with landlord negotiations. Services offered may also include providing funds to cover moving services, utility deposits/arrears and furniture/household items; and assistance with family reunification.

Aftercare Supports

UCCOC recommends housing providers offer voluntary aftercare services to individuals who have moved on for at least six months after their move-out, and track types of supports provided and outcomes of those supports. It is recommended housing providers provide a minimum of two check-ins per month that can be in-person, by phone or by email.

Creating a Culture of Moving On

UCCOC believes a programmatic reward/incentive structure for Moving On can assist in further promoting a culture of independence and self-sufficiency. The CoC will develop a variety of strategies to publicize and build interest in Moving On opportunities, including providing trainings on and working with providers to: post fliers in highly visible locations; host community meetings on Moving On; conducting one-on-one outreach to tenants; and encourage Moving On peers to talk about their experiences and engage tenants.

Moving on Timing and Availability

UCCOC understands a Move On request may not be able to be satisfied immediately due to a variety of variables. However, the housing program will act as quickly as possible with community partners to move a tenant into appropriate affordable housing.

Ongoing CoC Assessment of Move On Strategy

Once annually UCCOC will assess the success of this Move On Strategy, reviewing number/percentage of persons who have moved on and rate of retention in affordable housing destinations. UCCOC will also discuss strengths/weaknesses related to the strategy's recommendations for recruiting affordable housing providers, identifying households for moving on, eligibility considerations for tenants, transition services, aftercare supports, and creating a culture of moving on.

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

1. Screen shot of a website posting that demonstrates your CoC announced it was accepting project applications.

(a) Email and website screen shot announcing the final Rank & Review **Renewal Part 1 & 2 Tool** is ready for completion

(b) Email announcing the final Rank & Review **Renewal Part 3 Tool** is ready for completion

(c) Email and website screen shot announcing the final Rank & Review **New Project Application & DV Bonus Tool** is ready for completion

2. A copy of the document posted in advance that included point values for objective criteria your CoC would use to review and rank projects.

For the Renewal (Parts 1, 2, and 3), New Application, and DV Bonus Rank & Review Tools, the CoC collected public comments on the drafts (evidenced by email announcements and website screenshots). For each Rank & Review tool, a blank tool is attached below exemplifying the point values for objective criteria the CoC would use to review and rank projects.

a) Email announcement and screen shot of public comment period for NY-608's draft Rank & Review **Renewal Part 1 & 2 Tool**

b) Blank Rank & Review **Renewal Part 1 & 2 Tool**

c) Email announcement for NY-608's Rank & Review **Renewal Part 3 Tool**

d) Blank Rank & Review **Renewal Part 3 Tool (interview questions)**

e) Email announcement and screen shot of public comment period for NY-608's draft Rank & Review **New Project Application & DV Bonus Tools**

f) Blank Rank & Review **New Application Tool**

g) Blank Rank & Review **DV Bonus Tool**

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

1. Screen shot of a website posting that demonstrates your CoC announced it was accepting project applications

(a) Email and website screen shot announcing the final Rank & Review **Renewal Part 1 & 2 Tool** is ready for completion

Renewal Rank and Review Application - Deadline 6/21/21 - Message (HTML)

File Message Help Acrobat Tell me what you want to do

Delete Reply Reply All Forward ESG Mark Unread Find Zoom Share to Teams Insights

Renewal Rank and Review Application - Deadline 6/21/21

KG Kathy Germain Tue 6/8/2021 8:05 AM

To: mberg@familyofwoodstockinc.org; Rhonda Garcia; rlangton@ghv.org; mderose@ghv.org; Victoria Read; saltamirano@fowinc.org; etrotterbodie@familyofwoodstockinc.org;
Cc: Samantha Barnaby

UCCC-Rank-Review-2021-Part-1-Checklist.pdf 98 KB
Ulster Rank and Review 2021 Application -Final.pdf 649 KB
Final-NY-608 Rank and Review HIMS Data Attachments.pdf 101 KB

Continuum of Care Applicants,

Please see attached:

- Rank and Review Attachments Checklist
- Renewal Rank and Review Application
- Final HIMS Data Attachments

The application is also available on the CARES website:

[CoC Resource Planning – 2021 | CARES of NY, Inc. \(caresny.org\)](#)

The application must be completed by COB Monday June 21, 2021 and submitted in one PDF attachment. Please include the Rank and Review Attachments Checklist, completed application, and supporting Data Attachments as specified on the checklist. Applications should be submitted to kgermain@caresny.org. Please put your agency name/project name as the subject line.

You should have already received an invitation to a review of the application with me on Monday June 14th at 1 pm. We will go over questions in the application. If you didn't receive the invite please e-mail me. Thanks.

Kathy Germain

8:07 AM 6/8/2021

Programs participating in the Rank and Review process may need to complete the forms below.

These forms allow programs to enter DV data to be considered in the Rank and Review Process, submit requests to combine programs in the Rank and Review Data Attachments, and to confirm participating the Data Attachment process.
To learn more about these forms and the over process, please download this Rank and Review Online Form Submission Procedures document.

DV HMIS Data Submission

Data Attachments Confirmation

- Rank & Review
- NY 501 STEPS
- NY 503 ACCH
- NY 507 HSPB
- NY 511 STHC
- NY 512 RCHSC
- NY 519 CGHC
- NY 520 FEHC
- NY 522 PNHC
- NY 523 SNC
- NY 606 RCCC
- NY 608 UCCC**

Ulster County CoC

2021 RANK & REVIEW DOCUMENTS

FINAL: [2021 NY 608 Rank & Review Written Process](#)

2021 RENEWAL PROJECTS

All currently funded projects that are looking to be funded again must complete Rank and Review application materials below

Release Date: **June 7, 2021** Due Date: **June 21, 2021**

[NY-608 Rank and Review Part 1 Attachments Checklist](#)

[NY-608 Rank and Review Application Tool](#)

View Rank & Review Archives

+ 2020 Rank & Review: UCCC

CoC Public Postings

Summary

CoC's must demonstrate transparency in the local CoC competition results. Specifically, CoC's must post on their website, at least 2 days before the application submission deadline, all parts of the CoC Consolidated Application, including the CoC Application with attachments and the CoC Priority Listing with all project applications accepted and ranked, or rejected, and notify community members and key stakeholders that the CoC Consolidation

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

1. Screen shot of a website posting that demonstrates your CoC announced it was accepting project applications.
 - (b) Email announcing the final Rank & Review **Renewal Part 3 Tool** is ready for completion

Kathy Germain

From: Kathy Germain
Sent: Wednesday, September 22, 2021 7:37 AM
To: Michael Berg ; Victoria Read; Rhonda Garcia; Rhonda Langton; mderose@ghv.org
Subject: Interview Questions for Agencies Rank and Review
Attachments: UCCC Interview Agenda.docx; Part 3- Interview Questions- 2021.docx

Good Afternoon

Below is the information regarding Agency interviews as part of the final rank and review scoring of renewal projects. Interviews will take place Thursday, September 30th

Agencies will be asked to respond to the attached Interview questions. These questions directly relate to new HUD priorities that are linked to CoC scoring. To position the CoC to be able to access new bonus funds, it is important that the score on the consolidated portion of the application meet a high threshold. Your answers will assist us in writing narratives. Please review the questions and additional information about scoring criteria included in the attachment and come prepared to address these questions during your interview.

Agency Interview Times

Gateway Hudson Valley, Rhonda Langton 9:30-9:50 am

Family of Woodstock 10-11 am

People USA Rhonda Garcia 11:00-11:30

Join Zoom Meeting

<https://us06web.zoom.us/j/83126707036?pwd=c25rRDlnUEExwRjhFbW5aZzJJZU56dz09>

Meeting ID: 831 2670 7036

Please Note that Question #3- provides an opportunity for agencies to inform reviewers on challenges in working with the most vulnerable that may have reduced scoring in the HUD HMIS attachments. Attached to this email is the HMIS Data referenced in Question #3.

Please Note that Question #4 on Racial Equity was developed with program level data regarding minority populations served, this data will be sent to agencies when finalized.

I am asking that agencies are prepared with bullet point responses to each question as time is limited. If you need further explanation on any of the questions let me know I am happy to work through with you.

Kathy Germain

Planning Associate – CARES of NY, Inc.

200 Henry Johnson Blvd., Albany, NY 12210

518-489-4130 ext. 728

<http://www.caresny.org>

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

1. Screen shot of a website posting that demonstrates your CoC announced it was accepting project applications.

(c) Email Membership and website screen shot announcing the final Rank & Review **New Project Application & DV Bonus Tools** are ready for completion

From: [CARES Planning Team](#)
To: ["abab@co.ulster.ny.us"](mailto:abab@co.ulster.ny.us); ["Alice Mumper"](#); ["Alicia Schouten"](#); ["Allison McTague"](#); ["Allison Smith"](#); ["Amie Adams"](#); ["Amy Shields"](#); ["Andrew Martin"](#); ["Anezka Sebek"](#); ["Beatriz Valencia"](#); ["Bonnie Landi"](#); ["Brenna Robinson"](#); ["Brian Frances"](#); ["Callie Jayne"](#); ["Carla Bridges"](#); ["Catherine Emestica"](#); ["Catherine Maloney"](#); ["Chris Dennehy"](#); ["Christina Novak"](#); ["Craig Deraway"](#); ["Cynthia Bennett"](#); ["Dennis Doyle"](#); ["Diane Fauci"](#); ["Donna Bilyou"](#); ["Donna Muller"](#); ["Dr. John Mitchell"](#); ["Egidio Tinti"](#); ["egru@co.ulster.ny.us"](mailto:egru@co.ulster.ny.us); ["Eileen Walsh"](#); ["Elizabeth Bahr"](#); ["Ellen Pendegar"](#); ["Jackie Arsenuk"](#); ["Jay Quest"](#); ["John Colon"](#); ["Jordan Scruggs"](#); ["Kathy Hochman"](#); ["Kathy Germain"](#); ["Keith Bennett"](#); ["Kelly Warringer"](#); ["Kerren Bitner"](#); ["Kerry Wolfeil"](#); ["Kevin Bloomfield"](#); ["Kevin O'Connor"](#); ["Krysten Bullock"](#); ["Kyle Faulkner"](#); ["Lauren Sheeley"](#); ["Lehanne Sisco"](#); ["Lisa Burger"](#); ["Lisa McDonald"](#); ["Lisa Royer"](#); ["Margaret Hoffman"](#); ["Margaret Shlasko"](#); ["Maria Elena Ferrer-Harrington"](#); ["Maria Elena Kavouas"](#); ["Megan Arnold"](#); ["Megan Weiss"](#); ["Melissa Martinez"](#); ["miap@co.ulster.ny.us"](mailto:miap@co.ulster.ny.us); ["Michael Berg"](#); ["Michael Freer"](#); ["Monica Glosque"](#); ["Moses Edwards"](#); ["Nancy Schmidt"](#); ["Patricia Tuber"](#); ["Rhonda Garcia"](#); ["Rhonda Langton"](#); ["Richard Hoyl de Ortiz"](#); ["Salvador Altamirano-Segura"](#); ["Scott Butler"](#); ["Sheila Kilpatrick"](#); ["Stacey Rein"](#); ["Stephanie Turco"](#); ["Steven Masee"](#); ["Sue McDonough"](#); ["Sue Palmer"](#); ["Tamara Cooper"](#); ["Tara McDonald"](#); ["Tori Barnes"](#); ["Troy Snyder"](#); ["Victoria Read"](#); ["William Brown"](#); ["Yolanda Knox"](#)
Cc: [Amy Lacey](#); [Erin Reale](#); [Genesis Matvey](#); [Haleigh Schmidhamer](#); [Kathy Germain](#); [Kelsey Addy](#); [Maureen Van Deusen](#); [Nicholas Cassaro](#); [Samantha Barnaby](#)
Subject: Released for Completion CoC Funding Opportunities for New Projects: Deadline September 20, 2021
Date: Wednesday, September 8, 2021 2:42:00 PM
Attachments: [UCCC-2021-NEW-PROJECT-RFP.pdf](#)
[image001.png](#)
[image002.png](#)
[UCCC-2021-DV-Bonus-RFP-.pdf](#)

Good Afternoon Ulster County CoC Members,

The FY21 CoC New and DV Bonus applications for Rank & Review are now open for completion, are attached to this email, and can be found on the [CARES](#) website. Please feel free to extend this information broadly as New Project proposals will be considered from all eligible applicants regardless of whether an organization has previously received CoC Program funding.

The application must be completed by **COB Monday, September 20th** and submitted as a PDF attachment. Applications should be submitted to [Kathy Germain](#) using your agency name/project name as the subject line. **Please be aware all new project applications are due in Esnaps by October 1st** to meet HUD deadlines, even scoring through Rank and Review is not yet finalized.

As a reminder, CARES is hosting a webinar on 2021 CoC Funding Opportunities for New Projects tomorrow, September 9th, at 11:00am.

If you have any questions, please do not hesitate to reach out.


Thank you!

CARES Planning Team
200 Henry Johnson Blvd., Albany, NY 12210
(518) 489-4130 ext. 1
<http://www.caresny.org>

Rank and Review Online Forms

Programs participating in the Rank and Review process may need to complete the forms below.

These forms allow programs to enter DV data to be considered in the Rank and Review Process, submit requests to combine programs in the Rank and Review Data Attachments, and to confirm participating the Data Attachment process.

To learn more about these forms and the over process, please download this  [Rank and Review Online Form Submission Procedures document](#).

 DV HMIS Data Submission

 Data Attachments Confirmation

Rank & Review

NY 501 STEPS

NY 503 ACCH

NY 507 HSPB

NY 511 STHC

NY 512 RCHSC

NY 519 CGHC

NY 520 FEHC

NY 522 PNHC

NY 523 SNC

NY 601 DCHC

NY 606 RCCC

NY 608 UCCC

Ulster County CoC

2021 RANK & REVIEW DOCUMENTS

FINAL:  [2021 NY 608 Rank & Review Written Process](#)

2021 RENEWAL PROJECTS

All currently funded projects that are looking to be funded again must complete Rank and Review application materials below

 [NY-608 Rank and Review Part 1 Attachments Checklist](#)

 [NY-608 Rank and Review Application Tool](#)

Release Date: **June 7, 2021** Due Date: **June 21, 2021**

2021 NEW & BONUS PROJECTS

Any project looking to be funded for the first time must complete the appropriate RFP.

Applications due to Kathy Germain

New Project Application

 [NY-608 New Project Application](#)

Release Date: **September 8, 2021** Due Date: **September 20, 2021**

DV Bonus Application

 [NY-608 DV Bonus Application](#)

Release Date: **September 8, 2021** Due Date: **September 20, 2021**

[View Rank & Review Archives](#)

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

2. A copy of the document posted in advance that included point values for objective criteria your CoC would use to review and rank projects.
 - a) Email announcement and screen shot of public comment period for NY-608's draft Rank & Review **Renewal Part 1 & 2 Tool**

From: Kathy Germain

Sent: Thursday, May 6, 2021 3:30 PM

To: abab@co.ulster.ny.us; Alice Mumper <amumper@saugerties.ny.us>; Alicia Schouten <schouta@mail.amc.edu>; Allison McTague <amctague@rupco.org>; Allison Smith <Allison.Smith7@va.gov>; Amie Adams <aadams@astorservices.org>; Amy Shields <ashields@fowinc.org>; Andrew Martin <amartin@hvmhinc.org>; Anezka Sebek <anezka.sebek@gmail.com>; Beatriz Valencia <bvalencia@fowinc.org>; Bonnie Landi <ymcayb.landi@gmail.com>; Brenna Robinson <brobinson@kingston-ny.gov>; Brian Frances <bfrances@gatewayindustries.org>; Callie Jayne <callie@riseupkingston.org>; Carla Bridges <Ecarlabridges1@aol.com>; Catherine Emestica <cemestica@pathstone.org>; Catherine Maloney <Cmaloney@kingstonhousing.org>; Chris Dennehy <cdennehy@step1ny.org>; Christina Novak <CNovak@WestCOP.org>; Craig Deraway <cderaway@wesoldieron.org>; Cynthia Bennett <cbennet@fowinc.org>; Dennis Doyle <ddoy@co.ulster.ny.us>; Diane Fauci <dfauci@ulsterboces.org>; Donna Bilyou <dbilyeu@hvc.rr.com>; Donna Muller <mullerd3@mail.amc.edu>; Dr. John Mitchell <john.mitchell@omh.ny.gov>; Egidio Tinti <etinti@kingston-ny.gov>; egru@co.ulster.ny.us; Eileen Walsh <ewalsh@ucicare.com>; Elizabeth Bahr <ebahr@fowinc.org>; Ellen Pendegar <ependegar@mhainulster.com>; Jackie Arsenuk <ulster.safeharbour@gmail.com>; Jay Quest <jquest@rupco.org>; John Colon <jcolon@fowinc.org>; Jordan Scruggs <stjames.umc.outreach@gmail.com>; Kathy Hochman <khochman@rcal.org>; Kathy Germain <kgermain@rupco.org>; Keith Bennett <kben@co.ulster.ny.us>; Kelly Warringer <kwarringer@familyofwoodstockinc.org>; Kerren Bitner <mh1_ulster@cormedcare.com>; Kerry Wolfeil <kwolfeil@fowinc.org>; Kevin Bloomfield <kevin.bloomfield@va.gov>; Kevin O'Connor <koconnor@rupco.org>; Krysten Bullock <kbullock@fowinc.org>; Kyle Faulkner <kfaulkner@ulsterpolice.com>; Lauren Sheeley <lsheelley@lshv.org>; Lehanne Sisco <lsisco@fowinc.org>; Lisa Burger <lbur@co.ulster.ny.us>; Lisa McDonald <lmcdonald@rupco.org>; Lisa Royer <lisa@riseupkingston.org>; Margaret Hoffman <margareh@ugarc.org>; Margaret Shlasko <mshl@co.ulster.ny.us>; Maria Elena Ferrer-Harrington <mharrington@hahv.org>; Maria Elena Kavouas <mariak@projectstoempower.org>; Megan Arnold <Megan.Arnold@cccsos.org>; Megan Weiss <mweiss@familyofwoodstockinc.org>; Melissa Martinez <memartinez@institute2000.org>; miap@co.ulster.ny.us; Michael Berg <mberg@fowinc.org>; Michael Freer <mfrr@co.ulster.ny.us>; Monica Glosque <Monica.Glosque@hahv.org>; Moses Edwards <mce1026property@aol.com>; Nancy Schmidt <nsch@co.ulster.ny.us>; Patricia Tuber <ptuber@asfl.org>; Rhonda Garcia <rhondagarcia@projectstoempower.org>; Rhonda Langton <rlangton@gatewayindustries.org>; Richard Hoyl de Ortiz <richard@casaulster.org>; Salvador Altamirano-Segura <saltamirano@fowinc.org>; Scott Butler <butler@newpaltz.org>; Sheila Kilpatrick <skilpatrick@rupco.org>; Stacey Rein <reins@hvc.rr.com>; Stephanie Turco <STurco@gatewayindustries.org>; Steven Massee <smas@co.ulster.ny.us>; Sue McDonough <smco@co.ulster.ny.us>; Sue Palmer <spalmer@careny.org>; Tamara Cooper <tamaracooper999@hotmail.com>; Tara McDonald <tmcd@co.ulster.ny.us>; Tori Barnes <tbarnes@fowinc.org>; Troy Snyder <tsyd@co.ulster.ny.us>; Victoria Read <vread@fowinc.org>;

Willam Brown <wbrown@wesoldieron.org>; Yolanda Knox <ms.yolandapknox51@gmail.com>

Subject: Public Comment Notification: 2020 CoC Rank and Review Tool

Good Afternoon Ulster County CoC Members,

The comment period for the 2021 CoC Rank and Review Tool is now open. Please use the link below to view the document.

Please send all comments to kgermain@caresny.org on or before May 13, 2021.

[NY-608 CoC/Planning](#)

Thank You !

Kathy Germain

Planning Associate – CARES of NY, Inc.

200 Henry Johnson Blvd., Albany, NY 12210

518-489-4130 ext. 728

<http://www.caresny.org>



Programs participating in the Rank and Review process may need to complete the forms below.

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DV HMIS Data Submission **Combined HMIS Programs Submission** **Data Attachments Confirmation**

- Rank & Review
- NY 501 STEPS
- NY 503 ACCH
- NY 507 HSPB
- NY 511 STHC
- NY 512 RCHSC
- NY 519 CGHC
- NY 520 FEHC
- NY 522 PNHC
- NY 523 SNC
- NY 606 RCCC
- NY 608 UCCC**

Ulster County CoC

2021 RANK & REVIEW DOCUMENTS

FINAL: [2021 NY 608 Rank & Review Written Process](#)

DRAFT: 2021 NY 608 Rank & Review Tool **Public Comment Period: 5.6.21 - 5.13.21**

Please Submit Comments to [Kathy Germain](#)

View Rank & Review Archives

2020 Rank & Review: UCCC

CoC Public Postings

Summary

CoC's must demonstrate transparency in the local CoC competition results. Specifically, CoC's must post on their website, at least 2 days before the

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

2. A copy of the document posted in advance that included point values for objective criteria your CoC would use to review and rank projects.

b) Blank Rank & Review **Renewal Part 1 & 2 Tool**

ULSTER COUNTY CONTINUUM OF CARE
RANK AND REVIEW APPLICATION 2021
PART 1: SYSTEMS IMPACT: DATA AND OUTCOMES
DEADLINE TO SUBMIT: JUNE 21, 2021

PROJECT INFORMATION

1. Organization Name:

2. Project Name:

3. Application Contact Person:

4. Project Type: PSH RRH TH

5. FY19 Proposed Total Funding Request: \$ _____

Leasing \$ _____

Rental Assistance \$ _____

Supportive Services \$ _____

Operations \$ _____

Admin \$ _____

6. Permanent Housing Programs: Number of Contracted Beds/Units/Vouchers _____

7. What is the cost per bed (divide the number of proposed beds by the total HUD Request):

1. Utilization: Using the project's Federal Fiscal Year 2020 (FY20)* Program Application and FY20 APR, complete the chart below to calculate utilization rate (round to the closest whole number). Please attach relevant pages of Application and APR to this application. **(10 points)**

	Projected persons served during average PIT (Project Application Q5A)	Actual number served during PIT (APR Q 7 and 8)	
		Household	Persons
January	_____ Households _____ Persons		
April			
July			
October			
Average			

Households: Average Actual _____ / Projected _____ = **Utilization** _____

Persons: Average Actual _____ / Projected _____ = **Utilization** _____

1a. Did your project meet its projected number of households or persons served** during the year? Yes (5 pts) No (0 pts)

1b. The Continuum prioritizes projects that best utilize resources. Did your project have a utilization rate of more than 100% in *both* households and persons? Yes (5 pts)
 No (0 pts)

** Federal Fiscal Year 2020: October 1, 2019 – September 30, 2020*

*** For this tool only: Persons served is defined as having an entry in HMIS (i.e., intake, admission and move-in date) FY20*

2. Data Quality & Completeness: Based on your FY20 APR Q6: **Each yes=0 pts., each no is worth 3.75 pts. (10pts possible)**

2a. Is there an error rate of more than 5% of project participants' Personally Identifying Information? **Yes No**

2b. Is there an error rate of more than 5% of project's Universal Data elements?

Yes No

2c. Is there an error rate of more than 5% of project participants' Income and Housing data?

Yes No

2d. Is there an error rate of more than 5% of project's Chronic Homelessness data?

Yes No

3. Dedicated Chronic Homeless [ONLY PSH (RRH & TH projects will be weighted)] (FY20) Permanent Supportive Housing Programs: During Federal FY 20, the CoC **PSH projects** served a total of **24** chronically homeless individuals. Please refer to **Attachment 1** to note the following:

3a. The number of beds in the project which are dedicated to serving chronically homeless (CH): _____

20+ beds = 5 pts; 19-10 beds = 4 pts; 9-5 beds = 3 pts; 5-1 beds = 2; zero beds = 0 pts

3b. The percentage of CH contract beds the project contributes to the CoC (i.e., the impact of your project on ending chronic homelessness in Ulster.

50-100% = 5 pts; 31-40% = 4 pts; 21-30% = 3 pts; 11-20% = 2 pts; 0-10% = 0 pts

- 4. HMIS Attachment 2: Effect on Chronic Homeless (FY20)** During FY20, CoC funded projects served a total of 82 chronically homeless individuals. To show impact of this project on ending chronic homelessness, refer to **Attachment 2** to note the following:

Permanent Supportive Housing Programs ONLY

During FY20, the CoC's **PSH projects** served 80 chronically homeless (CH) individuals. To show project impact towards goal of ending CH, refer to **Attachment 2** to note:

4a. Total number of CH persons this project served in FY20: _____

4b. Of the total CH served by the CoC, note the % this project served in FY20: _____%

31-100% = 15 pts; 21-30% = 12 pts; 20-11% = 8 pts; 10-0 % = 0 pts

Rapid Rehousing Housing Programs ONLY

During FY20, the CoC's **RRH projects** served 2 chronically homeless (CH) individuals. To show project impact towards goal of ending CH, refer to **Attachment 2** to note:

4c. Total number of CH persons this project served in FY20: _____

4d. Of the total CH served by the CoC, note the % this project served in FY20: _____%

31-100% = 15 pts; 21-30% = 12 pts; 20-11% = 8 pts; 1-10%= 4pts; 0% = 0 pts

- 5. HMIS Attachment 3: Positive Outcomes:**

Permanent Housing Projects: During FY20, there were 159 persons with positive outcomes noted across all CoC PH (PSH/RRH/TH) programs. **(An exit is positive if an individual is a stayer or exited to a PH destination.)** To show the effect of this project on housing stability, refer to **Attachment 3** to note the following:

31-100% = 15 pts; 21-30% = 12pts; 11-20% = 8pts; 1-10% = 4; 0%= 0pts

Rapid Rehousing Projects: During FY20, there were 31 persons with positive outcomes noted across all CoC RRH programs. *An outcome is positive for RRH if client exited to a PH destination.* To indicate how this project contributed to housing stability across the system, please note the positive housing outcome rate listed in **Attachment 3:** _____%

31-100% = 15 pts; 21-30% = 12pts; 11-20% = 8pts; 1-10% = 4; 0%= 0pts

Transitional Housing Programs: During FY20, there were 25 persons with positive outcomes noted across all CoC TH programs. *An outcome is positive for TH if client exited*

to a PH destination. To indicate how this project contributed to housing stability across the system, please note the positive housing outcome rate listed in **Attachment 3**: _____

31-100% = 15 pts; 21-30% = 12pts; 11-20% = 8pts; 1-10% = 4; 0%= 0pts

6. HMIS Attachment 4: Exits to Homelessness:

To show impact of this project on ending homelessness, refer to **Attachment 4** (showing all CoC project leavers to homelessness) and note the percentage of project leavers who exited this program to a shelter or the street _____%

0-20% = 15 pts; 21-39% = 8; 40-100% = 0

7. HMIS Attachment 5: Effect on Income Growth: System Impact

To show impact of this project on total income growth in the Continuum, refer to **Attachment 5** which measures total income growth between the last two client assessments, and note the percentage that this project had on the system _____%

30%+ = 15; 29-10% = 12; 9-5% =8; 4-1% = 4 pts; 0%= 0 pts

8. Income Growth – Project Performance

(Refer to **APR Q19. Cash Income – Changes over Time** to respond to questions below.)

8a. What percentage of **stayers** gained or increased **earned income** between start and annual assessment? Note percent in **Q19a1. Row 1**) Number of Adults with Earned Income - **Column 9**) Performance Measure: Percent of Persons to accomplish this measure: _____%

75-100% = 5 pts; 50-74% = 3.75 pts; 25-49% = 2.5 pts; 15-24% = 1.25 pts; 0-14% = 0

8b. What percentage of **stayers** gained or increased **other income** between start and annual assessment? Note percent in **Q19a1. Row 3**) Number of Adults with Other Income - **Column 9**) Performance Measure: Percent of Persons to accomplish this measure: _____%

75-100% = 5 pts; 50-74% = 3.75 pts; 25-49% = 2.5 pts; 15-24% = 1.25 pts; 0-14% = 0

8c. What percentage of **leavers** gained or increased **earned income** between start and annual assessment? Note percent in **Q19a2. Row 1**) Number of Adults with Earned Income - **Column 9**) Performance Measure: Percent of Persons to accomplish this measure: _____%

75-100% = 5 pts; 50-74% = 3.75 pts; 25-49% = 2.5 pts; 15-24% = 1.25 pts; 0-14% = 0

8d. What percentage of **leavers** gained or increased **other income** between start and annual assessment? Note percent in **Q19a1. Row 3**) Number of Adults with Other Income - **Column 9**) Performance Measure: Percent of Persons to accomplish this measure: _____%

75-100% = 5 pts; 50-74% = 3.75 pts; 25-49% = 2.5 pts; 15-24% = 1.25 pts; 0-14% = 0

9. Priority Populations: (5 points for serving one or more priority populations as noted on the Project Application Q4B and/or Q5B)

Chronic _____

Family _____

Youth ages 18-24 _____

10. Complete the table below based on information from the project's most recently completed contract. (10 points)

	Final Award (\$) including budget mods	Amount Expended (\$)	Percentage Spent (Expended/Awarded)
Leasing			
Rental Assistance			
Supportive Services			
Operations			
Admin			
Total			

90-100=15 pts, 80-89=10 pts., 70-79=5 pts., under 69=0 pts.

11. Did the project draw down CoC funds for the project from ELOCCS at least quarterly in the most recently ended contract? (Please attach copies of last three drawdowns.)

Yes 5 pts **No 0 pts**

12. Housing First: Does your project follow core elements of the *Housing First* approach? Please check each "Yes" for each situation that your screening process will deny an income-eligible household access to your project: **Any Yes - 0 pts All No - 5 points**

	Yes	No
Active or history of substance use	<input type="checkbox"/>	<input type="checkbox"/>
Having a criminal record with exceptions for state-mandated restriction	<input type="checkbox"/>	<input type="checkbox"/>
Having too little or little income	<input type="checkbox"/>	<input type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input type="checkbox"/>	<input type="checkbox"/>
Failure to participate in supportive services	<input type="checkbox"/>	<input type="checkbox"/>
Failure to make progress on a service plan	<input type="checkbox"/>	<input type="checkbox"/>
Loss of income or failure to improve income	<input type="checkbox"/>	<input type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input type="checkbox"/>	<input type="checkbox"/>

13. Coordinated Entry

13a. Did your project make or receive referrals for potential new participants through the Coordinated Entry process (or through a parallel process for DV providers) in 2020? *(to be verified by the CoC CE Coordinator or supported with documents provided by the applicant)* **Yes 15 pts** **No 0 pts**

13.b. Did your agency attend at least 75 % of the coordinated entry team meetings in 2020? *(to be verified by the CoC CE Coordinator)* **Yes 10 pts** **No 0 pts**

ULSTER COUNTY CONTINUUM OF CARE
RANK AND REVIEW APPLICATION 2021
PART 2: WRITTEN QUESTIONS

1. **Utilization Rate:** This question should be answered **only** by projects which scored zero points on Q2 in Part 1 above. If your project did not achieve 100% utilization (i.e. number of projected/contracted households and/or persons served) during Federal Fiscal Year 2020, please explain why in 250 words or less. **0 to 10pts**

2. **Coordinated Entry (DV Projects Only) (Please refer to Q13 in Part 1)**
 - 2a. If project includes DV clients, explain barriers to direct participation in Coordinated Entry and if/how you engage with partners involved with CE (250 words or less). **0-5 pts**

3. **Leveraging and Coordination of Services:** Please provide specific examples of how your project coordinates services with other CoC members, HUD/VA, and STEHP funded projects. Please refer to specific programs (250 words or less). *(0-5 pts)*
 - **Up to 2.5 points if project gives specific examples of how project coordinates services with other CoC members.**
 - **Up to 2.5 points if project gives specific examples of how project coordinates services with HUD/VA and/or STEHP funded projects.**

4. Please describe how your agency is meeting the needs of clients facing various cultural barriers (e.g., language, LGBTQ, mental health) in 250 words or less. (0-10 pts)
 - **Up to 5 pts awarded if the narrative clearly describes how the agency is trying to meet the needs of clients with cultural barriers, please provide an example.**

5. How do you currently work with local employment agencies, employers and or partners to advance training and employment opportunities for people experiencing homelessness?
0 to 5 points

6. How have you adjusted your service delivery model to help clients during the pandemic? **0 to 5 points**
 - **2.5 points for continuing at least monthly contact with clients (including virtually)**
 - **2.5 points for ensuring clients have necessary cleaning/sanitary supplies**

7. Explain how your organization worked with new partners (e.g., DOH, Health Providers/Pharmacies) to meet the health care needs of clients and how these partnerships can help build stronger and more equitable homeless response systems. **0 to 5 points**
 - **2.5 points for exemplifying partnerships were made to meet the health care needs of persons in the program**
 - **2.5 points for exemplifying partnerships will build a more equitable homelessness response system in the future**
8. What is your agency doing to forward racial diversity, equity and inclusion work within your agency and/or CoC-funded program? **0 to 5 points**
(ex. Internal diversity committees or teams have been formed, staff training)

FOR DV AND YOUTH PROVIDERS ONLY BONUS QUESTIONS

11. **DV Providers Only:** The CoC acknowledges that positive outcomes for domestic violence programs may be measured differently than mainstream permanent supportive housing programs. With that being said, how does your agency contribute to the housing stability of clients within this CoC funded program? **(15 pts)**
 - **Up to 7.5 pts awarded if the narrative clearly describes positive outcomes through the DV provider lens.**
 - **Up to 7.5 pts awarded if the narrative clearly describes how the agency contributed to positive housing stability across the CoC.**
12. **Youth Providers Only:** The CoC acknowledges that additional barriers occur for youth compared to adults when looking at increasing income. With that being said, how do you feel your agency contributes to increasing income for youth within this CoC program? **(15 pts)**
 - **Up to 7.5 pts awarded if the narrative clearly describes positive outcomes through the youth provider lens.**
 - **Up to 7.5 pts awarded if the narrative clearly describes how the agency contributed to positive outcomes across the CoC.**

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

2. A copy of the document posted in advance that included point values for objective criteria your CoC would use to review and rank projects.
 - c) Email announcement for NY-608's Rank & Review **Renewal Part 3 Tool**

Kathy Germain

From: Kathy Germain
Sent: Wednesday, September 22, 2021 7:37 AM
To: Michael Berg ; Victoria Read; Rhonda Garcia; Rhonda Langton; mderose@ghv.org
Subject: Interview Questions for Agencies Rank and Review
Attachments: UCCC Interview Agenda.docx; Part 3- Interview Questions- 2021.docx

Good Afternoon

Below is the information regarding Agency interviews as part of the final rank and review scoring of renewal projects. Interviews will take place Thursday, September 30th

Agencies will be asked to respond to the attached Interview questions. These questions directly relate to new HUD priorities that are linked to CoC scoring. To position the CoC to be able to access new bonus funds, it is important that the score on the consolidated portion of the application meet a high threshold. Your answers will assist us in writing narratives. Please review the questions and additional information about scoring criteria included in the attachment and come prepared to address these questions during your interview.

Agency Interview Times

Gateway Hudson Valley, Rhonda Langton 9:30-9:50 am

Family of Woodstock 10-11 am

People USA Rhonda Garcia 11:00-11:30

Join Zoom Meeting

<https://us06web.zoom.us/j/83126707036?pwd=c25rRDlnUEExwRjhFbW5aZzJJZU56dz09>

Meeting ID: 831 2670 7036

Please Note that Question #3- provides an opportunity for agencies to inform reviewers on challenges in working with the most vulnerable that may have reduced scoring in the HUD HMIS attachments. Attached to this email is the HMIS Data referenced in Question #3.

Please Note that Question #4 on Racial Equity was developed with program level data regarding minority populations served, this data will be sent to agencies when finalized.

I am asking that agencies are prepared with bullet point responses to each question as time is limited. If you need further explanation on any of the questions let me know I am happy to work through with you.

Kathy Germain

Planning Associate – CARES of NY, Inc.

200 Henry Johnson Blvd., Albany, NY 12210

518-489-4130 ext. 728

<http://www.caresny.org>

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

2. A copy of the document posted in advance that included point values for objective criteria your CoC would use to review and rank projects.

d) Blank Rank & Review **Renewal Part 3 Tool (interview questions)**

2021 Rank & Review Interview Questions

These questions have been formed by CARES to focus on the 2021 HUD Policy Priorities as noted in the NOFO. Each question should be answered in no more than **5 minutes**. Check page two for interview tips and scoring criteria.

1. Describe the support services your project has tailored to serve persons coming from an unsheltered situation. (1 pt)
2. Does your agency have someone with lived experience of homelessness within its Executive Leadership, who is involved with programmatic and funding decisions? (1 pt)
3. The CoC scores each programs' impact on system performance measures in Part 1 of the rank and review tool (refer to Part 1 Data Attachments). If you felt your project performed low on any section of Part 1 due to serving particularly vulnerable populations or households with severe needs (e.g., chronically homeless, substance use, severe mental illness, history of domestic violence, criminal history), please explain. (1 or 2 pts)
4. Are those in your project racially representative of those in your CoC's homeless population? (Use Part III HMIS Attachment provide by CARES to respond) (1 pt)
 - a. If yes, how did your project achieve an equitable mirroring of program participants compared to the homeless population demographics in the CoC?
 - b. If not, how is your project working to improve outreach and assess policies that may be contributing to this racial disparity?

Interview questions were formulated based on HUD priorities as outlined in the 2021 NOFO. Check out the HUD priorities that informed Part 3 interview questions here:

<https://caresny.org/nofo-2021/#Priorities>

How to Have a Successful Interview:

- **Prepare responses to each interview question in advance.** Applicants will only have the time allotted for your interview to respond to each question, so preparation is key to maximize your opportunity to gain all available points. Make sure to reference the attachments provided by CARES in your responses.
- **Keep responses succinct.**
- For agencies interviewing for more than one project, make sure to note when a response applies to some or all projects and when a distinction needs to be made. Each project will be scored separately.

Scoring Criteria *(5 total points available):*

Question 1: 1-Point if program describes providing ample support services tailored to persons coming from an unsheltered situation.

Question 2: 1-Point if agency answers “Yes”.

Question 3: (Use Part 1 Data Attachments provided by CARES to respond)

1-Point-All program system performance measures are above average.

2-Points if agency explains it had low performance measures due to serving particularly vulnerable populations or households with severe needs, and how they are working to improve those outcomes.

Question 4: (Use HMIS Demographic Data provided by CARES to respond)

1-Point if agency explains either: how they achieved an equitable mirroring of program participants compared to the homeless population demographics in the CoC; or a thorough plan to improve outreach and assess policies that may be contributing to this disparity.

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

2. A copy of the document posted in advance that included point values for objective criteria your CoC would use to review and rank projects.

e) Email announcement and screen shot of public comment period for NY-608's draft Rank & Review **New Project Application & DV Bonus Tools**

Kathy Germain

From: Kathy Germain
Sent: Monday, August 30, 2021 4:41 PM
To: abab@co.ulster.ny.us; Allison.Smith7@va.gov; boshea@kingstonhousing.org; cdennehy@step1ny.org; Christina Novak (cnovak@westcop.org); Dennis Doyle ; Dominique Mills; donnadell@fowinc.org; dwells@saugerties.ny.gov; eburud@lshv.org; eflynn@kingston-ny.gov; gavin.walters@hvcvr.org; Geoff Raiti ; hector.morell@cccsos.org; JCross@hudsonvalleycs.org; jnad@co.ulster.ny.us; Kathy Germain; Kevin.keaveny@gmail.com; kvargas@rupco.org; kwolfeil@fowinc.org; luis.nobondo@childrenshome.us; Margaret Shlasko; mcoz@co.ulster.ny.us; mderose@ghv.org; Michael Berg ; Monica.Glosque@hahv.org; msch@co.ulster.ny.us; mullerd3@mail.amc.edu; nkabalkin@hudsonvalleycs.org; p.criswell@lgbtqcenter.org; pkarr@familyservicesny.org; Rhonda Garcia; rlangton@ghv.org; Salvador Altamirano; shinchey@uccas.com; shutton@fpcny.org; staceyrein@ulsterunitedway.org; Sue McDonough ; Sue Palmer; swag@co.ulster.ny.us; Tara.Amodio@hahv.org; Victoria Read; ymcayb.keating@gmail.com
Subject: Public Comment for New and DV Bonus Applications is Open

Good Afternoon Ulster CoC Members,

As you know there is funding available from HUD for New and DV Bonus through the 2021 competition. The comment period for the 2021 CoC Rank and Review New & DV Bonus Applications is now open. Please use the link below to view the document.

<https://caresny.org/nofo-2021/#608> UCCC

Please send all comments to kgermain@caresny.org before **Friday, September 3, 2021.**

Kathy Germain

Planning Associate – CARES of NY, Inc.

200 Henry Johnson Blvd., Albany, NY 12210

518-489-4130 ext. 728

<http://www.caresny.org>



- Rank & Review
- NY 501 STEPS
- NY 503 ACCH
- NY 507 HSPB
- NY 511 STHC
- NY 512 RHSC
- NY 519 CGHC
- NY 520 FEHC
- NY 522 PNHC
- NY 523 SNC
- NY 601 DCHC
- NY 606 RCCC
- NY 608 UCCC**

Ulster County CoC

2021 RANK & REVIEW DOCUMENTS

**Public Comment Period for Below Draft Documents:
August 30, 2021 through September 3, 2021**

- DRAFT: [NY-608 New Project Application](#)
- DRAFT: [NY-608 DV Bonus Application](#)
- [Submit Comments to Kathy Germain](#)

FINAL: [2021 NY 608 Rank & Review Written Process](#)

2021 RENEWAL PROJECTS

All currently funded projects that are looking to be funded again must complete Rank and Review application materials below

- [NY-608 Rank and Review Part 1 Attachments Checklist](#)
 - [NY-608 Rank and Review Application Tool](#)
- Release Date: **June 7, 2021** Due Date: **June 21, 2021**

View Rank & Review Archives

- + 2020 Rank & Review: UCCC

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

2. A copy of the document posted in advance that included point values for objective criteria your CoC would use to review and rank projects.

f) Blank Rank & Review **New Application Tool**

Ulster County Continuum of Care (UCCC): New Project RFP 2021 (Reallocation and/or Bonus Projects)

Application not to exceed three (3) pages.

1. Applicant/Agency Name: _____

2. Agency Point of Contact: _____

3. Proposed Project Name: _____

4. **Please circle the project type you are applying for:**

A) Permanent Supportive Housing that is either Dedicated PLUS OR has 100% of beds dedicated to persons experiencing chronic homelessness.

B) Permanent Housing-Rapid Rehousing

C) Joint TH and PH-RRH (project must be housing first)

D) HMIS (HMIS Lead Only)

E) Support Services Only-Coordinated Entry Project

5. Is the project you are applying for a new or expansion project? **Yes ___ No ___**

6. Is the applicant a current member of the UCCC Continuum of Care (CoC)?

Yes ___ 10 points No ___ 0 points

7. Is the agency applying a current CoC funded grantee? **Yes ___ 0 points No ___ 5 points**

a. If yes, are there any unresolved monitoring or audit findings from HUD or the CoC?

Yes ___ 0 points No ___ 5 points

8a. Does your Agency prioritize referrals from Coordinated Entry? **Yes ___ 3 pts No ___ 0 pts**

8b. Will your agency only accept clients from Coordinated Entry? **Yes ___ 3 pts No ___ 0 pts**

9. Does your agency currently report in the CoC's HMIS system? If not, how will you implement HMIS for this project? **(0-5 pts)**

Ulster County Continuum of Care (UCCC): New Project RFP 2021 (Reallocation and/or Bonus Projects)

10. Please provide a project description that addresses the entire scope of your project. Please include the target population that will be served and the outreach plan. If the proposed project follows a Housing First model, please specifically detail Housing First aspects. **(0 – 20 points)**

- 10 points if you outline a detailed strategy that will be used to help participants regain and maintain housing stability.
- 1 point if the project clearly states the number of units/beds requested
- 2 points if an outreach plan is note
- 2 points if the budget notes at least 80 percent of the requested funds are dedicated to housing
- 5 points if the narrative details how the project will implement the housing first model

11. Both HUD and the local community prioritize projects that provide healthcare services to program participants. Does your project (or will your project by the time of CoC Application submission) have a written commitment with a health care organization that ensures the value of assistance being provided is at least:

In the case of a substance abuse treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who qualify and choose those services, OR

*An amount that is equivalent to 25 percent of the funding being requested for the project will be covered by the healthcare organization. Value of the commitment and dates of services must be included in the written commitment. **Yes __ 10 points No __ 0 points***

N/A for applications for Coordinated Entry; these questions will be weighted.

12. Both HUD and the local community prioritize projects that incorporate PSH or RRH units using funds other than CoC or ESG (i.e. ESSHI, NYSSHP, private sources such as CDPHP). Will your project expand upon an awarded or existing PSH or RRH project not funded through CoC or ESG? **Yes __ 10 points No __ 0 points**

N/A for applications for Coordinated Entry; these questions will be weighted.

Please note: projects must attach letters of commitment, contracts, or other formal written documents that demonstrate the number of subsidies or units being provided to support the project, exemplifying the existing resources provide for at least 25% of the units proposed for the expanded project.

Ulster County Continuum of Care (UCCC): New Project RFP 2021 (Reallocation and/or Bonus Projects)

13. Does your agency have a policy focused on ensuring equitable services and program outcomes across participants of all races and ethnicities? **Yes __ 5 points No __ 0 points**

14. How will the agency ensure program participants have the resources they need to prevent transmission of COVID-19? **(0-3 points)**

- 1 point if the agency has/will have a partnership with a healthcare agency that provides regular health screenings
- 1 point if the agency will provide PPE/sanitation supplies to staff/program participants as needed
- 1 point if the agency describes how it will build COVID-19 vaccine confidence

N/A for applications for Coordinated Entry; these questions will be weighted.

15. Will the project be able to begin within 12 months? **Yes__ 5 points No__ 0 points**

16. Please provide a 12-month Budget Proposal (required for review):

ACTIVITY	CoC FUNDS REQUESTED	NOTES
A. Rental Assistance (80% total budget less Admin)	\$	
B. Support Services (20% total budget less Admin)	\$	
1. Salaries	\$	
2. Benefits	\$	
3. Other	\$	
C. Operating	\$	
D. Admin	\$	
E. Total Project Costs	\$	
MATCH	AMOUNT	SOURCE
F. 25% Match Requirement	\$	

1E-1: Announcement of 30-Day Local Competition Deadline – Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects.

2. A copy of the document posted in advance that included point values for objective criteria your CoC would use to review and rank projects.

g) Blank Rank & Review **DV Bonus Tool**

Ulster County Continuum of Care DV Bonus Project RFP 2021

Application may not exceed three (3) pages

1. Applicant/Agency Name: _____
2. Agency Point of Contact: _____
3. Proposed Project Name: _____
4. **Please circle the project type you are applying for:**
 - A. Permanent Housing-Rapid Rehousing *(project must be housing first)
 - B. Joint TH and PH-RRH-Must be housing first *(project must be housing first)
 - C. Support Services Only-Coordinated Entry Project – if CoC already has a CE project the application must be an expansion.
5. Is the project you are applying for a new or expansion project? Yes ___ No ___
6. Is the applicant a current member of the Ulster County Continuum of Care (CoC)?
Yes ___ 20 points No ___ - 0 points
 - a. If no, what is the agency's current involvement with the Ulster County CoC?
7. Is the agency applying as a current CoC funded grantee? **Yes ___ 5 pts No ___ 10 pts**
 - b. If yes, are there any unresolved monitoring or audit findings from HUD or the CoC? **Yes ___ 0 points No ___ 3 points**
8. Please provide a detailed description of the agency's experience in administering projects dedicated to serving survivors of domestic violence, dating violence and stalking. Please specify the name of current or past programs and note the funding sources **(10 points)**
 - 3 points for past experience serving a domestic violence survivor population
 - 3 points for four or more years serving a domestic violence survivor population
 - 3 points for serving more than 25 households in a calendar year (CY)
 - 1 point for listing funding sources

Ulster County Continuum of Care DV Bonus Project RFP 2021

9. Please provide a description addressing the entire scope of your project. Please include an outreach plan to the targeted population. Specify whether the project will be a Rapid Rehousing (PH-RRH) project, Joint TH and PH-RRH component project or a SSO project for Coordinated Entry (SSO-CE) designed to implement policies, procedures and practices to equip the CoC's Coordinated Entry system to better meet the needs of survivors of domestic violence, dating violence, sexual assault or stalking (e.g., policies and procedures that are trauma informed, client centered or to improve the referral process between the CoC's Coordinated Entry and victim service providers Coordinated Entry systems where they are different). Please provide details about Housing First aspects of the project.

(0 - 25 points)

- 10pts if the project narrative clearly details how the project will implement the Housing First model
- 8 pts if a clear and detailed outreach plan is included
- 5 pts if the project clearly states the number of units/beds requested
- 2 pts if applying for an SSO-CE project

7. Please describe how the need for this project within this geographic area was identified. Please quantify the need using an HMIS comparable database and/or a local data source?
Agency will receive full points if they have demonstrated the need.
Yes__ 10 points No__ 0 points

8. Does your agency have a policy focused on ensuring equitable services and program outcomes across participants of all races and ethnicities? **Yes __ 5 points No __0 points**

9. How will the agency ensure program participants have the resources they need to prevent transmission of COVID-19? **(0-3 points)**

- 1 point if the agency has/will have a partnership with a healthcare agency that provides regular health screenings
- 1 point if the agency will provide PPE/sanitation supplies to staff/program participants as needed
- 1 point if the agency describes how it will build COVID-19 vaccine confidence

N/A for applications for Coordinated Entry; these questions will be weighted.

10. Please detail the steps your agency takes to ensure the safety of program participants.

(0-5 points)

- 1 point if agency uses de-identified aggregate data from a comparable database.
- 2 points if agency has safety, planning, and confidentiality protocols in place for DV project participants.
- 2 points if agency uses a trauma-informed, victim-centered approach to their project.

Ulster County Continuum of Care DV Bonus Project RFP 2021

11. Will the project be able to start within 12 months? **Yes ___ 10 pts No ___ 0 pts**

12. A. Does your Agency prioritize referrals from Coordinated Entry? **Yes ___ 3 pts No ___ 0 pts**
 B. Will your agency only accept clients from Coordinated Entry? **Yes ___ 3 pts No ___ 0 pts**

13. Does your agency currently report in a DV system that is compatible to the HMIS system? If not, how will you implement a compatible HMIS system for this project, for reporting purposes? **(0-5 pts)**

14. Please provide a 12-month Budget Proposal (required for review):

ACTIVITY	CoC FUNDS REQUESTED	NOTES
A. Rental Assistance (80% total budget less Admin)	\$	
B. Support Services (20% total budget less Admin)	\$	
1. Salaries	\$	
2. Benefits	\$	
3. Other	\$	
C. Operating	\$	
D. Admin	\$	
E. Total Project Costs	\$	
MATCH	AMOUNT	SOURCE
F. 25% Match Requirement	\$	

1E-2: Project Review and Ranking Process Your CoC Used in its Local Competition.

This attachment details the Rank & Review process for **NY-608** as noted in their Written Process. Blank tools have been attached for the renewal, new and Bonus/DV Applications and a Scorecard example for the renewal Rank & Review tool. The attachment contains the following:

- 1. Scoring tool your CoC used in your local competition to score new and renewal application.**
 - (a) NY-608's Rank and Review Written Process
 - (b) Blank Renewal Application Tool
 - (c) Blank New Project Application Tool
 - (d) Blank Bonus/DV Application Tool

- 2. A copy of one scored application form**
 - (a) Objective Criteria and System Performance Criteria Chart with Point Values
 - (b) Renewal Application score card (filled out)

- 3. Final project scores for ranked new and renewal projects (Ranking and Tiering)**
 - (a) Ranking and Tiering PDF

1E-2: Project Review and Ranking Process Your CoC Used in its Local Competition.

1. Scoring tool your CoC used in your local competition to score new and renewal applications.

(a) NY 608's Rank and Review Written Process

ULSTER COUNTY CONTINUUM OF CARE

2021 RANK AND REVIEW PROCESS

Annual Rating and Ranking Procedure of the CoC Project Ranking

Applications will be updated annually based on HUD's Federal Register. The Collaborative Applicant (CA) will read the Federal Register, make the updates, and then send the recommended updates to the Board. At least three members of the Rank and Review Committee will be appointed by the Board of Directors. The Rank and Review committee will review the Rank and Review Written Process, Performance Measures Ranking tool developed from the previous year, New/Bonus tool, and choose reviewers for the Review Team. All revisions will go to the board for approval.

Each applicant is required to provide the Rank and Review Committee with all documentation required to complete the Project Ranking form.

Deadlines for applications will be based each year on the Notice of Funding Allocation (NOFA). Each NEW and RENEWAL project sponsor shall submit the appropriate application along with the required documents in a single electronic submission in ***esnaps by the identified due date by 3 pm. Late applications received within 48 hours of the due date will receive a 5-point score reduction. Late applications received after 48 hours may not be scored. The CA will review all applications for completeness and prepare the applications for the Rank and Review Committee Review Team's review.***

Ranking Process

The scoring tool used to review, and rank projects will be revised annually based upon HUD requirements and recommendations from the Rank and Review Committee with input from CoC applicants. The Review Committee members are identified based upon the procedures listed above. The CA prepares the renewal application packet used for ranking and provides instructions and training for the applicants. Applicants are offered Technical Assistance from the CA in completing their packets to ensure accuracy. The CA prepares the information for the Review Committee including a scoring tool. The Review Committee receives the information at least 5 days before the ranking meeting.

Renewal Projects are required to complete a Rank & Review Renewal Application. An application must include responses to all questions as well as required data and/or attachments from the most recent project application and Federal Fiscal Year APR and be packaged and delivered in order to be considered complete. All completed

applications will be shared with and reviewed by the Review Team. Late submissions, including incomplete submissions, will receive a 5-point penalty.

The 2021 Rank & Review Application process will occur in three (3) phases, however phases 1 and 2 will be combined. The intent of a three-phased process is to allow agencies adequate time to review project-level and system-level data.

- Phase 1 focuses on quantitative project and system outcome data using the prior calendar year project APR and Federal Fiscal year 2020 HMIS System Performance data to “prioritize” projects. (Please see Data Training and Sign-Off for Phase 1 Section below)
- Phase 2 focuses on qualitative project and system outcome data; allowing staff to explain unique circumstances that affect project performance.
- Phase 3 of the Rank & Review Process includes project interviews with the Review Team. After release of the NOFA, the CoC Committee will draft questions based on specific criteria mentioned within the Rank & Review Application to be asked during project interviews. Projects will receive these questions prior to the interview and may provide the Review Team with written answers prior to the interview. Interviews may assist the reviewers in awarding additional points.

The Review Team reviews all renewal applications and are offered an opportunity to interview applicants before final scoring is completed. The Review Team scores the applications, and the CA summarizes the results and process and sends back to Rank and Review committee members for approval. The Rank and Review Committee reports the results of the scoring to the Board that approves the recommendations. Prior to finalizing the scoring, the CA meets with each applicant to review their scoring and notifies in writing any applicant that is rejected from the CoC annual submission.

Data Training and Sign-Off for Phase 1

Applicants must attend the mandatory data training webinar, review data attachments provided by the Collaborative Applicant, and sign-off (within a one-week period) stating the data is correct. *If the data sign-off form is not completed by the provided date, it will be assumed the data is correct.* If edits to the data are noted within the one-week timeframe, those edits will be reviewed and made, if applicable, by the CARES

HMIS Team. If edits to the data are made after the one-week timeframe, those edits will not be made by the Collaborative Applicant. The agency may present any proposed errors to the Review Team during the Appeals Process (see below), the Review Team will then decide on awarding additional points based on what the agency presents.

UCCOC Ranking Appeal Process

An appeal process will be offered to all applicants for Continuum of Care funding whose projects were ranked and reviewed. The appeal process will be limited to a review of objective content to determine if a technical or mathematical error occurred in the rank and review process. New or revised applications will not be permitted. Appeals that are based on disagreements with the judgments of the Review Team will not be permitted.

The process consists of the following steps:

- Projects are notified of their application score and subsequent ranking.
- Projects have three business days to request a meeting with the Collaborative Applicant to review the scored tool.
- Projects have one week from the review date with the CARES Consultant to request an appeal in writing.

As stated above, appeals may only be based on an error having been made during scoring, primarily mathematical errors. No changes or additions are allowed to be made to the Rank and Review Application, including no additional information or changes to narratives.

Written appeals should be sent to the following entities: Board Chair(s), Rank and Review Committee Chair(s), and the Collaborative Applicant.

- The Review Team also acts as the Appeals Committee – the Committee will be notified of the written appeals received.
- The Review Team will meet to review the request. If deemed appropriate changes to the scoring may be made at the time. If necessary, a meeting with the project appealing will be scheduled for further discussion in regard to the appeal, after which a decision will be made.
- Agencies will be notified of the outcome of their appeals within two days of the Appeals Committee’s (Review Team) decision. The Appeals Committee decision is final.

Written Standards for Determining Assistance

The UCCOC's open process for determining assistance is part of its governance charter under Section 1.6 Guiding Principles. These principles encourage an inclusive structure that encourages a full range of opinions and project applications from individuals, members or entities with knowledge of homelessness or an interest in preventing or ending homelessness. There is an open and transparent process that guides the UCCOC in announcing both renewal and new project availability. The UCCOC undertakes a comprehensive review of projects by applying approved scoring criteria and selection priorities when ranking and tiering projects for funding, including the review of transitional housing for cost-effectiveness and performance.

UCCOC-funded programs will have as few barriers to housing as possible and follow a harm reduction philosophy. Prioritizing rapid placement and stabilization in permanent housing based on the needs and desires of the individual(s) without participation requirements or preconditions.

Reallocation Process

Once the Review Team completes the scoring of renewal programs, they will meet with the project applicants to review their scores. The Rank and Review Committee will then compile the final ranking scores and send them to the board for their review and approval. The committee report will include additional technical assistance suggestions that can improve the underperforming programs(s). An underperforming program is any program scoring 65% or lower than the total points available on the rank and review tool. If this is the case, the application is included for renewal and technical assistance is arranged and follow up reviews are scheduled at quarterly intervals. If the program continues to be underperforming after a year of assistance, the program is reviewed by the board to determine if the project should be considered for reallocation the following year. If the Rank and Review Committee determines through objective evidence that any underperforming project(s) will not benefit from additional assistance, they will schedule a meeting with the applicant and the board to discuss the possibility of reallocation via email. If a project is recommended for reallocation, the agency is notified as soon as possible but at least 14 days prior to the due date of the CoC application to HUD.

New Projects as a Result of Bonus, Reallocation, or Pro-Rata Availability

When the CoC is able to request project applications from the community due to availability of funds through bonuses, pro-rata, or reallocation, the CoC will advertise and distribute to its membership a public notice requesting application. The CoC's priorities and details of eligible

applications, as defined by the current year's NOFA, will be reviewed with the board and membership. The due date for submission to the CoC will be at least 30 days prior to the due date of the CoC Collaborative Application. ***Any applicant interested in applying for new or bonus funds must submit an application by the posted submission date. Additional applications will be submitted in esnaps within one week of e-mail notification from CA to proceed. New and reallocated projects will have their own scoring criteria based upon local priorities and needs. New and bonus applications will be scored separately from renewal projects.*** If there is no availability of funds for new applications through bonuses, pro-rata or reallocation, the CoC will post a public notice that it is not accepting new applications for the current CoC Application.

Project Ranking and Tiering Approval

Once the review process is completed, the final ranking and tiering is presented by the Rank and Review Committee to the Board who approves it. The approved ranking and tiering are then shared with the full Membership.

1E-2: Project Review and Ranking Process Your CoC Used in its Local Competition.

1. Scoring tool your CoC used in your local competition to score new and renewal applications.

(b) Blank Renewal Application Tool

ULSTER COUNTY CONTINUUM OF CARE
RANK AND REVIEW APPLICATION 2021
PART 1: SYSTEMS IMPACT: DATA AND OUTCOMES
DEADLINE TO SUBMIT: JUNE 21, 2021

PROJECT INFORMATION

1. Organization Name:

2. Project Name:

3. Application Contact Person:

4. Project Type: PSH RRH TH

5. FY19 Proposed Total Funding Request: \$ _____

Leasing \$ _____

Rental Assistance \$ _____

Supportive Services \$ _____

Operations \$ _____

Admin \$ _____

6. Permanent Housing Programs: Number of Contracted Beds/Units/Vouchers _____

7. What is the cost per bed (divide the number of proposed beds by the total HUD Request):

1. Utilization: Using the project’s Federal Fiscal Year 2020 (FY20)* Program Application and FY20 APR, complete the chart below to calculate utilization rate (round to the closest whole number). Please attach relevant pages of Application and APR to this application. **(10 points)**

	Projected persons served during average PIT (Project Application Q5A)	Actual number served during PIT (APR Q 7 and 8)	
		Household	Persons
January	_____ Households _____ Persons		
April			
July			
October			
Average			

Households: Average Actual _____ / Projected _____ = **Utilization** _____

Persons: Average Actual _____ / Projected _____ = **Utilization** _____

1a. Did your project meet its projected number of households or persons served** during the year? Yes (5 pts) No (0 pts)

1b. The Continuum prioritizes projects that best utilize resources. Did your project have a utilization rate of more than 100% in *both* households and persons? Yes (5 pts)
 No (0 pts)

** Federal Fiscal Year 2020: October 1, 2019 – September 30, 2020*

*** For this tool only: Persons served is defined as having an entry in HMIS (i.e., intake, admission and move-in date) FY20*

2. Data Quality & Completeness: Based on your FY20 APR Q6: **Each yes=0 pts., each no is worth 3.75 pts. (10pts possible)**

2a. Is there an error rate of more than 5% of project participants' Personally Identifying Information? **Yes No**

2b. Is there an error rate of more than 5% of project's Universal Data elements?

Yes No

2c. Is there an error rate of more than 5% of project participants' Income and Housing data?

Yes No

2d. Is there an error rate of more than 5% of project's Chronic Homelessness data?

Yes No

3. Dedicated Chronic Homeless [ONLY PSH (RRH & TH projects will be weighted)] (FY20) Permanent Supportive Housing Programs: During Federal FY 20, the CoC **PSH projects** served a total of **24** chronically homeless individuals. Please refer to **Attachment 1** to note the following:

3a. The number of beds in the project which are dedicated to serving chronically homeless (CH): _____

20+ beds = 5 pts; 19-10 beds = 4 pts; 9-5 beds = 3 pts; 5-1 beds = 2; zero beds = 0 pts

3b. The percentage of CH contract beds the project contributes to the CoC (i.e., the impact of your project on ending chronic homelessness in Ulster.

50-100% = 5 pts; 31-40% = 4 pts; 21-30% = 3 pts; 11-20% = 2 pts; 0-10% = 0 pts

- 4. HMIS Attachment 2: Effect on Chronic Homeless (FY20)** During FY20, CoC funded projects served a total of 82 chronically homeless individuals. To show impact of this project on ending chronic homelessness, refer to **Attachment 2** to note the following:

Permanent Supportive Housing Programs ONLY

During FY20, the CoC's **PSH projects** served 80 chronically homeless (CH) individuals. To show project impact towards goal of ending CH, refer to **Attachment 2** to note:

4a. Total number of CH persons this project served in FY20: _____

4b. Of the total CH served by the CoC, note the % this project served in FY20: _____%

31-100% = 15 pts; 21-30% = 12 pts; 20-11% = 8 pts; 10-0 % = 0 pts

Rapid Rehousing Housing Programs ONLY

During FY20, the CoC's **RRH projects** served 2 chronically homeless (CH) individuals. To show project impact towards goal of ending CH, refer to **Attachment 2** to note:

4c. Total number of CH persons this project served in FY20: _____

4d. Of the total CH served by the CoC, note the % this project served in FY20: _____%

31-100% = 15 pts; 21-30% = 12 pts; 20-11% = 8 pts; 1-10%= 4pts; 0% = 0 pts

- 5. HMIS Attachment 3: Positive Outcomes:**

Permanent Housing Projects: During FY20, there were 159 persons with positive outcomes noted across all CoC PH (PSH/RRH/TH) programs. **(An exit is positive if an individual is a stayer or exited to a PH destination.)** To show the effect of this project on housing stability, refer to **Attachment 3** to note the following:

31-100% = 15 pts; 21-30% = 12pts; 11-20% = 8pts; 1-10% = 4; 0%= 0pts

Rapid Rehousing Projects: During FY20, there were 31 persons with positive outcomes noted across all CoC RRH programs. *An outcome is positive for RRH if client exited to a PH destination.* To indicate how this project contributed to housing stability across the system, please note the positive housing outcome rate listed in **Attachment 3:** _____%

31-100% = 15 pts; 21-30% = 12pts; 11-20% = 8pts; 1-10% = 4; 0%= 0pts

Transitional Housing Programs: During FY20, there were 25 persons with positive outcomes noted across all CoC TH programs. *An outcome is positive for TH if client exited*

to a PH destination. To indicate how this project contributed to housing stability across the system, please note the positive housing outcome rate listed in **Attachment 3**: _____

31-100% = 15 pts; 21-30% = 12pts; 11-20% = 8pts; 1-10% = 4; 0%= 0pts

6. HMIS Attachment 4: Exits to Homelessness:

To show impact of this project on ending homelessness, refer to **Attachment 4** (showing all CoC project leavers to homelessness) and note the percentage of project leavers who exited this program to a shelter or the street _____%

0-20% = 15 pts; 21-39% = 8; 40-100% = 0

7. HMIS Attachment 5: Effect on Income Growth: System Impact

To show impact of this project on total income growth in the Continuum, refer to **Attachment 5** which measures total income growth between the last two client assessments, and note the percentage that this project had on the system _____%

30%+ = 15; 29-10% = 12; 9-5% =8; 4-1% = 4 pts; 0%= 0 pts

8. Income Growth – Project Performance

(Refer to **APR Q19. Cash Income – Changes over Time** to respond to questions below.)

8a. What percentage of **stayers** gained or increased **earned income** between start and annual assessment? Note percent in **Q19a1. Row 1**) Number of Adults with Earned Income - **Column 9**) Performance Measure: Percent of Persons to accomplish this measure: _____%

75-100% = 5 pts; 50-74% = 3.75 pts; 25-49% = 2.5 pts; 15-24% = 1.25 pts; 0-14% = 0

8b. What percentage of **stayers** gained or increased **other income** between start and annual assessment? Note percent in **Q19a1. Row 3**) Number of Adults with Other Income - **Column 9**) Performance Measure: Percent of Persons to accomplish this measure: _____%

75-100% = 5 pts; 50-74% = 3.75 pts; 25-49% = 2.5 pts; 15-24% = 1.25 pts; 0-14% = 0

8c. What percentage of **leavers** gained or increased **earned income** between start and annual assessment? Note percent in **Q19a2. Row 1**) Number of Adults with Earned Income - **Column 9**) Performance Measure: Percent of Persons to accomplish this measure: _____%

75-100% = 5 pts; 50-74% = 3.75 pts; 25-49% = 2.5 pts; 15-24% = 1.25 pts; 0-14% = 0

8d. What percentage of **leavers** gained or increased **other income** between start and annual assessment? Note percent in **Q19a1. Row 3**) Number of Adults with Other Income - **Column 9**) Performance Measure: Percent of Persons to accomplish this measure: _____%

75-100% = 5 pts; 50-74% = 3.75 pts; 25-49% = 2.5 pts; 15-24% = 1.25 pts; 0-14% = 0

9. Priority Populations: (5 points for serving one or more priority populations as noted on the Project Application Q4B and/or Q5B)

Chronic _____

Family _____

Youth ages 18-24 _____

10. Complete the table below based on information from the project's most recently completed contract. (10 points)

	Final Award (\$) including budget mods	Amount Expended (\$)	Percentage Spent (Expended/Awarded)
Leasing			
Rental Assistance			
Supportive Services			
Operations			
Admin			
Total			

90-100=15 pts, 80-89=10 pts., 70-79=5 pts., under 69=0 pts.

11. Did the project draw down CoC funds for the project from ELOCCS at least quarterly in the most recently ended contract? (Please attach copies of last three drawdowns.)

Yes 5 pts **No 0 pts**

12. Housing First: Does your project follow core elements of the *Housing First* approach? Please check each "Yes" for each situation that your screening process will deny an income-eligible household access to your project: **Any Yes - 0 pts All No - 5 points**

	Yes	No
Active or history of substance use	<input type="checkbox"/>	<input type="checkbox"/>
Having a criminal record with exceptions for state-mandated restriction	<input type="checkbox"/>	<input type="checkbox"/>
Having too little or little income	<input type="checkbox"/>	<input type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input type="checkbox"/>	<input type="checkbox"/>
Failure to participate in supportive services	<input type="checkbox"/>	<input type="checkbox"/>
Failure to make progress on a service plan	<input type="checkbox"/>	<input type="checkbox"/>
Loss of income or failure to improve income	<input type="checkbox"/>	<input type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input type="checkbox"/>	<input type="checkbox"/>

13. Coordinated Entry

13a. Did your project make or receive referrals for potential new participants through the Coordinated Entry process (or through a parallel process for DV providers) in 2020? *(to be verified by the CoC CE Coordinator or supported with documents provided by the applicant)* **Yes 15 pts** **No 0 pts**

13.b. Did your agency attend at least 75 % of the coordinated entry team meetings in 2020? *(to be verified by the CoC CE Coordinator)* **Yes 10 pts** **No 0 pts**

ULSTER COUNTY CONTINUUM OF CARE
RANK AND REVIEW APPLICATION 2021
PART 2: WRITTEN QUESTIONS

1. **Utilization Rate:** This question should be answered **only** by projects which scored zero points on Q2 in Part 1 above. If your project did not achieve 100% utilization (i.e. number of projected/contracted households and/or persons served) during Federal Fiscal Year 2020, please explain why in 250 words or less. **0 to 10pts**

2. **Coordinated Entry (DV Projects Only) (Please refer to Q13 in Part 1)**
 - 2a. If project includes DV clients, explain barriers to direct participation in Coordinated Entry and if/how you engage with partners involved with CE (250 words or less). **0-5 pts**

3. **Leveraging and Coordination of Services:** Please provide specific examples of how your project coordinates services with other CoC members, HUD/VA, and STEHP funded projects. Please refer to specific programs (250 words or less). *(0-5 pts)*
 - **Up to 2.5 points if project gives specific examples of how project coordinates services with other CoC members.**
 - **Up to 2.5 points if project gives specific examples of how project coordinates services with HUD/VA and/or STEHP funded projects.**

4. Please describe how your agency is meeting the needs of clients facing various cultural barriers (e.g., language, LGBTQ, mental health) in 250 words or less. (0-10 pts)
 - **Up to 5 pts awarded if the narrative clearly describes how the agency is trying to meet the needs of clients with cultural barriers, please provide an example.**

5. How do you currently work with local employment agencies, employers and or partners to advance training and employment opportunities for people experiencing homelessness?
0 to 5 points

6. How have you adjusted your service delivery model to help clients during the pandemic? **0 to 5 points**
 - **2.5 points for continuing at least monthly contact with clients (including virtually)**
 - **2.5 points for ensuring clients have necessary cleaning/sanitary supplies**

7. Explain how your organization worked with new partners (e.g., DOH, Health Providers/Pharmacies) to meet the health care needs of clients and how these partnerships can help build stronger and more equitable homeless response systems. **0 to 5 points**
 - **2.5 points for exemplifying partnerships were made to meet the health care needs of persons in the program**
 - **2.5 points for exemplifying partnerships will build a more equitable homelessness response system in the future**

8. What is your agency doing to forward racial diversity, equity and inclusion work within your agency and/or CoC-funded program? **0 to 5 points**
(ex. Internal diversity committees or teams have been formed, staff training)

FOR DV AND YOUTH PROVIDERS ONLY BONUS QUESTIONS

11. **DV Providers Only:** The CoC acknowledges that positive outcomes for domestic violence programs may be measured differently than mainstream permanent supportive housing programs. With that being said, how does your agency contribute to the housing stability of clients within this CoC funded program? **(15 pts)**
 - **Up to 7.5 pts awarded if the narrative clearly describes positive outcomes through the DV provider lens.**
 - **Up to 7.5 pts awarded if the narrative clearly describes how the agency contributed to positive housing stability across the CoC.**

12. **Youth Providers Only:** The CoC acknowledges that additional barriers occur for youth compared to adults when looking at increasing income. With that being said, how do you feel your agency contributes to increasing income for youth within this CoC program? **(15 pts)**
 - **Up to 7.5 pts awarded if the narrative clearly describes positive outcomes through the youth provider lens.**
 - **Up to 7.5 pts awarded if the narrative clearly describes how the agency contributed to positive outcomes across the CoC.**

1E-2: Project Review and Ranking Process Your CoC Used in its Local Competition.

1. Scoring tool your CoC used in your local competition to score new and renewal applications.

(c) Blank New Project Application Tool

Ulster County Continuum of Care (UCCC): New Project RFP 2021 (Reallocation and/or Bonus Projects)

Application not to exceed three (3) pages.

1. Applicant/Agency Name: _____

2. Agency Point of Contact: _____

3. Proposed Project Name: _____

4. **Please circle the project type you are applying for:**

A) Permanent Supportive Housing that is either Dedicated PLUS OR has 100% of beds dedicated to persons experiencing chronic homelessness.

B) Permanent Housing-Rapid Rehousing

C) Joint TH and PH-RRH (project must be housing first)

D) HMIS (HMIS Lead Only)

E) Support Services Only-Coordinated Entry Project

5. Is the project you are applying for a new or expansion project? **Yes ___ No ___**

6. Is the applicant a current member of the UCCC Continuum of Care (CoC)?

Yes ___ 10 points No ___ 0 points

7. Is the agency applying a current CoC funded grantee? **Yes ___ 0 points No ___ 5 points**

a. If yes, are there any unresolved monitoring or audit findings from HUD or the CoC?

Yes ___ 0 points No ___ 5 points

8a. Does your Agency prioritize referrals from Coordinated Entry? **Yes ___ 3 pts No ___ 0 pts**

8b. Will your agency only accept clients from Coordinated Entry? **Yes ___ 3 pts No ___ 0 pts**

9. Does your agency currently report in the CoC's HMIS system? If not, how will you implement HMIS for this project? **(0-5 pts)**

Ulster County Continuum of Care (UCCC): New Project RFP 2021 (Reallocation and/or Bonus Projects)

10. Please provide a project description that addresses the entire scope of your project. Please include the target population that will be served and the outreach plan. If the proposed project follows a Housing First model, please specifically detail Housing First aspects. **(0 – 20 points)**

- 10 points if you outline a detailed strategy that will be used to help participants regain and maintain housing stability.
- 1 point if the project clearly states the number of units/beds requested
- 2 points if an outreach plan is note
- 2 points if the budget notes at least 80 percent of the requested funds are dedicated to housing
- 5 points if the narrative details how the project will implement the housing first model

11. Both HUD and the local community prioritize projects that provide healthcare services to program participants. Does your project (or will your project by the time of CoC Application submission) have a written commitment with a health care organization that ensures the value of assistance being provided is at least:

In the case of a substance abuse treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who qualify and choose those services, OR

*An amount that is equivalent to 25 percent of the funding being requested for the project will be covered by the healthcare organization. Value of the commitment and dates of services must be included in the written commitment. **Yes __ 10 points No __ 0 points***

N/A for applications for Coordinated Entry; these questions will be weighted.

12. Both HUD and the local community prioritize projects that incorporate PSH or RRH units using funds other than CoC or ESG (i.e. ESSHI, NYSSHP, private sources such as CDPHP). Will your project expand upon an awarded or existing PSH or RRH project not funded through CoC or ESG? **Yes __ 10 points No __ 0 points**

N/A for applications for Coordinated Entry; these questions will be weighted.

Please note: projects must attach letters of commitment, contracts, or other formal written documents that demonstrate the number of subsidies or units being provided to support the project, exemplifying the existing resources provide for at least 25% of the units proposed for the expanded project.

Ulster County Continuum of Care (UCCC): New Project RFP 2021 (Reallocation and/or Bonus Projects)

13. Does your agency have a policy focused on ensuring equitable services and program outcomes across participants of all races and ethnicities? **Yes __ 5 points No __ 0 points**

14. How will the agency ensure program participants have the resources they need to prevent transmission of COVID-19? **(0-3 points)**

- 1 point if the agency has/will have a partnership with a healthcare agency that provides regular health screenings
- 1 point if the agency will provide PPE/sanitation supplies to staff/program participants as needed
- 1 point if the agency describes how it will build COVID-19 vaccine confidence

N/A for applications for Coordinated Entry; these questions will be weighted.

15. Will the project be able to begin within 12 months? **Yes__ 5 points No__ 0 points**

16. Please provide a 12-month Budget Proposal (required for review):

ACTIVITY	CoC FUNDS REQUESTED	NOTES
A. Rental Assistance (80% total budget less Admin)	\$	
B. Support Services (20% total budget less Admin)	\$	
1. Salaries	\$	
2. Benefits	\$	
3. Other	\$	
C. Operating	\$	
D. Admin	\$	
E. Total Project Costs	\$	
MATCH	AMOUNT	SOURCE
F. 25% Match Requirement	\$	

1E-2: Project Review and Ranking Process Your CoC Used in its Local Competition.

1. Scoring tool your CoC used in your local competition to score new and renewal applications.

(d) Blank DV Bonus Application Tool

Ulster County Continuum of Care DV Bonus Project RFP 2021

Application may not exceed three (3) pages

1. Applicant/Agency Name: _____
2. Agency Point of Contact: _____
3. Proposed Project Name: _____
4. **Please circle the project type you are applying for:**
 - A. Permanent Housing-Rapid Rehousing *(project must be housing first)
 - B. Joint TH and PH-RRH-Must be housing first *(project must be housing first)
 - C. Support Services Only-Coordinated Entry Project – if CoC already has a CE project the application must be an expansion.
5. Is the project you are applying for a new or expansion project? Yes ___ No ___
6. Is the applicant a current member of the Ulster County Continuum of Care (CoC)?
Yes ___ 20 points No ___ - 0 points
 - a. If no, what is the agency's current involvement with the Ulster County CoC?
7. Is the agency applying as a current CoC funded grantee? **Yes ___ 5 pts No ___ 10 pts**
 - b. If yes, are there any unresolved monitoring or audit findings from HUD or the CoC? **Yes ___ 0 points No ___ 3 points**
8. Please provide a detailed description of the agency's experience in administering projects dedicated to serving survivors of domestic violence, dating violence and stalking. Please specify the name of current or past programs and note the funding sources **(10 points)**
 - 3 points for past experience serving a domestic violence survivor population
 - 3 points for four or more years serving a domestic violence survivor population
 - 3 points for serving more than 25 households in a calendar year (CY)
 - 1 point for listing funding sources

Ulster County Continuum of Care DV Bonus Project RFP 2021

9. Please provide a description addressing the entire scope of your project. Please include an outreach plan to the targeted population. Specify whether the project will be a Rapid Rehousing (PH-RRH) project, Joint TH and PH-RRH component project or a SSO project for Coordinated Entry (SSO-CE) designed to implement policies, procedures and practices to equip the CoC's Coordinated Entry system to better meet the needs of survivors of domestic violence, dating violence, sexual assault or stalking (e.g., policies and procedures that are trauma informed, client centered or to improve the referral process between the CoC's Coordinated Entry and victim service providers Coordinated Entry systems where they are different). Please provide details about Housing First aspects of the project.

(0 - 25 points)

- 10pts if the project narrative clearly details how the project will implement the Housing First model
- 8 pts if a clear and detailed outreach plan is included
- 5 pts if the project clearly states the number of units/beds requested
- 2 pts if applying for an SSO-CE project

7. Please describe how the need for this project within this geographic area was identified. Please quantify the need using an HMIS comparable database and/or a local data source?
Agency will receive full points if they have demonstrated the need.
Yes__ 10 points No__ 0 points

8. Does your agency have a policy focused on ensuring equitable services and program outcomes across participants of all races and ethnicities? **Yes __ 5 points No __0 points**

9. How will the agency ensure program participants have the resources they need to prevent transmission of COVID-19? **(0-3 points)**

- 1 point if the agency has/will have a partnership with a healthcare agency that provides regular health screenings
- 1 point if the agency will provide PPE/sanitation supplies to staff/program participants as needed
- 1 point if the agency describes how it will build COVID-19 vaccine confidence

N/A for applications for Coordinated Entry; these questions will be weighted.

10. Please detail the steps your agency takes to ensure the safety of program participants.

(0-5 points)

- 1 point if agency uses de-identified aggregate data from a comparable database.
- 2 points if agency has safety, planning, and confidentiality protocols in place for DV project participants.
- 2 points if agency uses a trauma-informed, victim-centered approach to their project.

Ulster County Continuum of Care DV Bonus Project RFP 2021

11. Will the project be able to start within 12 months? **Yes ___ 10 pts No ___ 0 pts**

12. A. Does your Agency prioritize referrals from Coordinated Entry? **Yes ___ 3 pts No ___ 0 pts**
 B. Will your agency only accept clients from Coordinated Entry? **Yes ___ 3 pts No ___ 0 pts**

13. Does your agency currently report in a DV system that is compatible to the HMIS system? If not, how will you implement a compatible HMIS system for this project, for reporting purposes? **(0-5 pts)**

14. Please provide a 12-month Budget Proposal (required for review):

ACTIVITY	CoC FUNDS REQUESTED	NOTES
A. Rental Assistance (80% total budget less Admin)	\$	
B. Support Services (20% total budget less Admin)	\$	
1. Salaries	\$	
2. Benefits	\$	
3. Other	\$	
C. Operating	\$	
D. Admin	\$	
E. Total Project Costs	\$	
MATCH	AMOUNT	SOURCE
F. 25% Match Requirement	\$	

1E-2: Project Review and Ranking Process Your CoC Used in its Local Competition.

2. A copy of one scored application form

(a) Objective Criteria and System Performance Criteria Chart with Point Values

NY-608

Objective Criteria Used to Review and Rank Projects for Funding	
Specific Criteria	Question Addressing Criteria
Utilization Rate	Renewal Application: Part I: Q1, Part II: Q1
Data Quality & Completeness	Renewal Application: Part I: Q2a-2d
Performance Data (PSH only) Dedicated Chronic Homeless/DedicatedPLUS	Renewal Application: Part I: Q5
Funding	Renewal Application: Part 1: Q10, Q11
Population Served	Renewal Application: Part 2: Q4 New Bonus Application: Q11
Coordinated Entry Participation	Renewal Application: Part II: Q2a-2c New Bonus Application: Q8 DV Bonus Application: Q9
Type of housing/Type of housing proposed	Renewal Application: Part 1: Q4 New Bonus Application: Q4 DV Bonus Application: Q4
Match	New Bonus Application: Q16 DV Bonus Application: Q14
Objective Criteria Related to Improving System Performance	
Specific Criteria	Question Addressing Criteria
Length of Time Homeless (prior to entry) Dedicated CH/DedicatedPLUS (PSH only) Effect on Chronic Homelessness (PSH/RRH/TH)	Renewal Application: Part 1: Q3a-3b, HMIS Attachment 1 Renewal Application: Part 1: Q3a-3b, HMIS Attachment 1 Renewal Application: Part 1: Q4a-4d, HMIS Attachment 2
Positive Outcomes	Renewal Application: Part 1: Q5, HMIS Attachment 3
Exits to Homelessness	Renewal Application: Part 1: Q6, HMIS Attachment 4
Effect on Income Growth	Renewal Application: Part 1: Q7, HMIS Attachment 5
Coordinated Entry	Renewal Application: Part I: Q13a-13b New Bonus Application: Q8a-8b DV Bonus Application: Q12a-12b
Specific Method for Evaluating Projects Submitted by Victim Service Providers	
Specific Criteria	Question Addressing Criteria
Data Attachments 1-5	The Continuum allows the DV Project to self-report data since they use an HMIS-comparable database.
Victim Service Providers Only Positive Outcomes based on Safety Concerns	Renewal Application: Part II: Q11
Specific Method for Evaluating Projects Submitted by Youth Service Providers	
Youth Service Providers Only Positive Outcomes based on Increase of Income	Renewal Application: Part II: Q12

1E-2: Project Review and Ranking Process Your CoC Used in its Local Competition.

2. A copy of one scored application form

(b) Renewal Application score card (filled out)

Agency Name:	Family of Woodstock			Final Score: 167
Project Name:	Adult CMS Families			
		Yes	No: 5-pt penalty	
	Submitted by Deadline w/Required Docs			
		Total Possible Points	Points Awarded	

Part I: Systems Impact: Data and Outcomes				
10 points max	1a.- 1b. Utilization	CARES	10	0
3.75 points max	2a. Data Quality	CARES	2.5	2.5
3.75 points max	2b. Data Quality	CARES	2.5	2.5
3.75 points max	2c. Data Quality	CARES	2.5	2.5
3.75 points max	2d. Data Quality	CARES	2.5	2.5
5 points max	3a-Dedicated Chronic Beds	CARES	5	0
5 points max	3b. Dedicated Chronic Beds	CARES	5	0
15 points max	4b,4d. Effect on Chronic Homelessness	CARES	15	15
15 points max	5. Positive Outcomes	CARES	15	15
15 points max	6. Exits to Homelessness	CARES	15	15
15 points max	7. Income Growth-System Impact	CARES	15	8
5 points max	8a. Income Growth - Project Performance	CARES	5	0
5 points max	8b. Income Growth- Project Performance	CARES	5	0
5 points max	8c. Income Growth- Project Performance	CARES	5	2.5
5 points max	8d. Income Growth- Project performance	CARES	5	0
5 points max	9. Priority Populations	CARES	5	5
15 points max	10. Funds Spent	CARES	15	15
5 points max	11. LOCCS	CARES	5	5
5 points max	12 Housing First	CARES	5	5
15 points max	13a. CE	CARES	15	15
10 points max	13 b. CE	CE Lead	10	10
	Total		165	120.5

Part II: Project & System Performance-Related Questions				
10 points max	1. Utilization	Reviewers	10	10
5 points max	2. Coordinated Entry DV	Reviewers	5	0
5 points max	3. Coordination of Services	Reviewers	5	4.5
10 points max	4. Cultural Barriers	Reviewers	10	9
5 points max	5. Employment Agency Coordination	Reviewers	5	5
5 points max	6. COVID Service Delivery	Reviewers	5	5
5 points max	7. COVID Collaboration	Reviewers	5	4.5
5 points max	8. Racial Diversity	Reviewers	5	3.5
15 points max	9. DV Programs Only	Reviewers	15	N/A
15 points max	10. Youth Programs Only	Reviewers	15	N/A
	Total		80	41.5

Part III: Project Interviews				
1 point max		Reviewers	1	1
1 point max			1	1
1 point max		Reviewers	2	2
1 point max		Reviewers	1	1
	Total		5	5

1E-2: Project Review and Ranking Process Your CoC Used in its Local Competition.

3. Final project scores for ranked new and renewal projects (Ranking and Tiering)

(a) Ranking and Tiering PDF

2021 Ulster Ranking

Rank	Score	Applicant Name	Program	Funding Amount
1	189	Family of Woodstock	FOW-RRH DVS	\$87,931
2	180.5	Family of Woodstock	Midway	\$91,667
3	170.25	Family of Woodstock	Adult CMS Families	\$158,452
4	167	Family of Woodstock	CMS SHP Families	163,999
5	164	PEOPLE USA	People Home Again	\$259,852
6	161.25	Family of Woodstock	Adult CMS Singles	\$267,157
7	156.8	Family of Woodstock	RRH Families	\$107,208
8	118	Gateway of the Hudson Valley	Women with Children	\$46,176
9	N/A	Corporation for AIDS Research, Education and Services, Inc.	Ulster County HMIS	\$70,350
10	N/A	Corporation for AIDS Research, Education and Services, Inc.	Ulster County Coordinated Entry	\$43,988
11	N/A	Family of Woodstock	DV Coordinated Entry	\$15,000
DV 1	94	Family of Woodstock	Domestic Violence RRH	\$137,068
B1	77	PEOPLE USA	Home Again Expansion Project 2021	\$65,589
Annual Renewal Demand		\$1,311,780		
Tier 1		\$1,311,780		
Tier 2		\$202,657		
Planning		\$39,353		
Bonus		\$65,589		
DV Bonus		\$137,068		

Expansions	Applicant Name	Renewal Project	Expansion Project
	PEOPLE USA	People Home Again Expansion	People Home Again Expansion 2021

Consolidations	Surviving Pin	Applicant Name	Renewal Project 1	Renewal Project 2	Consolidated Project Name

1E-5: Projects Rejected and Reduced – Public Posting.

This attachment details the 15 Day Notification of Projects Rejected and an example reduction letter for NY-608.

It contains the following:

1. Example Rejection Letter
 - a. *Note: no projects were rejected through the FY2021 CoC Local Rank & Review Competition*

2. Example Reduction Letter
 - a. *Note: no projects were reduced through the FY2021 CoC Local Rank & Review Competition*

1E-5: Projects Rejected and Reduced – Public Posting.

1. Example Rejection Letter

- a. *Note: no projects were rejected through the FY2021 CoC Local Rank & Review Competition*

October 22, 2021

Nancy Harrington
CARES of NY, Inc.
200 Henry Johnson Blvd, Suite 4
Albany, NY 12210

RE: CARES FY2021 Renewal Project Application

Dear Nancy:

On behalf of the Ulster County CoC, we would like to thank you for your application for funding through the FY21 Continuum of Care competition. Unfortunately, through the Rank and Review process for Renewal Projects, your application was not selected to apply. Although the project was eligible and strong, your project was ranked outside of the eligible funding amount after the combined total of accepted application.

The CoC encourages you to apply if funding becomes available in the future CoC competitions.

Thank you,

Kelsey Addy

Planning Unit Director, CARES, Inc.

Collaborative Applicant

Ulster County CoC

1E-5: Projects Rejected and Reduced – Public Posting.

1. Example Reduction Letter

- a. *Note: no projects were reduced through the FY2021 CoC Local Rank & Review Competition*

October 22, 2021

Nancy Harrington
CARES of NY, Inc.
200 Henry Johnson Blvd, Suite 4
Albany, NY 12210

RE: CARES – Rapid Rehousing 1 - New Project Application

Dear Nancy:

On behalf of the Ulster County CoC, we would like to thank you for your application for the renewal of CARES Rapid Rehousing 1 under the FY21 Continuum of Care Competition. Unfortunately, through the rank and review process, your application was chosen to be reduced in the amount of XXX. Although the full project amount was eligible, it is the recommendation of the NOFO Committee to reduce funds in order to more effectively meet the unique needs of the most vulnerable.

As noted in our Rank and Review Policy you do have the right to request a debriefing of your project.

Thank you,

Kelsey Addy

Planning Unit Director, CARES, Inc.

Collaborative Applicant

Ulster County CoC

1E-5a: Projects Accepted – Public Posting.

This attachment details the 15 Day Notification of Projects Accepted and Tiered for NY-608. It contains the following:

1. Email notification of Projects Accepted:
 - a. CARES of NY, Inc.**
 - i. Ulster County HMIS – *Renewal Project Application*
 - ii. Ulster County Coordinated Entry
 - b. Family of Woodstock**
 - i. FOW-RRH DVS – *Renewal Project Application*
 - ii. Midway – *Renewal Project Application*
 - iii. CMS SHP Families – *Renewal Project Application*
 - iv. Adult CMS Singles – *Renewal Project Application*
 - v. RRH Families - *Renewal Project Application*
 - vi. DV Coordinated Entry - *Renewal Project Application*
 - vii. Domestic Violence RRH - *New Project Application*
 - c. Gateway of the Hudson Valley**
 - i. Family Supported Renewal – *Renewal Project Application*
 - d. People USA**
 - i. People Home Again Project Combined Renewal – *Renewal Project Application*
 - ii. People Home Again Project Expansion – *New Project Application*
2. October 22, 2021 Email Notification of Ranking & Tiering for NY-608 Accepted Projects publicly posted on website
3. October 22, 2021 Website screenshot showing posted Ranking & Tiering for NY-608 Accepted Projects

1E-5a: Projects Accepted – Public Posting.

1. Email notification of Projects Accepted:
 - a. **CARES of NY, Inc. (two separate emails)**
 - i. Ulster County HMIS – *Renewal Project Application*
 - ii. Ulster County Coordinated Entry

Kathy Germain

From: Kathy Germain
Sent: Wednesday, October 20, 2021 5:48 PM
To: Allyson Thiessen
Subject: 2021 NOFO Application Acceptance Notification

As the Collaborative Applicant for the NY-608 Kingston/Ulster CoC, we would like to congratulate CARES of NY Inc. on having your project accepted within the 2021 NY-608 CoC NOFO Application. Below is a detailed list of your agency's accepted project, funding request, and ranked position:

9	Corporation for AIDS Research, Education and Services, Inc.	Ulster County HMIS	\$70,350
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Kathy Germain

Planning Associate – CARES of NY, Inc.

200 Henry Johnson Blvd., Albany, NY 12210

518-489-4130 ext. 728

<http://www.caresny.org>



Kathy Germain

From: Kathy Germain
Sent: Wednesday, October 20, 2021 5:50 PM
To: Denise Brodt
Subject: 2021 NOFO Application Acceptance Notification

As the Collaborative Applicant for the NY-608 Kingston/Ulster CoC, we would like to congratulate CARES of NY Inc. on having your project accepted within the 2021 NY-608 CoC NOFO Application. Below is a detailed list of your agency's accepted project, funding request, and ranked position:

10	Corporation for AIDS Research, Education and Services, Inc.	Ulster County Coordinated
Entry	\$43,998	

Kathy Germain
Planning Associate – CARES of NY, Inc.
200 Henry Johnson Blvd., Albany, NY 12210
518-489-4130 ext. 728
<http://www.caresny.org>



1E-5a: Projects Accepted – Public Posting.

1. Email notification of Projects Accepted:

b. Family of Woodstock

- i. FOW-RRH DVS – *Renewal Project Application*
- ii. Midway – *Renewal Project Application*
- iii. CMS SHP Families – *Renewal Project Application*
- iv. Adult CMS Singles – *Renewal Project Application*
- v. RRH Families - *Renewal Project Application*
- vi. DV Coordinated Entry - *Renewal Project Application*
- vii. Domestic Violence RRH - *New Project Application*

Kathy Germain

From: Kathy Germain
Sent: Tuesday, October 12, 2021 5:13 PM
To: Michael Berg ; Victoria Read
Subject: Application Acceptance with Award Amounts

Rank Position

As the Collaborative Applicant for the NY-608 Kingston/Ulster CoC, CARES would like to congratulate Family of Woodstock on having your projects accepted within the 2021 NY-608 CoC NOFO Application. Below is a detailed list of your agency's accepted project, funding requests, and ranked position:

Rank Position

1	Family of Woodstock	FOW-RRH DVS	\$87,931
2	Family of Woodstock	Midway	\$91,667
3	Family of Woodstock	Adult CMS Families	\$158,452
4	Family of Woodstock	CMS SHP Families	163,999
6	Family of Woodstock	Adult CMS Singles	\$267,157
7	Family of Woodstock	RRH Families	\$107,208
N/A	Family of Woodstock	DV Coordinated Entry	\$15,000
Bonus	Family of Woodstock	Domestic Violence RRH	\$137,083

Kathy Germain

Planning Associate – CARES of NY, Inc.

200 Henry Johnson Blvd., Albany, NY 12210

518-489-4130 ext. 728

<http://www.caresny.org>



1E-5a: Projects Accepted – Public Posting.

1. Email notification of Projects Accepted:

c. Gateway of the Hudson Valley

i. Family Supported Renewal – *Renewal Project Application*

Kathy Germain

From: Kathy Germain
Sent: Tuesday, October 12, 2021 5:03 PM
To: Rhonda Langton; Branden Gibson; mderose@ghv.org
Subject: Acceptance of Project 2021 CoC Application

As the Collaborative Applicant for the NY-608 Kingston/Ulster CoC, CARES would like to congratulate Gateway of the Hudson Valley on having your project accepted within the 2021 NY-608 CoC NOFO Application. Below is a detailed list of your agency's accepted project, funding requests, and ranked position:

GCI- Family Supported Renewal - \$46,176 Ranked 8th

Again, congratulation. Please feel free to contact me should you have any questions.

Kathy Germain
Planning Associate – CARES of NY, Inc.
200 Henry Johnson Blvd., Albany, NY 12210
518-489-4130 ext. 728
<http://www.caresny.org>



1E-5a: Projects Accepted – Public Posting.

1. Email notification of Projects Accepted:

d. People USA

- i. People Home Again Project Combined Renewal – Renewal Project Application*
- ii. People Home Again Project Expansion – New Project Application*

Kathy Germain

From: Kathy Germain
Sent: Tuesday, October 12, 2021 5:00 PM
To: Rhonda Garcia
Subject: Acceptance of 2021 CoC Projects

As the Collaborative Applicant for the NY-608 Kingston/Ulster CoC, CARES would like to congratulate People USA on having your projects accepted within the 2021 NY-608 CoC NOFO Application. Below is a detailed list of your agency's accepted project, funding requests, and ranked position:

People Home Again Project Combined Renewal - \$259,852 Ranked 5th

People Home Again Project Expansion- \$65, 589 Ranked Tier 2 (Bonus)

Again, congratulation. Please feel free to contact me should you have any questions.

Kathy Germain

Planning Associate – CARES of NY, Inc.
200 Henry Johnson Blvd., Albany, NY 12210
518-489-4130 ext. 728

<http://www.caresny.org>



1E-5a: Projects Accepted – Public Posting.

2. October 22, 2021 Email Notification of Ranking & Tiering for NY-608 Accepted Projects publicly posted on website

From: [CARES Planning Team](#)
To: abab@co.ulster.ny.us; Allison.Smith7@va.gov; boshea@kingstonhousing.org; cdennehy@step1ny.org; [Christina Novak \(cnovak@westcop.org\)](#); [Dennis Doyle](#); [Dominique Mills](#); donnadell@fowinc.org; dwells@saugerties.ny.gov; eburud@lshv.org; eflynn@kingston-ny.gov; gavin.walters@hvcvr.org; [Geoffrey Raiti](#); hector.morell@cccsos.org; JCross@hudsonvalleycs.org; jnad@co.ulster.ny.us; [Kathy Germain](#); Kevin.keaveny@gmail.com; kvargas@rupco.org; kwolfeil@fowinc.org; luis.nobondo@childrenshome.us; [Margaret Shlasko](#); mcoz@co.ulster.ny.us; mderose@ghv.org; [Michael Berg](#); Monica.Glosque@hahv.org; msch@co.ulster.ny.us; mullerd3@mail.amc.edu; nkabalkin@hudsonvalleycs.org; p.criswell@lgbtqcenter.org; pkarr@familyservicesny.org; [Rhonda Garcia](#); rlangton@ghv.org; [Salvador Altamirano](#); shinchev@uccas.com; shutton@fpcny.org; staceyrein@ulsterunitedway.org; [Susan McDonough](#); [Sue Palmer](#); swag@co.ulster.ny.us; Tara.Amodio@hahv.org; [Victoria Read](#); ymcayb.keating@gmail.com
Cc: [Amy Lacey](#); [Erin Reale](#); [Genesis Matthey](#); [Haleigh Schmidhamer](#); [Kathy Germain](#); [Kelsey Addy](#); [Maureen Van Deusen](#); [Nicholas Cassaro](#); [Samantha Barnaby](#); [Michelle Sandoz-Dennis](#); [Nancy Harrington](#); [Denise Brodt](#); [Allyson Thiessen](#); [Kirstin Jones](#); [Denise Brodt](#)
Subject: UCCC Public Posting of FY21 CoC Application (Draft #5)
Date: Friday, October 22, 2021 5:47:11 PM
Attachments: [image001.png](#)
[image002.png](#)

Good Afternoon Ulster Co. CoC,

All parts of the 2021 Consolidated Application and Attachments have been posted to the [CARES Website](#) for public comment.

Specifically, you will find:

- Draft #5: Consolidated Application Narratives & Attachments
- Final Draft: Priority Listing (including project rankings), [Project Ranking & Tiering](#), Project Descriptions, and Planning Grant

CARES will be posting an updated application every Friday until submission to reflect our progress and allow for community input. Please send public comments to [Genesis Matthey](#).

If you have any questions or comments, please feel free to reach out.

Thank you,

Kelsey Addy, MPA

Pronouns: She/Her/Hers

Director of Planning – CARES of NY, Inc.

200 Henry Johnson Blvd., Albany, 12210

518-489-4130 x704

www.caresny.org

Find us on [Facebook](#)

1E-5a: Projects Accepted – Public Posting.

3. October 22, 2021 Website screenshot showing posted Ranking & Tiering for NY-608 Accepted Projects

Public Posting

NY 501 STEPS

NY 503 ACCH

NY 507 HSPB

NY 511 STHC

NY 512 RCHSC

NY 519 CGHC

NY 520 FEHC

NY 522 PNHC

NY 523 SNC

NY 601 DCHC

NY 606 RCCC

NY 608 UCCC

Ulster County Continuum of Care (UCCC)

CoC Project Applications

2021 Funding Snapshot

NY-608 Ulster						
ARD	Tier 1	Tier 2*	CoC Bonus	DV Bonus	CoC	UFA Grant
\$1,311,780	\$1,311,780	\$202,627	\$65,589	\$137,038	\$39,353	-
	<i>(100% of the amounts for all renewal projects)</i>	<i>(amount for Bonus + DV Bonus) *note: a portion of Tier 2 is solely for DV Bonus</i>				

2021 CoC Consolidated Application

Public Posting Date: 10.22.2021

DRAFT:  [NY 608 CoC Consolidated Application – Narrative](#)
DRAFT:  [NY 608 CoC Consolidated Application – Attachments](#)

2021 CoC Priority Listing

Public Posting Date: 10.22.2021

FINAL:  [NY 608 CoC Priority Listing](#)
FINAL:  [NY 608 CoC Project Descriptions](#)
FINAL:  [NY 608 Project Ranking and Tiering](#)

2021 CoC Planning Project

Public Posting Date: 10.22.2021

FINAL:  [NY 608 CoC Planning Project](#)

[View Public Posting Archives](#)

1E-6: Web Posting CoC-Approved Consolidated Application for CoC.

This attachment details the correspondence to NY-608's Membership and website postings for the CoC's draft and Approved Consolidated Application, Priority Listing, and Projects accepted, ranked, and rejected. It contains the following:

1. Public Posting of the Final Version of the CoC Consolidated Application
 - a. Screenshots of Draft & Final Public Posting
 - i. November 5, 2021 Final Draft Public Posting
 - ii. 9/24/21; 10/1/21; 10/8/21; 10/15/21; 10/22/21; 10/29/21
 - b. Emails informing CoC of Draft & Final Public Posting
 - i. November 5, 2021 Final Draft Public Posting
 - ii. 9/24/21; 10/1/21; 10/8/21; 10/15/21; 10/22/21; 10/29/21

1E-6: Web Posting CoC-Approved Consolidated Application for CoC

1. Public Posting of the Final Version of the CoC Consolidated Application
 - a. Screenshots of Public Postings
 - i. November 5, 2021 Final Public Posting

CoC's must demonstrate transparency in the local CoC competition results. Specifically, CoC's must post on their website, at least 2 days before the application submission deadline, all parts of the CoC Consolidated Application, including the CoC Application with attachments and the CoC Priority Listing with all project applications accepted and ranked, or rejected, and notify community members and key stakeholders that the CoC Consolidation Application is available.

Once a substantial portion of the Consolidated Application is completed, CARES will post an updated version of the application on Fridays. CoC community members are encouraged to review and provide comments to CARES by emailing planning_team@caresny.org.

- Public Posting
- NY 501 STEPS
- NY 503 ACCH
- NY 507 HSPB
- NY 511 STHC
- NY 512 RCHSC
- NY 519 CGHC
- NY 520 FEHC
- NY 522 PNHC
- NY 523 SNC
- NY 601 DCHC
- NY 606 RCCC
- NY 608 UCCC

Ulster County Continuum of Care (UCCC) CoC Project Applications

2021 Funding Snapshot

NY-608 Ulster						
ARD	Tier 1	Tier 2*	CoC Bonus	DV Bonus	CoC	UFA Grant
\$1,311,780	\$1,311,780	\$202,627	\$65,589	\$137,038	\$39,353	-
	<i>(100% of the amounts for all renewal projects)</i>	<i>(amount for Bonus + DV Bonus) *note: a portion of Tier 2 is solely for DV Bonus</i>				

2021 CoC Consolidated Application

Final Public Posting Date: 11.05.2021

- DRAFT: [NY 608 CoC Consolidated Application - Narrative](#)
- DRAFT: [NY 608 CoC Consolidated Application - Attachments](#)

2021 CoC Priority Listing

Final Public Posting Date: 11.05.2021

- FINAL: [NY 608 CoC Priority Listing](#)
- FINAL: [NY 608 CoC Project Descriptions](#)
- FINAL: [NY 608 Project Ranking and Tiering](#)

2021 CoC Planning Project

Final Public Posting Date: 11.05.2021

- FINAL: [NY 608 CoC Planning Project](#)

1E-6: Web Posting CoC-Approved Consolidated Application for COC.

1. Public Posting of the Final Version of the CoC Consolidated Application
 - a. Screenshots of Draft & Final Public Posting
 - i. 9/24/21; 10/1/21; 10/8/21; 10/15/21; 10/22/21; 10/29/21

CoC Public Postings

Summary

CoC's must demonstrate transparency in the local CoC competition results. Specifically, CoC's must post on their website, at least 2 days before the application submission deadline, all parts of the CoC Consolidated Application, including the CoC Application with attachments and the CoC Priority Listing with all project applications accepted and ranked, or rejected, and notify community members and key stakeholders that the CoC Consolidation Application is available.

Once a substantial portion of the Consolidated Application is completed, CARES will post an updated version of the application on Fridays. CoC community members are encouraged to review and provide comments to CARES by emailing planning_team@caresny.org.

- Public Posting
- NY 501 STEPS
- NY 503 ACCH
- NY 507 HSPB
- NY 511 STHC
- NY 512 RCHSC
- NY 519 CGHC
- NY 520 FEHC
- NY 522 PNHC
- NY 523 SNC
- NY 601 DCHC
- NY 606 RCCC
- NY 608 UCCC

Ulster County Continuum of Care (UCCC) CoC Project Applications

2021 Funding Snapshot

NY-608 Ulster						
ARD	Tier 1	Tier 2*	CoC Bonus	DV Bonus	CoC	UFA Grant
\$1,311,780	\$1,311,780	\$202,627	\$65,589	\$137,038	\$39,353	-
	<i>(100% of the amounts for all renewal projects)</i>	<i>(amount for Bonus + DV Bonus) *note: a portion of Tier 2 is solely for DV Bonus</i>				

2021 CoC Consolidated Application

Public Posting Date: 9.24.2021

- DRAFT: NY 608 CoC Consolidated Application - Narrative
- DRAFT: NY 608 CoC Consolidated Application - Attachments

View Public Posting Archives

2019 Public Postings: UCCC

Public Posting

NY 501 STEPS

NY 503 ACCH

NY 507 HSPB

NY 511 STHC

NY 512 RCHSC

NY 519 CGHC

NY 520 FEHC

NY 522 PNHC

NY 523 SNC

NY 601 DCHC

NY 606 RCCC

NY 608 UCCC

Ulster County Continuum of Care (UCCC)

CoC Project Applications

2021 Funding Snapshot

NY-608 Ulster

ARD	Tier 1	Tier 2*	CoC Bonus	DV Bonus	CoC	UFA Grant
\$1,311,780	\$1,311,780	\$202,627	\$65,589	\$137,038	\$39,353	-
	<i>(100% of the amounts for all renewal projects)</i>	<i>(amount for Bonus + DV Bonus) *note: a portion of Tier 2 is solely for DV Bonus</i>				

2021 CoC Consolidated Application

Public Posting Date: 10.1.2021

DRAFT:  NY 608 CoC Consolidated Application – Narrative

DRAFT:  NY 608 CoC Consolidated Application – Attachments

View Public Posting Archives

2019 Public Postings: UCCC

CoC's must demonstrate transparency in the local CoC competition results. Specifically, CoC's must post on their website, at least 2 days before the application submission deadline, all parts of the CoC Consolidated Application, including the CoC Application with attachments and the CoC Priority Listing with all project applications accepted and ranked, or rejected, and notify community members and key stakeholders that the CoC Consolidation Application is available.

Once a substantial portion of the Consolidated Application is completed, CARES will post an updated version of the application on Fridays. CoC community members are encouraged to review and provide comments to CARES by emailing planning_team@caresny.org.

- Public Posting
- NY 501 STEPS
- NY 503 ACCH
- NY 507 HSPB
- NY 511 STHC
- NY 512 RCHSC
- NY 519 CGHC
- NY 520 FEHC
- NY 522 PNHC
- NY 523 SNC
- NY 601 DCHC
- NY 606 RCCC
- NY 608 UCCC

Ulster County Continuum of Care (UCCC) CoC Project Applications

2021 Funding Snapshot

NY-6o8 Ulster						
ARD	Tier 1	Tier 2*	CoC Bonus	DV Bonus	CoC	UFA Grant
\$1,311,780	\$1,311,780	\$202,627	\$65,589	\$137,038	\$39,353	-
	<i>(100% of the amounts for all renewal projects)</i>	<i>(amount for Bonus + DV Bonus) *note: a portion of Tier 2 is solely for DV Bonus</i>				

2021 CoC Consolidated Application

Public Posting Date: 10.8.2021

- DRAFT: NY 608 CoC Consolidated Application – Narrative
- DRAFT: NY 608 CoC Consolidated Application – Attachments

View Public Posting Archives

✦ 2019 Public Postings: UCCC

Public Posting

NY 501 STEPS

NY 503 ACCH

NY 507 HSPB

NY 511 STHC

NY 512 RCHSC

NY 519 CGHC

NY 520 FEHC

NY 522 PNHC

NY 523 SNC

NY 601 DCHC

NY 606 RCCC

NY 608 UCCC

Ulster County Continuum of Care (UCCC)

CoC Project Applications

2021 Funding Snapshot

NY-608 Ulster

ARD	Tier 1	Tier 2*	CoC Bonus	DV Bonus	CoC	UFA Grant
\$1,311,780	\$1,311,780	\$202,627	\$65,589	\$137,038	\$39,353	-
	<i>(100% of the amounts for all renewal projects)</i>	<i>(amount for Bonus + DV Bonus) *note: a portion of Tier 2 is solely for DV Bonus</i>				

2021 CoC Consolidated Application


Public Posting Date: 10.15.2021

DRAFT:  NY 608 CoC Consolidated Application – Narrative

DRAFT:  NY 608 CoC Consolidated Application – Attachments

2021 CoC Priority Listing

Public Posting Date: 10.15.2021

DRAFT:  NY 608 CoC Priority Listing

Public Posting

NY 501 STEPS

NY 503 ACCH

NY 507 HSPB

NY 511 STHC

NY 512 RCHSC

NY 519 CGHC

NY 520 FEHC

NY 522 PNHC

NY 523 SNC

NY 601 DCHC

NY 606 RCCC

NY 608 UCCC

Ulster County Continuum of Care (UCCC)

CoC Project Applications

2021 Funding Snapshot

NY-608 Ulster

ARD	Tier 1	Tier 2*	CoC Bonus	DV Bonus	CoC	UFA Grant
\$1,311,780	\$1,311,780	\$202,627	\$65,589	\$137,038	\$39,353	-
	<i>(100% of the amounts for all renewal projects)</i>	<i>(amount for Bonus + DV Bonus) *note: a portion of Tier 2 is solely for DV Bonus</i>				

2021 CoC Consolidated Application

Public Posting Date: 10.22.2021

DRAFT: NY 608 CoC Consolidated Application - Narrative

DRAFT: NY 608 CoC Consolidated Application - Attachments

2021 CoC Priority Listing

Public Posting Date: 10.22.2021

FINAL: NY 608 CoC Priority Listing

FINAL: NY 608 CoC Project Descriptions

FINAL: NY 608 Project Ranking and Tiering

2021 CoC Planning Project

Public Posting Date: 10.22.2021

FINAL: NY 608 CoC Planning Project

[View Public Posting Archives](#)

Once a substantial portion of the Consolidated Application is completed, CARES will post an updated version of the application on Fridays. CoC community members are encouraged to review and provide comments to CARES by emailing planning_team@caresny.org.

- Public Posting
- NY 501 STEPS
- NY 503 ACCH
- NY 507 HSPB
- NY 511 STHC
- NY 512 RCHSC
- NY 519 CGHC
- NY 520 FEHC
- NY 522 PNHC
- NY 523 SNC
- NY 601 DCHC
- NY 606 RCCC
- NY 608 UCCC

Ulster County Continuum of Care (UCCC) CoC Project Applications

2021 Funding Snapshot

NY-608 Ulster						
ARD	Tier 1	Tier 2*	CoC Bonus	DV Bonus	CoC	UFA Grant
\$1,311,780	\$1,311,780	\$202,627	\$65,589	\$137,038	\$39,353	-
	<i>(100% of the amounts for all renewal projects)</i>	<i>(amount for Bonus + DV Bonus) *note: a portion of Tier 2 is solely for DV Bonus</i>				

2021 CoC Consolidated Application

Public Posting Date: 10.29.2021

- DRAFT: NY 608 CoC Consolidated Application – Narrative
- DRAFT: NY 608 CoC Consolidated Application – Attachments

2021 CoC Priority Listing

Public Posting Date: 10.29.2021

- FINAL: NY 608 CoC Priority Listing
- FINAL: NY 608 CoC Project Descriptions
- FINAL: NY 608 Project Ranking and Tiering

2021 CoC Planning Project

Public Posting Date: 10.29.2021

- FINAL: NY 608 CoC Planning Project

View Public Posting Archives

- 2019 Public Postings: UCCC

1E-6: Web Posting CoC-Approved Consolidated Application for CoC

1. Public Posting of the Final Version of the CoC Consolidated Application
 - b. Emails informing CoC of Public Postings
 - i. November 5, 2021 Final Draft Public Posting

From: [CARES Planning Team](#)
To: abab@co.ulster.ny.us; Allison.Smith7@va.gov; boshea@kingstonhousing.org; cdennehy@step1ny.org; [Christina Novak \(cnovak@westcop.org\)](#); [Dennis Doyle](#); [Dominique Mills](#); donnadell@fowinc.org; dwells@saugerties.ny.gov; eburud@lshv.org; eflynn@kingston-ny.gov; gavin.walters@hvcvr.org; Geoff Raiti ; hector.morell@cccsos.org; JCross@hudsonvalleycs.org; jnad@co.ulster.ny.us; Kevin.keaveny@gmail.com; kvargas@rupco.org; kwolfel@fowinc.org; luis.nobondo@childrenshome.us; [Margaret Shlasko](#); mcoz@co.ulster.ny.us; mderose@ghv.org; [Michael Berg](#); Monica.Glosque@hahv.org; msch@co.ulster.ny.us; muller3@mail.amc.edu; nkabalkin@hudsonvalleycs.org; p.criswell@lgbtqcenter.org; pkarr@familyservicesny.org; Rhonda Garcia; rlangton@ghv.org; Salvador Altamirano; shinchey@uccas.com; shutton@fpcny.org; staceyrein@ulsterunitedway.org; [Sue McDonough](#); [Sue Palmer](#); swag@co.ulster.ny.us; Tara.Amodio@hahv.org; [Victoria Read](#); ymcayb.keating@gmail.com
Cc: [Amy Lacey](#); [Erin Reale](#); [Genesis Mattey](#); [Haleigh Schmidhamer](#); [Kathy Germain](#); [Kelsey Addy](#); [Maureen Van Deusen](#); [Samantha Barnaby](#); [Michelle Sandoz-Dennis](#); [Nancy Harrington](#); [Allyson Thiessen](#); [Denise Brodt](#); [Kirstin Jones](#)
Subject: Final Posting of Ulster CoC FY2021 CoC Consolidated Application
Date: Friday, November 5, 2021 2:14:00 PM
Attachments: [image001.png](#)

Dear Ulster County Continuum of Care (UCCoC),

As the end of the 2021 Continuum of Care competition season approaches, we have some important announcements:

- The final version of the UCCoC 2021 Consolidated Application with Attachments and Priority Listing are now available on [CARES webpage](#).
- Comments may be submitted to Genesis Mattey (gmattey@caresny.org) by COB Tuesday, November 9th.
- Our submission goal is Friday, November 12th (well before HUD's November 16th deadline).

I want to thank all the funded agencies and systems partners who have worked collaboratively with CARES staff to complete the application.

We look forward to our continued partnership and coordination.

As always, please feel free to contact me directly if you have any comments or questions.

Thank you,

Kelsey Addy, MPA

Pronouns: She/Her/Hers

Director of Planning – CARES of NY, Inc.

200 Henry Johnson Blvd., Albany, 12210

518-489-4130 x704

www.caresny.org

Find us on [Facebook](#)



1E-6: Web Posting CoC-Approved Consolidated Application for COC.

1. Public Posting of the Final Version of the CoC Consolidated Application
 - b. Emails informing CoC of Draft & Final Public Posting
 - i. 9/24/21; 10/1/21; 10/8/21; 10/15/21; 10/22/21; 10/29/21

From: [CARES Planning Team](#)
To: abab@co.ulster.ny.us; Allison.Smith7@va.gov; boshea@kingstonhousing.org; cdennehy@step1ny.org; [Christina Novak \(cnovak@westcop.org\)](#); [Dennis Doyle](#); [Dominique Mills](mailto:Dominique.Mills); donnadell@fowinc.org; dwells@saugerties.ny.gov; eburud@lshv.org; eflynn@kingston-ny.gov; gavin.walters@hvcvr.org; [Geoff Raiti](#); hector.morell@cccsos.org; JCross@hudsonvalleycs.org; jnad@co.ulster.ny.us; [Kathy Germain](#); Kevin.keaveny@gmail.com; kvargas@rupco.org; kwolfeil@fowinc.org; luis.nobondo@childrenshome.us; [Margaret Shlasko](#); mcoz@co.ulster.ny.us; mderose@ghv.org; [Michael Berg](#); Monica.Glosque@hahv.org; msch@co.ulster.ny.us; mullerd3@mail.amc.edu; nkabalkin@hudsonvalleycs.org; p.criswell@lgbtqcenter.org; pkarr@familyservicesny.org; [Rhonda Garcia](#); rlangton@ghv.org; [Salvador Altamirano](#); shinchev@uccas.com; shutton@fpcny.org; staceyrein@ulsterunitedway.org; [Sue McDonough](#); [Sue Palmer](#); swag@co.ulster.ny.us; Tara.Amodio@hahv.org; [Victoria Read](#); ymcayb.keating@gmail.com
Cc: [Nancy Harrington](#); [Michelle Sandoz-Dennis](#); [Allyson Thiessen](#); [Kirstin Jones](#); [Denise Brodt](#); [Amy Lacey](#); [Erin Reale](#); [Genesis Mattey](#); [Haleigh Schmidhamer](#); [Kelsey Addy](#); [Maureen Van Deusen](#); [Nicholas Cassaro](#); [Samantha Barnaby](#)
Subject: Ulster CoC Public Posting of FY21 Draft Consolidated Application
Date: Friday, September 24, 2021 4:36:00 PM
Attachments: [image001.png](#)

Good Afternoon Ulster Co. CoC,

Draft version 1 of the 2021 Consolidated Application and Attachments have been posted to the [CARES Website](#) for public comment.

CARES will be posting an updated application every Friday until submission to reflect our progress and allow for community input. Please pay particular attention to question 1C-16, and let us know if you have lived experience that can be reflected in the application. Please send public comments to [Genesis Mattey](#).

If you have any questions or comments, please feel free to reach out.

Thank you,

Kelsey Addy, MPA

Pronouns: She/Her/Hers

Director of Planning – CARES of NY, Inc.

200 Henry Johnson Blvd., Albany, 12210

518-489-4130 x704

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From: [Genesis Matthey](#)
To: abab@co.ulster.ny.us; Allison.Smith7@va.gov; boshea@kingstonhousing.org; cdennehy@step1ny.org; [Christina Novak \(cnovak@westcop.org\)](mailto:Christina.Novak(cnovak@westcop.org)); [Dennis Doyle](mailto:Dennis.Doyle); [Dominique Mills](mailto:Dominique.Mills); donnadell@fowinc.org; dwells@saugerties.ny.gov; eburud@lshv.org; eflynn@kingston-ny.gov; gavin.walters@hvcvr.org; [Geoffrey Raiti](mailto:Geoffrey.Raiti); hector.morell@cccsos.org; JCross@hudsonvalleycs.org; jnad@co.ulster.ny.us; [Kathy Germain](mailto:Kathy.Germain); Kevin.keaveny@gmail.com; kvargas@rupco.org; kwolfeil@fowinc.org; luis.nobondo@childrenshome.us; [Margaret Shlasko](mailto:Margaret.Shlasko); mcoz@co.ulster.ny.us; mderose@ghv.org; [Michael Berg](mailto:Michael.Berg); Monica.Glosque@hahv.org; msch@co.ulster.ny.us; mullerd3@mail.amc.edu; nkabalkin@hudsonvalleycs.org; p.criswell@lgbtqcenter.org; pkarr@familyservicesny.org; [Rhonda Garcia](mailto:Rhonda.Garcia); rlangton@ghv.org; [Salvador Altamirano](mailto:Salvador.Altamirano); shinchev@uccas.com; shutton@fpcny.org; staceyrein@ulsterunitedway.org; [Susan McDonough](mailto:Susan.McDonough); [Sue Palmer](mailto:Sue.Palmer); swag@co.ulster.ny.us; Tara.Amodio@hahv.org; [Victoria Read](mailto:Victoria.Read); ymcayb.keating@gmail.com
Cc: [Amy Lacey](#); [Erin Reale](#); [Genesis Matthey](#); [Haleigh Schmidhamer](#); [Kelsey Addy](#); [Maureen Van Deusen](#); [Nicholas Cassaro](#); [Samantha Barnaby](#)
Subject: Ulster CoC Public Posting of FY21 Draft #2 Consolidated Application
Date: Friday, October 1, 2021 3:08:46 PM
Attachments: [image001.png](#)

Good Afternoon Ulster Co. CoC,

Draft version 2 of the 2021 Consolidated Application and Attachments have been [posted to the CARES Website](#) for public comment.

CARES will be posting an updated application every Friday until submission to reflect our progress and allow for community input. Please pay particular attention to question 1C-16, and let us know if you have lived experience that can be reflected in the application. Please send public comments to [Genesis Matthey](#).

If you have any questions or comments, please feel free to reach out.

Thank you,

Kelsey Addy, MPA

Pronouns: She/Her/Hers

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518-489-4130 x704

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To: abab@co.ulster.ny.us; Allison.Smith7@va.gov; boshea@kingstonhousing.org; cdennehy@step1ny.org; [Christina Novak \(cnovak@westcop.org\)](mailto:Christina.Novak@westcop.org); [Dennis Doyle](mailto:Dennis.Doyle); [Dominique Mills](mailto:Dominique.Mills); donnadell@fowinc.org; dwells@saugerties.ny.gov; eburud@lshv.org; eflynn@kingston-ny.gov; gavin.walters@hvcvr.org; [Geoffrey Raiti](mailto:Geoffrey.Raiti); hector.morell@cccsos.org; JCross@hudsonvalleycs.org; jnad@co.ulster.ny.us; [Kathy Germain](mailto:Kathy.Germain); Kevin.keaveny@gmail.com; kvargas@rupco.org; kwolfeil@fowinc.org; luis.nobondo@childrenshome.us; [Margaret Shlasko](mailto:Margaret.Shlasko); mcoz@co.ulster.ny.us; mderose@ghv.org; [Michael Berg](mailto:Michael.Berg); Monica.Glosque@hahv.org; msch@co.ulster.ny.us; mullerd3@mail.amc.edu; nkabalkin@hudsonvalleycs.org; p.criswell@lgbtqcenter.org; pkarr@familyservicesny.org; [Rhonda Garcia](mailto:Rhonda.Garcia); rlangton@ghv.org; [Salvador Altamirano](mailto:Salvador.Altamirano); shinchev@uccas.com; shutton@fpcny.org; staceyrein@ulsterunitedway.org; [Susan McDonough](mailto:Susan.McDonough); [Sue Palmer](mailto:Sue.Palmer); swag@co.ulster.ny.us; Tara.Amodio@hahv.org; [Victoria Read](mailto:Victoria.Read); ymcayb.keating@gmail.com
Cc: [Amy Lacey](#); [Erin Reale](#); [Haleigh Schmidhamer](#); [Kelsey Addy](#); [Maureen Van Deusen](#); [Nicholas Cassaro](#); [Samantha Barnaby](#)
Subject: Ulster CoC Public Posting of FY21 Draft #3 Consolidated Application
Date: Friday, October 8, 2021 2:03:00 PM
Attachments: [image001.png](#)

Good Afternoon Ulster Co. CoC,

Draft version 3 of the 2021 Consolidated Application and Attachments have been [posted to the CARES Website](#) for public comment.

CARES will be posting an updated application every Friday until submission to reflect our progress and allow for community input. Please pay particular attention to question 1C-16, and let us know if you have lived experience that can be reflected in the application. Please send public comments to [Genesis Mattey](#).

If you have any questions or comments, please feel free to reach out.

Thank you,

Kelsey Addy, MPA
Pronouns: She/Her/Hers
Director of Planning – CARES of NY, Inc.
200 Henry Johnson Blvd., Albany, 12210
518-489-4130 x704
www.caresny.org
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From: Genesis Mattey <gmattey@caresny.org>
Sent: Friday, October 1, 2021 3:09 PM
To: abab@co.ulster.ny.us; Allison.Smith7@va.gov; boshea@kingstonhousing.org; cdennehy@step1ny.org; [Christina Novak \(cnovak@westcop.org\)](mailto:Christina.Novak@westcop.org) <cnovak@westcop.org>; [Dennis Doyle](mailto:Dennis.Doyle) <ddoy@co.ulster.ny.us>; [Dominique Mills](mailto:Dominique.Mills) <dominique.mills@cccsos.org>;

From: [CARES Planning Team](#)
To: [CARES Planning Team](#); ["abab@co.ulster.ny.us"](#); ["Allison.Smith7@va.gov"](#); ["boshea@kingstonhousing.org"](#); ["cdennehy@step1ny.org"](#); ["Christina Novak \(cnovak@westcop.org\)"](#); ["Dennis Doyle "](#); ["Dominique Mills"](#); ["donnadell@fowinc.org"](#); ["dwells@saugerties.ny.gov"](#); ["eburud@lshv.org"](#); ["eflynn@kingston-ny.gov"](#); ["gavin.walters@hvcvr.org"](#); ["Geoffrey Raiti"](#); ["hector.morell@cccsos.org"](#); ["JCross@hudsonvalleycs.org"](#); ["jnad@co.ulster.ny.us"](#); ["Kathy Germain"](#); ["Kevin.keaveny@gmail.com"](#); ["kvargas@rupco.org"](#); ["kwoifeil@fowinc.org"](#); ["luis.nobondo@childrenshome.us"](#); ["Margaret Shlasko"](#); ["mcoz@co.ulster.ny.us"](#); ["mderose@ghv.org"](#); ["Michael Berg "](#); ["Monica.Glosque@hahv.org"](#); ["msch@co.ulster.ny.us"](#); ["mullerd3@mail.amc.edu"](#); ["nkabalkin@hudsonvalleycs.org"](#); ["p.criswell@lgbtqcenter.org"](#); ["pkarr@familyservicesny.org"](#); ["Rhonda Garcia"](#); ["rlangton@ghv.org"](#); ["Salvador Altamirano"](#); ["shinchey@uccas.com"](#); ["shutton@fpcny.org"](#); ["staceyrein@ulsterunitedway.org"](#); ["Susan McDonough"](#); ["Sue Palmer"](#); ["swag@co.ulster.ny.us"](#); ["Tara.Amodio@hahv.org"](#); ["Victoria Read"](#); ["ymcayb.keating@gmail.com"](#)
Cc: [Amy Lacey](#); [Erin Reale](#); [Haleigh Schmidhmer](#); [Kelsey Addy](#); [Maureen Van Deusen](#); [Nicholas Cassaro](#); [Samantha Barnaby](#)
Subject: Ulster CoC Public Posting of FY21 Draft #1 Priority Listing & Draft #4 Consolidated Application
Date: Friday, October 15, 2021 2:04:00 PM
Attachments: [image002.png](#)
[image003.png](#)
[image004.png](#)

Good Afternoon Ulster Co. CoC,

Draft version 1 of the Priority Listing and Draft version 4 of the 2021 Consolidated Application and Attachments have been posted to the [CARES Website](#) for public comment.

For context, the Priority Listing notes all those renewal and new project applications that will be included in this year's CoC application to HUD.

CARES will be posting an updated application every Friday until submission to reflect our progress and allow for community input. Please pay particular attention to question 1C-16, and let us know if you have lived experience that can be reflected in the application. Please send public comments to [Genesis Mattey](#).

If you have any questions or comments, please feel free to reach out.

Thank you,

Kelsey Addy, MPA

Pronouns: She/Her/Hers

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Cc: [Amy Lacey](mailto:Amy.Lacey); [Erin Reale](mailto:Erin.Reale); [Genesis Matthey](mailto:Genesis.Matthey); [Haleigh Schmidhamer](mailto:Haleigh.Schmidhamer); [Kathy Germain](mailto:Kathy.Germain); [Kelsey Addy](mailto:Kelsey.Addy); [Maureen Van Deusen](mailto:Maureen.Van.Deusen); [Nicholas Cassaro](mailto:Nicholas.Cassaro); [Samantha Barnaby](mailto:Samantha.Barnaby); [Michelle Sandoz-Dennis](mailto:Michelle.Sandoz-Dennis); [Nancy Harrington](mailto:Nancy.Harrington); [Denise Brodt](mailto:Denise.Brodt); [Allyson Thiessen](mailto:Allyson.Thiessen); [Kirstin Jones](mailto:Kirstin.Jones); [Denise Brodt](mailto:Denise.Brodt)
Subject: UCCC Public Posting of FY21 CoC Application (Draft #5)
Date: Friday, October 22, 2021 5:47:11 PM
Attachments: [image001.png](#)
[image002.png](#)

Good Afternoon Ulster Co. CoC,

All parts of the 2021 Consolidated Application and Attachments have been posted to the [CARES Website](#) for public comment.

Specifically, you will find:

- Draft #5: Consolidated Application Narratives & Attachments
- Final Draft: Priority Listing (including project rankings), Project Ranking & Tiering, Project Descriptions, and Planning Grant

CARES will be posting an updated application every Friday until submission to reflect our progress and allow for community input. Please send public comments to [Genesis Matthey](mailto:Genesis.Matthey).

If you have any questions or comments, please feel free to reach out.

Thank you,

Kelsey Addy, MPA

Pronouns: She/Her/Hers

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To: abab@co.ulster.ny.us; Allison.Smith7@va.gov; boshea@kingstonhousing.org; cdennehy@step1ny.org; [Christina Novak \(cnovak@westcop.org\)](mailto:Christina.Novak@westcop.org); [Dennis Doyle](mailto:Dennis.Doyle); [Dominique Mills](mailto:Dominique.Mills); donnadell@fowinc.org; dwells@saugerties.ny.gov; eburud@lshv.org; eflynn@kingston-ny.gov; gavin.walters@hvcvr.org; [Geoff Raiti](mailto:Geoff.Raiti); hector.morell@cccsos.org; JCross@hudsonvalleycs.org; jnad@co.ulster.ny.us; [Kathy Germain](mailto:Kathy.Germain); Kevin.keaveny@gmail.com; kvargas@rupco.org; kwolfeil@fowinc.org; luis.nobondo@childrenshome.us; [Margaret Shlasko](mailto:Margaret.Shlasko); mcoz@co.ulster.ny.us; mderose@ghv.org; [Michael Berg](mailto:Michael.Berg); Monica.Glosque@hahv.org; msch@co.ulster.ny.us; mullerd3@mail.amc.edu; nkabalkin@hudsonvalleycs.org; p.criswell@lgbtqcenter.org; pkarr@familyservicesny.org; [Rhonda Garcia](mailto:Rhonda.Garcia); rlangton@ghv.org; [Salvador Altamirano](mailto:Salvador.Altamirano); shinchev@uccas.com; shutton@fpcny.org; staceyrein@ulsterunitedway.org; [Sue McDonough](mailto:Sue.McDonough); [Sue Palmer](mailto:Sue.Palmer); swag@co.ulster.ny.us; Tara.Amodio@hahv.org; [Victoria Read](mailto:Victoria.Read); ymcayb.keating@gmail.com
Cc: [Amy Lacey](mailto:Amy.Lacey); [Erin Reale](mailto:Erin.Reale); [Genesis Matthey](mailto:Genesis.Matthey); [Haleigh Schmidhamer](mailto:Haleigh.Schmidhamer); [Kathy Germain](mailto:Kathy.Germain); [Kelsey Addy](mailto:Kelsey.Addy); [Maureen Van Deusen](mailto:Maureen.Van.Deusen); [Nicholas Cassaro](mailto:Nicholas.Cassaro); [Samantha Barnaby](mailto:Samantha.Barnaby); [Nancy Harrington](mailto:Nancy.Harrington); [Michelle Sandoz-Dennis](mailto:Michelle.Sandoz-Dennis); [Kirstin Jones](mailto:Kirstin.Jones); [Denise Brodz](mailto:Denise.Brodz); [Allyson Thiessen](mailto:Allyson.Thiessen)
Subject: UCCC Public Posting of FY21 CoC Application (Draft #6)
Date: Friday, October 29, 2021 5:27:00 PM
Attachments: [image001.png](#)
[image002.png](#)

Good Afternoon Ulster Co. CoC,

All parts of the 2021 Consolidated Application and Attachments have been posted to the [CARES Website](#) for public comment.

Specifically, you will find:

- Draft #6: Consolidated Application Narratives & Attachments
- Final Draft: Priority Listing (including project rankings), Project Ranking & Tiering, Project Descriptions, and Planning Grant

CARES will be posting the Submission Posting next Friday, November 5th. Please send public comments to [Genesis Matthey](mailto:Genesis.Matthey).

If you have any questions or comments, please feel free to reach out.

Thank you,

Kelsey Addy, MPA

Pronouns: She/Her/Hers

Director of Planning – CARES of NY, Inc.

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3A-1a Housing Leveraging Commitments

This attachment details the Housing Leveraging Commitments for new Projects in NY-608. It includes:

1. Proof of grant submission from **Family of Woodstock to New York State- Empire State Supportive Housing Initiative (ESSHI)** for the DV RRH.

The Agency is applying for \$137,068 in CoC funds and, as exemplified in the attached, expects to be awarded \$1,154,064 in ESSHI funds, potentially allowing for an 800% increase in the number of program participants expected to be served through the requested CoC funds.



A UNITED WAY AGENCY
www.fowinc.org

Michael Berg
Executive Director

ADMINISTRATION
Family of Woodstock, Inc.
POB 3516 - 39 John St.
Kingston, NY 12402
845.331.7080

ADOLESCENT SERVICES
Family House
845.338.5953

Youth Case Management Services
845.331.7080/255.8801/647.2443

MidWay I/MidWay II
845.339.5508/845.647.1346

CHILD CARE SERVICES
Child Care Connections
Ulster County- 845.331.7080
Columbia/Greene Co.- 518.822.1944

Columbia Co. Child Care Subsidy
518.822.0087

DOMESTIC VIOLENCE SERVICES
Washbourne House
845.338.2370
Non-Residential Services
845.338.2370

Evolve
845.331.7080

HOMELESS SERVICES
Darmstadt Shelter
845.331.1395
Family Inn
845.340.1847

ADULT SERVICES
Adult Case Management Services
845.331.7080/255.8801/647.2443
Re-Entry Services
845.331.7080
Health Homes
845.331.7080

HOTLINE/WALK-IN CENTERS
Family of Ellenville
845.647.2443/647.5700
Family of New Paltz
845.255.8801
Family of Woodstock
845.679.2485/338.2370

COMMUNITY SERVICES
Supervised Visitation
845.331.1395
Kingston Cares
845.331.9683

Cares of NY Inc.
200 Henry Johnson BLVD.
Albany, NY 12210

RE: Family of Woodstock, Inc. Coordination and Leveraging Housing Resources

To Whom It May Concern,

The Kingston/Ulster CoC NY-608 has been successful in identifying and helping to apply for additional capital, operational, and ongoing support service funding to expand the CoC's inventory of Permanent Supportive Housing for the chronically homeless, those reentering from State Prison or County Jail, those with Serious Mental Illness, those struggling with Substance Use Disorder, individuals with HIV AIDS, homeless veterans and DV Survivors.

Family of Woodstock, Inc. is partnering with the County's leading housing developer, RUPCO, and Catholic Charities to develop 100 units of additional permanent supportive housing serving all of the above populations. The proposal, which is seeking the funding from Empire State Supportive Housing Initiative (ESSHI), will not only pay for the rental of these apartments, but also the support services required for these at-risk populations.

Attached is documentation of submission of application to NYS.

Respectfully Submitted,

Michael Berg
Executive Director of Family of Woodstock, Inc.

Organization	Grant Opportunity	Document #	Document Role	Current Status
FAMILY OF WOODSTOCK INC	Empire State Supportive Housing Initiative - Inter-Agency Service and Operating Funding Opportunity	OMH01-ESSHI6-2021-00166	Grantee Contract Signatory	Assignment of Reviewers

PROJECT/SITE ADDRESSES

Instructions:

1. Please complete all required fields.
2. If Project Statewide is "Yes", do not enter Address information. If Project Statewide is "No", Address information is required.
3. Select the **Save** button above to save your work frequently.
4. Click Forms Menu to return to the navigation links.

Name/Description: Golden Hill Project
Project Statewide No

Address 1 63 Golden Hill Drive
Address 2

City Kingston
County Ulster County
State NY
Zip 12401
Regional Council: Mid-Hudson
Agency Specific Region: Rest of State (ROS)

PROGRAM SPECIFIC QUESTIONS

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.

Project Title Golden Hill Housing Project

Please note that all questions in the Grants Gateway will only allow one document to be uploaded per question. The Reports/Multiple documents should be combined into ONE SINGLE FILE no larger than 10MB in size. DO NOT UPLOAD PASSWORD PROTECTED OR SECURED DOCUMENTS. ENSURE ALL PASSWORDS ARE REMOVED PRIOR TO UPLOADING IN THE GRANTS GATEWAY.

ATT ATTESTATIONS - the following 5 questions must be attested to. No points assigned.

ATT Submitting Early - I understand it is strongly encouraged to submit this grant application at least 48 hours prior to the due date and time. This will allow sufficient opportunity to obtain assistance and take corrective action should there be a technical issue with the submission process.

Yes

ATT Application Due Date and Time: I understand that this grant application must be submitted electronically via the Grants Gateway system before the deadline listed in the RFP document.

Yes

ATT Application Submission - I understand that only someone in the Grantee Contract Signatory or Grantee System Administrator role can electronically submit this application via the Grants Gateway and I have taken steps to ensure that my organization has someone in the correct role, or that I am in the correct role.

Yes

ATT No Late Applications Accepted - I understand that late applications will not be accepted and the Grants Gateway will prevent the submission of any application once the due date and time has passed according to the Grants Gateway System clock.

Yes

ATT Prequalification - I understand my organization must be prequalified, if not exempt, in the NYS Grants Gateway on the date and time the application is due. Please refer to the Vendor User Manual - "Section 4.0 Nonprofit Prequalification" for details on the steps that must be completed to meet registration and prequalification requirements.

Yes

1 Section: Basic Project Data. Provide the following basic information regarding the proposed project. No points are assigned to this Section.

1a Continuum of Care

NY-608 - Kingston/Ulster County CoC

1b Total number of dwelling units in the project

160

1c Number of ESSHI-funded qualifying individuals. Note that this number should equal the sum of the responses to 1.d. – 1.n., below, specifying the number of individuals to be served in each eligible population (i.e. do not double-count individuals that may have multiple disabilities or life challenges).

48

1d (Number of qualifying individuals by population) individuals with a Serious Mental Illness (SMI)

0

1e (Number of qualifying individuals by population) individuals with a Substance Use Disorder (SUD)

0

1f (Number of qualifying individuals by population) individuals who are living with HIV/AIDS (HIV)

0

1g (Number of qualifying individuals by population) survivors of domestic violence (DV)

26

1h (Number of qualifying individuals by population) veterans

0

1i (Number of qualifying individuals by population) chronically homeless individuals

0

1j (Number of qualifying individuals by population) youth aging out of foster care

0

1k (Number of qualifying individuals by population) young adults 18-25

0

1l (Number of qualifying individuals by population) individuals reentering the community from incarceration

0

1m (Number of qualifying individuals by population) frail elderly/ seniors

22

1n (Number of qualifying individuals by population) Individuals with an Intellectual/Developmental Disability (I/DD)

0

1o (Number of qualifying individuals by population) MRT-eligible. NOTE: This number is a subset of the total number of qualifying individuals, not a separate population.

22

1p Please enter the capital funding source(s) that are planned to be used to develop the project.

Golden Hill will be financed with 4% as-of-right Low Income Housing Tax Credits issued by NYS Homes and Community Renewal, as well as the issuance of Tax-Exempt Bonds from the New York State Housing Finance Agency. In addition, the project will receive capital subsidy from HCR Supportive Housing Opportunity Program, Homes for Working Families, and the NYS Rural and Urban Community Investment Fund.

1q SHARS ID or HHAP ID, if applicable

N/A

2 Section - Need (30 points)

2a Provide an executive summary of the proposed project. Please include target population(s), total number of dwelling units, number of ESSHI qualifying individuals, total requested ESSHI funds, requested ESSHI funds per qualifying individual, location (or address, if known), building description (if known), and capital project team (if known).

Family of Woodstock, Inc. has partnered with Pennrose, NY LLC for the project, "Golden Hill." Pennrose has been a national leader in the development and management of affordable housing for over 50 years, brings extensive experience managing properties with a significant number of supportive housing units.

The Golden Hill project includes the development of 160 units of housing and approximately 5,000 square feet of commercial and community service facility space at 63 Golden Hill Drive, Kingston, NY 12401. The project is to be developed on land currently owned by the Ulster County Housing Development Corporation. The existing building, a former County Jail, will be demolished as part of the construction and the new development. In April 2021, the Ulster County Housing Development Corporation entered into a Purchase and Sale Agreement with Pennrose, LLC for the site.

Golden Hill is intended to be an intergenerational community affordable to tenants at a range of income levels ranging from 30% up to 130% of Area Median Income (AMI). The ESSHI units will likely be filled by households earning 0-30% AMI, but families earning up to 60% AMI will be eligible. Of the total forty-eight (48) ESSHI supported units, twenty-six (26) of the units will be townhome-style buildings intended for families and individuals and twenty-two (22) ESSHI units will be set aside for frail elderly aged 62+ and located in a 4-story apartment building designed for the specific needs of that population. The wide range of income levels and ages of the tenants will ensure the property meets the diverse needs of the local population, providing high-quality residences for families ranging from extremely low-income to moderate-income. In addition to creating forty-eight (48) permanent supportive housing units, Golden Hill will be designed to advance the goals of the Ulster County Green New Deal, and will incorporate accessibility, walkability, active open space, and other elements to improve and maximize the tenants' experience and health. The campus will include laundry facilities, a fitness center, resident lounges, on-site trails, a community garden, scenic overlook areas, and pending local approvals a connection to the UCAT bus network. Additionally, Golden Hill is within close proximity to numerous County resources, including the County Department of Health and private and non-profit health providers.

To provide a comprehensive set of supportive services and needed rental subsidies to this population, Family of Woodstock, Inc is requesting ESSHI funding in the annual amount of \$1,154,064. This includes \$608,016 in rental payments to the Pennrose Corp. for the 48 units. The overall ESSHI cost per unit is \$24,043.

In addition to the payment of rental subsidies, the funding will be used by Family to provide comprehensive case management services as well as services targeted specifically to the needs of the domestic violence survivors and frail elderly populations proposed to be served. A detailed description of these services is listed below.

2b Provide a brief overview and history of your agency. Explain how the agency meets the eligibility requirements set forth in Section 1.3 the RFP.

Family of Woodstock, Inc. (Family) is a multi-program human service agency providing services throughout Ulster and surrounding counties. Founded in 1970, Family's principle focuses are crisis intervention services - Family runs one of the oldest continuously operating 24-hour-a-day emergency switchboards in the country, which is county-wide and toll free; and walk-in centers in Woodstock, New Paltz, Ellenville and Kingston - emergency shelters - Family House, a 14-bed runaway and homeless youth facility; the Darmstadt Shelter for the Homeless, a 21-bed shelter for men and women, primarily in recovery; the Family Inn, a 27-bed shelter for homeless families; the Washbourne House, a 17-bed domestic violence shelter for survivors and their children; and MidWay, two supervised transitional living residences for up to six homeless older adolescents each, and, when necessary, their children - child care programs - Family's Child Care Connections program serves families, child care providers and the communities of Ulster, Columbia and Greene Counties; the agency provides Child Care Subsidy Administration for the Department of Social Services of Columbia County; Kingston Cares runs a multi-age afterschool program at the Everette Hodge Center serving Midtown youth - case management and care coordination services - to such discreet populations as adults and adolescents struggling with issues of substance abuse and/or health or mental health issues; individuals involved with the criminal justice system; homeless individuals and families; survivors of domestic violence; as well as the general public - and food programs - extensive food pantries at the walk-in centers in Woodstock, New Paltz, Ellenville and at our domestic violence and Family Inn shelters; a meal program serving youth, families and other at-risk populations created at the Everette Hodge Community Center; and distribution of donated produce and food from local farmers to the County's food pantries and feeding programs. The agency continues to sponsor the Farm to Food Pantry Collaborative, whose goal is to improve the storage of donated foods throughout the County and better share resources to the network of food pantries and feeding programs.

Family provides non-residential services to survivors and perpetrators of domestic violence including an advocate at the Ulster County Family Court; individual and group counseling for survivors of domestic violence; groups for men and women in the Evolve program who have been violent with a family member; and supervised visitations authorized by the Family Court for non-custodial parents. The Agency is leading the effort to expand strength-based and prevention programs which grow healthier individuals and communities, working with many of the county's school districts and participating in collaboratives in New Paltz and Ellenville. As part of this effort, the agency utilizes Trauma-Informed and Positive Youth Development approaches and is implementing restorative justice practices wherever possible. Family advocates for the creation of affordable housing and has taken responsibility to provide reentry support for those returning to the County from state prison and county jails. To assist with this effort, the Agency provides long term housing support for individuals and families whose heads of households struggle with significant disabilities. Family assists with vocational training and employment support for those we serve. The agency is involved in the transition in the delivery of behavioral health services to be funded through Medicaid as part of the Adult Health Home and Family Peer Support initiatives.

The goal of Family's programs is to assist people to achieve self-sufficiency and self-respect.

2c Describe partnerships (including housing, service providers, etc) to be entered into to meet the experience requirements in Section 1.3. Describe the roles, responsibilities, and highlight the experience of any partnership agencies with each of the targeted population(s)

Throughout its 51-year history, Family of Woodstock, Inc. has extensive experience working with virtually all of the homeless populations in Ulster County. Since 1972, when the County closed the County Home in New Paltz, Family has provided all of the emergency shelter services up until the present with the exception of services provided by the Warming Center in the last 3 years. The Agency has established 4 shelters, including the Darmstadt Shelter, a licensed 19-bed shelter for single adults, the Washbourne House, a licensed 17-bed shelter for survivors of domestic violence and their families; the Family Inn, a 27-bed shelter for homeless families; and Family House, a 14-bed runaway and homeless youth shelter. In addition, the Agency established two transitional living programs for older homeless adolescents, 16-21.

In addition to providing shelter services, the Agency provides extensive case management and emergency services. These include: the Adult Case Management Program which provide 72 units of long-term, supported permanent housing and rapid rehousing; child care services - the Agency is the

child care resource and referral agency for Ulster, Columbia and Greene Counties; crises intervention the Agency runs the oldest continuously operating emergency switchboard in the County providing 24-hour call and text access every day for the last 51 years; food security - the Agency actively distributes donated produce from local farmers to food pantries and feeding programs throughout the County. In 2020, the Agency distributed 196,000lbs of produce to pantries and food programs and established a network of 5 walk-in coolers and freezers to maximize the longevity of the produce donated. The Agency's walk-in centers in Woodstock, New Paltz, Ellenville and Kingston serve as the primary deliverers of human services in each of their communities - signing people up for eligible entitlements, helping set up counseling, therapy and/or treatment.

Throughout its 51 years, the Agency has developed strong working relationships with virtually every provider of human services in Ulster County. We are a contract agency of the Ulster County Department of Social Services, the Ulster County Department of Mental Health, the NYS Office of Temporary and Disability Assistance, the NYS Office of Children and Family Services, the NYS Department of Health; NYS Department of Criminal Justice Services, as well as maintaining 3 Federal Government contracts and a number of regional foundation contracts. We have been able to provide extensive services to all of the homeless populations in the County and have strong, mutually referring relationships from all of the agencies that the homeless require services from.

- 2d Describe each target population(s) the proposal would serve. If the proposal will serve MRT eligible individuals, greater than the 25% required in Section 1.4, Appendix A (MRT Project Questionnaire) must be completed and uploaded to the application in the pre-submission uploads section.

Family proposes to serve survivors of domestic violence and their families who are or are at risk of homelessness and frail elderly seniors who lack access to safe, permanent affordable housing. As many of the frail seniors exhibit conditions or histories recognized to be associated with high Medicaid usage, we anticipate more than 25% of the units served through the proposal will be MRT eligible individuals. In fact, we expect that all 22 frail elderly out of the total of 48 ESSHI units will be MRT Eligible.

- 2e Highlight the applicant agency's experience with each of the targeted population(s) that will be served through your proposal; demonstrate your agency's ability to effectively serve the targeted population(s).

The Agency provides comprehensive case management services which include: assistance in development individual services plan; coordination of medical and other needed appointments; arranging for Medicaid Transportation both in- and out-of county, or, when not available, providing transportation to appointments; assistance in obtaining prescriptions; assistance enrolling in paratransit services; assistance in locating a mental health practitioner and facilitating the intake process; assistance in locating appropriate substance use treatment and facilitating the intake process; coordinating with health insurance providers; assisting with housing issues/landlords/providing applications for any available subsidized housing opportunities; providing food resources; assisting with and public benefits and entitlements; including assistance with applications for SSI and SSDI; referral to legal services; referral to employment and vocational services, including assistance with ACCES-VR applications; financial and budgeting counseling; referral to recreational and social activities; and supportive counseling, to all homeless populations.

In 1980, Family opened the first domestic violence shelter in the Mid-Hudson region. The Washbourne House is currently licensed for 17 survivors. In addition, the Agency has developed an extensive network of non-residential services to meet the needs of domestic violence survivors not requiring emergency shelter. These services include: court advocacy; one-on-one counseling; entitlement advocacy; and groups for survivors and for their children. The Agency has strong working relationships with Ulster County Crime Victims, the District Attorney, and local police agencies. The Agency also works with Ulster County's Mobile Mental Health program to provide intensive mental health services as required.

The Agency also has extensive experience working with homeless seniors. In addition to the comprehensive case management services cited above, the Agency will employ a nurse who will assess the medical needs of both the DV individuals and families, and the seniors, to ensure that all medical conditions are addressed before they become more intense. The Agency has a close working relationship with the Resource Center for Accessible Living, an agency which is committed to assist people with disabilities to open the doors of opportunity and independence in the Ulster County region through self-determination by creating understanding and awareness, and access community-wide. The Agency also has long-standing relations with the Ulster County Office for the Aging, Health Alliance, and Westchester Medical Center. As part of its entitlement advocacy, the Agency has extensive experience helping seniors to access Medicare and Medicaid, and to navigate Social Security.

- 2f Describe the identified housing and services needs of each target population(s).

Virtually all of the homeless seniors and domestic violence survivors are in need of affordable housing. The seniors are largely living on Social Security and perhaps, a pension. The survivors have generally been removed from their primary source of income and are in need of public assistance to survive initially. As is going to be described below, there is virtually no affordable housing in Ulster County.

In addition to housing services, both populations require extensive case management support to stabilize their situations. For domestic violence survivors, there are issues of trauma - not only for the survivors but often the children involved, the need for vocational training since many of the survivors have been out of the work force, some of whom never held significant employment positions previously. As a concomitant issue, many survivors have serious mental health or substance abuse issues. The children in the family have at a minimum, seen their parents fight, and often be violent, have experienced homelessness, and have been removed from one of their parents. All members of the family need stability, trauma-informed care, and access to therapy to address their long-standing issues.

The seniors that we will be serving have both physical ailments and often mental health issues. It is our experience that many of the homeless seniors are suffering from isolation, depression, and in some instances, other mental health conditions and substance abuse. In addition to developing a comprehensive assessment of each senior's health conditions, the program will help each individual develop an individual service plan in which they not only address their medical and psychological issues, but also develop a social plan to address their isolation and depression.

- 2g What factors have created and perpetuated homelessness among each target population(s) that your organization is proposing to serve?

Even prior to the outbreak of the pandemic, Ulster County was suffering from a serious lack of affordable housing. In part, this was exacerbated by a huge proliferation of Air B&B's in the County, which already has listed 1,800 individual Air B&B's, 3 times as many than any other County in the Mid-Hudson region. In fact, that number is low since it only reflects those Air B&B's which have been registered with the County. It does not include all that are in existence. This situation became much worse when Ulster County became the hotspot for those seeking to leave the New York City Metropolitan Area as a result of the pandemic - in a recent article, the Washington Post referred to Kingston as the second-hottest retail market in the Country. A further complication has been the moratorium on evictions, which has led to the fact that there are no available affordable houses in Ulster County. There are currently no available apartments for rent at fair market rent.

One of the factors that has influenced the lack of affordable housing is the resistance in the community to siting low income housing. It is interesting to note that while our local municipality requires the addition of an open-space plan to their comprehensive plan, they do not identify areas that they would support affordable housing, which leads to lawsuits and significant delays in the implementation of any proposed project.

An additional factor leading to homelessness is the fact that there is a huge number of single head of households in the City of Kingston and surrounding towns. The number has been variously estimated at 37% and 51% of the family units. Since many of the jobs available, particularly for young parents starting out, do not even pay \$15 an hour, it is virtually impossible for these families to be able to find housing without subsidy.

All of these conditions have led to a total lack of apartments for domestic violence survivors, particularly families, and apartments for the frail elderly. The collaboration has specifically targeted these populations because they are not being adequately served by any other programs proposed.

2h Provide a thorough description of the community and the need for the project based on the agency's experience

An analysis of the population makeup of the County and particularly the City of Kingston indicates that there is a high poverty rate, especially among the minority populations. These minorities are the fastest growing populations in the County, have limited educational experience, high unemployment rates and high levels of poverty. The region of birth of foreign-born populations in the County are Latin-born and Spanish speaking with 45.3% of the population having been born in Latin America. This confirms that the fastest growing population in Kingston are Spanish-speaking. Only 15.1% of the population has either a graduate or professional degree, and the average wage for those with some college education or less is only \$32,591, which is not a living wage given the cost of housing and other necessities in the County. The poverty rate in Kingston for the black and Hispanic populations is 31.7% and 41.5% respectively as compared to 14.2% for the white population. The unemployment rate for females in the City of Kingston is 54.82%, and the overall marital status is only 37%. While the overall unemployment rate for Kingston is 6.8%, the unemployment rate among blacks is 10.2%.

While the demographics above demonstrate that there is a low education rate and a significant minority population at a time when the overall population is declining, the actual cost of housing and the lack of any available housing at this time is driving many families to homelessness. In fact, the only thing holding back this rise is the current moratorium on evictions, which has also led to a total lack of any available housing. Outside of the proposed Golden Hill project, there has been limited new affordable housing development in the County. In recent years, there has only been one significant project developed representing 57 new units. Particularly, family housing is virtually unavailable. While the County has 3 public housing authorities, one in Kingston, one in Ellenville and one in Saugerties, none of these housing authorities have recently built new housing. The number of available ESSHI units or funds for permanent, supported housing for people with disabilities has not in any way kept pace with the large number of people who are either disabled or able to find adequate employment.

There are major initiatives in the works. The proposed Golden Hill project will produce 160 units of affordable housing, including 80 units for seniors and 80 units for families and single individuals. In order to address the need, the project is proposing 48 units of ESSHI housing that will allow primarily domestic violence survivors and seniors who are frail elderly to maintain stable housing with significant supports.

2i Attach and summarize the HUD CoC Homeless Assistance Programs Homeless Populations and Subpopulations report (point in time data) and Housing Inventory Chart for your continuum, if these report is available to the applicant. For those areas without a Continuum or Care or where these CoC reports are not available to the applicant, please substitute local data. Applicants may enhance CoC and local planning data with other relevant information. Please focus your response on housing inventory on the Permanent Housing beds in your area.

The most recent point in time count was conducted by the Ulster County CoC on June 17th, 2021. It should be noted that because of Covid and the weather, the CoC decided not to extensively go out into the field to find unsheltered individuals and requested a waiver from the normal point in time count conducted in January, so the numbers presented in this year's point in time count are only sheltered individuals. An analysis of all of the housing units sponsored by the CoC is included in the attachment below. In total, there are 477 permanent supported and rapid rehousing beds sponsored by the Ulster County CoC.

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2j Describe how your proposal responds to the identified housing need for each of the populations to be served.

The Golden Hill project has decided to target two populations who are currently suffering because of the lack of affordable housing throughout Ulster County. The first population to be served is survivors of domestic violence and their families. In 1980, the Agency opened the first domestic violence shelter, The Washbourne House, between Yonkers and Albany. After opening the shelter, the Agency began to develop additional support services recognizing that not all survivors require shelter or are prepared to leave initially. The Agency developed an extensive network of non-residential services including a court advocate at the Family Court, advocacy and translation for survivors at DSS, groups, one-on-one counseling and comprehensive case management services. Recently, the program has been able to provide some limited housing services utilizing HUD and NYS OTDA funding. However, the success of that operation has been limited by the lack of availability of affordable housing and it is because of this severe shortage that we are proposing 26 units for domestic violence survivors and their families.

The second population chosen to be served is the frail elderly population, for which we will allocate 22 units. This will include individuals returning from nursing homes, and homeless elders living on the street or in area motels. The agency will offer extensive case management services including entitlement counseling, health checks, access to all medical, mental health and substance abuse services, as well as crises counseling and social activities. We will work with each individual to help them develop an individual service plan which identifies their goals and steps to achieve them. These plans will be reviewed at a minimum of a bi-weekly basis and can be adjusted as needed. There will be a nurse on site 30 hours per week to meet with each resident and ensure that they are maintaining their health regimes and are functioning independently. In instances where the residents need medical care, we will connect them to their personal doctor, to any required specialists, and will provide the transportation to ensure they have access.

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2k Explain how homeless services are currently coordinated and delivered in the proposed area. If there is a Continuum of Care (CoC), describe which organizations/individuals are represented and the entity charged with coordinating the planning.

Ulster County has a very active and dedicated CoC. Members include:
Michael Berg Family of Woodstock- Chair
Dennis Doyle Ulster County Planning
Mike Iapoco Ulster County DSS
Margaret Shlasko Ulster County Mental Health SPOA
Dominique Mills Catholic Charities
Geoff Raitti Soldier On
Joan Eck Ulster Savings Bank
Kelsey Vargas RUPCO
Erin Burud Legal Services
*Rhonda Garcia People-USA
*Michelle DeRose GHV
Al Babcock Ulster County Sheriff

The group meets monthly to determine policy, maintain the Coordinated Entry system, review recommended changes from HUD, and prioritize and rank all of the HUD applications.

- 2l Explain your agency's role in the CoC or local planning process. For those agencies that are not active in the CoC planning process or are not CoC participants, please describe what efforts will be undertaken to engage in or to seek an active role

Family of Woodstock, Inc. was involved in the creation of the Ulster County CoC and has played an active role in its ongoing operation. The Agency's Executive Director, Michael Berg, has been the Chair of the CoC since its beginning. In addition, Family's Team Leader for Domestic Violence Services, Salvador Altamirano, helped to develop and continues to chair the CoC's Coordinated Entry task force. The Agency currently maintains 7 HUD contracts including permanent supported housing, rapid rehousing, and transitional living services, and has recently applied for the DV Bonus funding which will expand our domestic violence services by 6 additional apartments. The Agency is currently maintaining 72 scattered-site apartments, 4 emergency shelters, and 2 transitional living programs for older adolescents. In addition to supporting the general Coordinated Entry system maintained by the CoC, the Agency received a grant from HUD and maintains a separate domestic violence CoC which will be used as the primary referral agent for the new proposed dv units.

- 2m Explain how the proposed program funded under this RFP will be coordinated with the existing programs in the CoC or local planning process, and how duplication of effort will be avoided with this project.

Since this is a project that collaborates with our CoC, the project will take referrals from the non-dv Coordinated Entry program as well as the specialized DV Coordinated Entry. As a result, the program will be taking those individuals that are most at-risk and ranked the highest on each of the Coordinated Entry lists. While the program will take referrals from the Health Department, Mental Health, Crime Victims Assistance Program, and the Department of Social Services, each referral will be evaluated and placed within the Coordinated Entry system and that evaluation will determine their ranking for receiving the next available apartment.

- 2n Describe your agency's participation (or lack of participation) in the Homeless Management Information System.

The Agency maintains all records concerning homeless individuals in the Foothold HMIS software maintained by CARES. In addition, since domestic violence program are not allowed to integrate data on their clients within regular homeless record keeping, the program has established a separate HMIS system utilizing the EmpowerDB program. Recently, HUD has expanded the requirements of the HMIS software, and the creator of EmpowerDB has indicated that they will ultimately not be HUD compatible. The entire DV community is studying the situation and it is our expectation that new software which will be totally HUD compliant will be developed and that the bulk of the DV programs serving the homeless will be forced to shift to this new software.

- 3 Section: Impact. (30 points)

- 3a Describe the process of how the target population(s) will be identified and list the primary referral sources (e.g. SPOA, coordinated entry, etc.). Include your agency's understanding and commitment to working with the referral process appropriate to the population(s) served.

Throughout its history, Family has developed working relationships with not only all of the major funders of human services, but also, most if not all of the providers of those human services. As discussed above, the program will be taking referrals that have been assessed either the Coordinated Entry or the DV Coordinated Entry systems. Those evaluations which were initially done by the Department of Social Services are now being evaluated by service providers throughout the County utilizing the same criteria. The referrals for the DV programs will include Family's 24-hour hotline, the Washbourne House, Family's 17-bed shelter for survivors of domestic violence, Family's non-residential dv program, Crime Victims Assistance Program, our local Mental Health Clinic, and the SPOA operation, DSS, local medical and hospital facilities, as well as local police agencies. The frail elderly will be referred by the NYS Office for the Aging, the Ulster County Office for the Aging, local hospitals and medical facilities, nursing homes, individual family members, as well as other helping agencies that provide support for seniors but generally do not do housing.

Since the establishment of first the general Coordinated Entry project and the establishment of an independent DVCE process, Family has not only taken referrals from both of the CE lists, but has actively worked to promote and maintain both Coordinated Entry systems.

- 3b Provide a detailed description of outreach efforts, intake, and exit from the program. How does your program conduct these efforts in a welcoming, inclusive and culturally-sensitive way?

There is a significant effort among the helping agencies in the County described as Integrated Ulster which develops training and processes to encourage all helping agencies to be welcoming, to uphold the philosophy of no-wrong entrance, and to coordinate service provision to maximize responding most effectively to the client's needs while not duplicated services provided by other organizations. The Agency has committed to the provision of services to the Hispanic community, and towards that end, has been regularly hiring Spanish-speaking case managers and shelter staff. Among the services provided by the Agency include, translation, both orally and of documents, outreach to the migrant community, assistance with navigating State portals that provide access to entitlements and rent-relief, and the building of a network of community providers that are both welcoming, knowledgeable, and committed to seeing that their clients receive all of the benefits for which they are eligible regardless of race, sex, gender, nationality, English-proficiency, religious beliefs, or sexual orientation.

When an individual seeks services from a particular organization, that organization will reach out to the Agency maintaining the Coordinated Entry listing to evaluate where that individual is in terms of eligibility for the next available apartment. As part of that process, the case manager assigned will facilitate the individual developing a detailed plan of services needed, goals and steps to achieve those goals. The plan will not only include the goals for the targeted individual in the family, but to improve the living conditions and address any issues faced by other members of the family. We are not expecting for there to be significant turnover in the ESSHI units since they provide stable, affordable housing and the services necessary to prevent further homelessness.

- 3c Describe what supportive services will be provided to the targeted population(s) through this funding. Provide evidence of any relationships/ linkages with other community service providers (letters of support, etc.) Clearly distinguish ESSHI-funded services to be provided directly by the applicant agency and those to be provided through ESSHI-funded agreements/partnerships with other community service providers.

For all of the ESSHI residents, staff will be available to provide comprehensive case management services. This starts with assisting each individual to develop a plan of what goals they want to achieve and what steps they need to take to achieve them. Services include: Coordination of medical and other needed appointments; arranging for Medicaid Transportation both in- and out-of County, or, when not available, providing transportation to appointments; assistance in obtaining prescriptions; assistance enrolling in paratransit services; assistance in locating a mental health practitioner and facilitating the intake process; assistance in locating appropriate substance use treatment and facilitating the intake process; coordinating with health insurance providers; assisting with housing issues; providing food resources; assisting with public benefits and entitlements; including assistance with applications for SSI and SSDI; referral to legal services; referral to employment and vocational services, including assistance with ACCES-VR applications; financial and budgeting counseling; referral to recreational and social activities; emergency counseling; and ongoing supportive services. All of the above services will be provided by staff paid for by ESSHI.

In addition, Family will provide the following specialized services for domestic violence survivors utilizing existing program funding: Crisis Counseling and Case Management for survivors of domestic violence who are not seeking residential services and/or are ex-residents; two weekly support groups in Kingston which include a children's group, one in English and one in Spanish; individual one on one sessions or support groups in Ellenville and New Paltz, depending on the number of participants available; advocacy for survivors seeking Orders of Protection, temporary custody, and modification of orders from the Family Court; a domestic violence education program for people referred by the Department of Social Services Child Protective Services, area courts, and Family of Woodstock's Homeless Shelters; rapid rehousing for survivors of domestic violence and case management services for participating families; and maintenance of the Ulster County Domestic Violence Coordinated Entry System; crisis intervention; information and referrals; community education for the general public; youth outreach, prevention, and education; and supportive services within the judicial, police, and school systems available bilingually. The program also gives former residents and group member's access to a food pantry, school supplies, and provides holiday gifts, food, and events for former residents and those currently participating in non-residential programming. All of the above services are provided by ESSHI staff or staff of the Agency already in place to support domestic violence survivors.

Many of the services required by frail elderly are provided automatically as part of Family's comprehensive case management services. In addition, the program will provide 30 hours of nursing staff that will focus on the nutrition, health, and consider the emotional well-being of the frail elderly being served. The program will assist with Medicaid management, exercise, access to medical appointments, and building a community within the facility to address feelings of isolation and depression. The Agency is itself a contractor of the Office of Mental Health and has strong working relationships with the County Mental Health Department which is about to significantly expand, as well as the major providers of service to seniors including the Resource Center for Accessible Living and the UC Office for the Aging. All of the above services will be provided by staff paid for with ESSHI funding. In addition, Family is in discussion with RCAL for establishing a clear collaboration as needed which can include: nursing home diversion services; accessibility advice; and staff training at no charge to the program.

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3d

Describe any tenant eligibility requirements for the proposed project.

The target population are homeless or those at serious risk of homelessness frail elderly (who must be 62+ and have at least one chronic illness), and survivors of domestic violence, human trafficking or sexual assault. Each applicant must have a household income at or below 60% AMI.

3e Discuss in detail the staffing of the project. Include the roles and functions of each ESSHI-funded position.

The Team Leader for Housing and Case Management Services will provide program development, staff training and program supervision. We are allocating 10% of her time to the program. We are proposing the hiring of a program director who will be responsible for the day-to-day operation of the program. It is likely that this person will be promoted from current ranks. We are proposing 3 case managers that will work with all of the populations. 2 of them will provide comprehensive case management and the 3rd will be a specialist in the provision of domestic violence services. The case managers will have as a minimum, a BA and 1 year experience working with the targeted population, or 3 years providing direct services to the target populations. Each will be 40 hours. In addition, the program will provide residential coordinators to provide support to residents 5 evenings a week from 5pm - 12am, and 10 hours each weekend day. In addition, the program is proposing to have 3 child care coordinators to provide parental education and support, and to provide child care when parents must keep medical appointments, go shopping, perform employment search, attend therapy or seek entitlements. The program is also budgeting fill-ins to provide coverage when other staff are off due to illness, vacations, or holidays.

3f Identify appropriate safety and security measures for the target population as well as building security.

Pennrose and Family will take every measure to ensure the safety and wellbeing of the residents of the housing program. Golden Hill will include security cameras around the building perimeter and internal hallways. Access to residential buildings will be restricted to residents and designated service providers. As a part of the resident handbook, residents will be introduced to emergency procedures (fire, security breach etc.) and emergency drills will be held throughout the year.

All apartments, common halls, stairwells, and utility areas will be protected by a sprinkler system. In addition, all housing units will be hard wired with smoke and carbon monoxide detectors. Each apartment and utility area will have a fire extinguisher, and all will be inspected on an annual basis by state certified companies.

All staff will be trained in emergency procedures, and what agencies to call in what situations. The program will provide 24-hour security, and each resident will be encouraged to contact the front desk when there are any dangerous or unstable situations. The Agency has a strong working relationship with local police agencies and will review with their leadership the potential requirements of the new Golden Hill facility.

3g Describe any rent collection, eviction, and turnover procedures.

Rent will be collected by the property manager in the first 5 days of the month. If tenants exhibit any behavior that may jeopardize their tenancy, such as nonpayment of rent or disruptive behavioral issues, the social service team works closely with the property management team to ensure the issues are resolved. In the event of rental arrearage, management and social services meet with the tenant to determine the cause of the failure to pay rent and a strategy to correct. Such strategy could include a payment plan, or financial counseling leading to improved rent paying behavior. Regarding behavioral issues of an individual tenant or among tenants, building management staff come together with the tenant and the social service team to discuss the issue. The social service team advocates for a mutually agreeable solution to the problem and conducts follow up with tenant(s) and management to ensure the problem has been resolved, thereby ensuring the tenant's housing stability.

3h Provide an overview of the desired outcomes. (Include specific performance measures intended to improve the health status and/or self-sufficiency and /or safety of the individuals served through this project). Outcome measures should be quantifiable.

The Golden Hill project will offer all comprehensive services to all residents of the program. While we are herein proposing only services to the individuals inhabiting the ESSHI units, it is likely that the Agency will provide some support services to the remainder of the units utilizing existing Agency or other community funding. We have proposed a greater number of DV units than frail elderly because there are currently no permanent housing projects with support targeting this populations, and as a result, we have seen a number of the survivors at our domestic violence shelter return to the perpetrator.

Of the 26 DV, all 26 individuals and families will be provided with safe shelter and will have their health conditions or any injuries evaluated by the program's nurse. All parents will be encouraged to bring their children's immunizations up to date. All survivors will be provided one-on-one counseling and will develop a service plan. Based on historic experience working with dv survivors, 15 of the survivors will participate in group counseling. 24 of the original occupants will remain stably housed at the end of the 1st year of operation. All survivors will be assisted to access all entitlements for which they and their families are eligible. 13 of the survivors will be assisted to access ongoing mental health counseling. 8 of the survivors will be helped to access substance abuse treatment. All family members will be assisted to address any medical, dental or vision issues that present. All participants who wish will

be assisted through the process of receiving orders of protection and temporary custody through the Agency's advocate at the Family Court will receive those services. All children in the family will also be evaluated by the Agency's Early Childhood specialists and advocacy will be provided to ensure that all children receive any specialized educational services required to address developmental delays or other issues. All children will be evaluated by the program's nurse. The program will include at least one Spanish-speaking staff to ensure proper communication between the program and all of its survivors. The project is also proposing to install a child care center in a portion of the community building proposed for the project. This will allow work-force residents to have reliable child care close to home. The program will also facilitate safe handoffs in situations where the court orders supervised visitation, a service which is already provided by the Agency at the Family Court.

All of the 22 frail elderly will develop an individual service plan addressing any issues and goals that they have. They will be evaluated on a regular basis by the program's nurse, who will facilitate access to any medical or physical therapy treatments required. The program's social director and case management staff will provide opportunities for each staff person to participate in events sponsored by the program and held at the community center proposed by the project. One of the benefits of the proposed child care center is that it will give the opportunity for seniors that wish to, to participate and enjoy the comradery of the children. All 22 frail elderly will be assessed for medical, mental health, substance abuse, vision, dental and hearing issues, and access to required professional assistance will be facilitated by the program's case managers. Where necessary, the program will also assist to locate personal care aids for seniors that require them. Since it is expected that the senior placements will be long-term, it is likely that virtually all of them will eventually have serious medical issues which will require assistance above the level provided by the ESSHI program for which we will make the necessary linkages to provide that care.

The program will facilitate transportation to all required services including shopping and will assist with delivery or provide assistance ordering food.

3i Describe how your agency will monitor the effectiveness of the program.

Ultimately, the effectiveness of the program is the stability and well-being of each of the residents. We will monitor the following: housing stability; once housed, how long do people continue to stay in the program; access to needed services - the program will keep records on the professional services accessed and the number of visits facilitated. While it is not the role of the program to evaluate the professional services delivered, we will discuss with residents whether those services have been helpful and should we look for alternatives that would better respond to the resident's needs; we will survey residents to get input on additional programming desired or required; we will monitor the health and mental health of each participant; records will be kept on the health needs of each resident including the children of domestic violence survivors. For the children, we will work with parents to monitor developmental issues, health conditions, educational success and overall well-being. All resident situations will be reviewed at the program's bi-weekly Case Conference, and a formal review of the individual and where appropriate, their family's conditions will take place on at least a bi-monthly basis and more often if required.

3j State specifically how the proposal will address one or more of the goals of Executive Order 190 (Incorporating Health Across All Policies into State Agency Activities).

The Golden Hill project in many ways embodies the intent of Executive Order 190. Since its inception, the Agency has recognized and attempted to deliver the social determinants of health. In fact, recently, the Chronogram magazine, as a result of its community survey identified Family of Woodstock, Inc. as the most recognized Public Health Agency in the region. In designing the Golden Hill project, the Agency is very aware that the health and mental health condition of the target populations must be foremost in assisting them to achieve stable housing. The program is intending to employ a nurse to provide regular evaluations of the health conditions not only of the frail elderly, but also to the domestic survivors and their families. All program staff will be trained and will implement trauma-informed care as part of their approach to helping people, and motivational interviewing to encourage people to identify what their particular needs and issues are. The goal of the program is long-term housing and health stability which includes not only addressing housing needs, but socialization, safety, health, financial stability, and desired recreation. The Agency has strong working relationships with all of the helping agencies in the community which have been developed over its 51 year history and will be able to help access any needed services which are available. The goal of each evaluation will be to address issues when they arise and before they become problems. The program will also focus on medication management and seeking alternatives to medications which could lead to addiction. All families will be assisted to access any entitlements targeted to parents and children including WIC, Food Stamps, as well as programs that promote healthy lifestyles. The facilities will be regularly maintained and care will be given to prevent unsanitary conditions which could lead to health and ongoing and chronic health issues. Particularly for the frail elderly that will have trouble going out to required physical and mental health appointments, the Agency will facilitate Telehealth communications whenever appropriate.

3k How does your program integrate trauma knowledge into its policies, procedures and practices? Provide a plan for staff training, examples of trauma-informed procedures and policies, client confidentiality, and client conflict resolution.

The entire case management staff of Family of Woodstock are trained in Trauma-informed care and motivational interviewing. Staff work with each resident to address his or her individual strengths and struggles. Trauma Informed Care and its insights regarding trauma's effects on the brain have helped define this process. At intake, each individual is asked to fill out a thorough personal history. The program understands that many homeless individuals and families are distrustful and seek additional information to be disclosed as the resident gains a sense of safety with staff. Further information is gathered from any existing support services to supplement what we know about the individual's trauma history. Each resident works with the case manager to create a safety plan and to identify any triggers he/she may be aware of. This safety plan is updated as new information is disclosed. At the first case conference after the resident enters into the program, the staff discusses the resident's history and how it may affect the youth's behavior and his/her needs around emotional safety. Youth with a history of trauma are encouraged to participate in mental health treatment. In instances where the resident may be resistant to formal treatment, staff will suggest other helping modalities such as yoga, peer-run groups, healthy activities and exercise, and community-based social events. All disciplinary actions address safety first and are treated as opportunities to teach residents about the effects of trauma on their lives and how they can overcome it. On a regular basis there are life skills groups about trauma and all staff use the language of trauma informed care in their daily interactions with residents. The staff also regularly discuss their own triggers, emotional safety, and trauma in supervision.

The program utilizes trauma-informed care in the following ways:

- All staff are trained in how trauma affects the developing brain
- Program expectations are provided during intake and through one-on-one and group interactions with staff throughout resident's stay
- Consequences are seen as teaching opportunities - behaviors that may lead to negative consequences are discussed
- Residents are able to have input into how the program works for them, and are able to provide feedback, suggestions, and participate in the development of and changes to policies
- All staff are expected to approach residents with curiosity about behavior, rather than assuming what a resident is thinking or feeling
- Staff are instructed to view behaviors as communication
- Staff are educated in trauma responses, and to recognize when they need to shift their own behavior to maintain a safe environment for the resident
- Safety is always the bottom line

The Agency is committed to maintaining the confidentiality of all personal and health information of each resident. Recently, the Agency has reformed its computer protections, changing password structure from 7 to 12 digits, limiting access to the Agency's servers from outside the Agency to individuals utilizing only Agency equipment which has special monitoring and security features, and requiring 2-step verification upon login.

- 3l Describe how your program addresses the needs of marginalized populations, including individuals of color, diverse cultural identities or ethnicities, people who identify as LGBTQ or gender non-conforming, etc.

In its trainings and its policies, Family clearly defines that it is an equal opportunity employer and is fully committed to the principles of multi-cultural staffing and equal employment. At Family, employment is based upon personal capabilities and qualifications without discrimination because of race, color, religion, gender identity/expression, sexual orientation, age, national origin, marital status, citizenship, medical condition, disability, status as a disabled, special or Vietnam era veteran, genetic predisposition or "carrier" status, military status, physical differences or any other protected characteristic as established by law. Part of the Agency's mission is to create safe environments for all staff and clients alike. New employee trainings talk about acceptable behaviors and address the agency's no-tolerance policy for sexual harassment. All staff are made aware of the channels through which complaints are handled and the protections in place for those who filed the complaint. An updated sexual harassment training that adheres to New York State requirements is required of all staff annually.

The Agency is also committed to employing staff who represent the constituencies that the Agency serves. Toward this end, the Agency has been actively seeking out minorities and particularly Spanish-speaking workers since they are the fastest growing population in the County. One of the Agency's Team Leaders has also led the effort of the Ulster County CoC to study and implement equity. The Agency has, since its beginning, been committed to a non-judgmental approach to all those seeking help and the commitment that the helper will not burden the resident with their judgement of the resident's actions.

Finally, the Agency recognizes that a number of these discreet populations will require connection to services from groups that specifically target their issues and social relationships. Toward that in, Family will encourage each population to identify and connect with community resources targeted specifically to that population's needs. Examples might include connection to the LGBTQ Center and community, participation in domestic violence support groups, groups that deal with the impact of trauma on children, and individuals that specially work on veterans or reentry issues, or provide groups to process the issues involved.

- 3m How does your program provide language access for individuals with limited English proficiency? Describe to what extent the following are available to tenants: translated materials, multilingual staff and/or interpretation and translation services.

As discussed above, the Agency is committed to quality communication with all those seeking assistance. Toward that end, the Agency has hired numerous Spanish-speakers and already provides document translation, oral translation, and advocacy for Spanish-speakers. In the last year, the Agency provided document translation for 60 individuals and oral translation for an additional 25 clients. The Agency's Team Leader for Domestic Violence and Crisis Services has led the Agency's efforts to outreach to and serve the immigrant community throughout Ulster County, and the Agency collaborates with the Worker's Justice Center to provide outreach and case management services to immigrant farm workers suffering domestic violence abuse. We are confident that the resources Family and its partners can bring to bear to assist with translation and other support services will be sufficient to meet the needs of the residents. If there are unusual requirements that a resident has, program staff will assist in locating service providers that can deliver these services.

4 Section: Readiness (15 points)

- 4a Is there an identified site for the proposed project?

Yes

- 4b Do you have site control? If yes, describe the form of site control. If not, describe your plan to achieve site control.

Yes. The proposed location for Golden Hill is currently owned by the Ulster County Housing Development Corporation. On April 8, 2021, Pennrose and UCHDC entered into a Purchase and Sale Agreement where Pennrose will purchase the site when it has obtained all necessary municipal and/or government approvals, construction and permanent financing, and all easements necessary to facilitate development of the site.

- 4c Describe what capital funding sources have already been secured. If capital funds have not been secured, discuss how your agency plans to secure capital funds within the 12-month time frame.

Golden Hill we be financed with 4% as-of-right Low Income Housing Tax Credits issued by NYS Homes and Community Renewal, as well as the issuance of Tax Exempt Bonds from the New York State Housing Finance Agency. In addition, the project will receive capital subsidy from HCR Supportive Opportunity Housing Program, Homes for Working Families, and the NYS Community Investment Fund. The development team is actively working with HFA and HCR and will be submitting an application for Tax Exempt Bonds in December 2021.

Permanent First Mortgage: The first mortgage debt will be financed with tax exempt bonds with bond volume cap by HFA.

Low-Income Housing Tax Credit Equity: With HFA tax-exempt financing, the project is eligible to receive 4% low-income tax credits as-of-right. These credits will be issued by NYS HCR.

HCR Subsidy: Based on current assumptions, the project will receive subsidy financing from HCR. Specifically, the project assumes SHOP, HWF, and CIF financing from HCR.

HCR's SHOP Program: Supportive Housing Opportunity Program (SHOP) is a statewide capital development program used to finance and build supportive housing. The use of SHOP funding is limited to projects with service and operating award through ESSHI or other local municipal agencies.

HCR's HWF Program: Homes for Working Families (HWF) is a statewide development program that provides gap financing to projects funded by a variety of HCR capital programs, including SHOP.

HCR's CIF Program: Rural and Urban Community Investment Fund (CIF) funds the new construction, adaptive reuse, or rehabilitation of a retail, commercial, or community facility component of an HCR-regulated affordable housing development.

- 4d Provide a detailed timeline for the project: Include milestones such as site acquisition, closing on financing, construction timeframe, and estimated project opening date. Address other items such as known zoning issues, community support, project development team readiness, etc.

The Golden Hill project team is actively pursuing site plan approvals and the zoning changes. The team has initiated the approval and rezoning process with the City of Kingston Planning Board and Common Council. The project team anticipates a 3-month rezoning and site approval process. The first formal Planning Board meeting is expected to occur in October 2021, which will begin the formal rezoning process. The team expects to have both site plan and zoning approvals by Q1 2022.

The Golden Hill project team anticipates submitting an application to HFA for 4% tax exempt bond financing in December 2021 and expects to close on all financing in February of 2023.

Construction will commence immediately upon financial closing. There will be an 18-month construction period (including all required demolition time) and a 10 month lease up period. The project is expected to complete construction in June 2024 and will be fully leased up and operational by April 2025.

The development team led by Pennrose has extensive affordable housing development experience and will manage financing applications, design development, environmental coordination, and project financing in house.

Development Team

Pennrose – developer, general partner

Pennrose Management Company – marketing, property management

WRT – Architect

- 4e If this project is already in development, identify the status/stage of development, including the percentage of construction completion, if applicable.

Golden Hill is still in pre-development. Construction is anticipated to begin in February 2023.

- 5 Section: Budget (25 points)

- 5a Describe the extent to which other viable sources of funding are available to provide operating and support services costs. Include any applicable funding such as tenant contributions, foundation funds, other subsidies, etc. Please list these funds separately in the "Other" Column in the budget.

Project operations at Golden Hill are supported through tenant rental income, and community/commercial space rental income. There are no additional sources of operating or rental subsidy available to the project. Tenants in the ESSHI units will be required to pay a tenant contribution of rent, underwritten to \$50 per month for all unit types. Family is in discussions with Ulster County, the NoVo Foundation and Home APR - all of which have said that support services are eligible for consideration if the project is funded which is equal to 30% of expected household income for tenants in ESSHI supported units.

- 5b Describe the fiscal viability and health of the applicant agency, including the history of successfully managing public grant funding.

Throughout its 51-year history, the Agency has maintained numerous contracts with all levels of Government as well as local and regional foundations. The Agency is currently maintaining over 80 such contracts. We are regularly audited by multiple funding sources and have never had any significant requirement to pay back inappropriate expenses. Throughout our history, there have been no major findings in our audit. While the 2020 audit is not completed, a summary is as follows

FAMILY OF WOODSTOCK, INC.
PROFIT AND LOSS STATEMENT (unaudited)
JANUARY 1, 2020 THROUGH DECEMBER 31, 2020

Total

REVENUES

Government Contracts \$6,060,572.60
Foundations \$1,664,947.48
Program Service Fees (inc. Per Diems) \$2,437,832.18
Rental Income \$311,140.46
Fundraising \$107,762.87
Contributions \$2,477,682.17
United Way & Other \$107,205.38

TOTAL REVENUES \$13,167,143.14

EXPENSES

Salaries & Wages \$5,912,927.07
Fringe \$1,572,967.90
General Operating \$3,155,511.95

TOTAL EXPENSES \$10,641,406.92

Net \$2,525,736.22

- 5c In the past three years, has the applicant agency been audited or reviewed by a government agency. If so, what was the result? Describe any negative findings and how they were resolved.

There have been no negative findings in any of Family's audits. Family is audited annually. Because we received so many funding sources in 2020 that were not originally budgeted, the 2020 audit is taking longer than usual, but the summary of findings has been included above.

- 5d Indicate if audited financial statements have been prepared for the applicant agency within the past twelve months and if the audit resulted in an unqualified, or "clean" opinion. If the audit resulted in a qualified opinion, please describe.

As stated above, all of our audits have been clean. We have sent a summary for 2020 and will include the 2019 audit for your review. In addition, we will forward the 2020 audit as soon as it is completed.

- 5e Did the most recent audited financial statements of the applicant agency indicate that current assets were equal to or exceeded current liabilities (a positive working capital position)?

The 2020 audit indicates that there was a net improvement of \$2,525,736.22.

- 5f Indicate the percentage of the total funding request attributable to rent subsidies, and the anticipated ESSHI rent subsidies per unit size, and the AMI level(s) the ESSHI rents are intended to equate to (e.g. 50% of AMI).

The total request attributable to rental subsidies is 52%. The total funding request is \$1,172,064, and the rental subsidy portion is 446,580. This represents the difference between the Shelter Rent Allowance (283 for a 1-bedroom, 425 for a 2-bedroom unit, and 512 for a 3-bedroom unit) and the 60% AMI net rent level (937 for a 1-bedroom, 1,187 for a 2-bedroom unit, and 1,549 for a 3-bedroom unit). The ESSHI units include 17 1-bedroom units, 22 2-bedroom units, and 9 3-bedroom units, for a total of 48 units. For the 1-bedroom units, the subsidy amount is 654 per month, or 7,848 annually. For the 2-bedroom units, the subsidy amount is 762 per month, or 9,144 annually. For the 3-bedroom units, the subsidy amount is 1,037 per month, or 12,444 annually. This averages to a total of 9,304 per unit in rental subsidy.

- 5g Describe how the amount of ESSHI funding requested per qualifying individual was determined. Explain the calculations regarding the services and other costs indicated in the budget. Each item should be justified.

Operating expenses for Golden Hill will be paid for using income from tenant rents and rent from the commercial spaces on the ground floor of the building. The amount of rental subsidy included in the ESSHI funding application was calculated to help fill the gap in capital sources and ongoing operating income to ensure long term stability for the project. The operating budget supported by rental income does not, however, include any expenses for supportive services staff, equipment or supplies, to support the 48 units at Golden Hill which will be set aside for formerly homeless tenants, which places the entirety of the services budget and associated items in the ESSHI funding request.

Family has extensive experience with providing supportive services to formerly homeless and at-risk populations and understands the suite of services required to adequately support these tenants. Based on historical organizational data, Family is able to provide accurate figures for the costs of these services, as well as associated supplies and equipment, which in the attached budget.

The expenses proposed for the Golden Hill ESSHI proposal include the subsidies to be paid for each of the 48 units based upon a unit breakdown of 30 one-bedroom apartments, 14 two-bedrooms and 4 three-bedroom apartments. The division of the apartments is based off of the Agency's experience in the make-up of survivors that have sought shelter from the Agency's domestic violence shelter. It is assumed that all of the frail elderly will be single adults and therefore require only a one-bedroom apartment. The amount charged is based on rents affordable to households earning 60% of AMI.

In addition, the Agency is proposing that 10% of Family's Team Leader for Housing and Case Management services will be spent to provide hiring, training, and supervision of the program's leadership and outcomes. Family is proposing a full-time Program Director and 3 case managers to provide the direct care to the proposed populations. While each of the case managers will be able to provide comprehensive services, one will be a specialist in DV services and one will have a specialization in senior services. In addition, the program is proposing to provide after-hour services utilizing resident coordinators. Coverage will be provided until midnight on weekdays and for 10 hours over the weekend.

In addition, Family is proposing to have 30 hours of nursing services to provide continuous evaluation of the frail elderly's conditions and review any medical issues as a result of the domestic violence or any issues among the families of the dv survivors. Family is also proposing to pay travel reimbursement at a rate of \$0.48 a mile and \$1,000 for emergency client costs.

PERSONAL SERVICES - SALARY

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once a Salary position has been saved successfully, select the **Add** button above to add additional Salary position.
4. Click Forms Menu to return to the navigation links.

Salary Detail

In the Salary section only include staff positions related to the implementation and administration of the program. If Salary is not applicable leave this section blank.

Details

Position/Title team Leader for Crisis Services
Role/Responsibility Supervises the program.
in Title 1

Financial

Annualized Salary Per Position \$66,560.00
STD Work Week (hrs) 40.00
% Funded 9.58%
Months Funded 12
Total Grant Funds \$6,376.00
Total Match Funds
Match % 0%

Total Other Funds	
Line Total	\$6,376.00
Category Total	\$232,200.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

PERSONAL SERVICES - SALARY

Instructions:

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Salary Detail

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Details

Position/Title Program Director
Role/Responsibility Provides supervision.
in Title 1

Financial

Annualized Salary Per Position \$60,771.00
STD Work Week (hrs) 40.00
% Funded 100%
Months Funded 12
Total Grant Funds \$60,771.00
Total Match Funds
Match % 0%

Total Other Funds	
Line Total	\$60,771.00
Category Total	\$232,200.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

PERSONAL SERVICES - SALARY

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Salary Detail

In the Salary section only include staff positions related to the implementation and administration of the program. If Salary is not applicable leave this section blank.

Details

Position/Title Case Manager
Role/Responsibility Case Managers will provide comprehensive case management assistance and transportation as needed
in Title 1

Financial

Annualized Salary Per Position \$38,626.00
STD Work Week (hrs) 40.00
% Funded 100%
Months Funded 12
Total Grant Funds \$38,626.00
Total Match Funds
Match % 0%

Total Other Funds	
Line Total	\$38,626.00
Category Total	\$232,200.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

PERSONAL SERVICES - SALARY

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Salary Detail

In the Salary section only include staff positions related to the implementation and administration of the program. If Salary is not applicable leave this section blank.

Details

Position/Title Case Manager
Role/Responsibility Case Managers will provide comprehensive case management assistance and transportation as needed
in Title 1

Financial

Annualized Salary Per Position \$36,400.00
STD Work Week (hrs) 40.00
% Funded 100%
Months Funded 12
Total Grant Funds \$36,400.00
Total Match Funds
Match % 0%
Total Other Funds

Line Total	\$36,400.00
Category Total	\$232,200.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

PERSONAL SERVICES - SALARY

Instructions:

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2. Select the **Save** button above to save your work frequently.
3. Once a Salary position has been saved successfully, select the **Add** button above to add additional Salary position.
4. Click Forms Menu to return to the navigation links.

Salary Detail

In the Salary section only include staff positions related to the implementation and administration of the program. If Salary is not applicable leave this section blank.

Details

Position/Title DV Case Manager
Role/Responsibility Case Managers will provide comprehensive case management assistance and transportation as needed
in Title 1

Financial

Annualized Salary Per Position \$36,400.00
STD Work Week (hrs) 40.00
% Funded 100%
Months Funded 12
Total Grant Funds \$36,400.00
Total Match Funds
Match % 0%
Total Other Funds

Line Total	\$36,400.00
Category Total	\$232,200.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

PERSONAL SERVICES - SALARY

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.

- Once a Salary position has been saved successfully, select the **Add** button above to add additional Salary position.
- Click Forms Menu to return to the navigation links.

Salary Detail

In the Salary section only include staff positions related to the implementation and administration of the program. If Salary is not applicable leave this section blank.

Details

Position/Title Residential Coordinator
Role/Responsibility The Residential Coordinators are responsible for the direct supervision of all residents and provide the necessary transportation to all scheduled appointments.
in Title 2

Financial

Annualized Salary Per Position \$22,751.00
STD Work Week (hrs) 27.50
% Funded 100%
Months Funded 12
Total Grant Funds \$45,502.00
Total Match Funds
Match % 0%
Total Other Funds

Line Total	\$45,502.00
Category Total	\$232,200.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

PERSONAL SERVICES - SALARY

Instructions:

- Please complete all the required fields.
- Select the **Save** button above to save your work frequently.
- Once a Salary position has been saved successfully, select the **Add** button above to add additional Salary position.
- Click Forms Menu to return to the navigation links.

Salary Detail

In the Salary section only include staff positions related to the implementation and administration of the program. If Salary is not applicable leave this section blank.

Details

Position/Title Fill-Ins
Role/Responsibility Provides coverage for Case Managers and Residential Coordinators
in Title 2

Financial

Annualized Salary Per Position \$8,125.00
STD Work Week (hrs) 9.82
% Funded 100%
Months Funded 12
Total Grant Funds \$8,125.00
Total Match Funds
Match % 0%
Total Other Funds

Line Total	\$8,125.00
Category Total	\$232,200.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

PERSONAL SERVICES - SALARY NARRATIVE

Instructions:

- Please complete narrative field.
- Select the **Save** button above to save your work frequently.
- Click Forms Menu to return to the navigation links.

Salary Narrative

Provide an explanation of any exceptions in staffing patterns and/or annual salary costs.

The Team Leader for Housing and Case Management will provide 10% of her time to the program. She will be involved in program development, staff hiring, staff training, and ongoing program supervision.

The Program Director will be responsible for the day-to-day supervision of the program including quality of care delivered, supervision of staff, problem solving on all major resident issues, and supervision of all reporting. They will be full-time in the program.

We are proposing 3 Case Managers. The responsibilities of case management are documented in detail in the narrative. Each will be 40 hours in the program. At least one CM will have a significant background working with domestic violence survivors, and at least one will have expertise working with seniors. The time of the case managers will include coverage for each weekend day.

Residential Coordinators - we are proposing to provide coverage 5pm to 12am, each of the 5 week days and 10 hours of service each weekend day. We are also proposing fill-ins to provide coverage when staff are off on holiday, vacation or sick time.

PERSONAL SERVICES - FRINGE

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once a Fringe item has been saved successfully, select the **Add** button above to add additional Fringe items.
4. Click Forms Menu to return to the navigation links.

Fringe Detail

Fringe Benefits should be budgeted in line with your organization's Standard Fringe Benefit Policy and/or Negotiated Bargaining Agreements and should not exceed the current NYS rate. Provide a brief explanation of the percentage and composition of the fringe benefit structure. If fringe is not applicable, leave this section blank.

Details

Fringe - Type/Description Insurances, Taxes and Retirement - Health, Dental, Vision and Life Insurance, NY Unemployment Insurance, NYS Disability and W
Justification Insurances, Taxes and Retirement - Health, Dental, Vision and Life Insurance, NY Unemployment Insurance, NYS Disability and Worker's Compensation and a retirement plan.

Financial

Total Grant Funds \$102,866.00

Total Match funds

Match % 0%

Total Other funds

Line Total	\$102,866.00
Category Total	\$102,866.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

PERSONAL SERVICES - FRINGE NARRATIVE

Instructions:

1. Please complete narrative field.
2. Select the **Save** button above to save your work frequently.
3. Click Forms Menu to return to the navigation links.

Fringe Narrative

Fringe Benefits should be budgeted in line with your organization's Standard Fringe Benefit Policy and/or Negotiated Bargaining Agreements and should not exceed the current NYS rate. Provide a brief explanation of the percentage and composition of the fringe benefit structure. If the budgeted fringe benefits represent an exception of the current NYS rate, please explain the difference.

Fringe consists of FICA, NYS unemployment insurance, NYS disability, NYS worker's Compensation and health, dental, vision and life insurance.

The Board of Directors establishes an amount each year that our Agency will pay for individuals, couples and families for the insurance plans. The 2021 amount for health insurance is \$637.89 per month for a single plan, \$1,275.78 per month for couple plan, \$1,211.89 per month for an employee plus child plan and \$1,786.09 per month for a family plan. The 2021 amount for dental and vision insurance is \$30.74 per month for a single plan, \$60.74 per month for the employee plus spouse, \$67.25 per month for the employee plus child plan, and \$97.25 per month for a family plan. Our full time (35hrs or more) employees earn 20% per year of employment toward the full cost of family insurance coverage so that after working for the agency for 5 years, the agency will pay full cost of the employees family health care up to the limit set by the board for the year.

Our Life Insurance costs \$2.30/month per employee who works 20 hours or more for the Agency. The monthly amount changes based on the age of the employee. The insurance pays a \$10,000 death benefit to assist families with the cost of burial.

The agency contributes 1.5% of total eligible salaries towards an employee's retirement plan.

CONTRACTUAL

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once a Contractual item has been saved successfully, select the **Add** button above to add additional Contractual items.
4. Click Forms Menu to return to the navigation links.

Contractual Detail

In the Contractual Services section should include costs for services rendered to the project under a format or written agreement such as direct provision of services by contractual arrangement. If Contractual is not applicable leave this section blank.

Details

Contractual - Type/Description Pennrose Management Company Leasing and Compliance
Justification Funding for property management to oversee leasing of ESSHI units and ensure compliance with both ESSHI and Tax Credit reporting requirements.

Financial

Total Grant Funds \$16,000.00

Total Match Funds

Match % 0%

Total Other Funds

Line Total	\$16,000.00
Category Total	\$154,000.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

CONTRACTUAL

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once a Contractual item has been saved successfully, select the **Add** button above to add additional Contractual items.
4. Click Forms Menu to return to the navigation links.

Contractual Detail

In the Contractual Services section should include costs for services rendered to the project under a format or written agreement such as direct provision of services by contractual arrangement. If Contractual is not applicable leave this section blank.

Details

Contractual - Type/Description Nurses
Justification 2 Nurses \$50/hr x 30 hrs to provide medical services when needed

Financial

Total Grant Funds \$78,000.00

Total Match Funds

Match % 0%

Total Other Funds

Line Total	\$78,000.00
Category Total	\$154,000.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

CONTRACTUAL

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once a Contractual item has been saved successfully, select the **Add** button above to add additional Contractual items.
4. Click Forms Menu to return to the navigation links.

Contractual Detail

In the Contractual Services section should include costs for services rendered to the project under a format or written agreement such as direct provision of services by contractual arrangement. If Contractual is not applicable leave this section blank.

Details

Contractual - Type/Description Overnight Security position (30%)
Justification The agency will pay 30% of a full time Overnight Security position to provide security.

Financial

Total Grant Funds \$18,000.00
Total Match Funds
Match % 0%
Total Other Funds \$42,000.00

Line Total	\$60,000.00
Category Total	\$154,000.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

TRAVEL

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once a Travel item has been saved successfully, select the **Add** button above to add additional Travel items.
4. Click Forms Menu to return to the navigation links.

Travel Detail

This section is used to itemize travel costs. If Travel is not applicable leave this section blank.

Details

Travel - Type/Description Local travel @ 48 cents per mile
Justification We reimburse staff travel at the rate of \$.48/mile plus tolls and parking, where appropriate.

Financial

Total Grant Funds \$500.00
Total Match Funds
Match % 0%
Total Other Funds

Line Total	\$500.00
Category Total	\$500.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

EQUIPMENT

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once an Equipment item has been saved successfully, select the **Add** button above to add additional Equipment items.
4. Click Forms Menu to return to the navigation links.

Equipment Detail

This section is used to itemize both purchased and rental equipment costs. If Equipment is not applicable leave this section blank.

Details

Equipment - Type/Description Purchase of Laptops
Justification Purchase of 3 Laptops for staff
Purchase/Rent? Purchase*

Financial

Total Grant Funds \$3,000.00
Total Match Funds
Match % 0%
Total Other Funds

Line Total	\$3,000.00
-------------------	-------------------

Category Total | **\$3,000.00**

[Click here to see a summary of the detail entered for this category.](#)

[CATEGORY TOTAL SUMMARY](#)

EQUIPMENT NARRATIVE

Instructions:

1. Please complete narrative field.
2. Select the **Save** button above to save your work frequently.
3. Click Forms Menu to return to the navigation links.

Equipment Narrative

Provide documentation regarding bids received for equipment purchases. This field can be used to reference additional documents that are submitted with the application/contract.

The Agency is proposing to purchase 3 laptops at a rate of \$1,000 a laptop. Documentation for all equipment purchases will be provided at the time of program approval and implementation.

Provide a justification for any exceptional equipment purchase/rental costs as related to the program needs. For example, a program may have a dollar threshold whereby equipment purchases of a certain amount must be justified. For ongoing or multiyear contract, justification is required for new items of equipment only.

We are not at this time proposing any exceptional equipment.

SPACE/PROPERTY RENT

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once a Space/Property: Rent item has been saved successfully, select the **Add** button above to add additional Space/Property: Rent items.
4. Click Forms Menu to return to the navigation links.

Space/Property: Rent Detail

This section is used to itemize costs associated with Space/Property: Rent. If Space/Property: Rent is not applicable leave this section blank.

Details

Space/Property: Rent - Type/Description Rental of Community Center

Justification 30% Space cost of Community building

Financial

Total Grant Funds \$16,667.00

Total Match Funds

Match % 0%

Total Other Funds

Line Total \$16,667.00

Category Total \$16,667.00

[Click here to see a summary of the detail entered for this category.](#)

[CATEGORY TOTAL SUMMARY](#)

SPACE/PROPERTY: RENT NARRATIVE

Instructions:

1. Please complete narrative field.
2. Select the **Save** button above to save your work frequently.
3. Click Forms Menu to return to the navigation links.

Space/Property: Rent Narrative

Provide a detailed explanation of any extraordinary costs or significant changes to the original contract. For example, a program may have a dollar threshold whereby space/property expenditures of a certain amount must be justified.

Rent expense used to lease space on-site for the direct provision of services such as day care, counseling, and case management.

UTILITIES

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once a Utility item has been saved successfully, select the **Add** button above to add additional Utility items.
4. Click Forms Menu to return to the navigation links.

Utility Detail

This section is used to itemize costs associated with Utilities. If Utility is not applicable leave this section blank.

Details

Utilities - Type/Description

Justification

Financial

Total Grant Funds

Total Match Funds

Match % %

Total Other Funds

Line Total	\$0
Category Total	\$0.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

UTILITIES NARRATIVE

Instructions:

1. Please complete narrative field.
2. Select the **Save** button above to save your work frequently.
3. Click Forms Menu to return to the navigation links.

Utilities Narrative

Provide a detailed explanation of any extraordinary costs or significant changes to the original contract. For example, a program may have a dollar threshold whereby space/property expenditures of a certain amount must be justified.

N/A

OPERATING EXPENSES

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once an operating expense item has been saved successfully, select the **Add** button above to add additional operating expense items.
4. Click Forms Menu to return to the navigation links.

Operating Expenses Detail

This section is used to itemize costs associated with the operation of the program, including but not limited to insurance/bonding, photocopying, advertising, and supplies. If Operating Expenses are not applicable leave this section blank.

Details

Operating Expenses - Type/Description Rental Subsidy

Justification Cost of rent-30 apartments x \$964 x 12mos; 14 apartments x \$1,166 x 12 mos; 4 apart x \$1,356 x 12mos

Financial

Total Grant Funds \$608,016.00

Total Match funds

Match % 0%

Total Other funds

Line Total	\$608,016.00
Category Total	\$608,016.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

OPERATING EXPENSES NARRATIVE

Instructions:

1. Please complete narrative field.
2. Select the **Save** button above to save your work frequently.
3. Click Forms Menu to return to the navigation links.

Operating Expenses Narrative

If applicable, please provide an explanation of any extraordinary costs or significant changes to the original contract. For example, a program may have a dollar threshold whereby operating expenses of a certain amount must be justified.

Cost of rent-30 apartments x \$964 x 12mos; 14 aparts x \$1,166 x 12 mos; 4 apart x \$1,356 x 12mos.

OTHER EXPENSES DETAIL

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once an other expense item has been saved successfully, select the **Add** button above to add additional other expense items.
4. Click Forms Menu to return to the navigation links.

Other Expenses Detail

If Other Expenses is not applicable, leave this section blank.

Details

Other Expenses - Type/Description Client Costs
Justification Transportation and other cost client related

Financial

Total Grant Funds \$1,000.00
Total Match funds
Match % 0%
Total Other funds

Line Total	\$1,000.00
Category Total	\$96,815.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

OTHER EXPENSES DETAIL

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once an other expense item has been saved successfully, select the **Add** button above to add additional other expense items.
4. Click Forms Menu to return to the navigation links.

Other Expenses Detail

If Other Expenses is not applicable, leave this section blank.

Details

Other Expenses - Type/Description Furniture purchases
Justification Purchase of furniture for apartments

Financial

Total Grant Funds \$38,400.00
Total Match funds
Match % 0%
Total Other funds

Line Total	\$38,400.00
Category Total	\$96,815.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

OTHER EXPENSES DETAIL

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Once an other expense item has been saved successfully, select the **Add** button above to add additional other expense items.
4. Click Forms Menu to return to the navigation links.

Other Expenses Detail

If Other Expenses is not applicable, leave this section blank.

Details

Other Expenses - Type/Description	Administration
Justification	Administration expenses-payroll, A/P, billing, auditing, grantwriting, IT, budgeting, supervision
Financial	
Total Grant Funds	\$57,415.00
Total Match funds	
Match %	0%
Total Other funds	
Line Total	\$57,415.00
Category Total	\$96,815.00

Click here to see a summary of the detail entered for this category.

[CATEGORY TOTAL SUMMARY](#)

OTHER NARRATIVE

Instructions:

1. Please complete all the required fields.
2. Select the **Save** button above to save your work frequently.
3. Click Forms Menu to return to the navigation links.

Other Expenses Narrative

If applicable, please provide an explanation of any extraordinary costs or significant changes to the original contract. For example, a program may have a dollar threshold whereby the other cost category expenses of a certain amount must be justified.

We are budgeting \$1,000 for client costs to pay for transportation and other cost client related.

We are budgeting \$38,400 for the purchase of furniture for the apartments.

We are budgeting \$57,415 for administration expenses which include payroll, A/P, billing, auditing, grantwriting, IT, budgeting, supervision

EXPENDITURE SUMMARY

Instructions:

1. Save this form to display a roll-up of the category budget details.
2. Click Forms Menu to return to the navigation links.

Category of Expense	Grant Funds	Match Funds	Match % Calculated	Match % Required	Other Funds	Total
1. Personal Services						
a) Salary	\$232,200.00	\$0	0%	0%	\$0	\$232,200.00
b) Fringe	\$102,866.00	\$0	0%	0%	\$0	\$102,866.00
Subtotal	\$335,066.00	\$0	0%		\$0	\$335,066.00
2. Non Personal Services						
a) Contractual	\$112,000.00	\$0	0%	0%	\$42,000.00	\$154,000.00
b) Travel	\$500.00	\$0	0%	0%	\$0	\$500.00
c) Equipment	\$3,000.00	\$0	0%	0%	\$0	\$3,000.00
d) Space/Property & Utilities	\$16,667.00	\$0	0%	0%	\$0	\$16,667.00
e) Operating Expenses	\$608,016.00	\$0	0%	0%	\$0	\$608,016.00

f) Other	\$96,815.00	\$0	0%	0%	\$0	\$96,815.00
Subtotal	\$836,998.00	\$0	0%		\$42,000.00	\$878,998.00
Total	\$1,172,064.00	\$0	0%	0%	\$42,000.00	\$1,214,064.00
PERIOD TOTAL	\$0					

WORK PLAN OVERVIEW FORM

Instructions:

The purpose of this form is to capture organizational information necessary for application processing, as well as a detailed accounting of the proposed or funded project. It is made up of three sections:

1. Project Summary
2. Organizational Capacity
3. Project Details - Objectives, Tasks and Performance Measures

If applicable, specific instructions/requirements for completing these sections may be found in the Grant Opportunity under which you are applying. Click Forms Menu to return to the navigation links.

Work Plan Period From 6/1/2024 To 7/1/2025

Project Summary

Provide a high-level overview of the project, including the overall goal and desired outcomes. Include information such as location, target population, overall number of persons to be served, service delivery method and hours of operation. Family of Woodstock, Inc. in collaboration with Pennrose NY, LLC are herein proposing to establish 48 units of ESSHI housing targeting 26 to the domestic violence population and 22 to the frail elderly population. The project is part of a larger development project to provide 160 units of affordable senior and work-force housing. Golden Hill was initially suggested in the study the County sponsored to determine where affordable housing could be located as the County faces a severe shortage of affordable housing. It was determined that a prime location was the old County Jail on Golden Hill and toward that end, the County turned over to its economic development arm to put out the bid for proposals to provide affordable housing. 5 major proposals were reviewed and the Pennrose proposal was accepted. As part of the Pennrose proposal, Family of Woodstock was identified as the local non-profit which would provide the support services for the target populations in the 48 ESSHI units. Family was chosen because of its long, 51-year history providing major services throughout the County. The Agency runs the oldest continuously operating emergency switchboard in the County, established domestic violence services in 1980 by opening the first DV shelter between Yonkers and Albany. The Agency also has established itself as the primary deliverer of case management services, particularly to the homeless. In total, the Agency runs 4 emergency shelters for survivors of domestic violence, homeless families, homeless single adults, and runaway and homeless youth. In its case management program, it has extensive experience working with seniors including issues of access to entitlements, access to needed services, transportation to required appointments, and collaborations with other agencies which provide specialized services.

Golden Hill is proposed on 20 acres of land formally owned by Ulster County and used for a now closed County Jail, Golden Hill located at located at 63 Golden Hill Drive, Kingston, NY 12401. The overall goal of the Golden Hill Project, is to provide quality, safe, affordable housing in a community setting to meet the housing needs of low and moderate income residents of Ulster and surrounding Counties. The project has selected domestic violence survivors and frail elderly because these are two populations which have limited or no affordable resources available currently through the housing market. The goals of the ESSHI program are to provide stable housing and comprehensive services to respond to the needs and improve the lives of survivors of domestic violence and of the frail elderly. Each resident will be provided comprehensive case management which is described in detail in the application narrative. Specialized services will either be provided through consultants or through outside agencies, access to which will be facilitated by the program staff. While there may be limited turnover, the housing is projected to be 100% occupied and to remain occupied by the initial residents during the first year of operation. We are proposing to serve 18 families of domestic violence survivors and expect to have on average, 2 children per family, and 8 individual domestic violence survivors. The Agency will provide additional children support through its existing programming.

We are proposing to provide services 7 days a week from 9am to midnight during the weekdays, and 10am to 8pm each weekend day. In addition, we are proposing to provide 30 hours per week of nursing coverage. The hours that the nurse will provide will be determined based on resident needs.

Organizational Capacity

Describe the staffing, qualifications and ongoing staff development/training activities, and relevant experience of the provider organization to support the project.

Family of Woodstock, Inc. has been the sole provider of emergency shelter in Ulster County for the last 50 years. It currently runs 4 emergency shelters and 2 transitional living programs. The program will be led by Victoria Read (hired in 2007), the Agency's Team Leader for Housing and Case Management. Miss Read has extensive knowledge of case management and has been promoted to Team Leader. Her resume is available upon request. The Program Director will have experience in case management and supervisory experience. They must have experience providing services to chronically homeless, a BA degree and 3-5 years of experience working with disabled and vulnerable populations. A Case Manager will have a BA degree and at least a year working in the field, a knowledge of the social services programs in the community, and experience working with vulnerable populations. At least one of the case managers will have experience working with DV survivors and a second, experience working with the frail elderly. Resident Coordinators will have at least 1-year's experience working with vulnerable populations. When an individual is under consideration for employment, the Agency requires: A motor vehicle driving history to check for insurability and safety issues; a check of the NYS Justice Center Staff Exclusion List to indicate whether the individual has abused a vulnerable person in New York State; fingerprints are sent to either the NYS Justice Center or NYS DCJS (depending on funding source) to check for criminal background history; and finally, a check with the NYS Child Abuse Registry for any misconduct. When an employee has been hired, an individualized training plan is developed as part of each staff's yearly formal written evaluation. All Family of Woodstock, Inc. employees are expected to complete a 46-hour training curriculum that includes: Listening Skills and Relationship Building; ; the History and Values of Family of Woodstock, Inc.; Domestic Violence Training; SAFETALK; Imminent Risk and Safety Planning; Mental Health First Aid; Youth Mental Health First Aid; Drug and Alcohol Training; Confidentiality and Mandated Reporting; Cultural Competency; Ethics, Boundaries and Self-Care; Trauma-informed Care; Narcan Training; and Sexual Harassment Training. Family, in conjunction with the other major human service agencies in the county, provides training on all OSHA requirements, trafficking and LGBTQ issues. In addition, NYS OCFs regulations require all program staff be provided 40 hours of in-service trainings each year of employment, concerning such topics as: CPR and first aid; emergency and safety procedures; HIV awareness, education and prevention; case records and confidentiality of information; positive youth development and youth issues; child abuse prevention and reporting requirements as set forth in and required by New York State Social Services Law; suicide prevention; sexual harassment; and runaway and homeless youth regulations. Whenever possible, the program utilizes training provided by RHYTTAC, CHY, UC Mental Health, Youth Bureau and Probation Departments, and the Mental Health Association of Ulster County. In the last year, staff have attended trainings on the following issues: HIV/AIDS transmission and protection; child abuse reporting and collaborating with Child Protective Services and Foster Care Services; confidentiality; boundaries; RHYA regulations; case management for runaway and homeless youth; Suicide Prevention trainings; adolescent sexuality; cultural competency awareness; trauma informed care; CPR and first aid training; mental health trainings on PTSD and other severe mental health issues; family system dynamics; motivational interviewing; and in such evidence based practices as "Positive Youth Development", and "Dialectical Behavior Therapy." Finally, all programmatic federal regulations are reviewed with program staff and financial regulations with financial staff.

OBJECTIVES

Instructions:

1. Enter an *Objective* in the field provided below.
2. Select the **Save** button.
3. To add another *Objective*, when applicable, select the **Add** button above.
4. Follow the directions below for adding *Tasks* to the *Objective*.
5. Click Forms Menu to return to the navigation links.

Objective Name

Objective Description

Instructions for Adding Tasks for this Objective:

Click the **Task** link in the Forms Menu navigation panel above to add a Task to this Objective.

OBJECTIVES AND TASKS

Instructions:

1. Select the **View/Add** link next to a Task to add or edit the Performance Measures for that Task.
2. Click Forms Menu to return to the navigation links.

Objective
Objective Name
Objective Description

TASKS

Instructions:

1. Enter an *Task* in the field provided below.
2. Select the **Save** button.
3. To add another *Task*, when applicable, select the **Add** button above.
4. Follow the directions below for adding *Performance Measures* to the *Task*.
5. Click Forms Menu to return to the navigation links.

Objective:

Task Name

Task Description

Instructions for Adding Performance Measures for this Task:

Click the **Performance Measures** link in the Forms Menu navigation panel above to add a Performance Measure to this Task.

DEFINE TASKS

Objective:

Task

PERFORMANCE MEASURE

Instructions:

1. Enter a *Performance Measure* in the field(s) provided below.
2. Select the **Save** button.
3. To add another *Performance Measure*, when applicable, select the **Add** button above.
4. Click Forms Menu to return to the navigation links.

Objective:

Task:

Performance Measure Name

Integer

PERFORMANCE MEASURE

Instructions:

1. Enter a *Performance Measure* in the field(s) provided below.
2. Select the **Save** button.
3. To add another *Performance Measure*, when applicable, select the **Add** button above.

4. Click Forms Menu to return to the navigation links.

Objective:

Task:

Performance Measure Name

Integer

PRE-SUBMISSION UPLOADS

Instructions:

1. Select the **Browse** button to locate an upload.
2. Select the **Save** button above to load it into the system.
3. If the Grant Opportunity you are applying for requires that a specific document be uploaded, a link to the Document Template will appear under the upload row. Click the link to download and save the Document Template to your computer. Once you have filled out the Document Template you can use the associated **Upload** row to upload the document as part of your application.

MRT Questionnaire (Appendix A)

Please complete and upload if applicable

FileNetDocRetrieval.aspx?docID={8875B143-4EE8-407D-B1C2-26E5C783069C}

Document Template: [Click here](#)

Sexual Harassment Certification *

Required document submission - Please refer to Section 1.15 of the RFP

FileNetDocRetrieval.aspx?docID={CFA08188-498B-4864-9568-0980B098A5C9}

Document Template: [Click here](#)

CoC or local planning entity letter of support*

Upload letter of support from Continuum of Care (CoC) or local planning entity (required)

FileNetDocRetrieval.aspx?docID={2B953D99-DF49-4B73-80B7-E4C941CBAF0A}

Additional Document Upload Space

Space is provided for supplemental information, if necessary, to be provided

FileNetDocRetrieval.aspx?docID={456B5BC2-FAB1-4415-9344-B18838105ECF}

Attestation

By clicking the **I Agree** button below, you certify and agree that you are authorized on behalf of the applicant and its governing body to commit the applicant to comply with the requirements of Article 15-A of the New York State Executive Law: Participation By Minority Group Members and Women With Respect To State Contracts by providing opportunities for Minority-owned Business Enterprise (MBE)/Woman-owned Business Enterprise (WBE) participation. You further certify that the applicant will maintain such records and take such actions necessary to demonstrate such compliance throughout the completion of the project.

By clicking the **I Agree** button below, you certify that you are authorized on behalf of the applicant and its governing body to submit this application. You further certify that all of the information contained in this Application and in all statements, data and supporting documents which have been made or furnished for the purpose of receiving Assistance for the project described in this application, are true, correct and complete to the best of your knowledge and belief. You acknowledge that offering a written instrument knowing that the written instrument contains a false statement or false information, with the intent to defraud the State or any political subdivision, public authority or public benefit corporation of the State, with the knowledge or belief that it will be filed with or recorded by the State or any political subdivision, public authority or public benefit corporation of the State, constitutes a crime under New York State Law.

Submitted By: [Michael Berg](#) **Submitted On:** [10/5/2021 4:50:00 PM](#)

3A-2a Healthcare Formal Agreements

This attachment details the Healthcare Formal Agreements for NY **608**. It includes the following:

1. Signed grant agreement between **Family of Woodstock, Inc.** and the **County of Ulster**, to **provide services for Domestic Violence RRH program.**

FAMILY

A UNITED WAY AGENCY
www.fowinc.org

Michael Berg
Executive Director

ADMINISTRATION

Family of Woodstock, Inc.
POB 3516 - 39 John St.
Kingston, NY 12402
845.331.7080

ADOLESCENT SERVICES

Family House
845.338.5953

Youth Case Management Services
845.331.7080/255.8801/647.2443

MidWay I/MidWay II
845.339.5508/845.647.1346

CHILD CARE SERVICES

Child Care Connections
Ulster County- 845.331.7080
Columbia/Greene Co.- 518.822.1944
Columbia Co. Child Care Subsidy
518.822.0087

DOMESTIC VIOLENCE SERVICES

Washbourne House
845.338.2370
Non-Residential Services
845.338.2370
Evolve
845.331.7080

HOMELESS SERVICES

Darmstadt Shelter
845.331.1395
Family Inn
845.340.1847

ADULT SERVICES

Adult Case Management Services
845.331.7080/255.8801/647.2443
Re-Entry Services
845.331.7080
Health Homes
845.331.7080

HOTLINE/WALK-IN CENTERS

Family of Ellenville
845.647.2443/647.5700
Family of New Paltz
845.255.8801
Family of Woodstock
845.679.2485/338.2370

COMMUNITY SERVICES

Supervised Visitation
845.331.1395
Kingston Cares
845.331.9683

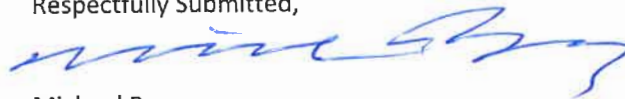
Cares of NY Inc.
200 Henry Johnson BLVD.
Albany, NY 12210

RE: Family of Woodstock, Inc. Coordination and Leveraging of Domestic Violence Resources

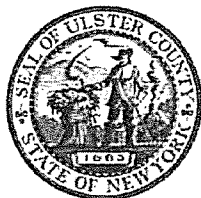
To Whom It May Concern,

The Kingston/Ulster CoC NY-608 has been successful in securing additional support service funding through contracts that Family of Woodstock, Inc. has with the NoVo Foundation totaling \$75,000 to outreach to homeless families in hotels and the NYS Office of Temporary and Disability Assistance totaling \$186,060 to provide comprehensive case management and support services to homeless individuals and families. In addition, the Agency has a contract with the Ulster County Mental Health Department to provide local assistance and case management funding to serve homeless and at-risk individuals in the amount of \$115,908. All of this funding significantly exceed the 25% match required to leverage the HUD funding.

Respectfully Submitted,



Michael Berg
Executive Director of Family of Woodstock, Inc.



AGREEMENT FOR PROFESSIONAL SERVICES

THIS AGREEMENT is entered into by and between the **COUNTY OF ULSTER**, a municipal corporation and a county of the State of New York, with principal offices at 244 Fair Street, Kingston, New York 12401 (the "County"), and **FAMILY OF WOODSTOCK INC.**, a domestic not-for-profit corporation with principal offices at 39 John Street, Kingston, New York 12401 (the "Agency"), (each, a "Party;" together, the "Parties").

RECITALS

WHEREAS, the State of New York Office of Mental Health (OMH), and Office of Addiction Services and Supports (OASAS) grant funding to local agencies to operate various programs; and

WHEREAS, the Ulster County Department of Mental Health (UCDMH) has been directed by OMH and OASAS to enter into an agreement with the Agency in order to allocate designated funding for the provision of i) Non-Medicaid Care Coordination, ii) Respite Services, iii) Primary Prevention Services, iv) Advocacy/Support Services, v) Family Peer Support Services (Children and Family), vi) Outreach, in accordance with the terms and conditions set forth in this Agreement.

NOW, THEREFORE, in consideration of the promises and covenants set forth below, the Parties hereby agree as follows:

ARTICLE 1 - SCOPE OF SERVICES

The Agency agrees to perform the services identified in Schedule A, the Scope of Services (the "Services"), which is attached hereto and is hereby made a part of this Agreement. The Agency agrees to perform the Services in accordance with the terms and conditions of this Agreement. It is specifically agreed to by the Agency that the County will not compensate the Agency for any services not included in Schedule A without prior authorization, evidenced only by a written Change Order, Amendment, or Addendum to this Agreement, which is executed by the Ulster County Executive (the "Executive") or the Ulster County Director of Purchasing (the "Purchasing Director"), after consultation with the head of the County Department responsible for the oversight of this Agreement (the "Department Head"), and upon review by the County Attorney's Office.

ARTICLE 2 - TERM OF AGREEMENT

The Agency agrees to perform the Services beginning **January 1, 2021 and ending December 31, 2021**.

ARTICLE 3 - COMPENSATION

For satisfactory performance of the Services, or as such Services may be modified mutually by a written Change Order, Amendment, or Addendum to this Agreement, the County agrees to compensate the Agency in accordance with the New York State Aid and County contribution as set forth in "Schedule B," which is attached hereto and is hereby made a part of this Agreement. The Agency shall submit to the County a request for payment for a funding advance as set forth in "Schedule B." Payments, in the form of advances, shall be made to the Agency within thirty (30) days of receipt of such monies from New York State, once the properly completed and signed Request for Payment form has been received by the County. In the fourth quarter of the calendar year, the County will reconcile prior payments based on the most recent New York State Aid allocation and adjusted for any variations in the New York State Aid or any under spending from the prior year, as determined from the Agency's prior year Consolidated Claims Report and revised New York State Aid allocations. The Agency agrees to provide any additional documentation required by the County upon the County's written request.

A not-to-exceed amount of **ONE MILLION, ONE HUNDRED NINE THOUSAND, NINE HUNDRED NINETY-SEVEN AND 00/100 (\$1,109,997.00) DOLLARS** has been established for the Services to be rendered by the Agency. Costs in excess of the above amount may not be incurred without the prior written authorization of the Executive or the

Purchasing Director, after consultation with the Department Head, and evidenced only by a written Change Order, Amendment, or Addendum to this Agreement. It is specifically agreed to by the Agency that the County will not be responsible for any additional costs, or costs in excess of the above cost, if authorization by the Executive or the Purchasing Director is not given in writing prior to the performance of any services giving rise to such excess or additional costs.

In the event that the Agency receives payments, from any source whatsoever, in consideration for the same Services provided to the County under this Agreement, the monetary obligation of the County hereunder will be reduced by an equivalent amount, provided, however, that nothing contained herein will require such reimbursement where additional similar services are provided and no duplicative payments are received.

If this is an Agreement for which Agency will, in whole or in part, be compensated with New York State funds, Agency agrees to comply with Executive Order Number 38, which sets limits on state-funded administrative costs and executive compensation contracts. Executive Order Number 38 can be found at the following website address: <https://www.governor.ny.gov/executiveorder/38>.

ARTICLE 4 - EXECUTORY CLAUSE

The County will have no liability under this Agreement to the Agency or to anyone else beyond funds appropriated and available for this Agreement. The County may terminate this Agreement at the end of any fiscal year if funds are not appropriated and available for this Agreement for the following fiscal year.

The Agency understands and agrees that the dollar amounts identified in this Agreement are based upon funding allocations from the State of New York and/or the Federal Government, which are the basis for any payments made by the County hereunder. In the event that the anticipated amount of funding changes, or is reduced or denied, in part or in full, the County, where appropriate, will not be liable to the Agency for the difference. If the full state and/or federal aid in reimbursement to the County for any payment made under this Agreement, by the County to the Agency, is not approved for any reason whatsoever, then the County may (i) deduct and withhold from any future payment(s) an amount equal to the reimbursement denied, or (ii) otherwise recover from the Agency the amount denied. It is understood that based upon changes in state aid and/or the federal funding process, the actual amounts in this Agreement may change throughout the Term. The amounts in this Agreement will be amended to reflect the actual approved aid amounts upon notification to the County by the state and/or Federal Government, as necessary.

ARTICLE 5 – PROCUREMENT OF AGREEMENT

The Agency represents and warrants that no person or selling agent has been employed or retained by the Agency to solicit or secure this Agreement upon a separate agreement, or upon an understanding for a commission, percentage, brokerage fee, contingent fee, or any other compensation. The Agency further represents and warrants that no payment, gift, or thing of value has been made, given, or promised to obtain this or any other agreement between the Parties. The Agency makes such representations and warranties to induce the County to enter into this Agreement and the County relies upon such representations and warranties in the execution hereof.

For a breach or violation of such representations or warranties, the County will have the right to annul this Agreement without liability, entitling the County to recover all monies paid hereunder, and the Agency shall neither make claim for, nor be entitled to recover any sum or sums otherwise due under this Agreement. This remedy, if effected, will not constitute the sole remedy afforded to the County for such breach or violation, nor will it constitute a waiver of the County's right to claim damages or otherwise refuse payment, or to take any other action provided for by law, in equity, or pursuant to this Agreement.

ARTICLE 6 - CONFLICT OF INTEREST

The Agency represents and warrants that neither it, nor any of its directors, officers, members, partners, or employees, have any interest, nor will they acquire any interest, directly or indirectly, which would or may conflict in any manner or degree with the performance or rendering of the Services to be provided pursuant to this Agreement. The Agency further represents and warrants that in the performance of this Agreement, no person having such interest or possible interest will be employed by it, and that no elected official or other officer or employee of the County, nor any person whose salary is payable, in whole or in part, by the County, or any corporation, partnership, or association in which such official, officer, or employee is directly or indirectly interested, will have any such interest, direct or indirect, in this Agreement, or in the

proceeds thereof, unless such person (i) is required by the Ulster County Ethics and Disclosure Law, as amended from time to time, to submit a disclosure form to the County's Board of Ethics, and amends such disclosure form to include their interest in this Agreement, or (ii) if not required to complete and submit such a disclosure form, either voluntarily completes and submits said disclosure form, disclosing their interest in this Agreement, or seeks a formal opinion from the County's Board of Ethics, as to whether or not a conflict of interest exists. The law and disclosure form may be accessed electronically at <https://ulstercountyny.gov/board-of-ethics>.

For a breach or violation of such representations or warranties, the County will have the right to annul this Agreement without liability, entitling the County to recover all monies paid hereunder, and the Agency must not make claim for, nor be entitled to recover any sum or sums otherwise due under this Agreement. This remedy, if effected, will not constitute the sole remedy afforded to the County for such breach or violation, nor will it constitute a waiver of the County's right to claim damages or otherwise refuse payment, or to take any other action provided for by law, in equity, or pursuant to this Agreement.

ARTICLE 7 – REPRESENTATIONS BY THE AGENCY

The Agency represents that it is fully licensed (to the extent required by law), experienced, and properly qualified to perform the Services to be provided under this Agreement, and that it is properly permitted, equipped, organized, and financed to perform such Services.

The Agency understands that it may become necessary for the County to submit to governmental agencies and/or authorities, or to a court of law, part or all of the data, analyses, and/or conclusions developed as a result of its performance of these Services. The Agency is aware that there are significant penalties for submitting false information to governmental agencies, including the possibility of fines and imprisonment. The Agency shall be responsible for such penalties resulting from false information submitted to the County by the Agency.

By signing this Agreement, the Agency is attesting to that fact that neither it nor any of its employees, agents, representatives, officers, subcontractors, or any other entity or individual providing Services pursuant to this Agreement has been sanctioned, excluded, or in any other manner barred from doing business with any federal, state, or local agency, municipality, or department. If the Agency or any of its officers, employees, subcontractors, or agents become excluded or barred in any manner from doing business with any federal, state, or local agency, municipality, or department during the Term of this Agreement, the Agency agrees to provide immediate and detailed notice to the County Attorney regarding such status. Any misrepresentation or false statement related to the Agency's status in this regard, or any failure by the Agency to immediately notify the County Attorney of any change in such status will result in immediate termination of this Agreement, in addition to such other remedies as may be provided by law, in equity, or pursuant to this Agreement.

ARTICLE 8 – CORPORATE COMPLIANCE

The Agency agrees to comply with all federal, state, and local laws, rules, and regulations governing the provision of goods and/or Services under this Agreement. In particular, the Agency agrees to comply with the laws, rules and regulations of Ulster County, as well as with its Compliance Plan (the "Plan"). The Plan can be viewed at www.co.ulster.ny.us/downloads/UlsterCountyCompliancePlan.pdf. Alternatively, a hard copy of the Plan will be provided upon the Agency's request. The Plan relates to the County's compliance with relevant federal and state fraud and abuse laws. The Agency represents and warrants that it has read and understands the Plan and agrees to abide by its terms when delivering Services under this Agreement. The Agency shall ensure that each individual who provides such Services under this Agreement is provided with a copy of the Plan or given access to the Plan. The County strongly encourages all healthcare providers contracting with the County to implement their own compliance programs that address each of the elements of compliance recommended by the Office of the Inspector General, as well as the elements as recommended and/or mandated by the New York State Office of the Medicaid Inspector General.

The County will conduct appropriate screening of providers, independent contractors, vendors, and agents to ensure and verify that they have not been sanctioned and/or excluded by any federal or state law enforcement, regulatory, or licensing authority. The County will also verify that entities and businesses that provide and/or perform Services for the County have not been the subject of adverse governmental actions and/or excluded from the federal healthcare programs.

The Agency understands that the County has established and implemented a Corporate Compliance Program and has developed "Standards of Conduct for Ulster County Vendors and Contractors" (the "Standards"). The Standards can be

accessed electronically at any time by going to www.co.ulster.ny.us/downloads/compliance.pdf. The Agency represents that it has read, understands and agrees to comply with the Standards with respect to its performance pursuant to this Agreement. The hotline for reporting violations of the Standards is (877) 569-8777.

ARTICLE 9 - FAIR PRACTICES

The Agency, and each person signing on behalf of the Agency, represents, warrants and certifies under penalty of perjury, that to the best of their knowledge and belief:

- A. The prices in this Agreement have been arrived at independently by the Agency without collusion, consultation, communication, or agreement with any other bidder, proposer, or with any competitor, as to any matter relating to such prices which has the effect of, or has as its purpose, restricting competition; and
- B. Unless otherwise required by law, the prices that have been quoted in this Agreement and on the proposal or quote submitted by the Agency have not been knowingly disclosed by the Agency prior to the communication of such quote to the County, or prior to the proposal opening, directly or indirectly, to any other bidder, proposer, or to any competitor; and
- C. No attempt has been made or will be made by the Agency to induce any other person, partnership, corporation, or other entity to submit or not to submit a proposal or quote for the purpose of restricting competition.

The fact that the Agency (i) published price lists, rates, or tariffs covering the Services and/or items being procured, (ii) informed prospective customers of proposed or pending publication of new or revised price lists for such Services and/or items, or (iii) provided the same Services and/or items to other customers at the same prices being bid or quoted, does not constitute, without more, a disclosure within the meaning of this Article 9.

ARTICLE 10 - INDEPENDENT CONTRACTOR

In performing the Services and incurring expenses under this Agreement, the Agency shall operate as and have the status of an independent contractor, and shall not act as agent for or on behalf of the County, nor will the Agency represent the County, or bind the County in any manner. As an independent contractor, the Agency shall be solely responsible for determining the means and methods of performing the Services, and shall have complete charge and responsibility for the Agency's personnel engaged in the performance of the same.

In accordance with such status as independent contractor, the Agency covenants and agrees that neither it, nor its employees or agents, will proclaim themselves to be officers or employees of the County, or of any department, agency, or unit thereof, by reason hereof, and that the Agency's employees or agents will not, by reason hereof, make any claim, demand, or application to or for any right or privilege applicable to an officer or employee of the County including, but not limited to, Workers' Compensation coverage, health insurance coverage, Unemployment Insurance benefits, Social Security benefits, or employee retirement membership or credit.

Nothing contained in this Agreement will be construed to create the relationship of employer and employee, principal and agent, partnership, or joint venture, or any other fiduciary relationship.

ARTICLE 11 - ASSIGNMENT

The Agency shall not assign any of its rights, interests, or obligations under this Agreement, or assign any of the Services to be performed by it under this Agreement, without the prior express written consent of the Executive or the Purchasing Director, upon review by the Ulster County Attorney's Office. Any such assignment, transfer, conveyance, or other disposition without such prior consent will be void, and any Services provided thereunder will not be compensated. Any assignment properly consented to by the Executive or the Purchasing Director will be subject to all of the terms and conditions of this Agreement.

Failure of the Agency to obtain any required consent to any assignment will be grounds for termination for cause at the option of the County, and if this Agreement be so terminated, the County will thereupon be relieved and discharged from any further liability and obligation to the Agency, its assignees, or transferees; and all monies that may become due under this Agreement shall be forfeited to the County, except so much thereof as may be necessary to pay the Agency's employees

for past Services.

The provisions of this clause shall not hinder, prevent, or affect any assignment by the Agency for the benefit of its creditors made pursuant to Article 2 of Chapter 12 of the New York Debtor and Creditor Law, except where the Federal Supremacy Clause requires otherwise.

This Agreement may be assigned by the County to any corporation, agency, municipality, or instrumentality having authority to accept such assignment.

ARTICLE 12 – SUBCONTRACTING

The Agency agrees to include the following provisions in any and all subcontract agreements for Services to be performed pursuant to this Agreement:

- A. That the work performed by the subcontractor must be in accordance with the terms and conditions of this Agreement between the County and the Agency, including, but not limited to, the insurance requirements set forth in Schedule C; and
- B. That nothing contained in the subcontractor agreement will impair the rights of the County; and
- C. That nothing contained in the subcontractor agreement, or under this Agreement between the County and the Agency, will create any contractual relation in law or equity, between the subcontractor and the County; and
- D. That the subcontractor specifically agrees to be bound by the confidentiality provision as set forth in Article 15 of this Agreement between the County and the Agency.

Upon signing this Agreement, the Agency shall provide the Department Head with the names and scope of work of any and all subcontractors to be used in the performance of the Agency's obligations pursuant to this Agreement. Furthermore, upon the County's request, the Agency shall provide copies of any and all subcontract agreements for Services to be performed pursuant to this Agreement.

The Agency agrees that it is fully responsible to the County for the acts and omissions of its subcontractors and of persons either directly or indirectly employed by them to the same extent as it is for the acts and omissions of persons employed by the Agency. The Agency will not in any way be relieved of any responsibility under this Agreement by any subcontract.

ARTICLE 13 - PERFORMANCE

The Agency shall perform the Services using its own equipment and facilities wherever and whenever possible. In performing the Services, the Agency shall assign qualified personnel and perform such Services in accordance with the professional standards and with the skill, diligence and quality control/quality assurance measures expected of a reputable company performing Services of a similar nature. The Agency is hereby given notice that the County will be relying upon the accuracy, competence, and completeness of the Agency's performance in using the results achieved by the Agency's performance of these Services. The Agency shall at all times comply with all applicable federal, New York State, and local laws, ordinances, statutes, rules, and regulations.

ARTICLE 14 – PRIVACY AND SECURITY

Health Insurance Portability & Accountability Act of 1996 ("HIPAA"). Under certain circumstances, federal law and regulations governing the privacy of certain health information requires a "Business Associate Agreement" (a "BAA") between the County and the Agency [45 C.F.R. Section 164.504(e)]. If HIPAA is applicable to this Agreement, the County and the Agency agree to enter into a separate BAA that complies with HIPAA, as that law may be amended from time to time. Unless the Agency has previously executed a compliant BAA that is in effect and on file with the County, the BAA referenced in this provision must be executed simultaneously with this Agreement.

ARTICLE 15 - CONFIDENTIALITY

For purposes of this Article:

- A. The term "Confidential Information" as used herein, means all material and information, whether written or oral, received by the Agency from or through the County or any other person connected with the County, or developed, produced, or obtained by the Agency in connection with its performance of Services under this Agreement. Confidential Information will include, but not be limited to: samples, substances and other materials, conversations, correspondence, records, notes, reports, plans, drawings, specifications and other documents in draft or final form, including any documentation or data relating to the results of any investigation, testing, sampling in laboratory or other analysis, and all conclusions, interpretations, recommendations, and/or comments relating thereto.
- B. The term "Agency" as used herein includes all officers, directors, employees, agents, subcontractors, assignees, or representatives of the Agency.

The Agency shall keep all Confidential Information in a secure location within the Agency's offices. The County will have the right, but not the obligation, to enter the Agency's offices in order to inspect the arrangements of the Agency for keeping Confidential Information secure. The County's inspection, or its failure to inspect, will not relieve the Agency of its responsibilities pursuant to this Article 15.

The Agency shall hold Confidential Information in trust and confidence, and must not disclose Confidential Information, or any portion thereof, to anyone other than the County without the prior written consent of the Executive or the Purchasing Director, and must not use Confidential Information, or any portion thereof, for any purpose whatsoever except in connection with its performance of the Services under this Agreement.

The Agency shall notify the County immediately upon its receipt of any request by anyone other than the County for, or any inquiry related to, Confidential Information. The Agency is not prohibited from disclosing portions of Confidential Information if and to the extent that: (i) such portions have become generally available to the public other than by an act or omission of the Agency, or (ii) disclosure of such portions is required by subpoena, warrant, or court order; provided, however, that in the event anyone other than the County requests all or a portion of Confidential Information, the Agency shall oppose such request and cooperate with the County in obtaining a protective order or other appropriate remedy, unless and until the Executive or the Purchasing Director, upon consultation with the Ulster County Attorney, in writing, waives compliance with the provisions of this Article 15, or determines that disclosure is legally required. In the event that such protective order or other remedy is not obtained, or the County waives compliance with this Article 15, or determines that such disclosure is legally required, the Agency shall disclose only such portions of Confidential Information that, in the opinion of the County, the Agency is legally required to disclose, and the Agency shall use its best efforts to obtain from the party to whom Confidential Information is disclosed, written assurance that confidential treatment will be given to any such Confidential Information disclosed, to the extent permitted by law.

Prior to the performance of any of the Services in connection with this Agreement, the Agency shall obtain from each of its subcontractors, a confidentiality agreement running to the benefit of the County that is substantively identical to this Article 15. Further, at any time, if requested by the County, the Agency shall obtain such an agreement from the officers, directors, agents, representatives, or employees of the Agency and/or any of its subcontractors.

ARTICLE 16 – OWNERSHIP OF CONFIDENTIAL INFORMATION

Notwithstanding any other provision herein to the contrary:

- A. All Confidential Information, as defined in Article 15, including all copies thereof, is the exclusive property of the County regardless of whether or not it is delivered to the County. The Agency shall deliver Confidential Information and all copies thereof to the County upon request.
- B. To the extent that copies of Confidential Information are authorized by the County to be retained by the Agency, such information shall be retained in a secure location in the Agency's office for a period of six (6) years after completion of the Services, or termination of this Agreement, whichever occurs later, and thereafter disposed of at the County's direction.

ARTICLE 17 – INTENTIONALLY LEFT BLANK

ARTICLE 18 – PUBLICITY

The prior written approval of the County is required before the Agency or any of its employees, representatives, servants, agents, assignees, or subcontractors may, at any time either during or after completion or termination of this Agreement, make any statement to the media or issue any material for publication bearing on the Services performed or data collected in connection with this Agreement.

If the Agency, or any of its employees, representatives, servants, agents, assignees, or subcontractors desires to publish a work dealing with any aspect of this Agreement, or of the results or accomplishments attained by its performance, they must first obtain the prior written permission of the Executive or the Purchasing Director which, unless otherwise agreed to in said written permission, will entitle the County to a royalty fee and a non-exclusive and irrevocable license to reproduce, publish, or otherwise use, and to authorize others to use, such publication.

ARTICLE 19 – RETENTION OF RECORDS

The Agency agrees to maintain separate and accurate books, records, documents, and other evidence, and to employ accounting procedures and practices that sufficiently and properly reflect all direct and indirect costs of any nature expended in the performance of this Agreement.

The Agency agrees to retain all books, records, and other documents relevant to this Agreement for six (6) years after the final payment or termination of this Agreement, whichever occurs later. The County, any New York State and/or federal auditors, and any other persons duly authorized by the County, will have full access and the right to examine any of said materials during said period.

ARTICLE 20 – AUDITING AND REPORTS

All forms or invoices presented for payment to be made hereunder, and the books, records, and accounts upon which said forms or invoices are based, are subject to audit by the County. The Agency shall submit any and all documentation and justification in support of expenditures or fees under this Agreement as may be required by the County so that it may evaluate the reasonableness of the charges, and the Agency shall make its records available to the County upon request. All books, forms, records, reports, cancelled checks, and any and all similar material may be subject to periodic inspection, review, and audit by the County, the State of New York, the Federal Government and/or other persons duly authorized by the County. Such audits may include examination and review of the source and application of all funds, whether from the County, the State of New York, the Federal Government, private sources, or otherwise. The Agency will not be entitled to any interim or final payment under this Agreement if any audit requirements and/or requests have not been satisfactorily met.

ARTICLE 21 – NO DISCRIMINATION

As required by Article 15 of the New York State Executive Law (also known as the Human Rights Law) and all other state and federal statutory and constitutional non-discrimination provisions, including the Civil Rights Act, the Agency must not discriminate against any employee or applicant for employment because of race, creed, color, sex, national origin, sexual orientation, age, disability, genetic predisposition, carrier status, military status, domestic violence victim status, or marital status.

If this Agreement provides for a total expenditure in excess of \$25,000.00, the Agency shall make and document its conscientious and active efforts to employ and utilize minority group members and women in its work force on County contracts, and will undertake or continue existing programs of affirmative action to ensure that minority group members and women are afforded equal employment opportunities without discrimination. Affirmative action will mean recruitment, employment, job assignment, promotion, upgrade, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation.

Furthermore, in accordance with New York State Labor Law Section 220-e, if this is an Agreement for the construction or alteration of any public building or public work, or for the manufacture, sale or distribution of materials, equipment or supplies, and to the extent that this Agreement will be performed within the State of New York, the Agency agrees that neither it, nor its subcontractors, will, by reason of race, creed, color, disability, sex, or national origin: (i) discriminate in

hiring against any New York State citizen who is qualified and available to perform the Services, or (ii) discriminate against or intimidate any employee hired for the performance of Services under this Agreement. If this is a building service agreement as defined in the New York State Labor Law Section 230, then in accordance with New York State Labor Law Section 239, the Agency agrees that neither it, nor its subcontractors, will by reason of race, creed, color, national origin, age, sex or disability: (i) discriminate in hiring against any New York State citizen who is qualified and available to perform the Services, or (ii) discriminate against or intimidate any employee hired for the performance of Services under this Agreement. The Agency is subject to (i) a fine of Fifty and 00/100 (\$50.00) Dollars per person, per day, for any violation of the New York State Labor Law Sections 220-e or 239, and/or (ii) possible termination of this Agreement and forfeiture of all moneys due hereunder for a second or subsequent violation.

The Agency understands that the County has established a Sexual Harassment Prevention Policy and Discriminatory Harassment Prevention Policy which applies to all contractors and non-employees conducting business with the County. These policies may be accessed electronically at <https://ulstercountyny.gov/ulster-county-compliance-plan>.

ARTICLE 22 - INSURANCE

For provision of the Services set forth herein and as may be hereinafter amended, the Agency shall maintain or cause to be maintained in full force and effect during the term of this Agreement, at its expense, insurance with stated minimum coverage as set forth in Schedule C, which is attached hereto and is hereby made a part of this Agreement. Such policies are to be in the broadest form available on usual commercial terms and must be written by insurers who have been fully informed as to the nature of Services to be performed by the Agency pursuant to this Agreement. Such insurers shall be of recognized financial standing, satisfactory to the County. The County shall be named as an additional insured on all commercial general liability policies with the understanding that any obligations imposed upon the insured (including, without limitation, the obligation to pay premiums) will be the sole obligation of the Agency and not those of the County. Notwithstanding anything to the contrary in this Agreement, the Agency irrevocably waives all claims against the County for all losses, damages, claims, or expenses resulting from risks commercially insurable under the insurance described in Schedule C and this Article 22. The provision of insurance by the Agency will not in any way limit the Agency's liability under this Agreement.

Each policy of insurance shall contain clauses to the effect that (i) such insurance shall be primary, without right of contribution of any other insurance carried by or on behalf of the County, with respect to its interests, (ii) it shall not be cancelled or materially amended without thirty (30) days prior written notice to the County, except in the case of cancellation for non-payment of premium which requires ten (10) days prior written notice, directed to the County's Insurance Department and the Department Head, and (iii) the County will have the option to pay any necessary premiums to keep such insurance in effect, and charge the cost back to the Agency.

To the extent it is commercially available, each policy of insurance must be provided on an "occurrence" basis. If any insurance is not so commercially available on an "occurrence" basis it must be provided on a "claims made" basis, and all such "claims made" policies must provide that:

- A. Policy retroactive dates coincide with or precede the Agency's start of the performance of Services (including subsequent policies purchased as renewals or replacements); and
- B. If the insurance is terminated for any reason, the Agency agrees to purchase for the County an unlimited, extended reporting provision to report claims arising from the Services performed under this Agreement; and
- C. The Agency must give immediate notice to the County, through the Department Head, the Ulster County Attorney's Office, and the County's Insurance Department, of circumstances or incidents that might give rise to future claims with respect to the Services performed under this Agreement.

ARTICLE 23 - INDEMNIFICATION

The Agency agrees to defend, indemnify, and hold harmless the County, including its officials, employees, and agents, against all claims, losses, damages, liabilities, costs, or expenses (including without limitation, reasonable attorney fees and costs of litigation and/or settlement), whether incurred as a result of a claim by a third party or any other person or entity, arising out of the Services performed by the Agency, its employees, representatives, subcontractors, assignees, or agents pursuant to this Agreement, which the County, or its officials, employees, or agents may suffer by reason of any negligence, fault, act, or omission of the Agency, its employees, representatives, subcontractors, assignees, or agents. The Agency

agrees to investigate, handle, respond to, provide defense for, and defend any such claims, demands, or suits at its sole expense, and agrees to bear all other costs and expenses related thereto, even if such claims, demands, or suits are groundless, false, or fraudulent.

In the event that any claim is made or any action is brought against the County arising out of the negligence, fault, act, or omission of the Agency or an employee, representative, subcontractor, assignee, or agent of the Agency, either within or without the scope of the respective employment, representation, subcontract, assignment, or agency, or arising out of the Agency's negligence, fault, act, or omission, then the County will have the right to withhold further payments hereunder for the purpose of set-off in sufficient sums to cover said claim or action. The rights and remedies of the County provided for in this clause will not be exclusive and are in addition to any other rights and remedies provided by law, in equity, or pursuant to this Agreement.

ARTICLE 24 - RESPONSIBILITY TO CORRECT DEFICIENCIES

The Agency shall be responsible to correct, in a timely fashion and at the Agency's sole expense, any deficiencies in its Services resulting from the Agency's failure to act in accordance with the standards set forth in Article 13 (Performance) and Schedule A, provided such deficiencies are reported to the Agency within one hundred-twenty (120) days after completion and final acceptance of the Services. If the Agency fails to correct such deficiencies in a timely and proper manner, the County may elect to have others perform such corrections, and the County may charge any related cost of such corrections to the Agency and/or set-off such amount against any sums otherwise due to the Agency. These remedies, if effected, will not constitute the sole or exclusive remedies afforded to the County for such deficiencies, nor will they constitute a waiver of the County's right to claim damages or otherwise refuse payment, or to take any other action provided for by law, in equity, or pursuant to this Agreement.

ARTICLE 25 - CURRENT OR FORMER COUNTY EMPLOYEES

The Agency represents and warrants that during the Term of this Agreement and for a period of one (1) year after its expiration or termination, it shall not retain the services of any County employee or former County employee in connection with this Agreement, or any other agreement that said Agency has or may have with the County, without the express written permission of the Executive or the Purchasing Director.

For a breach or violation of such representations or warranties, the County will have the right to annul this Agreement without liability, entitling the County to recover all monies paid hereunder, and the Agency must neither make claim for, nor be entitled to recover, any sum or sums otherwise due under this Agreement. This remedy, if effected, will not constitute the sole remedy afforded to the County for such breach or violation, nor will it constitute a waiver of the County's right to claim damages or otherwise refuse payment, or to take any other action provided for by law, in equity or pursuant to this Agreement.

ARTICLE 26 - PROTECTION OF COUNTY PROPERTY

The Agency assumes the risk of and shall be responsible for any loss or damage to the County's property and equipment, whether owned, leased, or otherwise possessed by the County, used in the performance of this Agreement. Any such loss or damage caused, either directly or indirectly, by the acts, conduct, omissions, or lack of good faith of the Agency, its officers, directors, members, partners, employees, representatives, or assignees, or any person, firm, company, agent, or others engaged by the Agency as an expert, consultant, specialist, or subcontractor hereunder, will be the responsibility of the Agency.

In the event that any such County property is lost or damaged, except for normal wear and tear, then the County will have the right to withhold further payments hereunder for the purposes of set-off in sufficient sums to cover such loss or damage.

The Agency agrees to defend, indemnify, and hold the County harmless from any and all liability or claim for loss, cost, damage, or expense (including without limitation, reasonable attorney fees and costs of litigation and/or settlement) due to any such loss or damage to any such County property described in this Article 26.

The rights and remedies of the County provided herein will not be exclusive and are in addition to any other rights and remedies provided by law, in equity, or pursuant to this Agreement.

ARTICLE 27 – EXTENSIONS AND DELAYS

If, owing to the actions or neglect of the County, the Agency is prevented from completing the Services within the Term of this Agreement, then the Agency's sole and exclusive remedy will be to request that a Change Order, Amendment, or an Addendum to this Agreement be issued by the Executive or the Purchasing Director, permitting an extension of time to perform the Services, equal to the time lost due to such delay. Such request shall be based upon written notice only, delivered to the Department Head promptly, but not later than thirty (30) days after the initial occurrence of the event giving rise to such claim, and stating the specific nature of the claim. An extension of time to perform the Services may only be granted by a written Change Order, Amendment, or Addendum to this Agreement, signed by the Executive or the Purchasing Director. In no event will the County be liable to the Agency, its subcontractors, agents, assignees, or any other person or entity, for damages arising out of or resulting from any such delays.

ARTICLE 28 - TERMINATION

The County may, by written notice to the Agency, effective upon mailing, terminate this Agreement in whole or in part at any time (i) for the County's convenience, (ii) upon the failure of the Agency to comply with any of the terms or conditions of this Agreement, or (iii) upon the Agency becoming insolvent or bankrupt.

In the event that this Agreement is terminated for the convenience of the County, the Agency will be paid for all Services rendered through the date of termination in accordance with Schedule B.

Upon termination of this Agreement, the Agency shall comply with any and all County closeout procedures, including but not limited to:

- A. Accounting for and refunding to the County within ten (10) days, any unearned and/or unexpended funds that have been paid to the Agency pursuant to this Agreement; and
- B. Furnishing to the County within ten (10) days, an inventory of all equipment, appurtenances, and property purchased by the Agency through, or provided under this Agreement, and carrying out any County directive concerning the disposition thereof.

In the event the County terminates this Agreement, in whole or in part, as provided in this Article 28, the County may procure upon such terms and in such manner as deemed appropriate, Services similar to those so terminated, and the Agency shall continue the performance of this Agreement to the extent not terminated hereby. If this Agreement is terminated in whole or in part for reasons other than the convenience of the County, the cost and expense of any Services procured by the County to complete the Services herein will be charged to the Agency and/or set off against any sums due to the Agency.

Notwithstanding any other provisions of this Agreement, the Agency will not be relieved of liability to the County for damages sustained by the County by virtue of the Agency's breach of this Agreement, or failure to perform in accordance with applicable standards. The County may withhold payments due to the Agency for the purposes of set-off until such time as the exact amount of damages due to the County from the Agency is determined.

The rights and remedies of the County provided herein will not be exclusive and are in addition to any other rights and remedies provided by law, in equity, or pursuant to this Agreement.

ARTICLE 29 - SET-OFF RIGHTS

The County will have all of its common law, equitable, and statutory rights of set-off. These rights shall include, but are not limited to, the County's right to withhold for the purposes of set-off any monies otherwise due to the Agency (i) under this Agreement, (ii) under any other agreement or contract with the County, including any agreement or contract for a term commencing prior to or after the Term of this Agreement, or (iii) from the County by operation of law. The County will also have the right to withhold any monies otherwise due under this Agreement for the purposes of set-off against any amounts due and owing to the County for any reason whatsoever, including without limitation, tax delinquencies, fee delinquencies and/or monetary penalties or interest relative thereto.

ARTICLE 30 - NO ARBITRATION

Any and all disputes involving this Agreement, including the breach or alleged breach thereof, may not be submitted to arbitration unless specifically agreed to in writing by the Executive or the Purchasing Director, after consultation with the Ulster County Attorney, but must instead only be heard in the Supreme Court of the State of New York, with venue in Ulster County, or if appropriate, in the Federal District Court, with venue in the Northern District of New York, Albany Division.

ARTICLE 31 - DISPUTES

In the event of a dispute arising from this Agreement, the Agency shall be liable to the County for reasonable attorney's fees, costs, expenses and disbursements incurred by the County in enforcing its legal and/or equitable rights pursuant to this Agreement by reason of the failure of the Agency to comply with any of the terms, conditions or warranties of this Agreement, express or implied, and/or the exercise of County's remedies with respect thereto, and/or any error, omission and/or professional negligence of the Agency or its subcontractors, including but not limited to all attorney's fees, costs, expenses and disbursements incurred by the County in prosecuting a lawsuit against the Agency, seeking Indemnification pursuant to Article 23, obtaining Correction of Deficiencies pursuant to Article 24, Termination pursuant to Article 28, and/or Set-Off Rights pursuant to Article 29. The Agency shall further be liable to the County for all prejudgment interest on any award of attorney's fees, costs, expenses and disbursements so awarded. This provision shall survive completion of the Services and/or the expiration or termination of this Agreement.

ARTICLE 32 - GOVERNING LAW

This Agreement is governed by the laws of the State of New York except where the Federal Supremacy Clause requires otherwise.

ARTICLE 33 – PREVAILING WAGE

In accordance with New York State Labor Law Section 220-d, if this is an Agreement for the construction, reconstruction, maintenance and/or repair of any public work, the Agency agrees that all laborers, workers, or mechanics employed by the Agency and/or its subcontractors in contemplation of the performance of this Agreement shall be paid not less than such hourly minimum rate of wage and shall be provided supplements not less than the prevailing supplements as designated by the New York State Commissioner of Labor.

ARTICLE 34 - WAIVER AND SEVERABILITY

The failure of either Party to enforce at any time, any provision of this Agreement, does not constitute a waiver of such provision in any way or waive the right of either Party at any time to avail itself of such remedies as it may have for any breach or breaches of such provision. None of the conditions of this Agreement will be considered waived by the County unless such waiver is explicitly given in writing by the Executive or the Purchasing Director. No such waiver shall be a waiver of any past or future default, breach, or modification of any of the terms or conditions of this Agreement, unless expressly stipulated in such waiver as executed by the Executive or the Purchasing Director.

The invalidity or invalid application of any provision of this Agreement will not affect the validity of any other provision, or the application of any other provision of this Agreement.

ARTICLE 35 - GENERAL RELEASE

Acceptance by the Agency or its assignees of the final payment under this Agreement, whether by voucher, judgment of any court of competent jurisdiction, administrative, or other means, will constitute and operate as a general release to the County from any and all claims of the Agency arising out of the performance of this Agreement.

ARTICLE 36 - NO CLAIM AGAINST OFFICERS, AGENTS OR EMPLOYEES

No claim whatsoever shall be made by the Agency against any officer, agent, or employee of the County, for or on account of any act or omission in connection with this Agreement.

ARTICLE 37 - ENTIRE AGREEMENT

The rights and obligations of the Parties and their respective agents, successors and assignees will be subject to and governed by this Agreement, including Schedules A, B, and C, which supersedes any other understandings or writings between or among the Parties to this Agreement.

ARTICLE 38 - SURVIVING OBLIGATIONS

The Agency's obligations and those of the Agency's employees, representatives, agents, subcontractors, successors, and assignees, assumed pursuant to Article 7 (Representations by the Agency), Article 8 (Corporate Compliance), Article 13 (Performance), Article 15 (Confidentiality), Article 16 (Ownership of Confidential Information), Article 18 (Publicity), Article 19 (Retention of Records), Article 23 (Indemnification), Article 24 (Responsibility to Correct Deficiencies), Article 26 (Protection of County Property), and Article 29 (Set-Off Rights) will survive completion of the Services and/or the expiration or termination of this Agreement.

ARTICLE 39 - NOTICES

Except as expressly provided otherwise in this Agreement, all notices given to any of the Parties pursuant to or in connection with this Agreement will be in writing, will be delivered by hand, by certified or registered mail, return receipt requested, or by Federal Express, Express Mail, or other nationally recognized overnight carrier. Except where otherwise specifically defined within this Agreement, notices will be effective when received. Notice addresses are as follows:

Agency:
Family of Woodstock, Inc.
Attention: Michael Berg, Executive Director
39 John Street
Kingston, New York 12401

County:
Ulster County Department of Mental Health
Attention: Commissioner
239 Golden Hill Lane
Kingston, New York 12401

Any communication or notice regarding indemnification, termination, litigation, or proposed changes to the terms and conditions of this Agreement will be deemed to have been duly made upon receipt by both the County's Department of Mental Health and the Ulster County Attorney's Office at the addresses set forth herein, or such other addresses as may have been specified in writing by the County:

Mailing Address:
County of Ulster
Attention: County Attorney
Post Office Box 1800
Kingston, New York 12402

Physical Address:
County of Ulster
Attention: County Attorney
244 Fair Street, 5th Floor
Kingston, New York 12401

Either Party may, by written notice to the other Party given in accordance with the foregoing, change its address for notices.

ARTICLE 40 - MODIFICATION

No changes, amendments, or modifications of any of the terms and/or conditions of this Agreement shall be valid unless reduced to writing and signed by the Parties to this Agreement, and no payment will be due in connection therewith, unless prior to the performance of any such Services, the Executive or the Purchasing Director, after consultation with the Department Head, executes an Addendum, Amendment, or Change Order to this Agreement. The aforesaid Addendum, Amendment, or Change Order must specifically set forth the scope of such extra or additional services, the amount of compensation, and the extension of time for performance, if any, for any such extra or additional services. Unless otherwise specifically provided for therein, the provisions of this Agreement will apply with full force and effect to the terms and conditions contained in such Addendum, Amendment, or Change Order.

ARTICLE 41 – FORCE MAJEURE

Neither Party hereto will be considered in default in the performance of its obligations hereunder, to the extent that performance of any such obligation is prevented and/or delayed by any cause, existing or future, beyond the control of such Party, and which by that Party's exercise of due diligence and foresight could not reasonably have been avoided.

Upon removal of such cause, the Party affected shall resume its performance as soon as reasonably possible. The Agency's financial inability to perform will not be deemed to be an event of Force Majeure regardless of the source causing such financial inability. If the Agency is so delayed in the timely performance of the Services, the Agency's sole and exclusive remedy is to request that a Change Order, Amendment, or Addendum to this Agreement be issued by the County and signed by the Executive or the Purchasing Director, permitting an extension of time to perform the Services in an amount equal to the time lost due to such delay. Such request shall be based upon written notice only, stating the specific nature of the claim, delivered to the Department Head promptly, but not later than thirty (30) days after the initial occurrence of the event giving rise to such claim. An extension of time to perform the Services may only be granted by a written Change Order, Amendment, or Addendum to this Agreement, signed by the Executive or the Purchasing Director. In no event will the County be liable to the Agency or to its subcontractors, agents, assignees, or any other person or entity for damages arising out of, or resulting from, any such delays.

ARTICLE 42 - HEADINGS AND DEFINED TERMS

The Article headings used in this Agreement are for reference and convenience only, and will not in any way limit or amplify the terms, conditions, and/or provisions hereof. All capitalized terms, acronyms, and/or abbreviations will have the meanings ascribed to them by this Agreement.

ARTICLE 43 - COUNTERPARTS

The Parties may execute this Agreement in counterparts, each of which shall be deemed an original, and all of which taken together constitute one and the same instrument. Delivery of an executed counterpart of this Agreement by facsimile, email in portable document format (.pdf), or by any other electronic means intended to preserve the original graphic and pictorial appearance of a document has the same effect as delivery of an executed original of this Agreement.

IN WITNESS WHEREOF, the Parties have caused their duly authorized representatives to enter into this Agreement as of the dates set forth below, effective as of the beginning date set forth in Article 2 above.

**ULSTER COUNTY
DEPARTMENT OF MENTAL HEALTH**
(Approved as to content)

By: [Signature]
NAME: Kristin Carney
TITLE: Deputy Director
DATE: 3/10/21

COUNTY OF ULSTER

By: Edward M. Jordan
NAME: Edward M. Jordan
TITLE: Director of Purchasing
DATE: 3-16-21

FAMILY OF WOODSTOCK, INC.

By: [Signature]
NAME: Michael Berg
TITLE: Executive Director
DATE: 3/18/21

SCHEDULE A
SCOPE OF SERVICES

A. The Agency shall provide the following Services under this Agreement and shall operate each of the Services enumerated below consistent with all New York State and Federal regulations applicable to the Services, as licensed by New York State:

1. **NON-MEDICAID CARE COORDINATION (2720):**

Program Name/Type: Non-Medicaid Care Coordination (NMCC)

Service Capacity:

- a. Adult NMCC: 18 individuals;
- b. Transitions: 18 individuals;
- c. Transitions at MidWay Kingston: 6 individuals;
- d. Transitions at MidWay Ellenville: 6 individuals; and
- e. Switchboards and Walk-In Center: 50 individuals.

Location (County/City): Ulster County

Target Population: Individuals 18 years old and above who struggle with serious mental illness.

PROGRAM OVERVIEW: Non-Medicaid Care Coordination supports individuals with serious mental illness (SMI) and/or children with serious emotional disturbance (SED). Care coordination services include linking individuals to needed services, monitoring established goals and outcomes and providing advocacy. The program does not bill Medicaid for its services. Individuals who meet Health Home eligibility should not be served with these resources; they should be enrolled in a Health Home Care Management program.

SERVICES PROVIDED:

NMCC staff will:

- a. Develop a Service Plan with each individual based on prioritized goals, including, but not limited to: mental health/substance use; parenting; economic/financial; physical/medical; social connectedness; group participation; criminal justice; education/vocational; residential; transportation; Activities of Daily Living (ADL's); skill building; relapse prevention; crisis management; independence;
- b. Identify and develop a safety plan to address any imminent safety concerns;
- c. Provide a minimum of bi-weekly individual face-to-face visits with the individual to ensure continuous monitoring of progress and/or revising of Service Plan;
- d. Initiate and facilitate communication with community agencies in order to refer and link individuals to resources/supports to meet service plan goals;
- e. Participate in the Utilization Review (UR) process during monthly NMCC meetings at the LGU;
- f. Attend monthly NMCC meetings in addition to other identified meetings at the LGU including SPOA and Integrated Ulster; and
- g. Operate switchboards and Walk-In Centers which provide linkage, monitoring, and consumer specific advocacy.

STAFFING/RESOURCES:

- a. Adult NMCC: 0.06 Full-Time Equivalent (FTE) Team Leader, 0.192 FTE Program Director, 0.053 FTE Assistant Program Director, 0.457 FTE Care Coordinator, 0.229 FTE Residential Coordinator;
- b. Transitions: 0.039 FTE Team Leader, 0.145 FTE Program Director, 1.0 FTE Care Coordinator;
- c. Transitions at MidWay Ellenville: 0.338 FTE; and
- d. Switchboards & Walk-In Center: 0.19 Team Leader, 0.306 Program Director, 0.487 Assistant Program Director, 1.458 FTE Care Coordinator

PROGRAM GOALS/OUTCOMES:

The goals of Non-Medicaid Care Coordination include linking individuals to needed services, monitoring established goals and outcomes and providing advocacy and coordination to improve daily functioning and achieve success across life areas to increase independence and promote recovery.

SPECIFIC DELIVERABLES AND TIMEFRAMES:

Quarterly reports (by the 15th of April, July, October and January) to the Ulster County Department of Mental Health. The following data points will include:

- a. Number of individuals open during the quarter;

- b. Number of face to face individual contacts per individual per quarter;
- c. Number of psychiatric hospitalizations or emergency department visits;
- d. Number of individuals open during the quarter who achieved at least 1 goal; and
- e. Number of individuals who completed ½ or more of their goals upon program completion

PERFORMANCE TARGETS/MILESTONES:

Staff will meet with Ulster County Department of Mental Health bi-annually to discuss program outcomes.

- a. Program will operate at 95% capacity.
- b. 95% of individuals open during the quarter will be seen at least 6 times per quarter.
- c. Less than 10% of individuals open during the quarter will have emergency or inpatient psychiatric visits.
- d. 85% of individuals open during the quarter achieved at least 1 goal.
- e. 50% of individuals discharged from the program achieved ½ or more of their goals.

2. **RESPIRE SERVICES (0650):**

PROGRAM SPECIFICS:

Program Name/Type: Respite - Darmstadt, Family House, Family Inn, Midway I/II, Getting Ahead Program (GAP)

Service Capacity:

- a. Darmstadt: 180 per year;
- b. Family House: 100 each year;
- c. Family Inn 170 per year;
- d. MidWay I/II: 24 per year. 30 individuals will receive short-term respite services through one of the shelters;
- e. GAP: caseload 10

Location (County/City): Ulster County, NY

Target Population: Disabled individuals from Ulster County who are homeless, at risk of homelessness, or whose primary care provider requires respite services.

PROGRAM OVERVIEW:

Temporary service provided by trained staff in consumer's place of residence or other temporary housing arrangement. Provides primary care givers relief from care responsibilities. To provide respite services to youth ages who have a psychiatric diagnosis and whose primary care giver or family resource circumstance would benefit from respite. Services are provided in temporary housing arrangements through the Agency's Emergency Shelter or Adolescent Transitional Living programs.

SERVICES PROVIDED:

- a. Respite services provide custodial care to disabled persons and relief to the primary care provider, allowing situations to stabilize, preventing hospitalization and/or longer-term placement out of the home.
- b. Case Management services including: referral linkage, monitoring and communication with human services and other providers as needed to accomplish individual goals.

STAFFING/RESOURCES:

- a. Darmstadt, Family House and Family Inn: 0.113 FTE Darmstadt, 0.09 Family Inn, 0.477 FTE Family House.
- b. Family House, MidWay I and II & GAP: 0.12 FTE Program Director, 1.0 FTE Case Manager.

PROGRAM GOALS/OUTCOMES:

To ensure that Ulster County residents have access to respite services which help them stabilize their current situation and allow time for respite for primary care providers.

SPECIFIC DELIVERABLES AND TIMEFRAMES:

Quarterly reports will be submitted to the Ulster County Department of Mental Health (due by the 15th of April, July, October and January) and will include:

- a. The number of individuals.
- b. The number who are hospitalized for a psychiatric reason.

PERFORMANCE TARGETS/MILESTONES:

Staff will meet with Ulster County Department of Mental Health bi-annually to discuss program outcomes.

- a. Program will operate at 100% capacity.
- b. Less than 10% of program participants will be hospitalized for a psychiatric reason.

3. **PRIMARY PREVENTION SERVICES (5520):**

PROGRAM SPECIFICS:

Program Name/Type: School-Based Prevention Services & Other Prevention Services

Service Capacity: 939

Location (County/City): Ulster County

Target Population: 10 to 19 year old adolescents

PROGRAM OVERVIEW:

Primary Prevention is defined as a collaborative and community focused process to prevent or delay substance use and abuse in individuals, families and communities. Prevention service approaches include education, environmental strategies, community capacity building, positive alternatives and information dissemination. The selection of prevention service activities within these service approaches is based on a community needs assessment that identifies levels of substance use, its consequences, elevated risk factors and decreased protective factors.

SERVICES PROVIDED:

Prevention Education: Provide education to assist youth, parents and families in identifying and reducing youth/family risk factors, learning about the effects of substance use and problem gambling on individuals and families, and better understand youth development.

Information and Awareness: Provide up to date information and increase knowledge and awareness of the nature and extent of substance misuse and compulsive gambling, and their effects on individuals, families, and communities through media campaigns, presentations, tabling, and trainings.

Other Prevention Services: Provide EBP early intervention programming targeting youth from 12-19 years of age who display signs of being in the early stages of developing an alcohol, substance, tobacco use and/or gambling disorder, but do not demonstrate a diagnosable substance use disorder.

STAFFING/RESOURCES: 0.129 Team Leader, 0.940 FTE Assistant Program Director, 0.924 FTE Case Manager

PROGRAM GOALS/OUTCOMES:

- a. Reduce the prevalence of substance use and problem gambling among youth in our community.
- b. Delay the initiation of substance use and gambling behaviors among youth as long as possible.
- c. Decrease the negative health, social, educational, and economic consequences and costs associated with substance use and problem gambling.
- d. Prevent the escalation of substance use and gambling behaviors to levels requiring treatment through early identification, education, promotion of pro-social opportunities in the community, and enhancement of protective factors.

SPECIFIC DELIVERABLES:

- a. Deliver 10-week sessions of Too Good for Violence Social Perspectives (TGFV-SP) and Positive Action in 3 school districts (Kingston, Rondout and Ellenville).
- b. Administer Student Knowledge pre and post-tests to all TGFV-SP participants.
- c. Administer pre and post-tests to all Teen Intervene participants.
- d. Quarterly reports will be submitted to the Ulster County Department of Mental Health (due by the 15th of April, July, October and January) and will include:
 - i. School districts served and grade levels who received TGFV-SP;
 - ii. Number of unique individuals participating in TGFV-SP, PA, and Teen Intervene;
 - iii. Number of 10-week sessions completed for TGFV-SP;
 - iv. Number of unique parent/guardians served for Teen Intervene;
 - v. Number of PA forms that demonstrate a positive response (agree/strongly agree) to the PA Behavior Plan; and
 - vi. Number of pre and post-tests completed for TGFV-SP & Teen Intervene

PERFORMANCE TARGETS/MILESTONES: Annual reports (Due January 15th) will summarize and highlight program outcomes and staff will meet with Ulster County Department of Mental Health bi-annually to discuss

program. Work Plans required by OASAS will be submitted annually through the WITNYS data system for approval by the LGU.

- a. 100% of identified schools and grade levels will receive TGFV-SP, PA, and Teen Intervene.
- b. Maintain 100% service capacity for TGFV-SP, PA and Teen Intervene.
- c. 75% of parent/guardians will participate in their child's Teen Intervene program.
- d. PA forms will demonstrate a 75% positive response (agree/strongly agree) to the PA Behavior Plan.
- e. 90% of pre and post-tests completed for TGFV-SP & Teen Intervene will demonstrate an improvement.

4. **ADVOCACY/SUPPORT SERVICES (1760):**

PROGRAM SPECIFICS:

Program Name/Type: EVOLVE, Switchboard/Walk-in Centers, Information & Referral, After-Hours Coverage; Lifeskills Program at MidWay

Service Capacity:

- a. EVOLVE: 160 individuals per year;
- b. Information & Referral: 150 individuals per year;
- c. Switchboard & Walk-in Centers: 65,000 contacts per year;
- d. After hours coverage services: N/A (as needed); and
- e. Lifeskills: 12 individuals per year

Location (County/City): EVOLVE: Ellenville and Kingston; Information & Referral: throughout Ulster County; Walk-in Centers: Woodstock, New Paltz and Ellenville; Lifeskills: Kingston and Ellenville.

Target Population: EVOLVE: Individuals referred when violence has occurred within the family; Information & Referral and Switchboard & Walk-in Centers: Individuals seeking information and referral to County resources; After hours coverage services: Clients of Astor Services for Children & Families Services, Family Services, Inc. and Ulster County Department of Mental Health after hours and on holidays; Lifeskills: Youth and young adults from Ulster County who are preparing to live independently and do not have the life and vocational skills necessary to function as independent adults.

PROGRAM OVERVIEW:

Advocacy and support services may be individual or systems advocacy or a combination of both. Individual advocacy assists consumers in protecting and promoting their rights, resolving complaints and grievances, and accesses services and supports of their choice. Systems advocacy represents the concerns of a class of consumers by identifying patterns of problems and working with program or system administrators to resolve or eliminate those problems on a systemic basis.

SERVICES PROVIDED:

- a. EVOLVE provides group sessions that teach alternatives to violence, parenting skills, age appropriate expectations and other resources available in the County;
- b. Community education, linkage and referral to service providers such as public entitlements, emergency housing, food pantries, mental health, substance use and parenting programs;
- c. Crisis response and connecting individuals to appropriate County emergency resources;
- d. Consultation, advocacy and support after hours; and
- e. Lifeskills provides group and individual sessions, targeted to life and worker readiness skill building over a broad area of issues.

STAFFING/RESOURCES:

- a. EVOLVE: 0.91 FTE Facilitator, 0.25 FTE Assistant Program Director;
- b. Information and Referral: 0.129 FTE Team Leader, 0.206 FTE Program Director, 0.002 FTE Assistant Program Director, 0.678 FTE Case Manager, 0.076 FTE Residential Coordinator;
- c. Switchboard/Walk-in Centers: staffed primarily by volunteers who are supervised by 2.53 FTE positions;
- d. After-Hours Coverage: .024 FTE Team Leader, 0.124 FTE Program Director, 0.158 FTE Assistant Program Director, 0.191 FTE Case Manager; and
- e. Lifeskills at MidWay: 0.141 FTE Transitional Living Manager I, 0.084 FTE Transitional Living Manager II

PROGRAM GOALS/OUTCOMES:

The service provides County residents with sufficient information and referral to assist callers and walk-ins in facilitating linkage to needed services. Linkage assists in diverting unnecessary utilization of emergency services to other available services. EVOLVE group participants learn parenting skills, age appropriate expectations and other

resources available in the County. These services are designed to provide education, advocacy and support to persons with few or no other resources. Lifeskills at MidWay helps youth identify problem areas and learn ongoing coping skills, provides vocational assessment and on-the-job training and experience, improves social skills and educational functions, and provides family education and support.

SPECIFIC DELIVERABLES AND TIMEFRAMES:

Reports will be submitted quarterly (by the 15th of April, July, October and January) and annually (end of January) to the Ulster County Department of Mental Health and include the following:

- a. EVOLVE
 - i. The number of individuals assessed for program appropriateness;
 - ii. The number of individuals accepted into the program;
 - iii. The number of individuals entering the long-term groups; and
 - iv. The number of individuals successfully completing the program, attending 33 sessions.
- b. Information and Referral/Switchboard/Walk-in Centers/After-Hours Coverage
 - i. The number of individuals served;
 - ii. The number of individuals who received at least one linkage; and
 - iii. Types of linkages.
- c. Switchboard/Walk-in Centers
 - i. The number of contacts;
 - ii. The number of individuals who received at least one linkage; and
 - iii. Types of linkages.
- d. After-Hours Coverage
 - i. The number of contacts.
- e. Lifeskills at MidWay
 - i. The number of individuals served;
 - ii. The number of individuals participating in group workshops;
 - iii. The number of individuals provided one-on-one training;
 - iv. The number of individuals returning to, continuing in and/or completing education;
 - v. The number of individuals obtaining part or full-time employment; and
 - vi. The number of individuals able to obtain and maintain stable independent living.

PERFORMANCE TARGETS/MILESTONES:

Staff will meet with Ulster County Department of Mental Health bi-annually to discuss program outcomes.

- a. EVOLVE
 - i. 100% of individuals accepted will participate in long term groups.
 - ii. 50% of individuals will successfully complete all 33 sessions.
- b. Information and Referral/Switchboard/Walk-in Centers
 - i. Program will operate at 100% capacity.
 - ii. 100% of individuals will receive at least one linkage.
- c. Switchboard/Walk-in Centers
 - i. Program will operate at 100% capacity.
 - ii. 100% of individuals will receive at least one linkage.
- d. Lifeskills at MidWay
 - i. Program will operate at 95% capacity.
 - ii. 80% of individuals will participate in group workshops.
 - iii. 80% of individuals will participate in one-on-one training.
 - iv. 80% of individuals will return to, continue in and/or complete education.
 - v. 80% of individuals will obtain part or full-time employment.
 - vi. 80% of individuals will obtain and maintain stable independent living.

5. FAMILY PEER SUPPORT SERVICES (CHILDREN AND FAMILY) (1650):

PROGRAM SPECIFICS:

Program Name/Type: Family Peer Support Services

Service Capacity: 36 families (caseload:12 families)

Location (County/City): Ulster County

Target Population: Families raising a child up to 21 who is experiencing challenges in their home, school, placement, and/or community.

PROGRAM OVERVIEW:

Family Peer Support Services (FPSS) are an array of formal and informal services and supports provided to families raising a child who is experiencing social, emotional, developmental, substance use and/or behavioral challenges. FPSS provide a structured, strength-based relationship between a Family Peer Advocate (FPA) and the parents or family member for the benefit of the child. Family is defined as the persons who live with, or provide care to, a child and may include a parent, spouse, guardians, sibling, children, relatives, grandparents, foster parents or others with significant attachment to the individual.

FPSS are provided by a trained and credentialed Family Peer Advocate who is uniquely qualified to work with families based on their personal experience parenting a child with similar needs. FPSS can be provided through individual and group face-to face work in the home, community or office. Face to face visits will be conducted at a minimum of one time weekly.

SERVICES PROVIDED:

The FPA will provide:

- a. Outreach and Information
 - i. Facilitate meetings, educate parents/family members regarding their child's strengths, needs and diagnosis, and provide information about resources, services and supports based on needs and strengths identified by the family.
- b. Engagement, Bridging and Transition Support
 - i. Assist families to engage in services, supporting a productive and respectful partnership; and support families during times of transitions (e.g. admission and discharge from placement, crisis, school, and between service systems).
- c. Self-Advocacy, Self-Efficacy and Empowerment
 - i. Assist families in finding their voice within schools, service providers and within their own families. Accompany families to school and service meetings to support in development of advocacy skills.
- d. Community Connections and Natural Supports
 - i. Help families identify natural supports, healthy connections, and leisure/recreational activities.
- e. Parent Skill Development
 - i. Assist the family to learn and practice strategies to support their child's positive behavior and engage in child's treatment.
- f. Promoting Effective Family-Driven Practice
 - i. Participate in SPOA meetings, Regional Planning Consortium (RPC) for Children and Families, Provider meeting, Human Services Coalition, Integrated Ulster and First Wednesday Buzz.

STAFFING/RESOURCES: 3.00 FTE Family Peer Advocate; 0.10 FTE Team Leader; 0.6322 FTE Program Director

PROGRAM GOALS/OUTCOMES:

To demonstrate improved measures of family functioning outcomes over time through the use of the Family Assessment of Needs and Strengths ("FANS") tool.

SPECIFIC DELIVERABLES AND TIMEFRAMES: Staff will meet with Ulster County Department of Mental Health bi-annually to discuss program outcomes.

- a. Family Peer Support services are delivered by New York State Credentialed Family Peer Advocates (FPA). Staff will be trained in the Parent Empowerment (PEP) and FANS;
- b. The FPA will complete the FANS with the parent/caregiver within thirty (30) days from the initial face-to-face, updated every ninety (90) days, and at discharge from program;
- c. The FPA will complete training specific to outcomes and use the Children and Adult Integrated Reporting System to extract data to assess FPSS Program effectiveness;
- d. The FPA will complete the Action Plan/Family Plan with the parent/family member within thirty (30) days of first visit that identifies parent guided goals and methods. The Action Plan/Family Plan will be updated every ninety (90) days from the initial Action Plan/Family Plan, or otherwise as needed;
- e. If safety issues and concerns are identified, a safety plan will be developed with the parent/family member and updated as needed;

- f. Participate in SPOA utilization review process 90 days after first face to face and at intervals determined by SPOA team until discharge; and
- g. Quarterly reports will be submitted to the Ulster County Department of Mental Health (due by the 15th of April, July, October and January) and will include:
 - a. Number of unique families served;
 - b. Number of face-to-face and phone contacts per family; and
 - c. Summary of FANS data including scores (FANS completed within thirty (30) days from the initial face-to-face, updated every ninety (90) days, and at discharge from program)

PERFORMANCE TARGETS/MILESTONES:

- a. Maintain 90% capacity.
- b. 90% of families will have one face to face contact weekly.
- c. 10% decrease of overall FANS scores will be demonstrated at discharge.

6. OUTREACH (0690):

PROGRAM SPECIFICS:

Program Name/Type: Outreach (Adult Case Management Services)

Service Capacity: 200

Location (County/City): Ulster County

Target Population: Adults age 18 and older who could benefit from behavioral health/social services and supports

PROGRAM OVERVIEW: Outreach programs/services are intended to engage and/or assess individuals potentially in need of behavioral health/social services.

SERVICES PROVIDED: Socialization, recreation, meals, provision of information about mental health and social services, as well as community-based assessments and screening services.

STAFFING/RESOURCES: 1.21 FTE

PROGRAM GOALS/OUTCOMES: The outreach worker will seek to deliver outreach services to individuals who are currently not making use of mental health services. The primary goal of the service is to assist persons in accessing and making engaged linkages to behavioral health and recovery services.

SPECIFIC DELIVERABLES AND TIMEFRAMES:

Quarterly reports will be submitted to the Ulster County Department of Mental Health (due by the 15th of April, July, October and January) and will include:

- a. Number of individuals provided outreach services; and
- b. Number of individuals with a completed referral/linkage (behavioral health, social services, recovery and/or community providers)

PERFORMANCE TARGETS/MILESTONES:

Staff will meet with Ulster County Department of Mental Health bi-annually to discuss program outcomes.

- a. Program will operate at 100% capacity
- b. 75% of individuals will be successfully linked to one support/service

B. OTHER RESPONSIBILITIES OF THE AGENCY

1. The Agency shall comply with all reporting requirements for OASAS and OMH funding, including annual work plans, monthly reports, fiscal reporting, etc.
2. The Agency shall submit to the County annual detailed preliminary and final budgets, as well as claims documents, as required by New York State, or as requested by the County, detailing all expenses, income sources, and statistical data, in a format to be designated by the County.
3. The Agency must submit all reports and documents required by the Federal, New York State and County governments, in accordance with formats and deadlines identified by those entities. Failure to comply with reporting requirements may result in a loss of funding.

4. The Agency shall actively participate in Ulster County-wide planning and coordination of Services.
5. **Client Protection Policies:** If in performing the Services provided for by this Agreement, the Agency through its officers, employees, agents, and/or representatives, whether paid or volunteer, has direct contact with individual members of the public, the Agency must at all times during the Term of this Agreement keep in effect, as a minimum, the following procedures and policies for the protection of its clients:
 - a. Written job descriptions, containing minimum standards and qualifications, must be kept on file for all paid and volunteer positions.
 - b. At least one (1) written and signed reference must be kept on file for all employees, both paid and volunteer.
 - c. A written plan must be in place for the investigation of, and response to complaints by the recipients of the Agency's Services concerning harassment, abuse or other misconduct by Agency personnel. Such plan must include:
 - i. The Agency's chain of supervision in such cases; and
 - ii. A provision for immediate notification to the County's Commissioner of Mental Health when a complaint has been lodged.
 - d. All recipients of Agency Services must be notified of their rights as clients, and of complaint procedures available in cases of harassment, abuse or other misconduct by Agency personnel.
 - e. All Agency personnel must be:
 - i. Trained with respect to the responsibility of each paid employee and volunteer to recognize and report harassment, abuse, or misconduct in the treatment of any client served by the Agency; and
 - ii. Advised of the potential civil liability of both the Agency and its individual personnel in the case of a lawsuit brought by a client as the result of harassment, abuse, or other misconduct by an employee of the Agency.
 - f. The Agency must maintain proof that it has complied with subparagraphs "a" through "f" of this Section and must produce such proof upon request by the County.
6. **Incident Reporting:** The Agency shall meet all Federal, New York State and County requirements for reporting, as required by the funding source.
7. **Corporate Compliance Program:** If the Agency bills for Medicare and/or Medicaid services, the Agency shall establish a Corporate Compliance Program. The Corporate Compliance Program shall ensure that the Agency complies with all regulations related to billing Medicare/Medicaid, so as to ensure that reimbursements from these sources are made in accordance with the regulations.
8. The Agency shall make every effort to collect payments from clients, their guardians, and from all appropriate payment sources, as long as they are financially able to pay, and from any program for which clients are eligible, to the extent applicable to the Services provided under this Agreement.
9. All Services provided by the Agency shall include a regular utilization review of Program/Services to ensure access and effectiveness. The Agency shall collect Data for review in collaboration with Ulster County Department of Mental Health to determine resource allocation and to make changes as needed to accommodate the needs of the community.
10. **New York State Office of Addiction Services and Supports/Lobbying:**
 - a. In accepting this Agreement, the Agency certifies that no Federal funds have been paid or will be paid, by or on behalf of the Agency, to any person for influencing or attempting to influence an officer or employee of any Federal agency, a Member of Congress, an officer or employee of a Member of Congress in connection with the awarding of any Federal contract, the awarding of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

- b. If any funds other than Federal funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Federal agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this contract, grant, loan or cooperative agreement, the Agency shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
 - c. The Agency shall require that the language of this Section be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loan, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.
11. **NYS Office of Addiction Services and Supports/Environmental Tobacco Smoke:**
- a. The Agency shall comply with all applicable Federal laws, including Public Law 103-227 and New York State law, including New York Public Health Law Section 1399-o, prohibiting or limiting smoking in public places or facilities.
12. **New York State Office of Addiction Services and Supports /Closely Allied Entities:**
- a. OASAS policy objectives on the provision of New York State Aid funding support to service providers with Closely Allied Entities (CAEs) are:
 - i. To assure that New York State Aid funding support for service provider expenditures involving transactions with CAEs, including the leasing of property and/or the purchase of goods and/or services from CAEs, is restricted to the lesser of the actual cost to the CAE or fair market value of the transactions.
 - ii. To assure that all funds available to the service provider, through fundraising activities carried out by the CAE on behalf of the service provider, are reasonably and appropriately applied toward the legal/corporate purposes of the service provider, in concert with OASAS' statutory authority and mission to support and advance chemical dependence and/or gambling treatment services in New York State.
 - b. Criteria and documentation requirements for provider certification of compliance with OASAS policy, as set forth in Local Services Bulletin No. 1999-02 or latest update.
 - c. By signing this Agreement, the Agency certifies that the information contained in the Closely Allied Entities Certification, attached hereto as "APPENDIX A" and made a part of this Agreement, has been completed and accurately identifies any CAEs and their compliance with OASAS policy.

APPENDIX A

CLOSELY ALLIED ENTITIES CERTIFICATION:

The undersigned (authorized official signing for the applicant organization) certifies that the following information is correct:

Does your organization have a relationship with any entity, which meets the criteria of a closely allied entity (CAE), as defined in OASAS, Local Services Bulletin No. 1999-02, or latest update?

[] Yes

No

If Yes, please identify each entity below and, by checking the box next to each, in the column labeled "In Compliance," certify that in accordance with OASAS policy on CAE's, as delineated in OASAS Local Services Bulletin No. 1999-02, or latest update:

- Amounts included in the provider's OASAS approved annual budget and State Aid expenditure reimbursement claims, for service provider expenditures involving any and all transactions with a CAE, including the leasing of property and/or the purchase of goods and/or services from a CAE, are/will be restricted to the lesser of the actual cost to the CAE or fair market value of the transaction, in accord with OASAS policy.
- All funds available to the service provider, through fund raising activities carried out by a CAE on behalf of the service provider, are/will be reflected in the service provider's OASAS approved annual revenue budget, in accord with OASAS policy.
- Documentation is/will be maintained to fully demonstrate compliance with OASAS policy.

<u>In Compliance</u>	CAE Name
[]	_____
[]	_____
[]	_____
[]	_____
[]	_____
[]	_____

SCHEDULE B
FEES, EXPENSES, AND SUBMISSIONS FOR PAYMENT

1. The Agency's fee for Services shall not exceed the amount of **ONE MILLION, ONE HUNDRED NINE THOUSAND, NINE HUNDRED NINETY-SEVEN AND 00/100 (\$1,109,997.00) DOLLARS** for the Term of this Agreement.
2. In performing the services of this Agreement, the Agency shall operate within the following budgetary limitations:

	<u>NYS OMH Aid</u>	<u>NYS Required</u> <u>Expenditures by Agency</u>
Local Assistance	\$153,776.00	\$307,552.00
Commissioner's Reinvestment	\$131,685.00	\$131,685.00
Community Support Child & Family	\$323,376.00	\$323,376.00
Adult Case Management – Non-Medicaid Care Coord	\$ 95,679.00	\$ 95,679.00
Personal Services Enhancement	\$ 139.00	\$ 139.00
Funding Reduction/COLA	<u>\$ 4,920.00</u>	<u>\$ 4,920.00</u>
Total NYS OMH Aid:	\$709,575.00	

	<u>NYS OASAS Aid</u>
Primary Prevention	<u>\$ 119,858.00</u>
Total NYS OASAS Aid:	\$ 119,858.00

	<u>County Contribution</u>
OASAS Match	\$ 9,640.00
Local Assistance Match	\$112,051.00
Community Support Child & Family	\$116,377.00
Reinvestment Assistance	<u>\$ 42,496.00</u>
Total County Contribution:	\$280,564.00

SUMMARY:

Total NYS OMH Aid:	\$ 709,575.00
Total NYS OASAS Aid:	\$ 119,858.00
Subtotal:	\$ 829,433.00
Total County Contribution:	\$ 280,564.00
TOTAL FUNDING (contract total):	\$1,109,997.00

3. The Agency understands that if it fails to meet the expenditure requirements above, the monetary assistance will be reduced by New York State. The County will NOT make up the difference of any such reductions.
4. The County will forward all advances to the Agency in accordance with the advances made by New York State to the County for this Agreement.
5. The sum of all advances shall not exceed the total dollar value identified in Section "1" of this Schedule B.
6. Consistent with the requirements of OMH, OASAS, and OPWDD (as applicable), the Agency shall submit to the Commissioner of Mental Health, as required to receive the above funding, copies of all audit results for the Consolidated Fiscal Report, Institutional Cost Report, and other annual fiscal reporting documents.
7. The County will notify the Agency when it receives its "Notification of Payment" letter from New York State.
8. Upon such notification, the Agency shall submit an executed "Request for Payment" form to the County for the advance payment. Such "Request for Payment" forms shall include a claimant certification, which shall be signed by an authorized designee of the Agency who is identified by title.

9. Within thirty (30) days of receipt of such monies from New York State, and upon receipt of a properly completed and signed Request for Payment form, and approval of the Ulster County Comptroller, the advance payment shall be made to the Agency.
10. In the fourth quarter of the calendar year, the County will reconcile prior payments based on the most recent New York State Aid allocation, and will adjust for any variations in New York State Aid and under-spending by the Agency, as determined from the Agency's Consolidated Claims Report and revised New York State Aid allocations. In the event that an over-payment has been made, reductions will be made to the future payment(s) to the Agency, and/or the Agency agrees to reimburse the County for any amount not recoverable by such reduction(s).
11. The Agency agrees to meet any additional requirements that New York State and/or the County may from time to time require, with reasonable notice to the Agency.

PLEASE BRING THESE INSURANCE REQUIREMENTS TO YOUR INSURANCE AGENT TO ENSURE PROPER COVERAGE AND LIMITS ARE IN PLACE. FAILURE TO PROVIDE CERTIFICATE(S) OF INSURANCE EVIDENCING REQUIREMENTS BELOW SHALL DELAY CONTRACT EXECUTION.

SCHEDULE C
COUNTY OF ULSTER CONTRACT INSURANCE REQUIREMENTS

I. CONDITIONS OF INSURANCE

Unless otherwise authorized by the Ulster County Insurance Officer, strict adherence to this schedule is required. Any deviation without prior authorization from the County's Insurance Department will result in a delay in the finalization of this Agreement.

The Agency shall submit copies of any or all required insurance documents as and when requested by the County. Upon policy renewal, the Agency shall submit updated insurance policy information.

II. CERTIFICATES OF INSURANCE

The Agency shall file with the County's Insurance Department, prior to commencing work under this Agreement, all proper Certificates of Insurance.

The Certificates of Insurance shall include:

- a. Name and address of Insured
- b. Issue date of certificate
- c. Insurance company name
- d. Type of coverage in effect
- e. Policy number
- f. Inception and expiration dates of policies included on the certificate
- g. Limits of liability for all policies included on the certificate
- h. **"Certificate Holder" for all certificates shall be the County of Ulster, P.O. Box 1800, Kingston, New York 12402-1800.**

If the Agency's insurance policies should be non-renewed or canceled, or should expire during the life of this Agreement, the County shall be provided with a new certificate indicating the replacement policy information as requested above. The County requires thirty (30) days prior written notice of cancellation [ten (10) days for non-payment of premium] from the Insurer, its agents or representatives.

The Agency agrees to indemnify the County of Ulster for any applicable deductibles and self-insured retentions.

III. WORKERS' COMPENSATION AND DISABILITY INSURANCE

The Agency shall take out and maintain during the life of this Agreement, Workers' Compensation (WC) Insurance and Disability Benefits (DB) Insurance, for all of its employees employed at the site of the project, and shall provide Certificates of Insurance evidencing this coverage to the County's Insurance Department.

If the Agency is not required to carry such insurance, the Agency must submit form CE-200 attesting to the fact that it is exempt from providing WC and/or DB Insurance coverage for all of its employees.

The manner of proof related to WC and DB Insurance is controlled by New York State Laws, Rules and Regulations. "ACORD" forms are not acceptable proof of WC and/or DB Insurance.

IV. WORKERS' COMPENSATION REQUIREMENTS

To assist the State of New York and municipal entities in enforcing WCL Section 57, a business entity (the Agency) seeking to enter into a contract with a municipality (the County) must provide one of the following forms to the municipal entity with which it is entering into a contract. The Agency should contact their insurance agent to obtain acceptable proof of WC

coverage:

- Form C-105.2 – “Certificate of NYS Workers’ Compensation Insurance” or
- Form U-26.3 – “Certificate of Workers’ Compensation Insurance” issued by the New York State Insurance Fund or
- Form SI-12 – “Affidavit Certifying that Compensation has Been Secured” issued by the Self-Insurance Office of the Workers’ Compensation Board if the Agency is self-insured or
- Form GSI-105.2 – “Certificate of Participation in Workers’ Compensation Group Self-Insurance” issued by the Self-Insurance administrator of the group or
- Form GSI-12 – “Certificate of Group Workers’ Compensation Group Self-Insurance” issued by the Self-Insurance Office of the Workers’ Compensation Board if the Agency is self-insured.

If the Agency is not required to carry WC coverage, it must submit Form CE-200, “Certificate of Attestation of Exemption” from New York State Workers’ Compensation and/or Disability Benefits Insurance Coverage. This form and the instructions for completing it are available at <http://www.wcb.ny.gov>

V. DISABILITY BENEFITS REQUIREMENTS

To assist the State of New York and municipal entities in enforcing WCL Section 220(8), a business entity (the Agency) seeking to enter into a contract with a municipality (the County) must provide one of the following forms to the municipal entity with which it is entering into a contract. The Agency should contact their insurance agent to obtain acceptable proof of DB Insurance Coverage:

- Form DB-120.1 – “Certificate of Insurance Coverage Under the NYS Disability Benefits Law” or
- Form DB-155 – “Compliance with Disability Benefits Law” issued by the Self-Insurance Office of the Workers’ Compensation Board if the Agency is self-insured.

If the Agency is not required to carry DB Insurance coverage, it must submit Form CE-200, “Certificate of Attestation of Exemption” from New York State Workers’ Compensation and/or Disability Benefits Insurance Coverage. This form and the instructions for completing it are available at <http://www.wcb.ny.gov>

VI. COMMERCIAL GENERAL LIABILITY INSURANCE

The Agency shall take out and maintain during the life of this Agreement, such bodily injury liability and property damage liability insurance as shall protect it and the County from claims for damages for bodily injury including accidental death, as well as from claims for property damage that may arise from operations under this Agreement, whether such operations be by the Agency, by any subcontractor, or by anyone directly or indirectly employed by either of them.

It shall be the responsibility of the Agency to maintain such insurance in amounts sufficient to fully protect itself and the County, but in no instance shall amounts be less than the minimum acceptable levels of coverage set forth below:

- Bodily Injury Liability and Property Damage Liability Insurance in an amount not less than **ONE MILLION AND 00/100 (\$1,000,000.00) DOLLARS** for each occurrence, and in an amount not less than **THREE MILLION AND 00/100 (\$3,000,000.00) DOLLARS** general aggregate.

Other Conditions of Commercial General Liability Insurance:

- a. Coverage shall be written on Commercial General Liability form.
- b. Coverage shall include:
 1. Contractual Liability
 2. Independent Contractors
 3. Products and Completed Operations
- c. “Additional Insured” status shall be granted to “County of Ulster, P.O. Box 1800, Kingston, New York, 12402-1800”, shown on the Commercial General Liability policy, further stating that this insurance shall be primary and non-contributory with any other valid and collectable insurance.

VII. UMBRELLA LIABILITY OR EXCESS LIABILITY INSURANCE

Umbrella Liability or Excess Liability Insurance shall be provided by the Agency in an amount not less than **TWO MILLION AND 00/100 (\$2,000,000.00) DOLLARS**.

NOTE: As long as all minimum underlying limits have been met, insurance limits may be a total combined limit of the Umbrella/Excess Liability limits and the underlying liability insurance limits.

The Umbrella/Excess Liability coverage **MUST** be written on a follow-form (drop down) basis to the underlying insurance coverage with no additional exclusions.

“Additional Insured” status shall be granted to “County of Ulster, P.O. Box 1800, Kingston, New York, 12402-1800”, shown on the Umbrella policy, further stating that this insurance shall be primary and non-contributory with any other valid and collectable insurance.

VIII. AUTOMOBILE LIABILITY INSURANCE

Automobile Bodily Injury Liability and Property Damage Liability Insurance shall be provided by the Agency, with a minimum Combined Single Limit (CSL) of **ONE MILLION AND 00/100 (\$1,000,000.00) DOLLARS**.

Coverage shall include:

- a. All owned vehicles
- b. Any hired automobile
- c. Any non-owned automobile
- d. “Additional Insured” status shall be granted to “County of Ulster, P.O. Box 1800, Kingston, New York, 12402-1800”, shown on the Auto Liability policy, further stating that this insurance shall be primary and non-contributory with any other valid and collectable insurance.

IX. PROFESSIONAL LIABILITY INSURANCE (e.g. MALPRACTICE, MEDIA LIABILITY, ERRORS & OMISSIONS INSURANCE)

If this box is checked, Professional Liability Insurance shall be provided by the Agency in an amount not less than **ONE MILLION AND 00/100 (\$1,000,000.00) DOLLARS** for each occurrence and in an amount of not less than **THREE MILLION AND 00/100 (\$3,000,000.00) DOLLARS** general aggregate.

X. CYBER LIABILITY INSURANCE

If this box is checked, Cyber Liability Insurance shall be provided by the Agency in an amount not less than **FIVE MILLION AND 00/100 (\$5,000,000.00) DOLLARS** for each occurrence and in an amount of not less than **FIVE MILLION AND 00/100 (\$5,000,000.00) DOLLARS** general aggregate. **Copies of policy must be submitted with certificate of insurance.**

XI. SEXUAL ABUSE & MOLESTATION COVERAGE

If this box is checked, Sexual Abuse & Molestation Coverage shall be provided by the Agency in an amount not less than **ONE MILLION AND 00/100 (\$1,000,000.00) DOLLARS** for each occurrence and in an amount of not less than **TWO MILLION AND 00/100 (\$2,000,000.00) DOLLARS** general aggregate.

September 22, 2021

Steve Miccio CEO
People USA
126 Innis Ave.
Poughkeepsie, NY 12401

Dear Steve,

I write on behalf of Arms Acres, Inc. in support of the People Home Again Project Grant Expansion Proposal to HUD and the UCCOC for People USA., adding 3 additional housing units to their current 16 units providing Housing first, scattered-site Permanent supported housing to individuals who are chronically homeless with a serious and persistent mental illness, and/or substance abuse disorder. By collaborating with People USA on this expansion we hope to reduce health disparities in this population by providing health screenings and wellness checks as needed. We strongly support this grant application and the focus on reducing health disparities among this population. As an organization which works directly with individuals who are struggling with substance use disorders and mental health issues and their families, we advocate strongly for this service. These individuals often find themselves struggling to find proper housing while re-establishing themselves in the community. Through this letter, we acknowledge the responsibilities we will fulfill in this partnership.

Sincerely,



Patrice Wallace-Moore, LCSW-R
Chief Executive Officer
Arms Acres, Inc.
75 Seminary Hill Road
Carmel, NY 10512