

Before Starting the CoC Application

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

The Collaborative Applicant is responsible for:

- Reviewing the FY 2016 CoC Program Competition NOFA in its entirety for specific application and program requirements.

- Using the CoC Application Detailed Instructions while completing the application in e-snaps.

- Answering all questions in the CoC application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing this keep in mind:

- This year, CoCs will see that a few responses have been imported from the FY 2015 CoC Application.

- For some of the questions HUD has provided documents to assist Collaborative Applicants in completing responses.

- For other questions, the Collaborative Applicant must be aware of responses provided by project applications in their Project Applications.

- Some questions require the Collaborative Applicant to attach a document to receive credit. This will be identified in the question.

- All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions click [here](#).

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: UT-504 - Provo/Mountainland CoC

1A-2. Collaborative Applicant Name: United Way of Utah County

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Dept. of Workforce Services, State of Utah

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

| Organization/Person Categories | Participates in CoC Meetings | Votes, including electing CoC Board | Sits on CoC Board |
|--|------------------------------|-------------------------------------|-------------------|
| Local Government Staff/Officials | Yes | Yes | Yes |
| CDBG/HOME/ESG Entitlement Jurisdiction | Yes | Yes | Yes |
| Law Enforcement | Yes | No | No |
| Local Jail(s) | Yes | No | No |
| Hospital(s) | Yes | Yes | Yes |
| EMT/Crisis Response Team(s) | No | No | No |
| Mental Health Service Organizations | Yes | Yes | Yes |
| Substance Abuse Service Organizations | Yes | Yes | Yes |
| Affordable Housing Developer(s) | Yes | Yes | Yes |
| Public Housing Authorities | Yes | Yes | Yes |
| CoC Funded Youth Homeless Organizations | Not Applicable | No | Not Applicable |
| Non-CoC Funded Youth Homeless Organizations | Yes | Yes | Yes |
| School Administrators/Homeless Liaisons | Yes | Yes | Yes |
| CoC Funded Victim Service Providers | Yes | Yes | Yes |
| Non-CoC Funded Victim Service Providers | Yes | Yes | Yes |
| Street Outreach Team(s) | Yes | Yes | Yes |
| Youth advocates | Yes | Yes | Yes |
| Agencies that serve survivors of human trafficking | Yes | Yes | Yes |
| Other homeless subpopulation advocates | Yes | Yes | Yes |
| Homeless or Formerly Homeless Persons | Yes | Yes | Yes |
| American Red Cross Emergency Assistance Program | Yes | Yes | Yes |
| County Veteran Services | Yes | Yes | Yes |
| Faith-based representative | Yes | Yes | Yes |

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

The CoC regularly reaches out to entities that have expertise about homelessness to ensure that local needs are addressed. The CoC reviews membership annually to assure representation from interested parties throughout the region. New entities are invited to be members and to attend CoC meetings. Two examples are the American Red Cross and a faith-based group called LDS Church Transient Services. The American Red Cross partners with County Veteran services to facilitate the housing needs of veterans and work with CoC staff to ensure clients are quickly engaged in the coordinated entry process. The Assistant Planner attends veteran community council meetings bi-monthly to discuss housing needs. LDS Church Transient Services attends CoC meetings monthly, and has CoC staff present to and train their service volunteers. They provide funding for a shelter program and meet weekly with the funded agency to do case staffing.

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

| Youth Service Provider (up to 10) | RHY Funded? | Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 20, 2016. | Sat on CoC Board as active member or official at any point between July 1, 2015 and June 20, 2016. |
|---|-------------|--|--|
| Vantage Point Youth Services | No | Yes | Yes |
| Department of Child and Family Services | No | No | No |
| | | | |
| | | | |
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| | | | |

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

or sits on the CoC Board.

| Victim Service Provider for Survivors of Domestic Violence (up to 10) | Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 30, 2016 | Sat on CoC Board as active member or official at any point between July 1, 2015 and June 30, 2016. |
|---|--|--|
| Center for Women and Children in Crisis | Yes | Yes |
| Peace House | Yes | Yes |
| | | |
| | | |
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| | | |
| | | |

1B-2. Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for new projects in 2016. (limit 1000 characters)

Each year the CoC issues a Request for Proposal which is widely disseminated to homeless and social service agencies, all CoC members, and other community groups. This RFP announcement is posted publicly on the CoC website, is announced through a mass CoC membership email, and is publicized via email through another nonprofit organization association. Any organization interested in learning more is invited to participate in an orientation to learn about the application process, the community needs and priorities, HUD priorities and regulations, esnaps, agency and project eligibility, review criteria, deadlines, OneCPD resources, and DUNS and SAM registration. Applicants may request assistance with project development and are given materials about key aspects of the application (eligible activities, eligible participants, match requirements and more). Applicants that may not be selected for inclusion would be given a debriefing.

1B-3. How often does the CoC invite new members to join the CoC through a publicly available invitation? Annually

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

| Funding or Program Source | Coordinates with Planning, Operation and Funding of Projects |
|--|--|
| Housing Opportunities for Persons with AIDS (HOPWA) | Yes |
| Temporary Assistance for Needy Families (TANF) | Yes |
| Runaway and Homeless Youth (RHY) | Not Applicable |
| Head Start Program | Yes |
| Housing and service programs funded through Federal, State and local government resources. | Yes |

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

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

| | Number |
|--|--------|
| Number of Con Plan jurisdictions with whom the CoC geography overlaps | 5 |
| How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process? | 5 |
| How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data? | 5 |
| How many of the Con Plan jurisdictions are also ESG recipients? | 1 |
| How many ESG recipients did the CoC participate with to make ESG funding decisions? | 1 |
| How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities? | 1 |

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

All of the 5 CP entities engage with the CoC as follows:

- CPs are CoC board members
- CoC members contribute in annual CP online needs surveys
- CoC members are invited to participate in the annual CP Public Hearings
- CoC gives PIT & HIC data, unmet needs report, & the CoC Application to the CPs
- 3 CP staff serve on the CoC Project Review and Ranking Subcommittee
- 2 are officers of the CoC Executive Committee
- CPs participate in the annual online CoC community survey.

CPs notify housing and homeless providers about the availability of HOME and CDBG funds. The CoC engages CHDO agencies in an annual HOME subcommittee to plan long-range homeless and housing projects. Two CPs participate in bi-monthly Housing Solutions work group meetings (1 1/2 hours) to plan for future housing projects, landlord outreach, etc.

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

The State of Utah engages in ongoing communication with Continuum representatives to inform the prioritization and funding amounts for ESG. Each of the 3 CoCs present to the ESG allocation committee about their priorities and needs. This feedback weighs into the scoring process and eventual prioritization of all ESG and State-funded project applications. The State develops a series of performance standards that measure the outcomes of their ESG sub-recipients with input from the CoCs. These measures are modeled after HUD System Performance Measures and hold agencies accountable for their contributions to State and CoC outcomes. These measures are pulled on a quarterly basis from HMIS and will eventually be used as an evaluative measure for funding prioritization. The Assistant Planner for our CoC participates in State of Utah ESG monitoring visits of ESG funded programs in our region.

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

When a client reaches out for help to a housing provider or 211, they begin with

a standard quick assessment. If a family says they are victims of DV, they receive info about DV shelter and services. With consent, the caseworker calls the DV program and connects the client to DV staff. DV shelter case managers use a SPDAT assessment and work with the housing and RRH providers to offer housing options with consideration for safety and to rapidly re-house the family. The assessments are tied to an HMIS client ID and name that is codified with numerals to maintain anonymity. The DV service providers offer shelter, housing, education, therapy, children's programs, and case management. They refer and assist with transportation to the Family Justice Center (legal assistance, prosecution efforts and law enforcement), Victim's Advocates, RRH, PHAs, UVISA assistance, etc. If needed, unresolved DV housing cases are brought to Coordinated Support Services and are discussed using client IDs.

1C-4. List each of the Public Housing Agencies (PHAs) within the CoC's geographic area. If there are more than 5 PHAs within the CoC's geographic area, list the 5 largest PHAs. For each PHA, provide the percentage of new admissions that were homeless at the time of admission between July 1, 2015 and June 30, 2016 and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program.

| Public Housing Agency Name | % New Admissions into Public Housing and Housing Choice Voucher Program from 7/1/15 to 6/30/16 who were homeless at entry | PHA has General or Limited Homeless Preference |
|----------------------------------|---|--|
| Housing Authority of Utah County | 10.00% | Yes-Both |
| Provo City Housing Authority | 16.00% | Yes-Both |
| | | |
| | | |
| | | |

If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.

1C-5. Other than CoC, ESG, Housing Choice Voucher Programs and Public Housing, describe other subsidized or low-income housing opportunities that exist within the CoC that target persons experiencing homelessness. (limit 1000 characters)

Several entities within our area provide housing for homeless persons through outside funding sources. Three new tax credit housing projects in Utah County and one in Summit County have 4-5 units set-aside for the homeless with several more for DV survivors. A tax credit project in Heber City has 5 units for homeless persons. A local non-CoC funded agency provides transitional housing and housing search for clients. A TANF grant is used by one agency to offer RRH and homeless prevention help for families. A faith-based entity has partnered with our agencies to provide emergency shelter for individuals and families in local motels. Our local DCFS office has a grant from the State Dept.

of Human Services to provide limited housing funding for youth ages 18-24 who are aging out of foster care. Also, our CoC has a flex fund that offers a deposit, first and last month's rent, and an additional security deposit for literally homeless individuals when no other funding sources are available

1C-6. Select the specific strategies implemented by the CoC to ensure that homelessness is not criminalized in the CoC's geographic area. Select all that apply.

| | |
|--------------------------------------|-------------------------------------|
| Engaged/educated local policymakers: | <input checked="" type="checkbox"/> |
| Engaged/educated law enforcement: | <input checked="" type="checkbox"/> |
| Implemented communitywide plans: | <input type="checkbox"/> |
| No strategies have been implemented | <input type="checkbox"/> |
| Other:(limit 1000 characters) | |
| | <input type="checkbox"/> |
| | <input type="checkbox"/> |
| | <input type="checkbox"/> |

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

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

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

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

1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) that were not selected and explain how the CoC plans to coordinate with the institution(s) to ensure persons

**discharged are not discharged into homelessness.
(limit 1000 characters)**

Not applicable.

1E. Centralized or Coordinated Assessment (Coordinated Entry)

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

The CoC Program Interim Rule requires CoCs to establish a Centralized or Coordinated Assessment System which HUD refers to as the Coordinated Entry Process. Based on the recent Coordinated Entry Policy Brief, HUD's primary goals for the coordinated entry process are that assistance be allocated as effectively as possible and that it be easily accessible no matter where or how people present for assistance.

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

Our CE process involves various homeless service providers: non-profit organizations, shelters, public housing authorities, substance abuse providers, and mental health providers, who work with law enforcement, health clinics and veteran services to ensure individuals' entry into the system. We offer 5-day/wk street outreach, led by mental health workers trained in trauma-informed care to help unsheltered homeless gain access into CE. The CoC also has a "no wrong door" policy. Our acuity assessments are Org Codes' (F)VI-SPDAT, and (F)SPDAT. The coordinated support services group meets bi-weekly to case conference and review acute standardized scores on the master by-name list to discuss clients' barriers, needs, and options. Time is prioritized for chronically homeless, veterans, youth, DV victims and families. The group coordinates assistance with paperwork and housing resources (PSH, PH, RRH) that are appropriate for the client based on their consent (PBRA, TBRA, S+C).

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

the screen, and then select the applicable checkboxes.

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

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

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1F-1. For all renewal project applications submitted in the FY 2016 CoC Program Competition complete the chart below regarding the CoC's review of the Annual Performance Report(s).

| | |
|---|---------|
| How many renewal project applications were submitted in the FY 2016 CoC Program Competition? | 5 |
| How many of the renewal project applications are first time renewals for which the first operating year has not expired yet? | 1 |
| How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2016 CoC Program Competition? | 4 |
| Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2016 CoC Competition? | 100.00% |

1F-2 - In the sections below, check the appropriate box(es) for each selection to indicate how project applications were reviewed and ranked for the FY 2016 CoC Program Competition. Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.

| | |
|--|-------------------------------------|
| Performance outcomes from APR reports/HMIS: | |
| % permanent housing exit destinations | <input checked="" type="checkbox"/> |
| % increases in income | <input checked="" type="checkbox"/> |
| | |
| Monitoring criteria: | |
| Utilization rates | <input checked="" type="checkbox"/> |
| Drawdown rates | <input checked="" type="checkbox"/> |
| Frequency or Amount of Funds Recaptured by HUD | <input checked="" type="checkbox"/> |
| Need for specialized population services: | |

| | |
|---|-------------------------------------|
| Youth | <input checked="" type="checkbox"/> |
| Victims of Domestic Violence | <input checked="" type="checkbox"/> |
| Families with Children | <input checked="" type="checkbox"/> |
| Persons Experiencing Chronic Homelessness | <input checked="" type="checkbox"/> |
| Veterans | <input checked="" type="checkbox"/> |
| None: | <input type="checkbox"/> |

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

The Rank and Review Committee were given recent gaps analysis reports and information about the CoC’s priority to serve vulnerable populations during the review process. The Rank and Review criteria for new and renewal projects also had built-in assessments to review each project’s capacity to operate with low barriers according to Opening Doors. Capacity was assessed by program model, wrap-around service partnership, participation in coordinated entry and assessment, eligibility verification, and prioritization of subpopulations (chronic homeless persons, victims of domestic violence, homeless families with children, youth, and veterans). The Rank and Review committee gave projects that serve the chronically homeless the greatest priority (PSH), followed by service to youth, domestic violence victims, and veterans. In addition, a willingness to serve clients with high acuity scores was assessed through “housing first” model status.

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

The initial criteria, request for proposal directions, and all essential information was posted on the CoC website along with links to HUD NOFA information on July 8th, 2016. The information was also widely distributed by email to all CoC members, all CoC funded agencies, other social service agencies on July 8th, 2016. The CoC Planner and Assistant Planner modified the 2015 Review and Ranking criteria document based upon the HUD NOFA and CoC member feedback and re-distributed it to all CoC members for adoption by vote. Once approved on August 5, 2016, the final criteria was posted on the CoC website and also sent via email to all Continuum membership. The evidence of the email notification and public posting is attached.

1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts of the FY 2016 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached). 09/07/2016

1F-5. Did the CoC use the reallocation process in the FY 2016 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.) Yes

1F-5a. If the CoC rejected project application(s), on what date did the CoC and Collaborative Applicant notify those project applicants that their project application was rejected? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.) 08/22/2016

1F-6. In the Annual Renewal Demand (ARD) is the CoC's FY 2016 CoC's FY 2016 Priority Listing equal to or less than the ARD on the final HUD-approved FY2016 GIW? Yes

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

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

CoC administrators monitor CoC-funded projects at least annually for HUD performance measures on a variety of criterion (eligibility compliance, APR outcomes, financial management, timely submission of reports, etc.) State HMIS leads and CoCs evaluate all CoC-funded program data quality quarterly. The monitoring form is in the CoC Policies and Procedures Manual. Annual Performance Reports (APR) are submitted to HUD by each CoC-funded program, and this report is evaluated by CoC staff before the in-person monitoring visit. CoC staff meet with project managers and discuss why APR goals were or were not met, and how funds and partnerships are being utilized to meet these goals. Strengths and needs of the agency are addressed, and a monitoring report is sent to executives and program managers of the agency with program improvement recommendations. These monitoring reports are kept on file on a secure server, and are provided for review during the project Rank and Review process.

1G-2. Did the Collaborative Applicant include accurately completed and appropriately signed form HUD-2991(s) for all project applications submitted on the CoC Priority Listing? Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or attached MOU/MOA. 4-8 of the HMIS and CoC's MOU document

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

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

2A-4. What is the name of the HMIS software ClientTrack

used by the CoC (e.g., ABC Software)?

2A-5. What is the name of the HMIS software vendor (e.g., ABC Systems)? Eccovia Solutions

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

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

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

2B-2.1 Funding Type: Federal - HUD

| Funding Source | Funding |
|-------------------------------------|----------------|
| CoC | \$0 |
| ESG | \$7,981 |
| CDBG | \$0 |
| HOME | \$0 |
| HOPWA | \$0 |
| Federal - HUD - Total Amount | \$7,981 |

2B-2.2 Funding Type: Other Federal

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

2B-2.3 Funding Type: State and Local

| Funding Source | Funding |
|----------------|---------|
|----------------|---------|

| | |
|---------------------------------------|-----------------|
| City | \$0 |
| County | \$0 |
| State | \$32,696 |
| State and Local - Total Amount | \$32,696 |

2B-2.4 Funding Type: Private

| Funding Source | Funding |
|-------------------------------|----------------|
| Individual | \$3,690 |
| Organization | \$0 |
| Private - Total Amount | \$3,690 |

2B-2.5 Funding Type: Other

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

| | |
|---|-----------------|
| 2B-2.6 Total Budget for Operating Year | \$44,367 |
|---|-----------------|

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Enter the date the CoC submitted the 2016 HIC data in HDX, (mm/dd/yyyy): 04/29/2016

2C-2. Per the 2016 Housing Inventory Count (HIC) Indicate the number of beds in the 2016 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells in that project type.

| Project Type | Total Beds in 2016 HIC | Total Beds in HIC Dedicated for DV | Total Beds in HMIS | HMIS Bed Coverage Rate |
|---|------------------------|------------------------------------|--------------------|------------------------|
| Emergency Shelter (ESG) beds | 91 | 36 | 55 | 100.00% |
| Safe Haven (SH) beds | 0 | 0 | 0 | |
| Transitional Housing (TH) beds | 72 | 23 | 49 | 100.00% |
| Rapid Re-Housing (RRH) beds | 103 | 0 | 103 | 100.00% |
| Permanent Supportive Housing (PSH) beds | 166 | 0 | 160 | 96.39% |
| Other Permanent Housing (OPH) beds | 2 | 0 | 2 | 100.00% |

2C-2a. If the bed coverage rate for any project type is below 85 percent, describe how the CoC plans to increase the bed coverage rate for each of these project types in the next 12 months. (limit 1000 characters)

Not applicable.

2C-3. If any of the project types listed in question 2C-2 above have a coverage rate below 85 percent, and some or all of these rates can be attributed to beds covered by one of the following program types, please indicate that here by selecting all that apply from the list below.

| | |
|-----------------------------|--------------------------|
| VA Grant per diem (VA GPD): | <input type="checkbox"/> |
| VASH: | <input type="checkbox"/> |

| | |
|---------------------------------------|-------------------------------------|
| Faith-Based projects/Rescue mission: | <input type="checkbox"/> |
| Youth focused projects: | <input type="checkbox"/> |
| Voucher beds (non-permanent housing): | <input type="checkbox"/> |
| HOPWA projects: | <input type="checkbox"/> |
| Not Applicable: | <input checked="" type="checkbox"/> |

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

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2D-1. Indicate the percentage of unduplicated client records with null or missing values and the percentage of "Client Doesn't Know" or "Client Refused" within the last 10 days of January 2016.

| Universal Data Element | Percentage Null or Missing | Percentage Client Doesn't Know or Refused |
|---|----------------------------|---|
| 3.1 Name | 0% | 0% |
| 3.2 Social Security Number | 1% | 13% |
| 3.3 Date of birth | 0% | 0% |
| 3.4 Race | 0% | 0% |
| 3.5 Ethnicity | 0% | 0% |
| 3.6 Gender | 0% | 0% |
| 3.7 Veteran status | 2% | 0% |
| 3.8 Disabling condition | 2% | 0% |
| 3.9 Residence prior to project entry | 5% | 0% |
| 3.10 Project Entry Date | 0% | 0% |
| 3.11 Project Exit Date | 0% | 0% |
| 3.12 Destination | 11% | 3% |
| 3.15 Relationship to Head of Household | 0% | 0% |
| 3.16 Client Location | 7% | 0% |
| 3.17 Length of time on street, in an emergency shelter, or safe haven | 2% | 0% |

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

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

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

2D-3. If you submitted the 2016 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR? 12

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

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

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

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

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

Not applicable.

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

The data collected during the PIT count is vital for both CoC's and HUD. HUD needs accurate data to understand the context and nature of homelessness throughout the country, and to provide Congress and the Office of Management and Budget (OMB) with information regarding services provided, gaps in service, and performance. Accurate, high quality data is vital to inform Congress' funding decisions.

- 2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2016 sheltered PIT count?** Yes
- 2E-2. Indicate the date of the most recent sheltered PIT count: (mm/dd/yyyy)** 01/27/2016
- 2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2016, was an exception granted by HUD?** Not Applicable
- 2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX: (mm/dd/yyyy)** 04/29/2016

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2016 PIT count:

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

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

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

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

Our sheltered PIT count came from three main sources; 1) HMIS, 2) client interviews at non-HMIS shelters, and 3) provider surveys from domestic violence service providers. We used these these methods to gather the

population and subpopulation data that was required for the PIT. Using these three sources we were able to get a complete census count of the sheltered population data in the continuum of care so no extrapolation was used for the population count. We were however missing a small amount of sub population data so we used the PIT Count Data Extrapolation Tool released by HUD to complete the required information.

2F-4. Describe any change in methodology from your sheltered PIT count in 2015 to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to the implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the PIT count). (limit 1000 characters)

There were no significant changes in our sheltered PIT count methodology from 2015 to 2016.

2F-5. Did your CoC change its provider coverage in the 2016 sheltered count? No

2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2016 sheltered count. (limit 750 characters)

Not applicable.

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

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

2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2015 to 2016 that would change data quality, including changes to training volunteers and inclusion of any partner agencies in the sheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual sheltered PIT count methodology (e.g. change in sampling or extrapolation methods). (limit 1000 characters)

There were no significant changes in our sheltered PIT count from 2015 to 2016 that would impact data quality.

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

HUD requires CoCs to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, HUD also strongly encourages CoCs to conduct the unsheltered PIT count annually at the same time that they conduct annual sheltered PIT counts. HUD required CoCs to conduct the last biennial PIT count during the last 10 days in January 2015.

2H-1. Did the CoC approve the final unsheltered PIT count methodology for the most recent unsheltered PIT count? Yes

2H-2. Indicate the date of the most recent unsheltered PIT count (mm/dd/yyyy): 01/27/2016

2H-2a. If the CoC conducted the unsheltered PIT count outside of the last 10 days of January 2016, or most recent count, was an exception granted by HUD? Not Applicable

2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy): 04/29/2016

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2I-1. Indicate the methods used to count unsheltered homeless persons during the 2016 or most recent PIT count:

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

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

For the unsheltered count, our CoC sent PIT count volunteers and outreach workers to known locations, as well as all major roads and areas where heat and cover were available to interview people on the night of the count as well as the two nights following the count. Interviewers surveyed all of the people who they came in contact with during these canvassing efforts. The interviews gathered all of the population and subpopulation data that are required for the PIT. We did not extrapolate as it was felt that all the areas where homeless persons might be staying were canvassed.

2I-3. Describe any change in methodology from your unsheltered PIT count in 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016, including any change in sampling or extrapolation method, if

applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the count). (limit 1000 characters)

There were no significant changes in our unsheltered PIT count methodology from 2015 to 2016.

2I-4. Has the CoC taken extra measures to identify unaccompanied homeless youth in the PIT count? No

2I-4a. If the response in 2I-4 was "no" describe any extra measures that are being taken to identify youth and what the CoC is doing for homeless youth. (limit 1000 characters)

Our primary youth service providers are the Department of Child and Family Services (DCFS) and Wasatch Mental Health (WMH). DCFS case manages the Transition to Adult Living program for youth transitioning out of foster care, and assist them with various needs (including housing). Wasatch Mental Health manages the youth shelter for children ages 11-17 (Vantage Point) and also case manages young adults struggling with psychoses that often struggle with housing. In October 2016 the Continuum will also be partnering with a local resource center for LGBT youth and their families to facilitate homelessness prevention through diversion practices and also rental help if separate living arrangements are desired or necessary.

One of our agencies has partnered with DCFS and WMH and is submitting two new RRH projects in 2016 to serve homeless youth that are working with those two agencies.

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2016 unsheltered PIT count:

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

2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016 that would affect data quality. This includes changes to training volunteers and inclusion of any partner agencies in the unsheltered PIT count planning and implementation, if applicable. Do not include information on changes in actual methodology (e.g. change in sampling or extrapolation method). (limit 1000 characters)

The Assistant Planner recruited 118 volunteers from a local university, which is a large increase in volunteer outreach numbers from 2015 (60). Also, we were able to maintain volunteer retention across all three days of intake at 70%, and all teams were able to remain intact and search the same geographical mapped areas. We were also more proactive about the review of our mapping to highlight hot spots with street outreach teams and formerly homeless clients to ensure the depth of our coverage.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

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

Using the table below, indicate the number of persons who were homeless at a Point-in-Time (PIT) based on the 2015 and 2016 PIT counts as recorded in the Homelessness Data Exchange (HDX).

| | 2015 PIT (for unsheltered count, most recent year conducted) | 2016 PIT | Difference |
|--|---|----------|------------|
| Universe: Total PIT Count of sheltered and unsheltered persons | 203 | 178 | -25 |
| Emergency Shelter Total | 86 | 76 | -10 |
| Safe Haven Total | 0 | 0 | 0 |
| Transitional Housing Total | 79 | 61 | -18 |
| Total Sheltered Count | 165 | 137 | -28 |
| Total Unsheltered Count | 38 | 41 | 3 |

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

Using HMIS data, enter the number of homeless persons who were served in a sheltered environment between October 1, 2014 and September 30, 2015 for each category provided.

| | Between October 1, 2014 and September 30, 2015 |
|---|--|
| Universe: Unduplicated Total sheltered homeless persons | 1,537 |
| Emergency Shelter Total | 1,466 |
| Safe Haven Total | 0 |
| Transitional Housing Total | 131 |

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

Describe the CoC's efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors of becoming homeless.

(limit 1000 characters)

The CoC engages with 2-1-1 and partners who outreach to individuals and families who are precariously housed. These risk factors are addressed to CoC planners by service providers who engage in shelter services: victimization, rental history, landlord relationships, prior homelessness, habitability of housing, language/cultural barriers, lease violations, inability to pay rent, illegal evictions, discrimination, substance abuse, mental illness, institutional history, no support network, aging out of foster care, jail discharge. Services provided to mitigate risk factors: diversion assessment; tenant rights & responsibilities training; landlord mediation; homeless prevention rent help; outreach through social services, churches, hospitals, schools, employers; outreach to landlords about resources; disability services; employment and income services; and use of a landlord toolkit and flex fund.

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

Describe the CoC's efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless.

(limit 1000 characters)

Chronically homeless individuals and homeless individuals who have endured long episodes of homelessness are consistently evaluated and case conferenced within our coordinated entry and assessment process every two weeks. The VI-SPDAT and SPDAT assessments length of homelessness and other issues such as physical and mental disability, family status, strength of social support, substance abuse, monetary resources, etc. Before each coordinated assessment meeting, the HMIS lead reviews all individuals that are recommended for housing resources on the by-name list. Individuals who are chronically homeless are flagged for special review, especially when they have high acuity scores. These individuals' housing histories are discussed at length and connected to appropriate services. Also, CoC-funded programs report on their progress to decrease length of homelessness in APRs, which is discussed in CoC monitoring visits at least annually.

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

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

**3A-4a. Exits to Permanent Housing Destinations:
Fill in the chart to indicate the extent to which projects exit program participants into permanent housing (subsidized or non-subsidized) or the**

retention of program participants in CoC Program-funded permanent supportive housing.

| | Between October 1, 2014 and September 30, 2015 |
|---|--|
| Universe: Persons in SSO, TH and PH-RRH who exited | 31 |
| Of the persons in the Universe above, how many of those exited to permanent destinations? | 8 |
| % Successful Exits | 25.81% |

3A-4b. Exit To or Retention Of Permanent Housing:
 In the chart below, CoCs must indicate the number of persons who exited from any CoC funded permanent housing project, except rapid re-housing projects, to permanent housing destinations or retained their permanent housing between October 1, 2014 and September 31, 2015.

| | Between October 1, 2014 and September 30, 2015 |
|---|--|
| Universe: Persons in all PH projects except PH-RRH | 214 |
| Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations? | 181 |
| % Successful Retentions/Exits | 84.58% |

3A-5. Performance Measure: Returns to Homelessness: Describe the CoCs efforts to reduce the rate of individuals and families who return to homelessness. Specifically, describe strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness. (limit 1000 characters)

The CoC emphasizes services to reduce returns to homelessness. We review quarterly HMIS reports (and system performance measures) on returns to homelessness to focus on high risk clients and strategies that require improvement. About 16% of households return to homelessness. To reduce this, our CoC is: 1) Offering services to help clients maintain housing (mental health services like psychotherapy, day treatment, medication management, psychiatric services, healthcare services, provisions for food and clothing, case management, employment counseling, and life-skills courses; 2) Engaging in an in-depth landlord survey to assess current concerns. Agencies will use this info to help prevent and resolve landlord issues; 3) Helping with landlord mediation and with deposits and rent. 4) discussing in coordinated assessment meetings how to resolve issues before people return to homelessness; and 5) Using a private flex fund to help cover excess apartment damages or unpaid fees.

3A-6. Performance Measure: Job and Income Growth. Performance Measure: Job and Income Growth. Describe the CoC's specific strategies to assist CoC Program-funded projects to increase program participants' cash income from employment and non-

**employment non-cash sources.
(limit 1000 characters)**

CoC projects work with clients to assess employment barriers and potential and to assess eligibility for benefits from non-employment non-cash sources. 1) Wasatch Mental Health (WMH) works with Vocational Rehabilitation to increase employment opportunities. Medicaid clients may participate in the WMH Transitional Employment program. 2) Community Action works with clients to apply online for SNAP, Medicaid, TANF, General Assistance, FEP, and CHIP. Community Action faxes required eligibility documents to DWS for clients and follows up with an eligibility worker when issues arise in the application process. Community Action provides access to computers for participants to check on their cases online. 3) Agencies ask for a DWS My Case printout at intake to target potential benefit increase. 4) DWS recruits employers to take advantage of the Utah \$2,000 tax incentive for hiring qualified homeless individuals.

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

The Department of Workforce Services (DWS) employment services are essential to successfully increasing the income of participants. DWS provides an Employment Counselor who works specifically with homeless individuals and families. DWS also has an Employment Counselor who works with families who receive TANF RRH and has special employment services for veterans. This person participates in coordinated support service meetings. DWS provides: working with persons on an employment plan, intensive employment preparation, job seeking skills, and job search. DWS recruits and provides incentives (\$2,000 tax credit for hiring) for employers to employ persons with a variety of barriers including homelessness. DWS assists with other training funding – GED, adult high school, short-term training, apprenticeships, etc. DWS provides updates of their employment services in CoC meetings, and a DWS worker participates in the CSS Subcommittee where agencies collaborate on specific cases.

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

The Ad Hoc PIT Subcommittee is committed to making the most effective use of staff, volunteers, and other resources in the unsheltered count. Members of these committee include program street outreach teams and at least one formerly homeless individual. These committee members help evaluate our mapping for the unsheltered homeless during and outside of PIT. This team frequents areas of high traffic unsheltered homeless 5 days a week, and also conduct "in-reach" in a walk-in soup kitchen/service center five days a week. They also coordinate with local law enforcement to track individuals that are identified on weekends. All of these unsheltered individuals are eventually introduced to the coordinated entry and assessment process either by street outreach or by agency visits. Our CoC has a "no wrong door" policy for these

individuals. Once they enter in CE, they are assisted with paperwork processes and are introduced to housing vacancy lists in order to find permanent housing.

3A-7a. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. disasters)? Yes

**3A-7b. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. deserts, wilderness, etc.)?
(limit 1000 characters)**

Yes. The areas of exclusion were in rural areas with no obvious habitable spaces and not near any major highways or main local roads. The areas which are excluded exhibit one or more of these criteria: areas that are inaccessible by vehicles or people; areas that are uninhabitable and inaccessible; remote west desert area; Wasatch Mountain range and high mountain passes; areas (mountains and desert) that are only frequented for recreational purposes and which are many miles from any community; isolated grazing land (cattle and/or sheep); and/or isolated river ways.

**3A-8. Enter the date the CoC submitted the system performance measure data into HDX. The System Performance Report generated by HDX must be attached.
(mm/dd/yyyy)** 07/29/2016

**3A-8a. If the CoC was unable to submit their System Performance Measures data to HUD via the HDX by the deadline, explain why and describe what specific steps they are taking to ensure they meet the next HDX submission deadline for System Performance Measures data.
(limit 1500 characters)**

Not applicable.

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

Objective 1: Ending Chronic Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

To end chronic homelessness by 2017, HUD encourages three areas of focus through the implementation of Notice CPD 14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status.

1. Targeting persons with the highest needs and longest histories of homelessness for existing and new permanent supportive housing;
2. Prioritizing chronically homeless individuals, youth and families who have the longest histories of homelessness; and
3. The highest needs for new and turnover units.

3B-1.1. Compare the total number of chronically homeless persons, which includes persons in families, in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

| | 2015 (for unsheltered count, most recent year conducted) | 2016 | Difference |
|---|---|------|------------|
| Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons | 5 | 9 | 4 |
| Sheltered Count of chronically homeless persons | 2 | 5 | 3 |
| Unsheltered Count of chronically homeless persons | 3 | 4 | 1 |

3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, or no change in the overall TOTAL number of chronically homeless persons in the CoC, as well as the change in the unsheltered count, as reported in the PIT count in 2016 compared to 2015. (limit 1000 characters)

Several factors could explain the change in the number of chronically homeless and those counted during PIT: 1) An increase in the total number and retention of outreach volunteers during PIT may have played a role in identifying more individuals than in 2015. Our geographical coverage across our counties improved. 2) Vacancy rates decreased in 2015 and housing application criteria became stricter in Utah County among private landlords. Many chronically homeless individuals have qualified for Shelter + Care vouchers and cannot find a place to live and must file for extensions. 3) Recent state legislation in March 2016 acted to remove the requirement for landlords to comply with Section 8 for tenants who carry vouchers, which reflects the angst of landlords toward clients with vouchers, particularly those with any kind of criminal history or poor credit. Several privately owned units transitioned into student housing, as both university populations grow in our area.

3B-1.2. Compare the total number of PSH beds (CoC Program and non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count, as compared to those identified on the 2015 Housing Inventory Count.

| | 2015 | 2016 | Difference |
|--|------|------|------------|
| Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC. | 198 | 166 | -32 |

3B-1.2a. Explain the reason(s) for any increase, or no change in the total number of PSH beds (CoC program funded or non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count compared to those identified on the 2015 Housing Inventory Count. (limit 1000 characters)

Not applicable.

3B-1.3. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status? Yes

3B-1.3a. If “Yes” was selected for question 3B-1.3, attach a copy of the CoC’s written standards or other evidence that clearly shows the incorporation of the Orders of Priority in Notice CPD 14-012 and indicate the page(s) for all documents where the Page

Orders of Priority are found.

3B-1.4. Is the CoC on track to meet the goal of ending chronic homelessness by 2017? No

This question will not be scored.

3B-1.4a. If the response to question 3B-1.4 was “Yes” what are the strategies that have been implemented by the CoC to maximize current resources to meet this goal? If “No” was selected, what resources or technical assistance will be implemented by the CoC to reach to goal of ending chronically homelessness by 2017? (limit 1000 characters)

We will continue to work with landlords in the private sector, and we are engaging in a broad and vigorous landlord research study (Summer/Fall 2016) to explore the issues landlords have been wrestling with as they house our clients. We also have workshops about public and private resource available for landlords to attend. We will also have nine new master lease units available for clients in the 2016-2017 program year and are continuing to work with developers and the housing commission to plan for an increase of units through purchases or construction. Five 2015-2016 affordable housing projects within Continuum boundaries offer set-a-sides to the homeless. We will continue to engage with these developers to prioritize the chronically homeless for housing through the coordinated entry, assessment, and supportive services processes.

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

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

HUD will evaluate CoC's based on the extent to which they are making progress to achieve the goal of ending homelessness among households with children by 2020.

3B-2.1. What factors will the CoC use to prioritize households with children during the FY2016 Operating year? (Check all that apply).

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

3B-2.2. Describe the CoC's strategies including concrete steps to rapidly rehouse every household with children within 30 days of those families becoming homeless. (limit 1000 characters)

Community Action (CAP) and the 2 DV shelters cooperate to re-house homeless families within 30 days. Families enter the DV shelter or CAP shelter program where an assessment is done in the first interview. Housing search begins in 1-7 days with a placement goal of 2-3 weeks. CAP is the provider of RRH in the region. The CoC maintains a list of vacant housing and recruits landlords to accept high risk families. The CoC flex fund is used for landlord concerns (pay a double deposit). CAP helps find and secure housing and in landlord negotiation. CH families have priority for PSH units. Families with more risk factors have a higher priority for RRH funding. CAP uses CoC RRH, TANF and EFSP funds for RRH. CAP went from \$77,000 RRH funds in 2014 to \$465,000 TANF RRH over 3 years starting in 2015. In 2016 CAP has begun a new CoC RRH project in the amount of about \$75,000. In 2016 CAP is submitting a new project application for more RRH funds to assist families.

3B-2.3. Compare the number of RRH units available to serve families from the 2015 and 2016 HIC.

| | 2015 | 2016 | Difference |
|---|------|------|------------|
| RRH units available to serve families in the HIC: | 6 | 25 | 19 |

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

| | |
|--|-------------------------------------|
| CoC policies and procedures prohibit involuntary family separation: | <input checked="" type="checkbox"/> |
| There is a method for clients to alert CoC when involuntarily separated: | <input type="checkbox"/> |
| CoC holds trainings on preventing involuntary family separation, at least once a year: | <input checked="" type="checkbox"/> |
| Reviewed in one CoC meeting, discussed in agency project planning meeting, and | <input checked="" type="checkbox"/> |
| reviewed in project monitoring reviews | <input checked="" type="checkbox"/> |
| None: | <input type="checkbox"/> |

3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

PIT Count of Homelessness Among Households With Children

| | 2015 (for unsheltered count, | | |
|------------------------|------------------------------|---------|------------|
| FY2016 CoC Application | | Page 43 | 09/12/2016 |

| | most recent year conducted) | 2016 | Difference |
|---|-----------------------------|------|------------|
| Universe: Total PIT Count of sheltered and unsheltered homeless households with children: | 30 | 23 | -7 |
| Sheltered Count of homeless households with children: | 29 | 23 | -6 |
| Unsheltered Count of homeless households with children: | 1 | 0 | -1 |

3B-2.5a. Explain the reason(s) for any increase, or no change in the total number of homeless households with children in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)

Not applicable.

3B-2.6. From the list below select the strategies to the CoC uses to address the unique needs of unaccompanied homeless youth including youth under age 18, and youth ages 18-24, including the following.

| | |
|--|-----|
| Human trafficking and other forms of exploitation? | Yes |
| LGBTQ youth homelessness? | Yes |
| Exits from foster care into homelessness? | Yes |
| Family reunification and community engagement? | Yes |
| Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs? | Yes |
| Unaccompanied minors/youth below the age of 18? | Yes |

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

| | |
|---|-------------------------------------|
| Diversion from institutions and decriminalization of youth actions that stem from being trafficked: | <input type="checkbox"/> |
| Increase housing and service options for youth fleeing or attempting to flee trafficking: | <input checked="" type="checkbox"/> |
| Specific sampling methodology for enumerating and characterizing local youth trafficking: | <input type="checkbox"/> |
| Cross systems strategies to quickly identify and prevent occurrences of youth trafficking: | <input checked="" type="checkbox"/> |
| Community awareness training concerning youth trafficking: | <input type="checkbox"/> |
| | <input type="checkbox"/> |
| N/A: | <input type="checkbox"/> |

3B-2.7. What factors will the CoC use to prioritize unaccompanied youth including youth under age 18, and youth ages 18-24 for housing and services during the FY 2016 operating year? (Check all that apply)

| | |
|--|-------------------------------------|
| Vulnerability to victimization: | <input checked="" type="checkbox"/> |
| Length of time homeless: | <input checked="" type="checkbox"/> |
| Unsheltered homelessness: | <input checked="" type="checkbox"/> |
| Lack of access to family and community support networks: | <input checked="" type="checkbox"/> |
| | <input type="checkbox"/> |
| | <input type="checkbox"/> |
| N/A: | <input type="checkbox"/> |

3B-2.8. Using HMIS, compare all unaccompanied youth including youth under age 18, and youth ages 18-24 served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 (October 1, 2013-September 30, 2014) and FY 2015 (October 1, 2014 - September 30, 2015).

| | FY 2014 (October 1, 2013 - September 30, 2014) | FY 2015 (October 1, 2014 - September 30, 2105) | Difference |
|---|--|--|------------|
| Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry: | 26 | 35 | 9 |

3B-2.8a. If the number of unaccompanied youth and children, and youth-headed households with children served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2015 is lower than FY 2014 explain why. (limit 1000 characters)

Not applicable.

3B-2.9. Compare funding for youth homelessness in the CoC's geographic area in CY 2016 and CY 2017.

| | Calendar Year 2016 | Calendar Year 2017 | Difference |
|------------------------|--------------------|--------------------|------------|
| FY2016 CoC Application | | | |

| | | | |
|---|--------------|--------------|-------------|
| Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded): | \$148,099.00 | \$225,677.00 | \$77,578.00 |
| CoC Program funding for youth homelessness dedicated projects: | \$0.00 | \$77,578.00 | \$77,578.00 |
| Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding): | \$148,099.00 | \$148,099.00 | \$0.00 |

3B-2.10. To what extent have youth services and educational representatives, and CoC representatives participated in each other's meetings between July 1, 2015 and June 30, 2016?

| Cross-Participation in Meetings | # Times |
|--|---------|
| CoC meetings or planning events attended by LEA or SEA representatives: | 3 |
| LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives: | 6 |
| CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers): | 3 |

3B-2.10a. Based on the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local educational authorities and school districts. (limit 1000 characters)

McKinney-Vento educational authorities are members of our Continuum's Education and Youth Subcommittee. Committee members include the primary RRH distributor, representatives from every school district in the Continuum jurisdiction, the unaccompanied youth shelter program director, DCFS, a local Head Start program director, domestic violence shelter representatives, and CoC staff. They attend meetings at least quarterly to discuss resource sharing, referrals, and strategic planning with all housing agencies that serve families with children 18 and under. The CoC provides school districts with housing referral cards and materials, and McKinney-Vento advocates collaborate with the domestic violence shelters to coordinate educational materials and transportation for children on-site. McKinney-Vento advocates also offer insight into outreach for unaccompanied youth that could be identified during the Point-in-Time count.

3B-2.11. How does the CoC make sure that homeless individuals and families who become homeless are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow. (limit 2000 characters)

The CoC is committed to ensuring that the educational needs of homeless children and youth are met. The CoC Education Subcommittee is tasked to coordinate educational and other services to families, ensure families are informed of their eligibility for services, and assist agencies in implementing

procedures to meet the educational needs of families. Their membership includes the school district homeless liaisons, shelter providers, housing providers, RRH and ESG service providers, RHY programs and Head Start. CoC Policy: All new and renewal CoC-funded projects as well as ESG-funded projects are required to have activities in place to collaborate with school district liaisons to ensure all children and unaccompanied youth are enrolled in school and are connected to other services such as Head Start. They are required to assign at least one caseworker to inform families of their eligibility for the McKinney-Vento educational services and to assist families in accessing these services. We have tasked the members of the Coordinated Support Services Subcommittee who work with families to address the educational needs of children and youth as they work together to place families into shelter and housing in their bi-monthly meetings. We have provided flyers and posters to every CoC funded and non-funded service provider to post and distribute to families and we have ensured that school district homeless liaisons are trained on at least a quarterly basis on housing resources. We have reached out to less participatory school district liaisons and only have one more individual to train. All school district representatives are participating in the strategic planning of the committee, and have created a mission statement to ensure that all families with youth under 18 facing housing instability and/or shelter services will have full access to educational enrollment and housing resources, either through education centers or through housing programs.

**3B-2.12. Does the CoC or any HUD-funded projects within the CoC have any written agreements with a program that services infants, toddlers, and youth children, such as Head Start; Child Care and Development Fund; Healthy Start; Maternal, Infant, Early Childhood Home Visiting programs; Public Pre-K; and others?
(limit 1000 characters)**

The Continuum approved an MOU with Mountainland Head Start and United Way's Help Me Grow program. These two programs provide child development programming to children at risk and have been trained on the Continuum's housing services. Head Start family advocates (case managers) are trained to especially direct families toward Community Action Services and Food Bank, who manage all of the Rapid Rehousing programs in the Continuum, TANF funds for homeless prevention, and TANF funds for emergency shelter vouchers for families. Help Me Grow offers online and hotline developmental support to families with young children, and can directly transfer families who are in need of resources for housing help to 2-1-1. Help Me Grow also has direct contact information to the Assistant Planner (a United Way employee) for special housing issues. Both of these programs offer feedback and work through the Education and Youth Subcommittee to update strategic planning.

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

Objective 3: Ending Veterans Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

Opening Doors outlines the goal of ending Veteran homelessness by the end of 2016. The following questions focus on the various strategies that will aid communities in meeting this goal.

3B-3.1. Compare the total number of homeless Veterans in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

| | 2015 (for unsheltered count, most recent year conducted) | 2016 | Difference |
|---|--|------|------------|
| Universe: Total PIT count of sheltered and unsheltered homeless veterans: | 9 | 3 | -6 |
| Sheltered count of homeless veterans: | 3 | 2 | -1 |
| Unsheltered count of homeless veterans: | 6 | 1 | -5 |

3B-3.1a. Explain the reason(s) for any increase, or no change in the total number of homeless veterans in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)

Not applicable.

3B-3.2. Describe how the CoC identifies, assesses, and refers homeless veterans who are eligible for Veterean's Affairs services and housing to appropriate reources such as HUD-VASH and SSVF. (limit 1000 characters)

Our CoC coordinated entry and assessment policy requires all case managers to conduct standardized assessments with cilents, and these assessments include questions about veterans status. If a client self-reports as being a

veteran, the case manager asks if the client has official paperwork and access to veterans' benefits. If not, the case manager completes a VA ROI with the client and faxes their information to the VA office in Salt Lake. We also have a VA representative meet with clients bi-weekly at a food and shelter walk-in center to help veterans fully review their benefits. We also work with the Homeless Veterans' Fellowship (HVF), an agency that distributes SSVF to all areas of the states outside of Salt Lake. VA, HFV, and DWS case managers attend bi-weekly coordinated supportive services meetings (CSS) to review veterans cases on the BNL to see if clients have received every benefit available to clients.

3B-3.3. Compare the total number of homeless Veterans in the CoC and the total number of unsheltered homeless Veterans in the CoC, as reported by the CoC for the 2016 PIT Count compared to the 2010 PIT Count (or 2009 if an unsheltered count was not conducted in 2010).

| | 2010 (or 2009 if an unsheltered count was not conducted in 2010) | 2016 | % Difference |
|---|--|------|--------------|
| Total PIT Count of sheltered and unsheltered homeless veterans: | 16 | 3 | -81.25% |
| Unsheltered Count of homeless veterans: | 12 | 1 | -91.67% |

3B-3.4. Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2016. Yes

This question will not be scored.

3B-3.4a. If "Yes", what are the strategies being used to maximize your current resources to meet this goal? If "No" what resources or technical assistance would help you reach the goal of ending Veteran homelessness by the end of 2016? (limit 1000 characters)

The Continuum engages with every veteran's outreach agency in the Continuum to ensure that every homeless veteran in the community can access the coordinated entry and assessment process. A VA representative, a non-profit called Homeless Veteran's Fellowship, a veterans service specialist from DWS, the American Red Cross, and a local Vet Center representative all engage with CoC administration to ensure that their clients are receiving services. The Assistant Planner does special outreach with community veteran councils once a month to ensure that they have adequate updates on housing resources. She also coordinates with the County Veteran's Service coordinator to engage with different groups who develop or are interested in housing services to open up units for vets. Although none of these units have been obtained, each new low income housing tax project in Continuum boundaries (five) have at least one veteran set-a-side to homeless veterans.

4A. Accessing Mainstream Benefits

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

4A-2. Based on the CoC's FY 2016 new and renewal project applications, what percentage of projects have demonstrated they are assisting project participants to obtain mainstream benefits? This includes all of the following within each project: transportation assistance, use of a single application, annual follow-ups with participants, and SOAR-trained staff technical assistance to obtain SSI/SSDI?

FY 2016 Assistance with Mainstream Benefits

| | |
|---|------|
| Total number of project applications in the FY 2016 competition (new and renewal): | 8 |
| Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 2a, 2b and 2c on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A). | 8 |
| Percentage of renewal and new project applications in the FY 2016 competition that have demonstrated assistance to project participants to obtain mainstream benefits: | 100% |

4A-3. List the organizations (public, private, non-profit and other) that you collaborate with to facilitate health insurance enrollment, (e.g., Medicaid, Medicare, Affordable Care Act options) for program participants. For each organization you partner with, detail the specific outcomes resulting from the partnership in the establishment of benefits. (limit 1000 characters)

Two local health care organizations are instrumental in facilitating health insurance enrollment for project participants. Mountainlands Community Health Center/Community Health Connect has licensed enrollment specialists available to help individuals obtain affordable health insurance (Medicaid, CHIP, and the Health Insurance Marketplace). They have enrolled over one hundred homeless persons once they opened. Mountainlands Community Health Center opened the Mountainlands East Bay Health Center in September 2015. This Health Center provides primary healthcare services for homeless persons. The Clinic is

co-located at the Food and Care Coalition (soup kitchen/shelter/transitional facility). Several hundred homeless persons have received health care since it has been opened. Also, the CoC co-sponsored a training for CoC case managers with Community Health Connect about Affordable Care Act options. These case managers took materials from this training to their clients.

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

| | |
|---|-------------------------------------|
| Educational materials: | <input checked="" type="checkbox"/> |
| In-Person Trainings: | <input checked="" type="checkbox"/> |
| Transportation to medical appointments: | <input checked="" type="checkbox"/> |
| East Bay Health Center | <input checked="" type="checkbox"/> |
| | <input type="checkbox"/> |
| | <input type="checkbox"/> |
| Not Applicable or None: | <input type="checkbox"/> |

4B. Additional Policies

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4B-1. Based on the CoCs FY 2016 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH), and SSO (non-Coordinated Entry) projects in the CoC are low barrier?

FY 2016 Low Barrier Designation

| | |
|--|------|
| Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2016 competition (new and renewal): | 8 |
| Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2016 competition: | 8 |
| Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2016 competition that will be designated as "low barrier": | 100% |

4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2016 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

FY 2016 Projects Housing First Designation

| | |
|---|-----|
| Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2016 competition (new and renewal): | 8 |
| Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2016 competition: | 7 |
| Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2016 competition that will be designated as Housing First: | 88% |

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

| | |
|--------------------------------|-------------------------------------|
| Direct outreach and marketing: | <input checked="" type="checkbox"/> |
|--------------------------------|-------------------------------------|

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

4B-4. Compare the number of RRH units available to serve populations from the 2015 and 2016 HIC.

| | 2015 | 2016 | Difference |
|--|------|------|------------|
| RRH units available to serve all populations in the HIC: | 6 | 42 | 36 |

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

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

Not applicable.

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

4B-7a. If "Yes", to question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons

defined as homeless in accordance with 24 CFR 578.89. Description must include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)

Not applicable.

4B-8. Has the project been affected by a major disaster, as declared by the President Obama under Title IV of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended (Public Law 93-288) in the 12 months prior to the opening of the FY 2016 CoC Program Competition? No

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

Not applicable.

4B-9. Did the CoC or any of its CoC program recipients/subrecipients request technical assistance from HUD since the submission of the FY 2015 application? This response does not affect the scoring of this application. Yes

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

This response does not affect the scoring of this application.

| | |
|--------------------------------------|-------------------------------------|
| CoC Governance: | <input type="checkbox"/> |
| CoC Systems Performance Measurement: | <input checked="" type="checkbox"/> |
| Coordinated Entry: | <input type="checkbox"/> |
| Data reporting and data analysis: | <input checked="" type="checkbox"/> |
| HMIS: | <input type="checkbox"/> |

| | |
|---|-------------------------------------|
| Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth: | <input type="checkbox"/> |
| Maximizing the use of mainstream resources: | <input type="checkbox"/> |
| Retooling transitional housing: | <input checked="" type="checkbox"/> |
| Rapid re-housing: | <input checked="" type="checkbox"/> |
| Under-performing program recipient, subrecipient or project: | <input type="checkbox"/> |
| Esnaps technical difficulties, eLOCCS draws | <input checked="" type="checkbox"/> |
| Not applicable: | <input type="checkbox"/> |

4B-9b. Indicate the type(s) of Technical Assistance that was provided, using the categories listed in 4B-9a, provide the month and year the CoC Program recipient or sub-recipient received the assistance and the value of the Technical Assistance to the CoC/recipient/sub recipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.

| Type of Technical Assistance Received | Date Received | Rate the Value of the Technical Assistance |
|---------------------------------------|---------------|--|
| RRH project tech submission | 08/02/2016 | 5 |
| eLOCCS tech issues | 07/01/2016 | 5 |
| TH question | 02/01/2016 | 5 |
| APR and reporting | 04/01/2016 | 5 |
| CoC Systems Performance | 06/01/2016 | 5 |

Attachment Details

Document Description: CoC notification to agencies re project funding reduction

Attachment Details

Document Description: Posting of Cons Appl and Project List

Attachment Details

Document Description: CoC RFP and Rating and Review documents

Attachment Details

Document Description: Public Posting of RFP and Procedure

Attachment Details

Document Description: CoC Reallocation Process

Attachment Details

Document Description: CoC Polices and Procedures

Attachment Details

Document Description: UHMIS Standard Pol and Procedures

Attachment Details

Document Description:

Attachment Details

Document Description: 2 PHAs Policies

Attachment Details

Document Description: UHMIS and CoC MOU

Attachment Details

Document Description: Priorities process

Attachment Details

Document Description:

Attachment Details

Document Description: HDX Sys Perf Report

Attachment Details

Document Description: Early Child Dev MOU

Attachment Details

Document Description:

Submission Summary

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

| Page | Last Updated |
|---------------------------|--------------------|
| 1A. Identification | 09/12/2016 |
| 1B. CoC Engagement | 09/12/2016 |
| 1C. Coordination | 09/12/2016 |
| FY2016 CoC Application | Page 59 09/12/2016 |

| | |
|--|-------------------|
| 1D. CoC Discharge Planning | 08/18/2016 |
| 1E. Coordinated Assessment | 09/07/2016 |
| 1F. Project Review | 09/12/2016 |
| 1G. Addressing Project Capacity | 09/01/2016 |
| 2A. HMIS Implementation | 09/02/2016 |
| 2B. HMIS Funding Sources | 09/02/2016 |
| 2C. HMIS Beds | 09/07/2016 |
| 2D. HMIS Data Quality | 09/02/2016 |
| 2E. Sheltered PIT | 09/07/2016 |
| 2F. Sheltered Data - Methods | 09/02/2016 |
| 2G. Sheltered Data - Quality | 09/02/2016 |
| 2H. Unsheltered PIT | 09/07/2016 |
| 2I. Unsheltered Data - Methods | 09/07/2016 |
| 2J. Unsheltered Data - Quality | 09/05/2016 |
| 3A. System Performance | 09/07/2016 |
| 3B. Objective 1 | 09/05/2016 |
| 3B. Objective 2 | 09/09/2016 |
| 3B. Objective 3 | 09/06/2016 |
| 4A. Benefits | 09/07/2016 |
| 4B. Additional Policies | 09/09/2016 |
| 4C. Attachments | 09/12/2016 |
| Submission Summary | No Input Required |