

## 4B. Attachments

**Instructions:**

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site:  
<https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource>

Document Type	Required?	Document Description	Date Attached
1C-5. PHA Administration Plan–Homeless Preference	No	Saugerties PHA Pr...	09/06/2018
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	1C-8	09/06/2018
1E-1. Objective Criteria–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes	1E-1	09/06/2018
1E-3. Public Posting CoC-Approved Consolidated Application	Yes		
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	1E-3 Public Posting	09/07/2018
1E-4. CoC's Reallocation Process	Yes	1E-4 Reallocation	09/06/2018
1E-5. Notifications Outside e-snaps–Projects Accepted	Yes	1E-5 Notification	09/06/2018
1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced	Yes	1E-5 Notification...	09/06/2018
1E-5. Public Posting–Local Competition Deadline	Yes	1E-5 Public Posting	09/07/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	2A-1 HMIS MOU	09/06/2018
2A-2. HMIS–Policies and Procedures Manual	Yes	2A-2 Policies and...	09/06/2018
3A-6. HDX–2018 Competition Report	Yes	3A-6 HDX Competit...	09/06/2018
3B-2. Order of Priority–Written Standards	No	3B-2 Order of Pri...	09/11/2018

3B-5. Racial Disparities Summary	No	3B-5 Racial Dispa...	09/06/2018
4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
Other	No		
Other	No		
Other	No		



*ULSTER COUNTY  
CONTINUUM of CARE*

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**1C-5 PHA Homeless Preference  
Saugerties Housing Authority**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit

## APPLICATION PROCEDURES

### WAITING LIST

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

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

### PROGRAM PRIORITIES AND PREFERENCES

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

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



*ULSTER COUNTY*  
*CONTINUUM of CARE*

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**1C-8 Coordinated Entry**

**Coordinated Entry Tool**

**Coordinated Entry Client Authorization**

**Coordinated Entry Policies and Procedures**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit

# Ulster County Coordinated Entry Assessment and Intake

*INTAKE DATE / /	*BED/UNIT	PRIMARY WORKER
---------------------	-----------	----------------

*FIRST NAME	MIDDLE NAME	*LAST NAME (and Suffix)
-------------	-------------	-------------------------

*NAME DATA QUALITY <input type="checkbox"/> Full Name Reported <input type="checkbox"/> Partial Name, Street Name or Code Name Reported <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	ALIAS
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*SOCIAL SECURITY NUMBER <i>(enter "9" for any missing numbers in an Approximate or Partial SSN)</i> - -	*SSN DATA QUALITY <input type="checkbox"/> Full SSN Reported <input type="checkbox"/> Approximate or Partial SSN Reported <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected
---	---

*GENDER		
<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Trans Male(FTM)
<input type="checkbox"/> Trans Female(MTF)	<input type="checkbox"/> Gender Non-Conforming	
<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

*BIRTHDATE / /	*BIRTHDATE DATA QUALITY <input type="checkbox"/> Full DOB Reported <input type="checkbox"/> Approximate or Partial DOB Reported <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected
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*ETHNICITY		
<input type="checkbox"/> Hispanic	<input type="checkbox"/> Non-Hispanic	
<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

*RACE (choose all that apply)		
<input type="checkbox"/> American Indian/Native Alaskan	<input type="checkbox"/> Black	<input type="checkbox"/> White
<input type="checkbox"/> Asian	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	
<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

*VETERAN STATUS				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

### \*LIVING SITUATION

*Based on the client's living situation the night before project entry, record responses in **one (1) section** below, EITHER Homeless Situation, Institutional Situation OR Transitional/Permanent Situation.*

*If the client's living situation the night before project entry is unknown, fill in the section called Unknown*

#### HOMELESS SITUATIONS:

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

LENGTH OF STAY IN PREVIOUS PLACE				
<input type="checkbox"/> 1 night or less	<input type="checkbox"/> 2 to 6 nights	<input type="checkbox"/> 1 week or more, but less than 1 month	<input type="checkbox"/> 1 month or more, but less than 90 days	
<input type="checkbox"/> 90 days or more, but less than 1 year	<input type="checkbox"/> 1 year or longer	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	
<input type="checkbox"/> Data Not Collected				

APPROXIMATE DATE HOMELESSNESS STARTED: / /	NUMBER OF TIMES THE CLIENT HAS BEEN ON THE STREETS, IN ES, OR SH IN THE PAST THREE YEARS INCLUDING TODAY: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4+ <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected
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TOTAL NUMBER OF MONTHS HOMELESS ON THE STREETS, IN ES, OR SH IN LAST THREE YEARS:												
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11	<input type="checkbox"/> 12	<input type="checkbox"/> More than 12
<input type="checkbox"/> Client Doesn't Know			<input type="checkbox"/> Client Refused			<input type="checkbox"/> Data Not Collected						

OR

INSTITUTIONAL SITUATIONS:	
<input type="checkbox"/> Foster care home or foster care group home	<input type="checkbox"/> Hospital or other residential non-psychiatric medical facility
<input type="checkbox"/> Jail, prison or juvenile detention facility	<input type="checkbox"/> Long-term care facility or nursing home
<input type="checkbox"/> Psychiatric hospital or other psychiatric facility	<input type="checkbox"/> Substance abuse treatment facility or detox center
DID YOU STAY LESS THAN 90 DAYS	
<input type="checkbox"/> No <input type="checkbox"/> Yes (If Yes) On the night before did you stay on the streets, ES, or SH? <input type="checkbox"/> No <input type="checkbox"/> Yes	
IF YES TO 'ON THE NIGHT BEFORE DID YOU STAY ON THE STREETS, ES OR SH?' PROVIDE DETAILS OF PREVIOUS HOMELESSNESS:	
APPROXIMATE DATE HOMELESSNESS STARTED: ____/____/____	NUMBER OF TIMES THE CLIENT HAS BEEN ON THE STREETS, IN ES, OR SH IN THE PAST THREE YEARS INCLUDING TODAY: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4+ <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected
TOTAL NUMBER OF MONTHS HOMELESS ON THE STREETS, IN ES, OR SH IN LAST THREE YEARS:	
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> More than 12 <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	

OR

TRANSITIONAL AND PERMANENT HOUSING SITUATIONS:	
<input type="checkbox"/> Hotel or Motel paid for without emergency voucher	<input type="checkbox"/> Rental by client with VASH subsidy
<input type="checkbox"/> Owned by client, no ongoing subsidy	<input type="checkbox"/> Rental by client with other ongoing housing subsidy
<input type="checkbox"/> Owned by client WITH ongoing subsidy	<input type="checkbox"/> Residential project or halfway house with no homeless criteria
<input type="checkbox"/> Perm. Supportive housing for formerly homeless persons (CoC project, HUD legacy program, HOPWA)	<input type="checkbox"/> Staying or in a family member's room, apartment or house
<input type="checkbox"/> Rental by client, no ongoing subsidy	<input type="checkbox"/> Staying or in a friend's room, apartment or house
<input type="checkbox"/> Rental by client with GPD TIP subsidy	<input type="checkbox"/> Transitional housing for homeless persons (incl. homeless youth)
DID YOU STAY LESS THAN 7 DAYS?	
<input type="checkbox"/> No <input type="checkbox"/> Yes    (If Yes) On the night before did you stay on the streets, ES, or SH? <input type="checkbox"/> No <input type="checkbox"/> Yes	
IF YES TO 'ON THE NIGHT BEFORE DID YOU STAY ON THE STREETS, ES OR SH?' PROVIDE DETAILS OF PREVIOUS HOMELESSNESS:	
APPROXIMATE DATE HOMELESSNESS STARTED: ____/____/____	NUMBER OF TIMES THE CLIENT HAS BEEN ON THE STREETS, IN ES, OR SH IN THE PAST THREE YEARS INCLUDING TODAY: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4+ <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected
TOTAL NUMBER OF MONTHS HOMELESS ON THE STREETS, IN ES, OR SH IN LAST THREE YEARS:	
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> More than 12 <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused <input type="checkbox"/> Data Not Collected	

OR

UNKNOWN OPTIONS:		
<input type="checkbox"/> Client doesn't know	<input type="checkbox"/> Client refused	<input type="checkbox"/> Data not collected

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

<b>*COVERED BY HEALTH INSURANCE</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

<b>IF YES:</b>				
MEDICAID.....	<input type="checkbox"/> No	<input type="checkbox"/> Yes	MEDICARE.....	<input type="checkbox"/> No <input type="checkbox"/> Yes
State Children's Health Insurance Program .....	<input type="checkbox"/> No	<input type="checkbox"/> Yes	VA Medical Services.....	<input type="checkbox"/> No <input type="checkbox"/> Yes
Employer provided Health insurance.....	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Health ins. via COBRA.....	<input type="checkbox"/> No <input type="checkbox"/> Yes
Private Pay Health Insurance.....	<input type="checkbox"/> No	<input type="checkbox"/> Yes	State Health Ins. Adults .....	<input type="checkbox"/> No <input type="checkbox"/> Yes
Indian Health Services .....	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Other (if yes please specify _____)	<input type="checkbox"/> No <input type="checkbox"/> Yes

<b>*PHYSICAL DISABILITY</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected
<b>IF YES:</b>				
<b>Expected to substantially impair ability to live independently:</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

<b>*DEVELOPMENTAL DISABILITY</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected
<b>IF YES:</b>				
<b>Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently:</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

<b>*CHRONIC HEALTH CONDITION</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected
<b>IF YES:</b>				
<b>Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently:</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

<b>*HIV/AIDS</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected
<b>IF YES:</b>				
<b>Expected to substantially impair ability to live independently:</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

<b>*MENTAL HEALTH</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected
<b>IF YES:</b>				
<b>Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently:</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

<b>*SUBSTANCE ABUSE PROBLEM</b>				
<input type="checkbox"/> Alcohol Abuse	<input type="checkbox"/> Drug Abuse	<input type="checkbox"/> Both Alcohol and Drug Abuse		
<input type="checkbox"/> No	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected	
<b>IF YES:</b>				
<b>Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently:</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected

<b>*DOMESTIC ABUSE VICTIM/SURVIVOR</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected
<b>IF YES: WHEN EXPERIENCE OCCURRED</b>				
<input type="checkbox"/> Within the past 3 months	<input type="checkbox"/> 3 to 6 months ago	<input type="checkbox"/> From 6 to 12 months ago	<b>Are you currently fleeing?</b>	
<input type="checkbox"/> More than a year ago	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<input type="checkbox"/> Data Not Collected			<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused
		<input type="checkbox"/> Data Not Collected		

<b>*ZIP CODE OF LAST PERMANENT ADDRESS</b>				
_____				

<b>SERVICES SOUGHT</b>				
<input type="checkbox"/> Shelter/Housing	<input type="checkbox"/> Drug Treatment	<input type="checkbox"/> Mental Health Care		
<input type="checkbox"/> Medical Care	<input type="checkbox"/> Legal Aid - CRJS/Civil	<input type="checkbox"/> Legal Aid - Immigration		



ADDITIONAL INFORMATION				
<b>*PREGNANT</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected
<b>*INVOLVEMENT IN ADULT PROTECTIVE, CHILD PROTECTIVE, JUVENILE JUSTICE, FAMILY COURT, FOSTER CARE LAST 12 MONTHS</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected
<b>*HOMELESS DUE TO EVICTION</b> Provide documentation when possible				
<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Client Doesn't Know	<input type="checkbox"/> Client Refused	<input type="checkbox"/> Data Not Collected
<b>*Is the client able to live independently without supports?</b>				
<input type="checkbox"/> No	<input type="checkbox"/> Yes			

### CRHMIS INCLUSION DISCLOSURE

\_\_\_\_\_ participates in the CARES Regional Homeless Management Information System (CRHMIS). This means that we collect information about your household and input it into a secure and private database that allows us to keep track of that information to better assess and serve your needs.

The CRHMIS is dedicated to the privacy and safeguarding of the information collected and input into the HMIS database and does not publish identifying, client level data. For more information, please see our complete policy and procedure manual, which includes information on opting out of the HMIS, data ownership and a list of research and coordination projects that use HMIS information at [www.caresny.org/HMIS-policies](http://www.caresny.org/HMIS-policies). Please initial below to indicate that you have received this information.

Client Initials: \_\_\_\_\_

### CRHMIS Client Release of Information

To better assist in the coordination and provision of services, we are requesting your permission to share limited information about you with other homeless services providers. As the owner of your own information within the CRHMIS, you have the right to choose whether or not other users of the system can see any of your personal information and on what level. HIV/AIDS information, Domestic Violence information, Behavioral health (mental illness and substance abuse) and client notes are NOT shared through the HMIS. This consent will be in effect for a minimum of 36 months but may be revoked at any time.

**Please check the (1) box below which indicates the level at which you are willing to share your information with the homeless services coordinators and providers in the community;**

- 1) \_\_\_ I agree to share my name, gender and program enrollment history through the HMIS with other provider homeless services agencies.
- 2) \_\_\_ I agree to share my name, gender, program enrollment history, demographic, income and contact information through the HMIS with other partner homeless services agencies.
- 3) \_\_\_ I do NOT agree to share any of my information through the HMIS with other partner homeless services agencies.

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

\_\_\_\_\_  
Print name of Client, Guardian or Power of Attorney

\_\_\_\_\_  
Print name of Witness

\_\_\_\_\_  
Signature of Client, Guardian or Power of Attorney

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Date:

# Ulster County Continuum of Care

## Coordinated Entry Client Release of Information

To provide each consumer with options for housing Ulster County Continuum of Care is implementing a Coordinated Entry. The goal is to make it easier for you to access housing and services that best fit your needs and to reduce the amount of times you will need to share basic demographic information. We are requesting your permission to share limited information about you with the Coordinated Entry providers in Ulster County. As the owner of your own information within the Coordinated Entry System, you have the right to choose whether or not other service providers can see any of your personal information and the level of information that can be shared. HIV/AIDS information, Domestic Violence information, Behavioral health (mental illness and substance abuse) and client notes are NOT shared. This consent will be in effect for a minimum of 36 months but may be revoked at any time.

**Please check the (1) box below which indicates the level of your information that may be shared with the Coordinated Entry system in Ulster County**

\_\_\_\_\_ Yes

\_\_\_\_\_ No

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

\_\_\_\_\_  
Print name of Client, Guardian or Power of Attorney

\_\_\_\_\_  
Print name of Witness

\_\_\_\_\_  
Signature of Client, Guardian or Power of Attorney

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Date:

## Ce Wait List Vulnerability Scoring and Wait list Descriptions

1. \_\_\_\_ Age over 60 or 18 to 24 (1 point)
2. \_\_\_\_ Disabling Condition (1 point)
3. Household with Children (no scoring)
4. \_\_\_\_ HUD Chronically Homeless (1 point)
5. \_\_\_\_ Homeless for over one year (1 point)
6. \_\_\_\_ Multiple episodes of homelessness (1 point)
7. Gender (no scoring)
8. \_\_\_\_ Person is NOT able to Live Independently without supports (1 point)
9. \_\_\_\_ Pregnant household member (1 point)
10. \_\_\_\_ probation/parole/sex offender (1 point)
11. \_\_\_\_ Involvement with APS/CPS/Juvenile Justice/Family Court/Foster Care (1 point)
12. \_\_\_\_ Institutional Placement (1 point)
13. \_\_\_\_ Limitations in where the person can live due to disability/ or other (1 point)
14. \_\_\_\_ History of Domestic Violence (1 point)
15. \_\_\_\_ No income or only DSS assistance (1 point)
16. \_\_\_\_ Veteran Yes (1 point)
17. \_\_\_\_ Eviction (1 point) not on wait list

Total Score: \_\_\_\_\_

Total Possible Score: 16

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

Published: December 2017

Revised:

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## COORDINATED ENTRY SYSTEM

### 1 INTRODUCTION

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

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

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

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

### 2 ACCESS

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

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

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

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

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

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

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

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



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

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

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

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

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

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

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

### **3 ASSESSMENT**

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

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

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

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

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

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

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

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

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

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

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

#### **4 ASSESSMENT PROCESS**

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

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

The CE lead will have the following responsibilities:

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

#### **4.2 Provider Responsibilities**

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

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

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

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

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

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

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

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

## **5 PRIORITIZATION WRITTEN STANDARDS**

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

other Vulnerable Homeless Persons in Permanent Supportive Housing.

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

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

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

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

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

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

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

- Be literally homeless as defined by HUD
- Prepare a reasonable plan that shows how they are going to maintain housing once housing assistance ends, a budget, a financial worksheet and/or description of changes in

household circumstances that made them homeless.

- Providers will follow individual program guidelines to determine the minimum amount of rent and utility assistance and supportive services that a household will receive to stabilize their housing with the goal of moving toward self-sufficiency. If it becomes clear that the amount and duration of assistance are not enough, the household will be reassessed for placement on the CE waitlist for a more appropriate housing program.
- Efforts will be made to house households within 30 days of acceptance into the program.
- Providers are expected to remain engaged with the household from the first contact to program exit.

### **5.3 Transitional Housing**

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

#### Transitional Housing:

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

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

*The UCCOC prioritizes housing placement for chronically homeless for PSH placement. Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs that are Chronically Homeless. This is defined as an individual or family that is eligible for UCCOC Program-funded PSH who has experienced four or more episodes totaling 12 months in a three year period, or 12 consecutive months where they have been living in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs.*

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

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

## **6 REFERRALS**

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

UCCOC and ESG programs will use the coordinated entry process as the only referral source

from which to consider filling vacancies in housing or services. UCCOC funded projects will admit those that meet the eligibility guidelines for their programs as vacancies occur.

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

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

## **7 DATA MANAGEMENT**

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

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

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

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



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

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

## **8 DOMESTIC VIOLENCE**

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

## **9 EVALUATION**

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

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

## **10 GRIEVANCES**

- a. **Housing Program Grievances** are related to a participant's experiences with a homeless housing provider and will be directed back to the homeless program provider to follow the programs grievance policies and procedures.
- b. **Fair Housing Grievances** are related to discrimination.  
To file a formal fair housing complaint, contact:  
U.S. Dept. of Housing & Urban Development  
[http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/fair\\_housing\\_equal\\_opp](http://portal.hud.gov/hudportal/HUD?src=/program_offices/fair_housing_equal_opp)  
File a complaint online:  
[http://portal.hud.gov/hudportal/HUD?src=/topics/housing\\_discrimination](http://portal.hud.gov/hudportal/HUD?src=/topics/housing_discrimination)  
(206) 220-5170 (800.877.0246)  
TTY (206) 220-5185
- c. **Coordinated Entry Grievances**  
COORDINATED ENTRY GRIEVANCES are related to Coordinated Entry Policies and Procedures, and shall be directed to:  
The Continuum of Care Coordinator  
RUPCO, Inc  
301 Fair Street, Kingston, NY 12401  
P: (845) 331-9860 X219 F: (845) 331-9864

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

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

## **11 KEY TERMS**

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

- **Access Points** – Coordinated Entry Access Points are designated locations within the continuum where individuals or families go for intake and assessment of homeless prevention and housing services.
- **Admission** – Using authority to admit a client into a program
- **Assessment** – Assessment is the process used to reveal a client's eligibility, needs, barriers and strengths in order to provide appropriate housing and services.
- **Chronic Homelessness**- A chronically homeless individual is someone who has experienced homelessness for at least 12 consecutive months or longer, or who have experienced four or more episodes of homelessness during the last three years which totaled 12 months, and has a disability. A family with an adult member who meets this description would also be considered chronically homeless.
- **Coordinated Assessment** – All providers within the UCCOC using the same assessment tools to connect clients to services as a means for a coordinated entry system.
- **Coordinated Entry Committee** – The group responsible for implementation of the Coordinated Entry System. Members of the coordinated entry committee are UCCOC

members and represent organizations that provide housing or services to homeless individuals and families.

- **Coordinated Entry (CE) Lead** – The CE lead is responsible to update and maintain information on program vacancies/openings. This must be done at least monthly regardless of whether there are new openings to report. Regularly update and make current all programs eligibility guidelines and program contact information so staff can make the best referrals possible. Ensure that when a referral is made, staff confirms within two business days whether the referral is accepted, declined by provider, declined by client, or pending, or the provider is unable to contact the client. Bring problems and suggestions to the monthly coordinated entry and Assessment meeting. Oversee provision of homeless diversion, prevention and housing services for eligible clients. Ensure that all points of entry will use the same screening and assessment tool, data collection forms, policies on eligibility verification and referral/information-sharing systems.
- **Coordinated Entry** – A process developed to prioritize assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most can receive it in a timely manner, and that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs.
- **HEARTH** – The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 that includes Emergency Solutions Grant (ESG) and Continuum of Care (CoC) grants.
- **HMIS** – Homeless Management Information System; a centralized database designated to create an unduplicated accounting of homelessness that includes housing and services. Ulster County UCCOC uses CARES Regional HMIS, using the Awards software from Foothold Technology.
- **Homeless** - Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or a place not meant for human habitation immediately before entering that institution; (2) Individuals and families who will imminently lose their primary nighttime residence; (3) Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; or (4) Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.
- **Housing First** – is an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent **housing** without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements.
- **HUD** – The Department of Housing and Urban Development; the United States federal department that administers federal program dealing with homelessness. HUD oversees HEARTH-funded programs.
- **Intake** – The general process between the first point of contact and the initial screening for eligibility. This step involves primary assessment of needs, strengths, and resources to refer households into appropriate services
- **Outcome** – The result achieved from a specific activity or service; for coordinated entry, it is

the result attained in relation to housing stability.

- **Prevention** – An approach that focuses on homeless prevention by referring or providing services to households at risk of homelessness.
- **Rapid Re-housing** – Rapid re-housing is an intervention designed to help individuals and families quickly exit homelessness and return to permanent housing.
- **Referral** – The formal process of sending a consumer to another agency to provide services.
- **Screening** – Screening the process used to determine eligibility for housing and services at the initial point of contact with the coordinated entry system. Once screening determines eligibility, the intake and referral process follows.
- **Systems Change** – The purpose of system change is to implement practices that have shown to decrease the incidence and length of time in homelessness, with a long-term goal of reducing and ending homelessness.
- **Personalized Programs and Services** – Case management services that work to match appropriate services to the individual or family needs.
- **Verification** – The gathering and review of information to substantiate the applicants/client's situation and support program eligibility and priority determination.

## 12 CE Planning Committee

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

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

- Rhonda Garcia – PEOPLE Inc.
- Ashley Jendras – PEOPLE Inc.
- Michael Berg – Family of Woodstock
- Salvador Altamirano-Segura – Family of Woodstock
- Lisa Marie Fallon – RSS
- Linda McNiff – WestCOP
- Margaret Shlasko – Ulster County Mental Health
- Melissa Martinez – Institute for Family Health
- Katrina Middleton – Soldier On
- Michelle DeRose – Gateway Community Industries
- Rhonda Langton – Gateway Community Industries
- Sue McDonough – Ulster County Department of Social Services
- Sue Palmer – CARES, Inc.
- Allyson Thiessen – CARES, Inc.
- Kathy Germain – RUPCO, Inc.

- Bob Budreau – RUPCO, Inc.

For additional Information please contact:

**Continuum of Care Coordinator**

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

**Appendix A**

**Ulster County Continuum of Care**

**Coordinated Entry Client Release of Information**

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

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

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

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

\_\_\_\_\_  
 Print name of Client, Guardian or Power of Attorney

\_\_\_\_\_  
 Print name of Witness

\_\_\_\_\_  
 Signature of Client, Guardian or Power of Attorney

\_\_\_\_\_  
 Signature of Witness

\_\_\_\_\_  
 Date:

\_\_\_\_\_  
 Date:



*ULSTER COUNTY  
CONTINUUM of CARE*

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**1E-1: CoC Rating and Ranking Procedure**

**1. Summary of Selection Criteria for the Review and Ranking of CoC Projects, including Interview questions**

**2. Rank and Review Tool**

**a. Checklist**

**b. Rank and Review Tool**

**c. Data Attachments**

**3. New Project RFP (Reallocation and/or Bonus)**

**4. DV Bonus Project RFP**

**5. Evidence Supporting the Process Selected:  
NY-608 Kingston/Ulster CoC Rank and Review  
Process Procedures**

**1. Summary of Selection Criteria for the Review and Ranking of CoC Projects,  
Including Interview Questions**

**Ulster County CoC – NY-608**

**Summary of Selection Criteria for the Review, and Ranking of CoC Projects**

<b>Objective Criteria for Review, Rating, Ranking and Selection</b>	
<b>Specific Criteria</b>	<b>Question Addressing Criteria</b>
Cost effectiveness	A7
Utilization Rate	B2, B2.A, B2B
Performance Data	B2, B3, B4, B8, B9, C1, C2, C3, C4
Housing Type	A4, B1
Data Quality	C4.1, C4.2, C4.3, C4.4
Housing First Approach	A8 2
Financial Drawdown Rates	B8, B9
Type of Population Served	B1, B3, B7

<b>Objective Criteria Related to Achieving Positive Housing Outcomes</b>	
<b>Specific Criteria</b>	<b>Question Addressing Criteria</b>
Positive Housing Outcomes Housing Stability	C1,
Exits to Homeless	C2
DV Only Interview Question	See Attached

<b>Specific Method/Criteria for Evaluating Projects Submitted by Victim Service Providers</b>	
<b>Specific Criteria</b>	<b>Question Addressing Criteria</b>
HMIS Attachments 1-5	The Continuum allows DV providers to provide data from a comparable database since they are not in HMIS.
Interview Questions	See Attached



## **Rank & Review Interview Agenda / Additional Questions**

1. Please provide a brief verbal summary of your program. How many clients are currently enrolled? What support services does your agency provide to clients? What is the average length of time clients stay in the program?
2. HUD defines 'Move on Strategy' as how recipients move current CoC Program clients (who no longer require intensive services) from CoC Program funded-PSH beds to other housing assistance programs (including, but not limited to Housing Choice Vouchers and Public Housing) to free up CoC Program funded-PSH beds to be used for persons experiencing homelessness. Does your agency with local agencies to implement 'move on strategies'?
3. Are there any areas of the application you would like to discuss?
4. **REQUIRED - Domestic Violence Projects ONLY:**  
We realize that a DV program may define/consider a positive outcome differently than a non-DV permanent supportive housing program. That said, how do you feel your agency contributes to the level of housing stability across the CoC system?

**2. Renewal Rank and Review Tool**

**a. checklist**

**b. Rank and Review Tool**

**c. Data Attachments**

## 2018 Ulster Rank and Review Attachments Checklist

Agency: \_\_\_\_\_

Project: \_\_\_\_\_

Attachments must be included with the submission of the Rank and Review Application for it to be considered complete.

- Q3B Project Application
- Q5 Project Application
- Q6 APR
- Q7 APR
- Q9 APR

N/A Copies of last three (3) Loccs drawdowns were provided at project monitoring it is not necessary to reattach.

Received: \_\_\_\_\_ at \_\_:\_\_ am/pm

# 2018 Ulster County CoC – Project Rank & Review Application

Please generate a **CoC CALENDAR YEAR 2017 (CY17: 1/1/17 - 12/31/17) APR** from Foothold or comparable HMIS to complete Part I of this application.

## **A. PROJECT INFORMATION (15 Bonus Points)**

**A1. Organization Name:**

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**A2. Project Name:**

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**A3. Application Contact Person:**

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**A4. Project Type:**                      PSH                      RRH                      TH

**A5. FY17 Proposed Total Funding Request:** \$ \_\_\_\_\_

Leasing                      \$ \_\_\_\_\_

Rental Assistance        \$ \_\_\_\_\_

Supportive Services     \$ \_\_\_\_\_

Operations                      \$ \_\_\_\_\_

Admin                              \$ \_\_\_\_\_

**A6. Permanent Housing Programs: Number of Contracted Beds/Units/Vouchers** \_\_\_\_\_

**A7. What is the cost per bed (divide the number of proposed beds by the total HUD Request):**

\_\_\_\_\_

## **A8. LOCAL CONTINUUM PRIORITIES: (15 Bonus Points)**

1. **Increase Dedicated Chronic Beds:** Applicants that commit to increasing the number of dedicated chronic homeless beds will receive (5 bonus points)

Yes \_\_\_ No \_\_\_

2. **Housing First:** In the 2017 application all projects stated they were utilizing the Housing First Model. What was your project score on the HUD Housing First Assessment Tool that was completed during project monitoring? \_\_\_\_\_

(1-150% = 0 pts; 150-200% = 10 pts)

# 2018 Ulster CoC – Project Rank & Review Application

## **B. CONTINUUM PRIORITIES AND SYSTEM IMPACT (100 points)**

### **B1. Persons Served: (5 points)**

- 1a. Number of Contracted Beds (contract persons served) \_\_\_\_\_  
 1b Total number of persons served CY17 APR \_\_\_\_\_  
 1c. Did the project serve more persons than stated number on Contract?  
 Yes (5 points)  No (0 points)

### **B2. Utilization: (10 points)**

	Projected persons served during average PIT (Project Application Q5)	Actual number served during PIT	
		Household	Persons
<b>January</b>	_____ Households  _____ Persons		
<b>April</b>			
<b>July</b>			
<b>October</b>			
<b>Average</b>			

**Households:** Average Actual \_\_\_\_\_ / Projected \_\_\_\_\_ = **Utilization** \_\_\_\_\_

**Persons:** Average Actual \_\_\_\_\_ / Projected \_\_\_\_\_ = **Utilization** \_\_\_\_\_

**B2a.** Did your project meet its projected number of households or persons served during the year?  Yes (5 pts)  No (0 pts)

**B2b.** The Continuum prioritizes projects that best utilize resources. Did your project have a utilization rate of more than 100%?  Yes (5 pts)  No (0 pts)

**B3. A. HMIS Attachment 1: Effect on Chronic Homeless:** To show the impact of your project on ending chronic homelessness (CH) in the CoC, refer to Attachment 1 and note below the percentage of CH beds it contributes. \_\_\_\_\_  
 (70-100% = 15 pts; 20-69% = 12 pts; 1-20% = 8 pts; 0% = 0 pts)

**B3. B. HMIS Attachment 2:** During CY17, CoC funded projects served a total of 21 chronically homeless individuals. To show impact of this project on ending chronic homelessness, refer to Attachment 2 to note the following:  
 The project's percentage of Chronically Homeless persons served in CY17: \_\_\_\_\_  
 (30-100% = 15 pts; 10-29% = 12 pts; 1-9% = 8 pts; 0% = 0 pts)

**B4.** Historically, has your agency sent and received referrals from all of the following: HUD/VA; Emergency Solutions Grant (ESG); and Solutions to End Homeless Program (STEHP) funded programs:  
 Yes \_\_\_ No \_\_\_ (5 points)

## 2018 Ulster CoC – Project Rank & Review Application

**B5.** Please describe how your agency is meeting the needs of clients facing various cultural barriers (e.g., language, LGBTQ, mental health) in 250 words or less. (0-10 pts)

**B6.** Priority Populations: (5 points for serving priority population as noted on the HIC)

Chronic \_\_\_\_\_

Family \_\_\_\_\_

Youth ages 18-24 \_\_\_\_\_

**B7.** UCCOC adopted a local strategic plan in 2017. Please review the attached Strategic Plan Strategy and Action Plan document. Provide two Strategies and Action steps consistent with your program using the example below. **(10 points)**

List below by # of Goal, # of Strategy, # of Action Step

**Example:** I am proposing a project to serve homeless families, Goal #3 one of the strategies that will be furthered by this project would be Strategy #3- increasing the amount of prevention resources; Action Step #2- this project will leverage funds from a private source for prevention funding (ie... United Way)

1. Strategy # \_\_\_\_\_3\_\_\_\_\_ Action Step # 2

1. Goal # \_\_\_\_\_ Strategy # \_\_\_\_\_ Action Step # \_\_\_\_\_

2. Goal# \_\_\_\_\_ Strategy# \_\_\_\_\_ Action Step # \_\_\_\_\_

**B8.** Complete the table below based on information from the project's most recently completed contract. (20 points)

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

**B9.** Did the project draw down CoC funds for the project from ELOCCS at least quarterly in the most recently ended contract? (Please attach copies of last three drawdowns.)

- Yes 5 pts     No 0 pts

# 2018 Ulster CoC – Project Rank & Review Application

## **C. SYSTEM PERFORMANCE OUTCOMES (Total 100 Points)**

### **C1. HMIS Attachment 3: Positive Outcomes:**

Permanent Housing projects: During CY17, there were 201 persons with positive outcomes noted across all CoC PH (PSH/RRH/TH) programs. (An exit is positive if an individual is a stayer or exited to a PH destination.) To show the effect of this project on housing stability, refer to Attachment 3 and note the percentage of this project: \_\_\_\_\_%

100% = 25 pts; 95-85% = 15 pts; 84-74% = 5pts; < 74% = 0pts

### **C2. HMIS Attachment 4: Exits to Homelessness:**

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

0-49%=25, >49%=0

### **C3. HMIS Attachment 5: Effect on Income Growth:**

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

>70% = 25 pts; 69-50%-= 20 pts; 49-30% =15; 29-10%-= 10 pts; <10% = 0 pts

**C4. Data Quality & Completeness:** Based on your CY17 APR Q6: Each worth 5 pts; 5 additional points if All are No (25 pts possible)

1. Is there an error rate of more than 5% of project participants' Personally Identifying Information?

**Yes No**

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

**Yes No**

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

**Yes No**

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

**Yes No**

Rank and Review 608  
Attachment 1 - Dedicated CH Beds

Proj. Type	Organization Name	Project Name	CH Dedicated Beds	Percent of System Impact
PSH	Family of Woodstock, Inc.	HUD S&C Families FY2017	0	0%
PSH	Family of Woodstock, Inc.	HUD S&C SRO FY2017	14	67%
PSH	Family of Woodstock, Inc.	HUD SHP Families #2 FY2017	0	0%
PSH	Family of Woodstock, Inc.	HUD SHP Families FY 2017	0	0%
PSH	Family of Woodstock, Inc.	Rapid Re-Housing Families FY2017	0	0%
PSH	Family of Woodstock, Inc.	Rapid Re-Housing for Domestic Violence Survivors	0	0%
PSH	Gateway Community Industries, Inc.	WWC FY 2017-Renewal	0	0%
PSH	PEOPLE, Inc.	PEOPLE Home Again Project FY2017	7	33%
PSH	Rehabilitation Support Services, Inc	Oasas Shelter Plus Care 2017	0	0%
TH	Family of Woodstock, Inc.	HUD MidWay FY 2017	0	0%
<b>Total</b>			<b>21</b>	<b>100%</b>



Rank and Review 608  
Attachment 2 - CH Served

Proj. Type	Organization Name	Project Name	CH Served	Percent of System Impact
PSH	Family of Woodstock, Inc.	HUD S&C Families FY2017	4	19%
PSH	Family of Woodstock, Inc.	HUD S&C SRO FY2017	3	14%
PSH	Family of Woodstock, Inc.	HUD SHP Families #2 FY2017	2	10%
PSH	Family of Woodstock, Inc.	HUD SHP Families FY 2017	2	10%
PSH	Family of Woodstock, Inc.	Rapid Re-Housing Families FY2017	0	0%
PSH	Family of Woodstock, Inc.	Rapid Re-Housing for Domestic Violence Survivors	0	0%
PSH	Gateway Community Industries, Inc.	WWC FY 2017-Renewal	0	0%
PSH	PEOPLE, Inc.	PEOPLE Home Again Project FY2017	8	38%
PSH	Rehabilitation Support Services, Inc	Oasas Shelter Plus Care 2017	2	10%
TH	Family of Woodstock, Inc.	HUD MidWay FY 2017	0	0%
<b>Total</b>			21	100%

Rank and Review 608  
Attachment 3 - Positive Outcomes -PSH

Proj. Type	Organization Name	Project Name	Total Leavers	Positive Outcomes	Percent of Impact
PSH	Family of Woodstock, Inc.	HUD S&C Families FY2017	55	53	96%
PSH	Family of Woodstock, Inc.	HUD S&C SRO FY2017	48	39	81%
PSH	Family of Woodstock, Inc.	HUD SHP Families #2 FY2017	24	20	83%
PSH	Family of Woodstock, Inc.	HUD SHP Families FY 2017	28	25	89%
PSH	Rehabilitation Support Services, Inc	Oasas Shelter Plus Care 2017	32	26	81%
PSH	PEOPLE, Inc.	PEOPLE Home Again Project FY2017	9	8	89%
PSH	Family of Woodstock, Inc.	Rapid Re-Housing Families FY2017 *	0	0	0%
PSH	Family of Woodstock, Inc.	Rapid Re-Housing for Domestic Violence Survivors *	0	0	0%
PSH	Gateway Community Industries, Inc.	WWC FY 2017-Renewal	8	8	100%
<b>Total</b>			<b>204</b>	<b>179</b>	

9

Attachment 3 - Positive Outcomes -TH

Proj. Type	Organization Name	Project Name	Total Leavers	Positive Outcomes	Percent of Impact
TH	Family of Woodstock, Inc.	HUD MidWay FY 2017	28	22	79%
<b>Total</b>			<b>28</b>	<b>22</b>	

1

\* This program has not operated for a full year

Rank and Review 608  
Attachment 4 - Returns to Homelessness

Proj. Type	Organization Name	Project Name	Returns to Homelessness	Percent of System Impact
PSH	Family of Woodstock, Inc.	HUD S&C Families FY2017	2	50%
PSH	Family of Woodstock, Inc.	HUD S&C SRO FY2017	0	0%
PSH	Family of Woodstock, Inc.	HUD SHP Families #2 FY2017	0	0%
PSH	Family of Woodstock, Inc.	HUD SHP Families FY 2017	2	50%
PSH	Family of Woodstock, Inc.	Rapid Re-Housing Families FY2017 *	0	0%
PSH	Family of Woodstock, Inc.	Rapid Re-Housing for Domestic Violence Survivors *	0	0%
PSH	Gateway Community Industries, Inc.	WWC FY 2017-Renewal	0	0%
PSH	PEOPLE, Inc.	PEOPLE Home Again Project FY2017	0	0%
PSH	Rehabilitation Support Services, Inc	Oasas Shelter Plus Care 2017	0	0%
TH	Family of Woodstock, Inc.	HUD MidWay FY 2017	0	0%
10		<b>Total</b>	4	100%

\* This program has not operated for a full year

Rank and Review 608  
Attachment 5 - Total Income Growth

Proj. Type	Organization Name	Project Name	All Adults	Adults with Income Growth	Percent of Impact
PSH	Family of Woodstock, Inc.	HUD S&C Families FY2017	47	5	11%
PSH	Family of Woodstock, Inc.	HUD S&C SRO FY2017	37	10	27%
PSH	Family of Woodstock, Inc.	HUD SHP Families #2 FY2017	17	3	18%
PSH	Family of Woodstock, Inc.	HUD SHP Families FY 2017	21	5	24%
PSH	Family of Woodstock, Inc.	Rapid Re-Housing Families FY2017 *	0	0	0%
PSH	Family of Woodstock, Inc.	Rapid Re-Housing for Domestic Violence Survivors *	0	0	0%
PSH	Gateway Community Industries, Inc.	WWC FY 2017-Renewal	8	1	13%
PSH	PEOPLE, Inc.	PEOPLE Home Again Project FY2017	7	3	43%
PSH	Rehabilitation Support Services, Inc	Oasas Shelter Plus Care 2017	17	12	71%
TH	Family of Woodstock, Inc.	HUD MidWay FY 2017	16	4	25%
<b>Total</b>			170	43	

10

\* This program has not operated for a full year

**3. New Project RFP (Reallocation and/or Bonus Project)**

# Ulster County Continuum of Care (UCCOC) New Project RFP 2018 (Reallocation and/or Bonus Projects)

Application must not be longer than three (3) pages

Applicant/Agency Name: \_\_\_\_\_

Agency Point of Contact: \_\_\_\_\_

Proposed Project Name: \_\_\_\_\_

1. Does your agency participate on Continuum of Care committees or membership?  
 Yes – 10 points  No – 0 points
  - a. If no, what is the agency's current involvement with the UCCOC?
2. Is the agency applying a current CoC funded grantee?  Yes – 5 points  No – 10 points
  - b. If yes, are there any unresolved monitoring or audit findings from HUD or the CoC?  Yes – 0 points  No – 5 points
3. Please provide a detailed description of the agency's experience in administering projects dedicated to serving an underserved population. Please specify the name of current or past programs and note the funding sources. (10 points) (250 word limit)
4. Please provide a project *description* AND *budget* that addresses the entire scope your project including the target population you will serve. (250 words max)
5. Does your project serve Youth ages 18-24, Families, or Chronic Homeless\*?  
*Chronic Homeless Definition: chronically homeless person as "either (1) an unaccompanied homeless individual with a disabling condition who has been continuously homeless for a year or more, OR (2) an unaccompanied individual with a disabling condition who has had at least four episodes of homelessness in 12 months.*  
Yes \_\_\_\_ (10 points) No \_\_\_\_ (0 points)
6. Is 80% or more of your Project budget dedicated to housing and operations?  
Yes \_\_\_\_ (10 points) No \_\_\_\_ (0 points)

**Ulster County Continuum of Care (UCCOC)  
New Project RFP 2018  
(Reallocation and/or Bonus Projects)**

7. Will the project follow the housing first philosophy? Key indicators are listed below. Those project that answer yes to a, b, and c below will receive 15 points.

7 a \_\_\_ **The proposed project quickly move participants into housing within 45 days of intake?**

7 b \_\_\_ **The project does not screen out participants based upon the following criteria:** having little or no income, active history of substance abuse, criminal record with the exception for state mandated restrictions, or history of victimization.

7c. \_\_\_ **The participants are not terminated from the program for the following reasons:** failure to participate in services, failure to make progress on a service plan, or loss of income or failure to improve income.

8. Will the project be able to begin within 12 months?  Yes- 10 points  No – 0 points

9. UCCOC adopted a local strategic plan in 2017. Please review the attached Strategic Plan Strategy and Action Plan document. Provide two Strategies and Action steps consistent with your program using the example below. **(10 points)** List below by # of Goal, # of Strategy, # of Action Step

Example: I am proposing a project to serve homeless families, Goal #3 one of the strategies that will be furthered by this project would be Strategy #3- increasing the amount of prevention resources; Action Step #2- this project will leverage funds from a private source for prevention funding (ie... United Way)

1. Goal#   3   Strategy #   3   Action Step #   2  

1. Goal #        Strategy #            Action Step #       

2. Goal #        Strategy #            Action Step #       

10. Document potential sources that will allow the program to meet HUD's match requirement (25 percent match). 10 points if match requirements are met

#### **4. DV Bonus Project RFP**



# Ulster County Continuum of Care DV Bonus Project RFP 2018

Application may not exceed three (3) pages

1. Applicant/Agency Name: \_\_\_\_\_
2. Agency Point of Contact: \_\_\_\_\_
3. Proposed Project Name: \_\_\_\_\_
4. Is the applicant a current member of the Ulster County Continuum of Care (CoC)?   
**Yes - 20 points**  **No - 0 points**
  - a. If no, what is the agency's current involvement with the Ulster County CoC?
5. a. Is the agency applying as a current CoC funded grantee?  **Yes - 5 pts**  **No - 10 pts**
  - b. If yes, are there any unresolved monitoring or audit findings from HUD or the CoC?  **Yes - 0 points**  **No - 3 points**
6. Please provide a detailed description of the agency's experience in administering projects dedicated to serving survivors of domestic violence, dating violence and stalking. Please specify the name of current or past programs and note the funding sources **(10 points)**
  - 3 points for past experience serving a domestic violence survivor population
  - 3 points for four or more years serving a domestic violence survivor population
  - 3 points for serving more than 25 households in a calendar year (CY)
  - 1 point for listing funding sources
7. Please provide a *description AND budget* that addresses the entire scope of your project. Please include an outreach plan to the targeted population. Specify whether the project will be a Rapid Rehousing (PH-RRH) project, Joint TH and PH-RRH component project or a SSO project for Coordinated Entry (SSO-CE) designed to implement policies, procedures and practices to equip the CoC's Coordinated Entry system to better meet the needs of survivors of domestic violence, dating violence, sexual assault or stalking (e.g., policies and procedures that are trauma informed, client centered or to improve the referral process between the CoC's Coordinated Entry and victim service providers Coordinated Entry systems where they are different). Please provide details about Housing First aspects of the project. **(0 - 25 points)**

# Ulster County Continuum of Care DV Bonus Project RFP 2018

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

8. Eligible DV bonus project must follow a Housing First approach. Housing First is a recovery-oriented approach to ending homelessness which allows for rapidly housing individuals without screening out or terminating based on any of criteria listed below. Does the proposed project screen out or terminate based on any of the following?

	<i>Any Yes - 0 pts</i>	<i>All No - 15 pts</i>
	<b>Yes</b>	<b>No</b>
Having too little or no income	<input type="checkbox"/>	<input type="checkbox"/>
Active or history of substance abuse	<input type="checkbox"/>	<input type="checkbox"/>
Criminal record with exceptions for state-mandated restrictions	<input type="checkbox"/>	<input type="checkbox"/>
History of domestic violence	<input type="checkbox"/>	<input type="checkbox"/>
Failure to participate in supportive services	<input type="checkbox"/>	<input type="checkbox"/>
Failure to make progress on a service plan	<input type="checkbox"/>	<input type="checkbox"/>
Loss of income or failure to improve income	<input type="checkbox"/>	<input type="checkbox"/>
Being a victim of domestic violence	<input type="checkbox"/>	<input type="checkbox"/>
Any other activity not covered in a lease agreement typically found in the project's geographic area.	<input type="checkbox"/>	<input type="checkbox"/>

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

10. Is the project an existing project that is currently not dedicated to serving survivors of domestic violence, dating violence, sexual assault or stalking (who meet the definition of homeless) being expanded to dedicate additional units, beds, persons served or services provided to this domestic violence population.                       **Yes – 3 pts**                       **No**

11. Is your agency an active participant in the Ulster County CoC Coordinated Entry program?  
 **Yes – 3.5 pts**     **No - 0 pts**

If no, is your agency willing to become an active participant in the Ulster County CoC Coordinated Entry program?  **Yes – 3.5 pts**     **No - 0 pts**

**5. Evidence Supporting the Process Selected: NY-608 Kingston/Ulster CoC Rank and Review Process Procedures**



# *ULSTER COUNTY CONTINUUM of CARE*

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## 2018 Rank and Review Process

### **UCCOC Ranking Procedure and Process**

#### **Annual Rating and Ranking Procedure of the CoC Project Ranking:**

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

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

Deadlines for applications will be based each year on the Notice of Funding Allocation (NOFA). Each NEW and RENEWAL project sponsor shall submit the appropriate application along with the required documents in a single electronic submission in esnaps by the identified due date by 3 pm. Late applications received within 48 hours of the due date will receive a 15 point score reduction. Late applications received after 48 hours may not be scored. The CA will review all applications for completeness and prepare the applications for Ranking committee review. Applications will only be accepted from Local Continua which are members of the UCCOC.

In order to better track progress on individual organizational projects in relation to overall performance goals established by the UCCOC Board, the Evaluation Subcommittee will review projects for expenditures and progress at 6-month intervals.

#### **Ranking Process**

The scoring tool used to review and rank projects will be revised annually based upon HUD requirements and recommendations from the Ranking Committee with input from CoC applicants.

The Ranking Committee members are identified based upon the procedures listed above. The CA prepares the renewal application packet used for ranking and provides instructions and training for the applicants. Applicants are offered Technical Assistance from the CA in completing their packets to ensure accuracy.

The CA prepares the information for the Ranking Committee including a scoring tool. The Ranking Committee receives the information at least 7 days before the ranking meeting.

The Ranking Committee reviews all renewal applications and are offered an opportunity to interview applicants before final scoring is completed. The Ranking Committee scores the applications and the CA summarizes the results and process and sends back to committee members for approval.

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



## *ULSTER COUNTY CONTINUUM of CARE*

The Ranking Committee reports the results of the scoring to the Board that approves the recommendations.

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After the scoring is finalized, the CA meets with each applicant to review their scoring and notifies in writing any applicant that is rejected from the CoC annual submission.

Adopted April 2014

### **UCCOC Ranking Appeal Process**

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

The process consists of the following steps:

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

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

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

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

Adopted June 2015

### **Written Standards for Determining Assistance**

The UCCOC's open process for determining assistance is part of its governance charter under Section 1.6 Guiding Principles. These principles encourage an inclusive structure that encourages a full range of opinions and project applications from individuals, members or entities with knowledge of homelessness or an interest in preventing or ending homelessness. There is an open and transparent process that guides the UCCOC in announcing both renewal and new project availability. The UCCOC undertakes a

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



## *ULSTER COUNTY CONTINUUM of CARE*

comprehensive review of projects by applying approved scoring criteria and selection priorities when ranking and rating projects for funding, including the review of transitional housing for cost-effectiveness and performance.

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

### **Reallocation Process**

Once the Ranking and Performance Committee completes the scoring of renewal programs and meets with the project applicants to review their scores, they compile the final ranking scores that are sent to the board for their review and approval. The committee report will include additional technical assistance suggestions that can improve the underperforming programs(s). If this is the case, the application is included for renewal and technical assistance is arranged and follow up reviews are scheduled at quarterly intervals. If the program continues to be underperforming after a year of assistance, the program is reviewed by the board to determine if the project should be considered for reallocation the following year. If the Ranking and Performance Committee determines through objective evidence that any underperforming project(s) will not benefit from additional assistance, they will schedule a meeting with the applicant and the board to discuss the possibility of reallocation. If a project is recommended for reallocation, the agency is notified as soon as possible but at least 14 days prior to the due date of the CoC application to HUD.

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

When the CoC is able to request project applications from the community due to availability of funds through bonuses, pro-rata, or reallocation, the CoC will advertise in the local newspaper and distribute to its membership a public notice requesting application. The CoC's priorities and details of eligible applications, as defined by the current year's NOFA, will be reviewed with the board and membership. The due date for submission to the CoC will be at least 30 days prior to the due date of the CoC Collaborative Application. Any applicant interested in applying for new or bonus funds must submit a letter of intent stating the population it intends to serve, the number of beds and/or units, and a budget submitted by the posted submission date. Additional applications will be submitted in esnaps within one week of e-mail notification from CA to proceed. New and reallocated projects will have their own scoring criteria based upon local priorities and needs. New and bonus applications will be scored separately from renewal projects. If there is no availability of funds for new applications through bonuses, pro-rata or reallocation, the CoC will post a public notice that it is not accepting new applications for the current CoC Application.

### **Ranking of Projects for the Collaborative Application Project Listing**

The Ranking and Performance Committee will rank both renewal and new projects selected to be included in the CoC Collaborative Application using their percentage score. The Ranking and Performance Committee may apply bonus points based on HUD's priorities as articulated in the NOFA.

Scoring results are delivered to applicants with a reminder about the appeal process.

- Applications which do not meet the threshold requirements will not be included in the Priority List in Exhibit 1, and therefore will not be forwarded to HUD for consideration.

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



# *ULSTER COUNTY CONTINUUM of CARE*

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- If the dollar amount of the Annual Renewal Demand (ARD) is less than the total of the funding requested by applicants, the lowest-scoring applications will not be included in the Priority List in Exhibit 1, and therefore will not be forwarded to HUD for consideration.
- Applications may be considered for the next fiscal year's CoC application to HUD.

## **UCCOC Ranking Appeal Process**

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

The process consists of the following steps:

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

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

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

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

Adopted June 2015

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



*ULSTER COUNTY  
CONTINUUM of CARE*

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**Attachment 1E-5: Public Posting – Local  
Competition Deadline**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



## Kathy Germain

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**From:** Kathy Germain  
**Sent:** Friday, July 06, 2018 1:41 PM  
**To:** 'Brenna Robinson'; 'Catherine Maloney (cmaloney@kingstonhousing.org)'; 'ddoy@co.ulster.ny.us'; 'Dominique Wallace Mills'; 'Eleanore Gruber (egru@co.ulster.ny.us)'; 'Geoff Raiti'; 'Jake Salt (j.salt@lgbtqcenter.org)'; 'Joan Eck (jeck@ulstersavings.com)'; 'Karen Winkle'; 'Kim Mapes'; 'Lauren Sheeley'; 'Maria Elena Harrington'; 'Michael Berg (mberg@fowinc.org)'; 'Mike Iapocce'; 'Rhonda Garcia'; 'Salvador Altamirano-Segura'; 'Steve Massey'; 'Tracy Van Wagenen'; Alicia Schouten; Allison McTague; Amy Colon; Andrew Martin; Annie Adams; Brian Frances; Carla Bridges; Chad Storey; Chris Dennehy; Donna Muller; Egidio Tinti; Eileen Walsh; ellen pedegar; Frank Dixon; Hal Smith; Jim Hanstein; John Colon; John Mitchell; Jordan Scruggs; Keith Bennet; Kerren Bitner; Lehanne Sisco; Lisa McDonald; Mandi Pagliavento; Margaret Gagnon; Margaret Hoffman; Margaret Shlasko; Maureen MacArthur; Michael Freer; Moses Edwards; Patricia Tuber; Rhonda Langton; Shannon Kelly; Stephanie Turco; Sue McDonough; 'Sue Palmer' (spalmer@caresny.org); Thomas McCarry; Tori Barnes; William  
**Cc:** 'Samantha Barnaby'; 'Michelle Sandoz-Dennis'  
**Subject:** Accepting applications for New Projects for 2018 Ulster County Continuum of Care  
**Attachments:** UCCOC New Project Application 6-8 revisions.docx; New HUD funded Project Descriptions.docx; Strategic Plan strategies and action steps.docx

Good Evening, members of the Ulster County Continuum of Care:

On behalf of the Ulster County Continuum of Care, attached please find the 2018 New Project RFP. Please note deadline for submission is no later than 4pm Wednesday, July 18th, 2018. Any new agency that anticipates applying should e-mail me so we can talk about additional requirements.

The link to the full NOFA is <https://www.hudexchange.info/resources/documents/FY-2018-CoC-Program-Competition-NOFA.pdf>

For agencies interested in applying there are certain eligible project types. New projects may be created through Reallocation or Permanent Housing (PH) Bonus funding which for Ulster CoC is approximately \$65,000. Please keep that in mind when you are preparing your budgets.

1. Permanent Housing/Permanent Supportive Housing (PH-PSH) projects which meet requirements of Dedicated PLUS (see attached definitions) or where 100% of beds are dedicated to individuals and families experiencing chronic homelessness.

2. Rapid Rehousing projects to serve homeless individuals/families, including unaccompanied youth.

3. Joint Transitional and PH-RRH component projects to better serve individuals and families, including individuals or families fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking who are experiencing homelessness (details in FY18 NOFA page 28)

In addition to CoC member organizations, agencies with 501c3 status, State or Local municipalities, and PHAs are eligible to apply for HUD New/Bonus Project funding -- please share with colleagues/agencies you think may be interested.

Again, completed applications are due to Kathy Germain no later than 4pm Wednesday, July 18th, 2018. Please email all documents to [kgermain@rupco.org](mailto:kgermain@rupco.org)

CARES will be holding a webinar for new applicants to answer questions about the process and eligibility, that date has not been announced.

Please Note: Information and RFP related to a separate DV Bonus Project is currently under review and will be shared next week. In addition, informational webinars about the CoC application process and PH Bonus (among other NOFA-related topics) will soon be posted on CARES website.

Feel free to contact me with any questions.

## **Kathy Germain**

Vice President of Housing Services

RUPCO's NeighborWorks HomeOwnership Center, Inc.

301 Fair Street | Kingston, NY 12401

845 331-9860 w ext. 238 | 845 331-9864 fax | [kgermain@rupco.org](mailto:kgermain@rupco.org)



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## Ulster County

- Ulster County Planning Department
  - Comprehensive Plan
  - Economic Development
  - Housing
  - Agriculture & Natural Lands
  - Transportation
  - Tools and Data

### 2018 Continuum of Care New Project RFP and Bonus Project Applications Available

On behalf of the Ulster County Continuum of Care, please see the attached 2018 New Project RFP and the 2018 DV Bonus RFP. Please note the deadline for submission is Wednesday, July 31st, 2018. In addition to currently funded Continuum member organizations, agencies with 501c3 status, State or Local municipalities, and PHAs are eligible to apply for funding. Please share this information with colleagues/agencies that may be interested.

Below is a brief description of available funding and eligible activities under each funding stream.

#### New Project RFP (Reallocation and Bonus Funding)

New projects may be created through Reallocation or Bonus funding. Includes:

## Kathy Germain

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**From:** Kathy Germain  
**Sent:** Tuesday, August 07, 2018 11:33 AM  
**To:** 'Michael Berg (mberg@fowinc.org)'; 'saltamirano@fowinc.org'; 'Lisa Marie Fallon'; 'Tracy VanWagenen'; 'Rhonda Garcia'; 'Rhonda Langton'; 'Michelle DeRose'  
**Cc:** 'Michelle Sandoz-Dennis'  
**Subject:** IMPORTANT APPLICANT INFORMATION FOR RANKING AND ESNAPS  
**Attachments:** Ranking Committee agenda.docx

As you know the ranking committee is meeting on August 14<sup>th</sup> from 1-5 CARES is facilitating the ranking process I have attached the agenda- applicants will have an opportunity to meet with the Ranking Committee interview times are attached in the agenda. It is not mandatory that applicants participate in the interviewing. If there are scheduling issues let me know ASAP I may be able to switch the order.

Also, **All renewals must be in esnaps by Friday August 10<sup>th</sup>**- there is a public posting requirement- please prepare your renewals in esnaps and submit to me. We can edit up to the application deadline.

**New Project applications have until August 15<sup>th</sup> to enter in esnaps-** if new projects are not submitted through esnaps to me the collaborative applicant it may jeopardize them being included in the application. If you need technical assistance contact me.

## Kathy Germain

Vice President of Housing Services

RUPCO's NeighborWorks HomeOwnership Center, Inc.

301 Fair Street | Kingston, NY 12401

845 331-9860 w ext. 238 | 845 331-9864 fax | [kgermain@rupco.org](mailto:kgermain@rupco.org)



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## Kathy Germain

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**From:** Kathy Germain  
**Sent:** Thursday, July 26, 2018 8:39 AM  
**To:** Lisa Marie Fallon; 'Rhonda Garcia'; 'Rhonda Langton'; Michelle DeRose; Victoria Read; 'donnadell@familyofwoodstockinc.org'; 'Michael Berg (mberg@fowinc.org)'  
**Subject:** Esnaps Application Names  
**Attachments:** Copy of GIW HMIS HIC Crosswalk Ulster.xlsx  
**Importance:** High

To be consistent with HMIS and HIC we are asking all projects that are put into esnaps to use the attached names.

The deadline for esnaps submission is August 15<sup>th</sup> so you have some time and do not need to put it in right away. Family should not put Midway or SHP grants in yet we may consolidate and transition those programs.

Any new applications for bonus, DV bonus or reallocation are due to me on the 31<sup>st</sup>, since CARES is not available until the 30<sup>th</sup> do the best you can in answering application questions we will handle other TA next week. Thanks.

## Kathy Germain

Vice President of Housing Services

RUPCO's NeighborWorks HomeOwnership Center, Inc.

301 Fair Street | Kingston, NY 12401

845 331-9860 w ext. 238 | 845 331-9864 fax | [kgermain@rupco.org](mailto:kgermain@rupco.org)



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## Kathy Germain

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**From:** Kathy Germain  
**Sent:** Wednesday, July 11, 2018 5:24 PM  
**To:** 'Michael Berg (mberg@fowinc.org)'; saltamirano@familyofwoodstockinc.org; 'Rhonda Garcia'; 'Rhonda Langton'; 'Michelle DeRose'; 'Lisa Marie Fallon'; 'Tracy VanWagenen'; 'Allyson Thiessen' (athiessen@caresny.org)  
**Cc:** 'Michelle Sandoz-Dennis'; 'Samantha Barnaby'  
**Subject:** 2018 Continuum of Care Renewal Ranking and New Project Applications  
**Attachments:** Ulster County CoC Ranking Memo.docx; Ulster Rank and Review Renewal Application.docx; Ulster- 2018 Rank and Review Checklist.docx; HMIS Attachments for Renewals.pdf; DV Bonus RFP 2018 Ulster.docx; 2018 UCCOC New Project Application Final.docx; Strategic Plan strategies and action steps.docx; New HUD funded Project Descriptions.docx

**Importance:** High

Welcome to 2018 NOFA season. Hopefully you are reading this e-mail in the morning, there is a lot of information. CARES will be leading the ranking and application process this year. You will send both your new and renewal applications to me, submit in esnaps as usual, but CARES will be providing applicant TA for all applications and handle the ranking process.

The following documents are attached:

- Renewal Ranking Memo with details on new projects and important deadlines
- Ulster Rank and Renewal Application
- Ulster Rank and Renewal Checklist- provides the questions from Calendar Year 2017 APR questions for renewal applications
- HMIS Attachments for Section C of Renewal Application questions
- DV Bonus Project Application
- 2018 New Project Application
- Strategic Plan Strategies and Action Steps- that applicants will have to link projects to
- New HUD Funded Project Description

### **Renewal Applicants will need to pull calendar year 2017 APR to answer questions on the renewal application**

In addition to the renewal applications that will be due to me by July 24<sup>th</sup> at 4 pm, there are opportunities for new projects Information on each project type is detailed in the attached memo with some important NOFA information:

### **Bonus and Reallocated funding is available for the below eligible project types.**

- Permanent Supportive Housing that is Dedicated PLUS (see page 16) OR has 100% of beds dedicated to persons experiencing chronic homelessness.
- Rapid Rehousing
- Joint Transitional Housing-Rapid Rehousing
- HMIS
- Support Service Only – Coordinated Entry project

**DV Bonus (see page 8 of the NOFA):** This year an additional bonus opportunity is available for projects to serve survivors of Domestic Violence. The CoC is eligible for \$64,964. Below are the eligible project types.

- Rapid Rehousing
- Joint Transitional Housing-Rapid Rehousing
- Support Service Only – Coordinated Entry

In order to provide additional information on this funding opportunity, CARES will be holding a webinar on **July 18th at 10am**. Please contact Anna Turner [aturner@caresny.org](mailto:aturner@caresny.org) to RSVP and receive call-in information.

CARES is planning to conduct a Returning e-snaps User Training webinar on **Friday, July 20th at Noon**. The intended audience is CoC funded agencies who are submitting a renewal project. The objective of the e-snaps training is to walk returning CoC project applicants through the application creation, completion and submission process. If you are interested please RSVP to Anna Turner [aturner@caresny.org](mailto:aturner@caresny.org) for call in information.

There is also some great information and training webinars on their website in addition to the webinars listed above. To access the page these are posted on, <http://caresny.org/continuum-of-care/fy2018-coc-program-nofa/>

I am of course available to answer questions as you open up the wealth of information attached.

## **Kathy Germain**

Vice President of Housing Services

RUPCO's NeighborWorks HomeOwnership Center, Inc.

301 Fair Street | Kingston, NY 12401

845 331-9860 w ext. 238 | 845 331-9864 fax | [kgermain@rupco.org](mailto:kgermain@rupco.org)



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*ULSTER COUNTY  
CONTINUUM of CARE*

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**Attachment 1E-4. CoC's Reallocation Process**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit





## *ULSTER COUNTY CONTINUUM of CARE*

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### **Reallocation Process**

Once the Ranking and Performance Committee completes the scoring of renewal programs and meets with the project applicants to review their scores, they compile the final ranking scores that are sent to the board for their review and approval. The committee report will include additional technical assistance suggestions that can improve the underperforming programs(s). If this is the case, the application is included for renewal and technical assistance is arranged and follow up reviews are scheduled at quarterly intervals. If the program continues to be underperforming after a year of assistance, the program is reviewed by the board to determine if the project should be considered for reallocation the following year. If the Ranking and Performance Committee determines through objective evidence that any underperforming project(s) will not benefit from additional assistance, they will schedule a meeting with the applicant and the board to discuss the possibility of reallocation. If a project is recommended for reallocation, the agency is notified as soon as possible but at least 14 days prior to the due date of the CoC application to HUD.

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

When the CoC is able to request project applications from the community due to availability of funds through bonuses, pro-rata, or reallocation, the CoC will advertise in the local newspaper and distribute to its membership a public notice requesting application. The CoC's priorities and details of eligible applications, as defined by the current year's NOFA, will be reviewed with the board and membership. The due date for submission to the CoC will be at least 30 days prior to the due date of the CoC Collaborative Application. Any applicant interested in applying for new or bonus funds must submit a letter of intent stating the population it intends to serve, the number of beds and/or units, and a budget submitted by the posted submission date. Additional applications will be submitted in esnaps within one week of e-mail notification from CA to proceed. New and reallocated projects will have their own scoring criteria based upon local priorities and needs. New and bonus applications will be scored separately from renewal projects. If there is no availability of funds for new applications through bonuses, pro-rata or reallocation, the CoC will post a public notice that it is not accepting new applications for the current CoC Application.

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



*ULSTER COUNTY*  
*CONTINUUM of CARE*

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**Attachment 1E-5: Projects Accepted Notification**

**1. Projects Accepted (14) Notifications (6)**

- a. **Family of Woodstock Inc.**
- b. **CARES Inc.**
- c. **RUPCO Inc.**
- d. **Rehabilitation Support Services (RSS)**
- e. **Gateway Community Industries**
- f. **PEOPLE Inc.**

**2. Notification of Final Priority Listing outside of esnaps**

## Kathy Germain

---

**From:** Samantha Barnaby <sbarnaby@caresny.org>  
**Sent:** Tuesday, September 04, 2018 2:21 PM  
**To:** Kathy Germain  
**Subject:** FW: 2018 Rank and Review  
**Attachments:** Families of woodstock- HUD SHP.pdf; Families of Woodstock Midway TL.pdf; Families of Woodstock-CMS singl.pdf; Families of Woodstock-S&C famil.pdf; Families of Woodstock-SHP.pdf; Debriefing-families of woodstock-SHP Families 2.docx; Debriefing-families of woodstock-shelter + care families.docx; Debriefing-families of woodstock-CMS Singles.docx; Debriefing-families of woodstock-Midway TLP.docx; Debriefing-families of woodstock-hud shp families.docx

**From:** Samantha Barnaby  
**Sent:** Thursday, August 23, 2018 3:23 PM  
**To:** mberg@fowinc.org  
**Subject:** 2018 Rank and Review

Good Afternoon Michael,

Attached are the Rank and Review scoresheets from this year's Rank and Review process for your CoC programs. This is notification that your program/s have been accepted as part of the Ulster County 2018 NOFA application.

Also attached are Debriefing forms for each project. If you have any questions regarding your score or if you would like CARES to walk through the scoresheet with you please complete the appropriate Debriefing form and return to me at [sbarnaby@caresny.org](mailto:sbarnaby@caresny.org). Forms must be submitted on or before August 28, 2018.

Thank you

Samantha Barnaby  
Continuum of Care Unit  
Program Compliance Specialist  
CARES, Inc.  
200 Henry Johnson Blvd, Suite 4,  
Albany, NY 12210  
(P): (518) 489-4130 Ext. 106  
(F): (518) 489-2237  
[www.caresny.org](http://www.caresny.org)

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From: [sbarnaby@caresny.org](mailto:sbarnaby@caresny.org)

*You received this message because the sender is on your allow list.*

## Kathy Germain

---

**From:** Samantha Barnaby <sbarnaby@caresny.org>  
**Sent:** Tuesday, September 04, 2018 2:16 PM  
**To:** Kathy Germain  
**Subject:** FW: Notification Outside of e-snaps Projects Accepted

**From:** Samantha Barnaby  
**Sent:** Monday, August 27, 2018 3:37 PM  
**To:** 'donnadell@fowinc.org' <donnadell@fowinc.org>  
**Subject:** Notification Outside of e-snaps Projects Accepted

Good Afternoon,

CARES would like to congratulate you on having your project/s accepted within the 2018 Ulster County CoC NOFA Application. A detailed list of your agency's accepted project/s and funding requests can be found below:

- DV UCCOC DV CE Lead: \$14,019

Again, congratulations. If you have any questions please do not hesitate to contact me directly.

Thank you

Samantha Barnaby  
Continuum of Care Unit  
Program Compliance Specialist  
CARES, Inc.  
200 Henry Johnson Blvd, Suite 4,  
Albany, NY 12210  
(P): (518) 489-4130 Ext. 106  
(F): (518) 489-2237  
[www.caresny.org](http://www.caresny.org)

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Project Name:	HUD SHP Families FY 2017	Total Points:	142
Agency Name:	Family of Woodstock		

		Total Points Available	Points Awarded
<b>A: Project Information (15 points)</b>			
<b>MAX 15 Points</b>	<b>A8 1. Local priorities</b>	5	5
	<b>A8 2. Housing First</b>	10	10
<b>B. Continuum Priorities and System Impact (100 points)</b>			
	<b>B1. Persons served</b>	5	5
	<b>B2. Utilization</b>	10	5
	<b>B3A. Effect on Chronic Homelessness</b>	15	0
	<b>B3B. Effect on Chronic Homelessness</b>	15	12
	<b>B4. ESG referrals from ESG, HUD/VA and STEHP</b>	5	5
	<b>B5. Cultural Barriers (narrative)</b>	10	10
	<b>B6. Priority populations</b>	5	5
	<b>B7. Strategic Plan</b>	10	10
	<b>B8. Table</b>	20	20
	<b>B9. ELOCCS draw down</b>	5	5
<b>C: System Performance Outcomes (100 points)</b>			
	<b>C1. Positive Outcomes</b>	25	15
	<b>C2. Exits to Homelessness</b>	25	0
	<b>C3. Effect on Income Growth</b>	25	10
	<b>C4. Data Quality and Completeness</b>	25	25
<b>Total:</b>		<b>215</b>	<b>142</b>

Consolidating

# RANK AND REVIEW SCORE DEBRIEFING

August 28, 2018

**AGENCY NAME: FAMILY OF WOODSTOCK**  
**PROJECT NAME: HUD SHP FAMILIES FY 2017**  
**SCORE: 142**

**1. Would you like a debriefing on your rank and review project application?**

- If yes, please fill out table below and CARES will confirm
- If no, sign and send back (digital signature is fine)

**2. How would you like to meet for your debriefing (Can select both)?**

- Phone Conference
- In Person (At CARES)

**3. Are there any specific concerns you would like to address at your debriefing?**

## DATES AVAILABLE FOR DEBRIEFING

If you would like a debriefing, please select any times in which you are available. Scheduling will be on a first come first serve basis.

Date	Time	Accepted	Phone or In Person
8/22	12:30 PM		
8/22	1:30 PM		
8/22	2:00 PM		

Reviewed By \_\_\_\_\_

Date \_\_\_\_\_

CARES Staff \_\_\_\_\_

Date \_\_\_\_\_

Project Name:	Midway TLP	Total	
Agency Name:	Family of Woodstock	Points:	171

		Total Points Available	Points Awarded
<b>A: Project Information (15 points)</b>			
<b>MAX 15 Points</b>	<b>A8 1. Local priorities</b>	5	0
	<b>A8 2. Housing First</b>	10	0 or n/a ?
<b>B. Continuum Priorities and System Impact (100 points)</b>			
	<b>B1. Persons served</b>	5	5
	<b>B2. Utilization</b>	10	10
	<b>B3A. Effect on Chronic Homelessness</b>	15	0 or n/a ?
	<b>B3B. Effect on Chronic Homelessness</b>	15	0
	<b>B4. ESG referrals from ESG, HUD/VA and STEHP</b>	5	5
	<b>B5. Cultural Barriers (narrative)</b>	10	10
	<b>B6. Priority populations</b>	5	5
	<b>B7. Strategic Plan</b>	10	10
	<b>B8. Table</b>	20	20
	<b>B9. ELOCCS draw down</b>	5	5
<b>C: System Performance Outcomes (100 points)</b>			
	<b>C1. Positive Outcomes</b>	25	5
	<b>C2. Exits to Homelessness</b>	25	25
	<b>C3. Effect on Income Growth</b>	25	10
	<b>C4. Data Quality and Completeness</b>	25	25
<b>Total:</b>		<b>170</b>	<b>135</b>

0.794117647  
171

# RANK AND REVIEW SCORE DEBRIEFING

August 28, 2018

**AGENCY NAME: FAMILY OF WOODSTOCK**

**PROJECT NAME: MIDWAY TLP**

**SCORE: 171**

**1. Would you like a debriefing on your rank and review project application?**

If yes, please fill out table below and CARES will confirm

If no, sign and send back (digital signature is fine)

**2. How would you like to meet for your debriefing (Can select both)?**

Phone Conference

In Person (At CARES)

**3. Are there any specific concerns you would like to address at your debriefing?**

## DATES AVAILABLE FOR DEBRIEFING

If you would like a debriefing, please select any times in which you are available. Scheduling will be on a first come first serve basis.

Date	Time	Accepted	Phone or In Person
8/22	12:30 PM		
8/22	1:30 PM		
8/22	2:00 PM		

Reviewed By \_\_\_\_\_

Date \_\_\_\_\_

CARES Staff \_\_\_\_\_

Date \_\_\_\_\_



Project Name:	CMS Singles	Total	
Agency Name:	Family of Woodstock	Points:	169

		Total Points Available	Points Awarded
<b>A: Project Information (15 points)</b>			
<b>MAX 15 Points</b>	<b>A8 1. Local priorities</b>	5	5
	<b>A8 2. Housing First</b>	10	10
<b>B. Continuum Priorities and System Impact (100 points)</b>			
	<b>B1. Persons served</b>	5	5
	<b>B2. Utilization</b>	10	5
	<b>B3A. Effect on Chronic Homelessness</b>	15	12
	<b>B3B. Effect on Chronic Homelessness</b>	15	12
	<b>B4. ESG referrals from ESG, HUD/VA and STEHP</b>	5	5
	<b>B5. Cultural Barriers (narrative)</b>	10	10
	<b>B6. Priority populations</b>	5	5
	<b>B7. Strategic Plan</b>	10	10
	<b>B8. Table</b>	20	20
	<b>B9. ELOCCS draw down</b>	5	5
<b>C: System Performance Outcomes (100 points)</b>			
	<b>C1. Positive Outcomes</b>	25	5
	<b>C2. Exits to Homelessness</b>	25	25
	<b>C3. Effect on Income Growth</b>	25	10
	<b>C4. Data Quality and Completeness</b>	25	25
<b>Total:</b>		<b>215</b>	<b>169</b>

# RANK AND REVIEW SCORE DEBRIEFING

August 28, 2018

**AGENCY NAME: FAMILY OF WOODSTOCK**

**PROJECT NAME: CMS SINGLES**

**SCORE: 196**

**1. Would you like a debriefing on your rank and review project application?**

- If yes, please fill out table below and CARES will confirm
- If no, sign and send back (digital signature is fine)

**2. How would you like to meet for your debriefing (Can select both)?**

- Phone Conference
- In Person (At CARES)

**3. Are there any specific concerns you would like to address at your debriefing?**

## DATES AVAILABLE FOR DEBRIEFING

If you would like a debriefing, please select any times in which you are available. Scheduling will be on a first come first serve basis.

Date	Time	Accepted	Phone or In Person
8/22	12:30 PM		
8/22	1:30 PM		
8/22	2:00 PM		

Reviewed By \_\_\_\_\_

Date \_\_\_\_\_

CARES Staff \_\_\_\_\_

Date \_\_\_\_\_

Project Name:	SHP Families 2		Total	152
Agency Name:	Family of Woodstock		Points:	

		Total Points Available	Points Awarded
<b>A: Project Information (15 points)</b>			
<b>MAX 15 Points</b>	<b>A8 1. Local priorities</b>	5	5
	<b>A8 2. Housing First</b>	10	10
<b>B. Continuum Priorities and System Impact (100 points)</b>			
	<b>B1. Persons served</b>	5	5
	<b>B2. Utilization</b>	10	5
	<b>B3A. Effect on Chronic Homelessness</b>	15	0
	<b>B3B. Effect on Chronic Homelessness</b>	15	12
	<b>B4. ESG referrals from ESG, HUD/VA and STEHP</b>	5	5
	<b>B5. Cultural Barriers (narrative)</b>	10	10
	<b>B6. Priority populations</b>	5	5
	<b>B7. Strategic Plan</b>	10	10
	<b>B8. Table</b>	20	20
	<b>B9. ELOCCS draw down</b>	5	5
<b>C: System Performance Outcomes (100 points)</b>			
	<b>C1. Positive Outcomes</b>	25	5
	<b>C2. Exits to Homelessness</b>	25	25
	<b>C3. Effect on Income Growth</b>	25	10
	<b>C4. Data Quality and Completeness</b>	25	25
<b>Total:</b>		<b>210</b>	<b>152</b>

Consolidating

# RANK AND REVIEW SCORE DEBRIEFING

August 28, 2018

**AGENCY NAME: FAMILY OF WOODSTOCK**

**PROJECT NAME: SHP FAMILIES 2**

**SCORE: 152**

**1. Would you like a debriefing on your rank and review project application?**

- If yes, please fill out table below and CARES will confirm
- If no, sign and send back (digital signature is fine)

**2. How would you like to meet for your debriefing (Can select both)?**

- Phone Conference
- In Person (At CARES)

**3. Are there any specific concerns you would like to address at your debriefing?**

## DATES AVAILABLE FOR DEBRIEFING

If you would like a debriefing, please select any times in which you are available. Scheduling will be on a first come first serve basis.

Date	Time	Accepted	Phone or In Person
8/22	12:30 PM		
8/22	1:30 PM		
8/22	2:00 PM		

Reviewed By \_\_\_\_\_

Date \_\_\_\_\_

CARES Staff \_\_\_\_\_

Date \_\_\_\_\_

Project Name:	Shelter + Care Families	Total Points:	147
Agency Name:	Family of Woodstock		

		Total Points Available	Points Awarded
<b>A: Project Information (15 points)</b>			
<b>MAX 15 Points</b>	<b>A8 1. Local priorities</b>	5	5
	<b>A8 2. Housing First</b>	10	10
<b>B. Continuum Priorities and System Impact (100 points)</b>			
	<b>B1. Persons served</b>	5	5
	<b>B2. Utilization</b>	10	10
	<b>B3A. Effect on Chronic Homelessness</b>	15	0
	<b>B3B. Effect on Chronic Homelessness</b>	15	12
	<b>B4. ESG referrals from ESG, HUD/VA and STEHP</b>	5	5
	<b>B5. Cultural Barriers (narrative)</b>	10	10
	<b>B6. Priority populations</b>	5	5
	<b>B7. Strategic Plan</b>	10	10
	<b>B8. Table</b>	20	20
	<b>B9. ELOCCS draw down</b>	5	5
<b>C: System Performance Outcomes (100 points)</b>			
	<b>C1. Positive Outcomes</b>	25	15
	<b>C2. Exits to Homelessness</b>	25	0
	<b>C3. Effect on Income Growth</b>	25	10
	<b>C4. Data Quality and Completeness</b>	25	25
<b>Total:</b>		<b>215</b>	<b>147</b>

# RANK AND REVIEW SCORE DEBRIEFING

August 28, 2018

**AGENCY NAME: FAMILY OF WOODSTOCK**  
**PROJECT NAME: SHELTER + CARE FAMILIES**  
**SCORE: 147**

**1. Would you like a debriefing on your rank and review project application?**

- If yes, please fill out table below and CARES will confirm
- If no, sign and send back (digital signature is fine)

**2. How would you like to meet for your debriefing (Can select both)?**

- Phone Conference
- In Person (At CARES)

**3. Are there any specific concerns you would like to address at your debriefing?**

## DATES AVAILABLE FOR DEBRIEFING

If you would like a debriefing, please select any times in which you are available. Scheduling will be on a first come first serve basis.

Date	Time	Accepted	Phone or In Person
8/22	12:30 PM		
8/22	1:30 PM		
8/22	2:00 PM		

Reviewed By \_\_\_\_\_ Date \_\_\_\_\_ CARES Staff \_\_\_\_\_ Date \_\_\_\_\_

## Kathy Germain

---

**From:** Samantha Barnaby <sbarnaby@caresny.org>  
**Sent:** Tuesday, September 04, 2018 3:02 PM  
**To:** Allyson Thiessen  
**Cc:** Kathy Germain  
**Subject:** Notification Outside of e-snaps Projects Accepted

Good Afternoon,

CARES would like to congratulate you on having your project/s accepted within the 2018 Ulster Country CoC NOFA Application. A detailed list of your agency's accepted project/s and funding requests can be found below:

- Ulster CoC HMIS: \$70,350

Again, congratulations. If you have any questions please do not hesitate to contact me directly.

Thank you

Samantha Barnaby  
Continuum of Care Unit  
Program Compliance Specialist  
CARES, Inc.  
200 Henry Johnson Blvd, Suite 4,  
Albany, NY 12210  
(P): (518) 489-4130 Ext. 106  
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## Kathy Germain

---

**From:** Samantha Barnaby <sbarnaby@caresny.org>  
**Sent:** Tuesday, September 04, 2018 3:01 PM  
**To:** Kathy Germain  
**Subject:** Notification Outside of e-snaps Projects Accepted

Good Afternoon,

CARES would like to congratulate you on having your project/s accepted within the 2018 Ulster Country CoC NOFA Application. A detailed list of your agency's accepted project/s and funding requests can be found below:

- UCCOC CE Lead: \$23,000

Again, congratulations. If you have any questions please do not hesitate to contact me directly.

Thank you

Samantha Barnaby  
Continuum of Care Unit  
Program Compliance Specialist  
CARES, Inc.  
200 Henry Johnson Blvd, Suite 4,  
Albany, NY 12210  
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## Kathy Germain

---

**From:** Samantha Barnaby <sbarnaby@caresny.org>  
**Sent:** Monday, August 27, 2018 1:52 PM  
**To:** Lfallen@rehab.org  
**Cc:** Kathy Germain  
**Subject:** 2018 Rank and Review  
**Attachments:** RSS- Oasis SH+Care.pdf; Debriefing-RSS-oasis shelter + Care.docx

Good Afternoon LisaMarie,

Attached are the Rank and Review scoresheets from this year's Rank and Review process for your CoC programs. This is notification that your program/s have been accepted as part of the Ulster County 2018 NOFA application.

Also attached are Debriefing forms for each project. If you have any questions regarding your score or if you would like CARES to walk through the scoresheet with you please complete the appropriate Debriefing form and return to me at [sbarnaby@caresny.org](mailto:sbarnaby@caresny.org). Forms must be submitted on or before August 28, 2018.

Thank you

Samantha Barnaby  
Continuum of Care Unit  
Program Compliance Specialist  
CARES, Inc.  
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Albany, NY 12210  
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Project Name:	Oasis Shelter + Care	Total Points:
Agency Name:	RSS	

		Total Points Available	Points Awarded
<b>A: Project Information (15 points)</b>			
<b>MAX 15 Points</b>	<b>A8 1. Local priorities</b>	5	5
	<b>A8 2. Housing First</b>	10	10
<b>B. Continuum Priorities and System Impact (100 points)</b>			
	<b>B1. Persons served</b>	5	5
	<b>B2. Utilization</b>	10	10
	<b>B3A. Effect on Chronic Homelessness</b>	15	0
	<b>B3B. Effect on Chronic Homelessness</b>	15	8
	<b>B4. ESG referrals from ESG, HUD/VA and STEHP</b>	5	0
	<b>B5. Cultural Barriers (narrative)</b>	10	
	<b>B6. Priority populations</b>	5	5
	<b>B7. Strategic Plan</b>	10	
	<b>B8. Table</b>	20	
	<b>B9. ELOCCS draw down</b>	5	5
<b>C: System Performance Outcomes (100 points)</b>			
	<b>C1. Positive Outcomes</b>	25	15
	<b>C2. Exits to Homelessness</b>	25	25
	<b>C3. Effect on Income Growth</b>	25	25
	<b>C4. Data Quality and Completeness</b>	25	15

Total:

## Kathy Germain

---

**From:** Samantha Barnaby <sbarnaby@caresny.org>  
**Sent:** Monday, August 27, 2018 1:53 PM  
**To:** Mderose@gatewaycommunityindustries.org; Rlangton@gatewaycommunityindustries.org  
**Cc:** Kathy Germain  
**Subject:** 2018 Rank and Review  
**Attachments:** GCI-Ulster-Family Supported.pdf; Debriefing-families of woodstock-GCI Ulster Family Supported.docx

Good Afternoon Debbie,

Attached are the Rank and Review scoresheets from this year's Rank and Review process for your CoC programs. This is notification that your program/s have been accepted as part of the Ulster County 2018 NOFA application.

Also attached are Debriefing forms for each project. If you have any questions regarding your score or if you would like CARES to walk through the scoresheet with you please complete the appropriate Debriefing form and return to me at [sbarnaby@caresny.org](mailto:sbarnaby@caresny.org). Forms must be submitted on or before August 28, 2018.

Thank you

Samantha Barnaby  
Continuum of Care Unit  
Program Compliance Specialist  
CARES, Inc.  
200 Henry Johnson Blvd, Suite 4,  
Albany, NY 12210  
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Project Name:	GCI-Ulster Family Supported	Total	
Agency Name:	Gateway Community Industries	Points:	140

		Total Points Available	Points Awarded
<b>A: Project Information (15 points)</b>			
<b>MAX 15 Points</b>	<b>A8 1. Local priorities</b>	5	0
	<b>A8 2. Housing First</b>	10	10
<b>B. Continuum Priorities and System Impact (100 points)</b>			
	<b>B1. Persons served</b>	5	5
	<b>B2. Utilization</b>	10	0
	<b>B3A. Effect on Chronic Homelessness</b>	15	0
	<b>B3B. Effect on Chronic Homelessness</b>	15	0
	<b>B4. ESG referrals from ESG, HUD/VA and STEHP</b>	5	5
	<b>B5. Cultural Barriers (narrative)</b>	10	10
	<b>B6. Priority populations</b>	5	5
	<b>B7. Strategic Plan</b>	10	10
	<b>B8. Table</b>	20	5
	<b>B9. ELOCCS draw down</b>	5	5
<b>C: System Performance Outcomes (100 points)</b>			
	<b>C1. Positive Outcomes</b>	25	25
	<b>C2. Exits to Homelessness</b>	25	25
	<b>C3. Effect on Income Growth</b>	25	10
	<b>C4. Data Quality and Completeness</b>	25	25
<b>Total:</b>		<b>215</b>	<b>140</b>

# RANK AND REVIEW SCORE DEBRIEFING

August 28, 2018

**AGENCY NAME: GATEWAY COMMUNITY INDUSTRIES**  
**PROJECT NAME: GCI ULSTER FAMILY SUPPORTED**  
**SCORE: 140**

**1. Would you like a debriefing on your rank and review project application?**

- If yes, please fill out table below and CARES will confirm
- If no, sign and send back (digital signature is fine)

**2. How would you like to meet for your debriefing (Can select both)?**

- Phone Conference
- In Person (At CARES)

**3. Are there any specific concerns you would like to address at your debriefing?**

## DATES AVAILABLE FOR DEBRIEFING

If you would like a debriefing, please select any times in which you are available. Scheduling will be on a first come first serve basis.

Date	Time	Accepted	Phone or In Person
8/22	12:30 PM		
8/22	1:30 PM		
8/22	2:00 PM		

Reviewed By \_\_\_\_\_ Date \_\_\_\_\_ CARES Staff \_\_\_\_\_ Date \_\_\_\_\_

## Kathy Germain

---

**From:** Samantha Barnaby <[sbarnaby@caresny.org](mailto:sbarnaby@caresny.org)>  
**Sent:** Wednesday, September 05, 2018 3:25 PM  
**To:** Kathy Germain  
**Subject:** FW: 2018 Rank and Review  
**Attachments:** People Inc. -Home again project.pdf; Debriefing-People Inc..docx

**From:** Samantha Barnaby  
**Sent:** Thursday, August 23, 2018 3:09 PM  
**To:** Rhonda Garcia <[rhondagarcia@projectstoempower.org](mailto:rhondagarcia@projectstoempower.org)>  
**Cc:** Kathy Germain <[kgermain@rupco.org](mailto:kgermain@rupco.org)>  
**Subject:** 2018 Rank and Review

Good Afternoon Rhonda,

Attached are the Rank and Review scoresheets from this year's Rank and Review process for your CoC programs. This is notification that your program/s have been accepted as part of the Ulster County 2018 NOFA application.

Also attached are Debriefing forms for each project. If you have any questions regarding your score or if you would like CARES to walk through the scoresheet with you please complete the appropriate Debriefing form and return to me at [sbarnaby@caresny.org](mailto:sbarnaby@caresny.org). Forms must be submitted on or before August 28, 2018.

Thank you

Samantha Barnaby  
Continuum of Care Unit  
Program Compliance Specialist  
CARES, Inc.  
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Project Name:		Home Again				Total Points:		192	
Agency Name:		People Inc.							
		Total Points Available		Points Awarded					
A: Project Information (15 points)									
<b>MAX 15 Points</b>	<b>A8 1. Local priorities</b>	5		5					
	<b>A8 2. Housing First</b>	10		10					
B. Continuum Priorities and System Impact (100 points)									
	<b>B1. Persons served</b>	5		5					
	<b>B2. Utilization</b>	10		10					
	<b>B3A. Effect on Chronic Homelessness</b>	15		12					
	<b>B3B. Effect on Chronic Homelessness</b>	15		15					
	<b>B4. ESG referrals from ESG, HUD/VA and STEHP</b>	5		5					
	<b>B5. Cultural Barriers (narrative)</b>	10		10					
	<b>B6. Priority populations</b>	5		5					
	<b>B7. Strategic Plan</b>	10		10					
	<b>B8. Table</b>	20		20					
	<b>B9. ELOCCS draw down</b>	5		5					
25									
	<b>C1. Positive Outcomes</b>	25		15					
	<b>C2. Exits to Homelessness</b>	25		25					
	<b>C3. Effect on Income Growth</b>	25		15					
	<b>C4. Data Quality and Completeness</b>	25		25					
Total:		215		192					

# RANK AND REVIEW SCORE DEBRIEFING

August 28, 2018

**AGENCY NAME: PEOPLE INC**  
**PROJECT NAME: HOME AGAIN**  
**SCORE: 192**

## 1. Would you like a debriefing on your rank and review project application?

- If yes, please fill out table below and CARES will confirm
- If no, sign and send back (digital signature is fine)

## 2. How would you like to meet for your debriefing (Can select both)?

- Phone Conference
- In Person (At CARES)

## 3. Are there any specific concerns you would like to address at your debriefing?

## DATES AVAILABLE FOR DEBRIEFING

If you would like a debriefing, please select any times in which you are available. Scheduling will be on a first come first serve basis.

Date	Time	Accepted	Phone or In Person
8/22	12:30 PM		
8/22	1:30 PM		
8/22	2:00 PM		

Reviewed By \_\_\_\_\_ Date \_\_\_\_\_ CARES Staff \_\_\_\_\_ Date \_\_\_\_\_



## Kathy Germain

---

**From:** Samantha Barnaby <sbarnaby@caresny.org>  
**Sent:** Wednesday, September 05, 2018 3:40 PM  
**To:** Rhonda Garcia  
**Cc:** Kathy Germain  
**Subject:** Notification Outside of e-snaps Projects Accepted

Good Afternoon,

CARES would like to congratulate you on having your project/s accepted within the 2018 Ulster Country CoC NOFA Application. A detailed list of your agency's accepted project/s and funding requests can be found below:

- Home Again Project (new): \$60,114

Again, congratulations. If you have any questions please do not hesitate to contact me directly.

Thank you

Samantha Barnaby  
Continuum of Care Unit  
Program Compliance Specialist  
CARES, Inc.  
200 Henry Johnson Blvd, Suite 4,  
Albany, NY 12210  
(P): (518) 489-4130 Ext. 106  
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From: [sbarnaby@caresny.org](mailto:sbarnaby@caresny.org)

*You received this message because the sender is on your allow list.*

## Kathy Germain

---

**From:** Kathy Germain  
**Sent:** Friday, August 31, 2018 1:41 PM  
**To:** Allison McTague; Amy Colon; Andrew Martin; Annie Adams; Brenna Robinson; Carla Bridges ; Chad Storey; Chris Dennehy; ddoy@co.ulster.ny.us; Donna Muller; Egidio Tinti; Eileen Walsh; Geoff Raiti; Hal Smith; Jim Hanstein; John Mitchell; Jordan Scruggs; Karen Winkle; Keith Bennet; Kerren Bitner; Lauren Sheeley; Lehanne Sisco; Lisa McDonald; Margaret Gagnon; Margaret Hoffman; Margaret Shlasko; Maureen MacArthur; Michael Freer; Moses Edwards; Patricia Tuber; Rhonda Garcia; Rhonda Langton; Salvador Altamirano-Segura; Shannon Kelly; Stephanie Turco; Sue McDonough; 'Sue Palmer' (spalmer@caresny.org); Thomas McCarry; Tori Barnes; Tracy Van Wagenen; William ; 'Catherine Maloney (cmaloney@kingstonhousing.org)'; 'Dominique Wallace Mills'; 'Eleanore Gruber (egru@co.ulster.ny.us)'; 'Jake Salt (j.salt@lgbtqcenter.org)'; 'Joan Eck (jeck@ulstersavings.com)'; Kim Mapes; 'Maria Elena Harrington'; 'Michael Berg (mberg@fowinc.org)'; 'Mike Iapocce'; 'Steve Massey'  
**Cc:** Samantha Barnaby; 'Michelle Sandoz-Dennis'  
**Subject:** Final 2018 Continuum of Care NOFA Ranking  
**Attachments:** Final 2018 Ulster Rank and Review Tiering.xlsx

Good afternoon Ulster County Continuum of Care members,

On behalf of the Ulster County Continuum of Care board attached please find the final FY18 Priority Listing CoC Ranking and Tiering.

As a reminder draft versions of the Consolidated Application including the Priority Listing are posted on the Ulster County Planning Website for public comment.

The consolidated application will be updated every Friday until submission with our progress using public comments we receive.

Please do not hesitate to contact me directly with any comments or questions.

Regards,

Kathy Germain  
Collaborative Applicant

## Kathy Germain

Vice President of Housing Services

RUPCO's NeighborWorks HomeOwnership Center, Inc.

301 Fair Street | Kingston, NY 12401

845 331-9860 w ext. 238 | 845 331-9864 fax | kgermain@rupco.org



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2018 Ulster Ranking

Rank	Score	Applicant Name	Project Name	Funding Amount
1	--	Family of Woodstock, Inc.	Rapid Re-Housing for Domestic Violence Survivors	\$79,423
2	--	Family of Woodstock, Inc.	Rapid Re-Housing Families FY2018	\$97,452
3	192	PEOPLE, Inc.	PEOPLE Home Again Project FY2018	\$65,598
4	171	Family of Woodstock, Inc.	HUD MidWay FY 2018	\$91,667
5	169	Family of Woodstock, Inc.	HUD S&C SRO FY2018	\$227,989
6	156	Rehabilitation Support Services, Inc	Oasas Shelter Plus Care 2018	\$154,316
7	152	Family of Woodstock, Inc.	HUD SHP Families #2 FY2018	\$65,886
8	147	Family of Woodstock, Inc.	HUD S&C Families FY2018	\$139,756
9	--	Corporation for AIDS Research, Education and Services, Inc.	Ulster CoC HMIS 2018	\$70,350
10	142	Family of Woodstock, Inc.	HUD SHP Families FY 2018	\$80,316
11	140	Gateway Community Industries, Inc.	WWC FY 2018-Renewal	\$41,891
12	85	PEOPLE, Inc.	Home Again	\$60,114
13	70	RUPCO	UCCOC CE Lead	\$
14	--	DV UCCOC DV CE Lead	Family of Woodstock	\$

Tier 1 = \$59,512 Tier 2 = \$21,404

Annual Renewal Demand \$1,138,244  
 Tier 1 = 94% of ARD \$1,069,949  
 Tier 2 = 6% of ARD + bonus \$68,295  
**Planning = 3% of ARD \$34,147**  
**PH Bonus = 6% of FPRN \$68,295**  
**DV Bonus = 10% of PPRN \$64,964**

# Ulster County

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- RESIDENTS
- BUSINESS
- VISITORS
- HOW DO I?



## Ulster County

Ulster County Planning  
Department

- Comprehensive Plan
- Economic Development
- Housing
- Agriculture & Natural Lands
- Transportation
- Tools and Data

### 2018 Ulster County Continuum of Care Consolidated Application, Project Listing, and Final FY18 NOFA Ranking and Tiering

On behalf of the Ulster County Continuum of Care, please see the content of the consolidated application, Exhibit 1. There will be updates as the CoC completes the application questions. There is also a Project Listing of all applications submitted for funding.

Please Contact Kathy Garmain, Collaborative Applicant for the Ulster County Continuum of Care at [kagarmain@ulsterco.org](mailto:kagarmain@ulsterco.org)

- 2018 Consolidated Application - Draft Form



*ULSTER COUNTY  
CONTINUUM of CARE*

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**Attachment 1E-5: Notifications Outside e-snaps  
– Projects Rejected or Reduced**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



*ULSTER COUNTY  
CONTINUUM of CARE*

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Jerry Lesczynski  
Managing Director  
Rehabilitation Support Services  
11 Twin Maples Plaza  
Saugerties, NY 12477

Re: RSS OASAS Shelter plus Care – FY18 Renewal Project Application

Dear Mr. Lesczynski,

On behalf of the Ulster County Continuum of Care (UCCOC) board, we would like to thank you for your application for the renewal for RSS OASAS Shelter Plus Care submitted for the FY18 Continuum of Care Competition. The board appreciates your willingness to reallocate \$18,000 of your total HUD award that will be used to submit a new application for Coordinated Entry staffing. The program was ranked in Tier 1 but had leftover funds that would more effectively meet the needs of the CoC as a whole.

As noted in our Rank and Review Policy you do have the right to request a debriefing of your project. I have attached the score card for your review.

Thank you,

A handwritten signature in dark ink, appearing to read 'Kathy Germain', with a stylized flourish at the end.

Kathy Germain  
Collaborative Applicant  
Ulster County Continuum of Care

---

Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



*ULSTER COUNTY  
CONTINUUM of CARE*

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Mary Ann Hildebrandt  
Executive Director  
Gateway Community Industries  
1 Amy Kay Parkway  
Kingston, New York 12401

RE: GCI Ulster – Family Supported Program- FY18 Renewal Project Application

Dear Ms. Hildebrandt,

On behalf of the Ulster County Continuum of Care (UCCOC) board, we would like to thank you for your application for the renewal of the GCI Ulster- Family Supported Program submitted for the FY18 Continuum of Care Competition. Your application has been accepted for submission in this year's allocation. The CoC appreciates your willingness to reallocate \$5,000 of your total HUD award that will be used to submit a new application for Coordinated Entry staffing. This voluntary reallocation was not due to a lack of project performance, the main consideration was the leftover funds in this year's budget that would more effectively meet the needs of the CoC as a whole for a new project.

As noted in the Rank and Review Policy, you do have a right to request a debriefing of your project. I have attached the scorecard for your review.

Sincerely,

Kathy Germain  
UCCOC Collaborative Applicant

---

Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit





*ULSTER COUNTY  
CONTINUUM of CARE*

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**Attachment 1E-5: Public Posting – Local  
Competition Deadline**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit

## Kathy Germain

---

**From:** Kathy Germain  
**Sent:** Friday, July 06, 2018 1:41 PM  
**To:** 'Brenna Robinson'; 'Catherine Maloney (cmaloney@kingstonhousing.org)'; 'ddoy@co.ulster.ny.us'; 'Dominique Wallace Mills'; 'Eleanore Gruber (egrub@co.ulster.ny.us)'; 'Geoff Raiti'; 'Jake Salt (j.salt@lgbtqcenter.org)'; 'Joan Eck (jeck@ulstersavings.com)'; 'Karen Winkle'; 'Kim Mapes'; 'Lauren Sheeley'; 'Maria Elena Harrington'; 'Michael Berg (mberg@fowinc.org)'; 'Mike Iapocce'; 'Rhonda Garcia'; 'Salvador Altamirano-Segura'; 'Steve Massey'; 'Tracy Van Wagenen'; Alicia Schouten; Allison McTague; Amy Colon; Andrew Martin; Annie Adams; Brian Frances; Carla Bridges; Chad Storey; Chris Dennehy; Donna Muller; Egidio Tinti; Eileen Walsh; ellen pedegar; Frank Dixon; Hal Smith; Jim Hanstein; John Colon; John Mitchell; Jordan Scruggs; Keith Bennet; Kerren Bitner; Lehanne Sisco; Lisa McDonald; Mandi Pagliavento; Margaret Gagnon; Margaret Hoffman; Margaret Shlasko; Maureen MacArthur; Michael Freer; Moses Edwards; Patricia Tuber; Rhonda Langton; Shannon Kelly; Stephanie Turco; Sue McDonough; 'Sue Palmer' (spalmer@caresny.org); Thomas McCarry; Tori Barnes; William  
**Cc:** 'Samantha Barnaby'; 'Michelle Sandoz-Dennis'  
**Subject:** Accepting applications for New Projects for 2018 Ulster County Continuum of Care  
**Attachments:** UCCOC New Project Application 6-8 revisions.docx; New HUD funded Project Descriptions.docx; Strategic Plan strategies and action steps.docx

Good Evening, members of the Ulster County Continuum of Care:

On behalf of the Ulster County Continuum of Care, attached please find the 2018 New Project RFP. Please note deadline for submission is no later than 4pm Wednesday, July 18th, 2018. Any new agency that anticipates applying should e-mail me so we can talk about additional requirements.

The link to the full NOFA is <https://www.hudexchange.info/resources/documents/FY-2018-CoC-Program-Competition-NOFA.pdf>

For agencies interested in applying there are certain eligible project types. New projects may be created through Reallocation or Permanent Housing (PH) Bonus funding which for Ulster CoC is approximately \$65,000. Please keep that in mind when you are preparing your budgets.

1. Permanent Housing/Permanent Supportive Housing (PH-PSH) projects which meet requirements of Dedicated PLUS (see attached definitions) or where 100% of beds are dedicated to individuals and families experiencing chronic homelessness.

2. Rapid Rehousing projects to serve homeless individuals/families, including unaccompanied youth.

3. Joint Transitional and PH-RRH component projects to better serve individuals and families, including individuals or families fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking who are experiencing homelessness (details in FY18 NOFA page 28)

In addition to CoC member organizations, agencies with 501c3 status, State or Local municipalities, and PHAs are eligible to apply for HUD New/Bonus Project funding -- please share with colleagues/agencies you think may be interested.

Again, completed applications are due to Kathy Germain no later than 4pm Wednesday, July 18th, 2018. Please email all documents to [kgermain@rupco.org](mailto:kgermain@rupco.org)

CARES will be holding a webinar for new applicants to answer questions about the process and eligibility, that date has not been announced.

Please Note: Information and RFP related to a separate DV Bonus Project is currently under review and will be shared next week. In addition, informational webinars about the CoC application process and PH Bonus (among other NOFA-related topics) will soon be posted on CARES website.

Feel free to contact me with any questions.

## **Kathy Germain**

Vice President of Housing Services

RUPCO's NeighborWorks HomeOwnership Center, Inc.

301 Fair Street | Kingston, NY 12401

845 331-9860 w ext. 238 | 845 331-9864 fax | [kgermain@rupco.org](mailto:kgermain@rupco.org)



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  - Agriculture & Natural Lands
  - Transportation
  - Tools and Data

## 2018 Continuum of Care New Project RFP and Bonus Project Applications Available

On behalf of the Ulster County Continuum of Care, please see the attached 2018 New Project RFP and the 2018 DV Bonus RFP. Please note the deadline for submission is Wednesday, July 31st, 2018. In addition to currently funded Continuum member organizations, agencies with 501c3 status, State or Local municipalities, and PHAs are eligible to apply for funding. Please share this information with colleagues/agencies that may be interested.

Below is a brief description of available funding and eligible activities under each funding stream.

### New Project RFP (Reallocation and Bonus Funding)

New projects may be created through Reallocation or Bonus funding. Includes:

## Kathy Germain

---

**From:** Kathy Germain  
**Sent:** Tuesday, August 07, 2018 11:33 AM  
**To:** 'Michael Berg (mberg@fowinc.org)'; 'saltamirano@fowinc.org'; 'Lisa Marie Fallon'; 'Tracy VanWagenen'; 'Rhonda Garcia'; 'Rhonda Langton'; 'Michelle DeRose'  
**Cc:** 'Michelle Sandoz-Dennis'  
**Subject:** IMPORTANT APPLICANT INFORMATION FOR RANKING AND ESNAPS  
**Attachments:** Ranking Committee agenda.docx

As you know the ranking committee is meeting on August 14<sup>th</sup> from 1-5 CARES is facilitating the ranking process I have attached the agenda- applicants will have an opportunity to meet with the Ranking Committee interview times are attached in the agenda. It is not mandatory that applicants participate in the interviewing. If there are scheduling issues let me know ASAP I may be able to switch the order.

Also, **All renewals must be in esnaps by Friday August 10<sup>th</sup>**- there is a public posting requirement- please prepare your renewals in esnaps and submit to me. We can edit up to the application deadline.

**New Project applications have until August 15<sup>th</sup> to enter in esnaps-** if new projects are not submitted through esnaps to me the collaborative applicant it may jeopardize them being included in the application. If you need technical assistance contact me.

## Kathy Germain

Vice President of Housing Services

RUPCO's NeighborWorks HomeOwnership Center, Inc.

301 Fair Street | Kingston, NY 12401

845 331-9860 w ext. 238 | 845 331-9864 fax | [kgermain@rupco.org](mailto:kgermain@rupco.org)



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## Kathy Germain

---

**From:** Kathy Germain  
**Sent:** Thursday, July 26, 2018 8:39 AM  
**To:** Lisa Marie Fallon; 'Rhonda Garcia'; 'Rhonda Langton'; Michelle DeRose; Victoria Read; 'donnadell@familyofwoodstockinc.org'; 'Michael Berg (mberg@fowinc.org)'  
**Subject:** Esnaps Application Names  
**Attachments:** Copy of GIW HMIS HIC Crosswalk Ulster.xlsx  
**Importance:** High

To be consistent with HMIS and HIC we are asking all projects that are put into esnaps to use the attached names.

The deadline for esnaps submission is August 15<sup>th</sup> so you have some time and do not need to put it in right away. Family should not put Midway or SHP grants in yet we may consolidate and transition those programs.

Any new applications for bonus, DV bonus or reallocation are due to me on the 31<sup>st</sup>, since CARES is not available until the 30<sup>th</sup> do the best you can in answering application questions we will handle other TA next week. Thanks.

## Kathy Germain

Vice President of Housing Services

RUPCO's NeighborWorks HomeOwnership Center, Inc.

301 Fair Street | Kingston, NY 12401

845 331-9860 w ext. 238 | 845 331-9864 fax | [kgermain@rupco.org](mailto:kgermain@rupco.org)



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## Kathy Germain

---

**From:** Kathy Germain  
**Sent:** Wednesday, July 11, 2018 5:24 PM  
**To:** 'Michael Berg (mberg@fowinc.org)'; saltamirano@familyofwoodstockinc.org; 'Rhonda Garcia'; 'Rhonda Langton'; 'Michelle DeRose'; 'Lisa Marie Fallon'; 'Tracy VanWagenen'; 'Allyson Thiessen' (athiessen@caresny.org)  
**Cc:** 'Michelle Sandoz-Dennis'; 'Samantha Barnaby'  
**Subject:** 2018 Continuum of Care Renewal Ranking and New Project Applications  
**Attachments:** Ulster County CoC Ranking Memo.docx; Ulster Rank and Review Renewal Application.docx; Ulster- 2018 Rank and Review Checklist.docx; HMIS Attachments for Renewals.pdf; DV Bonus RFP 2018 Ulster.docx; 2018 UCCOC New Project Application Final.docx; Strategic Plan strategies and action steps.docx; New HUD funded Project Descriptions.docx

**Importance:** High

Welcome to 2018 NOFA season. Hopefully you are reading this e-mail in the morning, there is a lot of information. CARES will be leading the ranking and application process this year. You will send both your new and renewal applications to me, submit in esnaps as usual, but CARES will be providing applicant TA for all applications and handle the ranking process.

The following documents are attached:

- Renewal Ranking Memo with details on new projects and important deadlines
- Ulster Rank and Renewal Application
- Ulster Rank and Renewal Checklist- provides the questions from Calendar Year 2017 APR questions for renewal applications
- HMIS Attachments for Section C of Renewal Application questions
- DV Bonus Project Application
- 2018 New Project Application
- Strategic Plan Strategies and Action Steps- that applicants will have to link projects to
- New HUD Funded Project Description

### **Renewal Applicants will need to pull calendar year 2017 APR to answer questions on the renewal application**

In addition to the renewal applications that will be due to me by July 24<sup>th</sup> at 4 pm, there are opportunities for new projects Information on each project type is detailed in the attached memo with some important NOFA information:

### **Bonus and Reallocated funding is available for the below eligible project types.**

- Permanent Supportive Housing that is Dedicated PLUS (see page 16) OR has 100% of beds dedicated to persons experiencing chronic homelessness.
- Rapid Rehousing
- Joint Transitional Housing-Rapid Rehousing
- HMIS
- Support Service Only – Coordinated Entry project

**DV Bonus (see page 8 of the NOFA):** This year an additional bonus opportunity is available for projects to serve survivors of Domestic Violence. The CoC is eligible for \$64,964. Below are the eligible project types.

- Rapid Rehousing
- Joint Transitional Housing-Rapid Rehousing
- Support Service Only – Coordinated Entry

In order to provide additional information on this funding opportunity, CARES will be holding a webinar on **July 18th at 10am**. Please contact Anna Turner [aturner@caresny.org](mailto:aturner@caresny.org) to RSVP and receive call-in information.

CARES is planning to conduct a Returning e-snaps User Training webinar on **Friday, July 20th at Noon**. The intended audience is CoC funded agencies who are submitting a renewal project. The objective of the e-snaps training is to walk returning CoC project applicants through the application creation, completion and submission process. If you are interested please RSVP to Anna Turner [aturner@caresny.org](mailto:aturner@caresny.org) for call in information.

There is also some great information and training webinars on their website in addition to the webinars listed above. To access the page these are posted on, <http://caresny.org/continuum-of-care/fy2018-coc-program-nofa/>

I am of course available to answer questions as you open up the wealth of information attached.

## **Kathy Germain**

Vice President of Housing Services

RUPCO's NeighborWorks HomeOwnership Center, Inc.

301 Fair Street | Kingston, NY 12401

845 331-9860 w ext. 238 | 845 331-9864 fax | [kgermain@rupco.org](mailto:kgermain@rupco.org)



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*ULSTER COUNTY  
CONTINUUM of CARE*

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**Attachment 2A-1: CoC and HMIS Lead  
Governance**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



# Memorandum of Understanding

between

The Corporation for AIDS Research, Education and Services, Incorporated  
(CARES, Inc.)

and

NY-608 - KINGSTON/ULSTER COUNTY COC

---

## I. Purpose and Scope

NY-608 - KINGSTON/ULSTER COUNTY COC has requested CARES, Inc. implement and maintain a Homeless Management Information System (HMIS) in compliance with HUD's requirements and standards.

CARES, Inc. agrees to abide by the below purpose of the HMIS:

- To meet HUD's requirement to produce an unduplicated count of homeless
- To develop new means of regional collaboration
- To facilitate continuity of care in homeless services
- To develop programs that are responsive to individuals' needs

In 2001, Congress directed the U.S. Department of Housing and Urban Development (HUD) to implement a national data collection system to produce an unduplicated count of persons using homeless services. The Homeless Management Information System (HMIS) is a computerized data collection system that will be used by multiple agencies to capture the number of persons utilizing services, their characteristics and demographic information.

The Capital Region HMIS (CARES Inc.) has a tremendous capacity to strengthen the collaboration among homeless service providers. Utilizing this coordinated system to count and track homeless trends, CARES HMIS will allow providers to collect data using a universal language. Methods and procedures for recording use of service will be standardized, thereby giving all service providers a common denominator for discussions about the quantity and quality of service. Perhaps most important, homeless service providers will be working together in a new manner to follow those activities and trends that transcend the individual agency

## HMIS Goals

- **Unduplicated count:** The HMIS will provide an unduplicated count of the number of individuals accessing services from homeless service providers in NY-608 - KINGSTON/ULSTER COUNTY COC.

200 Henry Johnson Boulevard, Suite 4 • Albany, New York 12210  
Phone: (518) 489-4130 • Fax: (518) 489-2237 • caresny.org



- **Service tracking and trends:** The HMIS will identify demographic and service utilization trends.
- **Streamlined referral process:** The HMIS will create a comprehensive data-base of homeless services throughout NY-608 - KINGSTON/ULSTER COUNTY COC
- **Enhanced service delivery:** Reviewing client service trends, the HMIS will reveal service areas in need of enhancement and growth.
- **Information for policymaking:** Aggregate data will be shared with homeless service advocates, government officials and researchers. This information will better inform our understanding of homelessness and guide public policy and program development.

### **HMIS Participation**

All recipients of HUD funds will be required to participate in the HMIS as will some Federal Partners. This includes recipients of Emergency Shelter Grant (ESG) funds, Supportive Housing Program (SHP), Shelter Plus Care (S+C), Section 8 Mod Rehab for SRO, Housing Opportunities for Persons with AIDS (HOPWA) and more recently, Homelessness Prevention and Rapid Re-housing Program (HPRP), Supportive Services for Veteran Families (SSVF) and Runaway Homeless Youth (RHY). In addition, HUD encourages participation of other federal programs that serve homeless persons. Participation of other organizations that do not receive HUD Continuum of Care funding is voluntary, but strongly encouraged in order to achieve an accurate picture of homeless services in the region.

### **Benefits to Lead Agency and the Continuum of Care**

In addition to fulfilling the HUD requirements, participation in the HMIS will enable Lead Agency and NY-608 - KINGSTON/ULSTER COUNTY COC (CoC) to report accurate statistical data to funders and policy makers including information on clients' financial resources, county of origin, and use of services. It will ensure that all local providers are using a common intake, thereby providing the most effective and efficient service to clients. In addition, individual agencies will benefit from the ability to electronically manage their client records and generate reports in a quick and easy manner.

### **CARES and the HMIS**

CARES, Inc. is a not-for-profit agency whose mission is assisting local communities in expanding housing and other resources for homeless persons and/or persons with disabilities. CARES was selected to serve as the administrator of the Homeless Management Information System (HMIS) in the Capital Region because of its involvement and knowledge of the service provision in each of these communities. In addition, CARES serves as HMIS administrators for 24 counties within 13 Continuums of Care in NYS. As the HMIS administrators, CARES is responsible for promoting the use of a regional HMIS, implementing the HMIS, providing computer training to agency users, and providing on-going technical assistance to all service providers participating in the HMIS.

## **II. MOU Term**

The term of this MOU Agreement is the period within which the project responsibilities of this agreement shall be performed. The term is for the period of the HUD HMIS contract year and continues until terminated by one or both parties.

## **III. CARES, Inc. Responsibilities**

CARES, Inc. shall undertake the following activities during the duration of the MOU term:

- **Monitor adherence of all participating agencies in NY-608 - KINGSTON/ULSTER COUNTY COC to applicable federal and state laws and regulations and program guidelines and report findings to the HMIS Data Committee and HMIS Advisory Committee at least quarterly.**

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- Review and approve all documentation evidencing NY-608 - KINGSTON/ULSTER COUNTY COC performance of services as set forth in the Scope of Work and monitor NY-608 - KINGSTON/ULSTER COUNTY COC performance compliance with the MOU.

Additionally, as the HMIS System Administrator, CARES, Inc. shall undertake the following activities during the duration of the MOU term:

- Selection of a software vendor and maintaining the relationship with this software vendor.
- Ensuring software securities are up-to-date and protecting all individual client data from unauthorized viewing.
- Training on privacy standards at each participating agency.
- Complying with HIPAA regulations as required by covered entities.
- Providing regular user training to ensure all users are knowledgeable on the software system
- Providing technical assistance for all system users
- Producing and distributing regular reports to NY-608 - KINGSTON/ULSTER COUNTY COC
- Producing additional reports as required by HUD and requested by member agencies.

#### **IV. NY-608 - KINGSTON/ULSTER COUNTY COC Responsibilities**

NY-608 - KINGSTON/ULSTER COUNTY COC shall undertake the following activities during the duration of the MOU term:

##### **Responsibilities of NY-608 - KINGSTON/ULSTER COUNTY COC**

As the Continuum of Care coordinating body, Lead Agency is responsible for the following activities:

- Encourage the participation of all members in the HMIS
- Require all new users to attend training by CARES, Inc. prior to being assigned a user license
- Review CoC level reports and provide feedback on the data provided to both NY-608 - KINGSTON/ULSTER COUNTY COC and the HMIS System Administrator as needed.
- Support CARES, Inc.'s efforts to secure funds to maintain the HMIS.
- Ensure participating agencies maintain the rules and responsibilities outlined in the CARES Regional HMIS policy and procedure manual.
- Convene and maintain a Data Quality sub committee

##### **Participating Agency Responsibilities**

The participating agency is responsible for all activities associated with agency staff access and use of the Foothold Software System (AWARDS). The agency will be held responsible for any misuse of the software system by the designated staff.

It is required that each participating agency:

- Review and sign in agreement with the CARES/Capital District HMIS Policy and Procedure Manual.
- Establish operating practices to ensure organizational adherence to the HMIS Policies and Procedures.
- Establish a privacy policy to ensure the protection the confidential client data and provide to CARES, Inc.
- Communicate operating practices including privacy protection and User responsibilities to agency users. Document that each User understands and accepts the User responsibilities.
- Monitor compliance and periodically review control decisions.
- Edit and update agency information, including staff, location, and capacity, as needed.
- Grant access to the software system for Users authorized by the agency's Executive Director by creating usernames and passwords

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- Send staff to trainings on the uses of the Foothold software system including a review of the CARES/ Capital Region HMIS Policies and Procedures, and any agency operating practices and privacy notice.
- Notify all Users in their agency of interruptions in service.
- Detect and respond to violations of the Policies and Procedures or agency procedures.
- Maintain complete and accurate client records.

## **V. Funding**

CARES, Inc. will work with NY-608 - KINGSTON/ULSTER COUNTY COC to procure adequate funding for programs funded by the Continuum of Care grant to maintain access to the HMIS with all attending supports and services as outlined above, including, but not limited to, grant funding from the Continuum of Care Grant Award and community sourced cash matches.

To keep the CoC cost burden of the HMIS to a minimum, non Continuum of Care funded programs (such as SSVF, RHY, HOPWA, ESG, etc) required by any funding source to use the HMIS will be required to separately contract with CARES, Inc. for inclusion in the HMIS. CARES, Inc. will work with all such programs and agencies to secure appropriate funding. Programs falling under this category, even those within agencies already participating in the HMIS with CoC funded or voluntary programs, will not be set up or given user access until a signed contract has been delivered.

## **VII. Modification and Termination**

- This agreement may be cancelled or terminated without cause by either party by giving (90) calendar days advance written notice to the other party. Such notification shall state the effective date of termination or cancellation and include any final performance and/or payment invoicing instructions/requirements.
- Any and all amendments must be made in writing and must be agreed to and executed by the parties before becoming effective.
- It is mutually agreed that if the funding of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall be of no further force and effect. In this event, NY-608 - KINGSTON/ULSTER COUNTY COC shall have no liability to pay any funds whatsoever to CARES, Inc. and CARES, Inc shall not be obligated to perform any provisions of this Agreement for which they are not reimbursed.



### VIII. Effective Date and Signature

This MOU shall be effective upon the signature of CARES, Inc. and NY-608 - KINGSTON/ULSTER COUNTY COC authorized officials. It shall be in force from 12/1/19-11/30/20. CARES, Inc. and NY-608 - KINGSTON/ULSTER COUNTY COC indicate agreement with this MOU by their signatures.

Signatures and dates

  
Authorized signature from CARES, Inc.

  
Authorized signature from NY-608  
KINGSTON/ULSTER COUNTY COC

  
Date

  
Date





*ULSTER COUNTY  
CONTINUUM of CARE*

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**Attachment 2A-2: HMIS Policies and Procedure  
Manual**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



**CARES Regional  
Homeless Management  
Information System  
(CRHMIS)**



**Policies & Procedures Manual  
January 2017**



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## **Introduction**

### **Document Overview**

In order to implement and maintain a region-wide Homeless Management Information System (HMIS), CARES, Inc. has developed the following Policies and Procedures Manual to outline and define the goals and objectives of the CARES Regional Homeless Management Information System (CRHMIS) program. This document delineates the roles and responsibilities of each agency and user involved in the program while establishing protocol for privacy, security, consumer disclosure, data quality and data ownership. Each participating agency must have the Director of that agency sign the Agency Agreement at the end of this document, indicating that the agency has reviewed these policies and procedures and will comply with them. Additionally, all users are required to sign the User Agreement (also at the end of this document) indicating that they have reviewed and will abide by these policies and procedures as well.

### **History of the HMIS**

In 2001, Congress directed HUD to implement a national data collection system to produce an unduplicated count of persons using homeless services. The Homeless Management Information System (HMIS) is a computerized data collection system used by multiple agencies to capture the number, characteristics and demographic information of persons utilizing these services. HUD did not create this database, nor was a specified vendor required. All communities are, instead, required to create their own compliant, relational database or contract individually with an outside software vendor. CARES, Inc., at the direction of, and in cooperation with, the CARES Regional HMIS Implementation Committee, chose the vendor Foothold Technology and the software Affordable Wider Area Regional Database System (AWARDS) for this purpose in 2004 and has maintained that relationship through the present day.

### **Configuration and Purpose of the CARES Regional HMIS (CRHMIS)**

The CARES Regional HMIS has a tremendous capacity to strengthen the collaboration among homeless service providers. Utilizing this coordinated system to count and track homeless trends in the region, the CRHMIS program gives providers the ability to collect data using a universal language accepted by HUD and, increasingly, other State and Federal funders. Methods and procedures for recording use of service are standardized, thereby giving all service providers a common denominator for discussions about the quantity and quality of services. Perhaps most importantly, homeless service providers, at the community, State and Federal level are working together to track those activities and trends. This information is then used at each level for allocation of funding and for community planning.

Representing a large area of upstate and mid-western New York, the CARES Regional HMIS captures client-level information over time, allowing agencies and communities to assess the characteristics and service needs of individuals and families experiencing homelessness, and at risk of homelessness, within the participating counties.

### **Purpose of the CR-HMIS**

- To meet HUD's requirement to produce an unduplicated count of homeless persons and households
- To understand the nature and scope of homelessness
- To develop, foster and maintain regional collaboration
- To facilitate continuity of care in homeless services
- To assist in the development of programs addressing the needs of homeless individuals and families through the collection and distribution of data.



## Goals

- **Unduplicated count:** The CRHMIS will provide an unduplicated count of the number of individuals accessing services from homeless service providers in the region.
- **Service tracking and trends:** The CRHMIS will identify demographic and service utilization trends.
- **Enhanced service delivery:** Through tracking client service trends, the HMIS will identify service areas in need of enhancement and growth.
- **Information for policymaking:** Data will be shared, in accordance with our stated policies, with homeless service advocates, government officials and researchers. This information will better inform our understanding of homelessness and guide public policy and program development.

## To Learn More about the CRHMIS

For general information about the CARES Regional HMIS or the policies and procedures contained in this document, please contact the Director of the HMIS Program and Services at [hmis@caresny.org](mailto:hmis@caresny.org) or by phone at (518) 489-4130. For information about becoming part of the CARES Regional HMIS, please contact the Executive Director, Nancy Chiarella, at [nchiarella@caresny.org](mailto:nchiarella@caresny.org) or by phone at (518) 489-4130 x105.

## Administrative Structure:

There are three major components to the CARES Regional Homeless Management System's administrative structure: Lead Agency, Implementation Committee, and Advisory Committee. As new communities join the HMIS a local level implementation committee may be convened in order to facilitate a smooth transition, however the Regional Implementation Committee is currently inactive on and will remain so unless the need arises for the Advisory Committee to re-activate it (such as a change in software vendor).

### Lead Agency

The lead agency for the CARES Regional HMIS is the Corporation for AIDS Research, Education and Services (CARES, Inc.). Of the participating CoCs, CARES, Inc is also the HMIS lead on the CoC Grant Application, the exception being Clinton County where the Evergreen Townhouse Community retains the HMIS Lead Agency position and CARES, Inc. is a sub-grantee.

CARES, Inc. is a not-for-profit agency whose mission is to assist local communities in expanding housing and other resources for homeless persons and/or persons with disabilities. In 2003, as the lead agency for coordinating the Continuum of Care groups in 6 Capital Region counties within four Continuums of Care, CARES was asked by providers to assume responsibility for the HMIS development and implementation for the Capital Region of New

York State, encompassing the original three counties that were in the (former) Capital Region HMIS of Albany, Rensselaer and Schenectady. Having led the initial implementation of the HMIS in those counties, CARES continues to act as the Director of the HMIS Program and Services for the HMIS by providing ongoing training, technical assistance, consulting, database management, reporting and help desk support to the Continuums of Care with the HMIS. Since the creation of the regional database in 2004, the number of counties served by the CARES HMIS has grown to include several counties well outside the Capital Region. As a result, and to reflect the scope and collaborative nature of the database, the name was changed in 2008 to the CARES Regional HMIS. In its role as Director of the HMIS Program and Services and Lead Agency, CARES also acts as an intermediary between the Software Solutions Provider (Foothold Technology) and participating agencies, handling the billing and payments for the software, keeping current with the HUD requirements and trends, attending regional and national conferences, participating in larger, regional collaborative HMIS administrator groups, keeping current with software updates, trainings, conferences and trends while also maintaining regular contact with HUD technical assistance providers and staff. In addition to being a member of the Mid-Atlantic HMIS Director of the HMIS



Program and Services group (MARHMIS) CARES is also involved in the New York State Office of Temporary Disability Assistance (NYS OTDA) project of creating a state-wide HMIS Data Warehouse and the HUD AHAR Redesign Project. The Director of the HMIS Program and Services, participates in committee meetings and calls regarding these projects with regular updates to the CRHMIS Advisory Committee.

### **Implementation Committee**

The role of the Implementation Committee is to establish community goals for the HMIS and support the lead agency with investigating, choosing and negotiating a contract with a software solutions provider. In addition, the Implementation Committee assists in coordinating the implementation of the HMIS community-wide, addressing issues and concerns along with the lead agency to help make using the HMIS both functional and efficient within the community. The original implementation team for CARES Regional HMIS has been disbanded as the implementation was completed in 2005 for the original three counties. As new communities join the CARES Regional HMIS, they may nominate a person or persons to work alongside the HMIS Director of the HMIS Program and Services to implement participation in the HMIS. While there is no longer an active implementation committee for the CARES Regional HMIS, smaller-scope implementation committees are often formed when bringing a new community into the CARES Regional HMIS in order to ensure a smooth and complete transition.

### **Advisory Committee**

The role of the Advisory Committee is to facilitate a better-working HMIS and continue to ensure that it meets the needs of both the Continuums of Care as well as meeting the program requirements described in the latest HMIS regulations put out by HUD. The Advisory Committee is made up of representatives from each CoC and meets regularly via webinar. It is the role of this committee to bring forward issues of particular concern to their respective Continuum of Care coordinating bodies in order to find solutions to problems or issues that arise from use of the HMIS. The Advisory Committee will also advise on policies regarding such issues as: consumer privacy and confidentiality, reporting schedules, information sharing, software choices, and user/agency monitoring and report directly back to their CoC as specified by each Continuum's policies.

The Advisory Committee meets the 4th Wednesday of each month. Committee representatives are nominated and approved by each CoC. All Advisory Committee members should be associated with HMIS Participating agencies and there is a limit of two representatives per CoC regardless of the CoC's geographic reach. Chairs/Co- chairs of the CoC are not eligible for membership on the Advisory Committee and there may only be one representative per participating agency, regardless of that agency's geographic scope. It is understood that in smaller, rural CoCs these restrictions may need to be reviewed or waved on a case by case basis. For more information on the committee or the process, or to get the log-on information for the next webinar, please contact the HMIS Director of the HMIS Program and Services at [hmis@caresny.org](mailto:hmis@caresny.org).

A list of CRHMIS Advisory Committee members, along with their contact information, is posted on the CARES, Inc. website at <http://www.caresny.org>. Please contact your advisory committee representative with any HMIS programmatic concerns that you would like to have addressed during the next meeting.

### **Data Committee**

The Data committees are organized and overseen by each local CoC. The Data Committee is made up of members of the CoC who are dedicated to reviewing and reporting on data to the CoC on a quarterly basis. Each Data Committee should have a chair or two co-chairs and at least 3 other committee members. The CoC HMIS and CoC Lead Administrative staff will work closely with the Data Committee chair/co-chairs, providing aggregate HMIS data on the demographics of consumers within the CoC and also assisting in identifying weaknesses and trends in the data by producing quarterly and annual reports. Please see addendums for details on each CoC's data committee role and responsibilities.



## **Communication Protocol**

### **Helpdesk**

All client-level communications are to go through the AWARDS system by filling out a helpdesk ticket. If that is impractical, or the question is from an administrative non-user, the request may be made via telephone. It is strictly prohibited to send client-level information (name, date of birth or social security number), even using client initials in place of names.

If a user does breach policy and send protected personal information (PPI) via e-mail or other unsecure means, the user license may be revoked until a phone meeting between the user, CARES staff and the program manager is held to discuss the breach in protocol and make sure that the user understands the protocol and is committed to following it.

The CRHMIS team works to address all helpdesk tickets within one business day; however that is not always possible. If there is an urgent helpdesk matter which needs more immediate attention, any user or administrator may send an e-mail or leave a voice mail with the Data Specialist, Customer Service Representative or Director of the HMIS Program and Services to alert the team to the more pressing issue so that it can be addressed more expediently.

### **System Administration**

There are several ways to contact the Director of the HMIS Program and Services of the CARES Regional HMIS.

E-mail: Please send all (non PPI) e-mail communications to the HMIS Director of the HMIS Program and Services at [hmis@caresny.org](mailto:hmis@caresny.org). Often, due to the travel and meeting demands of the position, e-mail is the most expedient form of communication.

- Telephone: HMIS staff can be reached via phone at (518) 489-4130
- CoC Meetings: The Director of the HMIS Program and Services is available to attend meetings local to Albany, NY or to call in to rural CoC meetings upon request and with proper notice. Please contact the Director of the HMIS Program and Services at [hmis@caresny.org](mailto:hmis@caresny.org) or by phone at (518) 489-4130 to set up attendance in person or via phone.
- Webinar: Trainings, helpdesk, technical assistance and calls may be facilitated via a webinar format in order to better assist the user or to review reports, contracts and other deliverables.

### **Program Customization**

There are many ways that CARES, Inc. can assist in program customization for the participating agencies, including building custom forms and reports, assisting programs in integrating HMIS into their daily intake and reporting needs and negotiating system changes with the software vendor, Foothold Technology. These services are usually not part of the agency or CoC contract with CARES, Inc. and may come with an additional cost. Please see attached fee schedule for more information.

### **CRHMIS List-serve:**

In the past, the CRHMIS team has used various social media resources to reach out to users, but no one method reached all HMIS users and it began to get confusing. To solve this issue, the CRHMIS has built in a user-maintained subscription list on the CARES website. To subscribe, please go to the website at <http://www.caresny.org> and scroll to the bottom of the home page to register for any of the list-serves offered. All HMIS system level communications now go through the list-serve, so it is essential that all users enroll in this free service.



## **Technical Assistance**

Agencies having trouble integrating HMIS into their programs or getting needed reporting (both mandated and internal) from the database can set up an appointment with the HMIS staff to look for solutions and set up any further intervention that may be needed. Please contact the HMIS Director of the HMIS Program and Services, at (518) 489-4130 x103 or e-mail [hmis@caresny.org](mailto:hmis@caresny.org) for more information.

## **Grievances**

Please see the detailed Grievance Policy in this policy and procedures manual for information on the formal grievance policy at the agency, user or consumer level.

## **Database Customizations**

The AWARDS software can be modified to meet specific needs of an agency. Customizations that are above and beyond those created for the CARES Regional HMIS and HUD requirements will be completed at an additional expense to the agency. All private program-level customizations will be facilitated and contracted through CARES, Inc.

Modifications that could be completed at an additional charge may include, but are not limited to: additional number of users, supplementary training, software customization, increased security to allow transfer of data among specific agencies, increased data collection capabilities and other options that are outside those identified by the HMIS Implementation Team.

At all times, the Foothold Technology staff and CARES, Inc. will work to make sure that the database is compliant with HUD standards for data collection and reporting. CARES, Inc. will also work with other required programs under different funders to ensure relevant and accessible functionality.

## **Continuing Education**

It is extremely important that users stay current with HMIS regulations and changes. CARES, Inc. offers ongoing trainings in many areas of the AWARDS database, both on-line and in person. In order to ensure that all users have proper information and access, periodic attendance to training is required. All users who have not attended at least one training per year will be required to fill out and return a quiz which will be provided to the user via AWARDS messaging within 30 days of their log-in anniversary date. Failure to complete this quiz within 30 days of distribution will result in the loss of HMIS user access until such a time as a training has been attended or the quiz has been submitted.

## **Data Quality**

### **Data Entry Requirements**

In order for data to be meaningful across program sites, data must be consistently added and updated in the AWARDS system. HUD has identified minimum data standards with which all participating agencies must comply. Information for these minimum data fields must be gathered at intake and regularly updated throughout the client's stay within, and at discharge from, the program. While agencies are not currently required to maintain real-time data records, it is important that all data be complete and up-to-date within two weeks of client activity. Backdating permissions for entry of intakes and discharges more than two weeks beyond the intake date must go through an identified program manager and be sent as a request via the helpdesk ticketing system. Progress note and contact log input date ranges will be established on an agency by agency basis and backdating requests must also go through the identified program manager.



## Entry of Universal and Program Level Data Elements

Universal and program specific level data elements have been established by HUD and must be collected by all agencies serving homeless persons, regardless of program type. These data elements make it possible to obtain unduplicated estimates of the number of homeless persons accessing services from homeless providers and also provide basic demographic characteristics of people who are homeless, and their patterns of services. Collection of the Universal Data Elements (UDEs) will also allow measurement of the number and percentage of chronically homeless people who use homeless services. The HMIS software has safeguards built into the intake and discharge so that an intake may not be completed without filling in these data elements. However, due to periodic changes in HUD requirements and upgrades to the software, it may be necessary for some agencies to correct historical data to remain compliant with the current HUD Data and Technical Standards (Data standards 2016 and Technical Standards 2004). Additionally, the Continuum of Care may request that specific, non-required fields be filled out for community planning purposes.

With the October 2014 Data Standards changes more Federal partners began to also use the HMIS for their programs to use as a reporting system in the hopes that duplicate data entry in multiple systems can be mitigated somewhat. The following programs now have HMIS programming capabilities:

### Department of Housing and Urban Development (HUD)

- Office of Special Needs Assistance Programs (SNAPS)
  - Continuum of Care (CoC) Program
  - Emergency Solutions Grants (ESG) Program
  - Housing Opportunities for Persons with AIDS program (HOPWA)\*\*
  - HUD-Veterans Affairs Supportive Housing (HUD/VASH) \*\*
  - Rural Housing Stability Assistance Program (RHSP) \*\*

### Department of Health and Human Services (HHS)

- Administration for Children and Families (ACYF) – Family and Youth Service Bureau (FYSB)
  - Runaway and Homeless Youth (RHY) \*\*
  - Substance Abuse and Mental Health Services Administration (SAMHSA) \*\*
  - Projects for Assistance in Transition from Homelessness (PATH) \*\*

### Department of Veteran Affairs (VA)

- Supportive Services for Veteran Families Program (SSVF)
  - Community Contract Emergency Housing (HCHV/EH)\*
  - Community Contract Residential Treatment Program (HCHV/RT)\*
  - Domiciliary Care (HCHV/DOM)\*
  - VA Community Contract Safe Haven Program (HCHV/SH)\*
  - Grant and Per Diem Program (GPD)\*
  - Compensated Work Therapy Transitional Residence (CWT/TR)\*

*\*Participation in HMIS is not required as part of a funding requirement except for SSVF. The federal partners recognize that communities record Project Descriptor Data Elements and Universal Data Elements in order to facilitate completion of the HIC and PIT.*

*\*\* Please refer to the soon to be published program guides for each specific program for HMIS participation requirements.*

## Data Quality Expectations





As a HUD program, the CRHMIS must report annually on overall data quality in a variety of mediums, including but not limited to: the HMIS Dedicated Grantee Annual Performance Report (APR), the Annual Homeless Assessment Report (AHAR) and the CoC Grant Application (CoC wide data quality is reported in The Collaborative Application, formerly Exhibit 1). Additionally, each mandated agency must report program level data quality during the CoCAPR report and CoC Grant Application (program level HMIS data quality is reported to HUD for each renewal) process.

Because of these reports and the constant use of HMIS data for agency level reporting, research and community planning, good data quality is paramount to the success of this program. To facilitate that, the following data quality expectations have been established:

1. Less than 5% missing or null data in any of the universal and program level data elements. This includes any responses of Refused, Unknown or Don't Know as well as incomplete (missing) data. Due to the nature of some programs (including but not limited to; outreach and drop in centers), that data quality measure will be reassessed on a program-by-program basis and data quality markers will be determined by the CoC Data Committee. Some program types may find, due to the difficult population served, that this is an unrealistic data quality expectation. Agencies with particularly difficult circumstances will be given individual waivers on data quality with separate data quality goals.
2. Data collection (intakes and discharges) will be current within 10 days
3. Updates to income, benefits, disability and housing status for consumers at least annually and at discharge
4. Problems with the database or errors in data will be reported, in writing, to the Director of the HMIS Program and Services immediately upon discovery
5. PDDE (Program Descriptor Data Elements known as HMIS Data in the Consumer Face Sheet) must be updated annually (within 30 days before or after the consumer's anniversary date) for programs which create an APR

To facilitate the best data practices possible, projects which are mandated to use the HMIS by their funders and have been found to be non-compliant with the above expectations will be reported to the funding entity (i.e. the CoC Collaborative Applicant, OTDA, Etc.) and may be required to have users and the program manager meet with a representative of the CoC and/or the CRHMIS to create a comprehensive action plan to address the problem areas. If, upon completion of this action plan, there is not adequate improvement in the identified problem areas, the Director of the CRHMIS will require a meeting with the program manager and agency Executive Director to create a more extensive action plan with agency level follow-up. At any time in this process. CARES may disable user log-ins until such a time as the agency is capable of proper data cleanup and entry into the HMIS.

If a mandated program continues to be out of compliance, Technical Assistance may be sought from the funding entity (OTDA, the VA and/or HUD) to assist in the process. Suspended programs will be listed as 'Not Participating' on the CoC Housing Inventory Chart and in any renewal applications within the CoC Grant Application which could influence funding decisions by the CoC governing body.

## **Data Ownership**

CARES, Inc. does not claim ownership of any client level data stored within the CRHMIS other than that which belongs to programs they administer. As such, the CRHMIS will not at any time change, distribute or delete data within programs without the direct instruction of the program in question.

If a community or agency withdraws from the CRHMIS, a request may be made to have their data transferred onto disk in CSV format and sent to them by post. This request, following the protocol at the end of this section, must be made within six months of discontinuing the relationship with the CRHMIS. After six months, the data will no longer be accessible to users or program managers and CARES, Inc. will discontinue the program within the database. If the agency wishes to have all data wiped from the CRHMIS, making it no longer available for historical comparison or data analysis, a written request from the Agency Director must be sent, by post, to CARES, Inc., care



of Nancy Chiarella, Executive Director. That request will be followed up with by the Director of the HMIS Program and Services and confirmation of the data purge will be sent to the requesting Agency Director once the process has been completed.

Following the parameters, set out by Loshin (2002), there are several parties who can claim full or partial ownership of CRHMIS data:

- A. **Creator:** The party that creates or generates the data
- B. **Consumer:** The party that uses the data
- C. **Funder:** The party that commissions the data
- D. **Packager:** The party that collects information for a particular use and adds value through formatting the information for a particular market or set of consumers
- E. **Subject:** The subject of the data claims ownership of that data

In the case of the CRHMIS, there is a hierarchy of ownership of data. It begins with the Subject (5) who can, at any time, submit a written request to CARES, Inc. to have his or her personal information removed from the database. These requests for data removal from the CRHMIS will be honored by CARES, Inc. when done through the correct protocol (below).

Secondly, The Consumer (2), or the agency that enters data, has the ability to claim the data within the CRHMIS that they have input as an agency. In this way, they can modify, delete or ask for a full purge as they desire. These requests for data removal from the CRHMIS will also be honored by CARES, Inc. when done through the correct protocol (below).

Last, the Packager (4), CARES, Inc., has ownership of the data within the database for the purposes outlined within this manual, namely:

1. The aggregation of data for reporting at the community level
2. Control of access to the data via usernames and log-ins
3. Data Quality Parameters to qualify data for admission into the CRHMIS
4. Helpdesk and reporting support requests

Data requests for PPI (client level data) must go through the contracted agency rather than the HMIS Director of the HMIS Program and Services. Upon written request by the Executive Director, CARES will grant access to client files as defined by the contractual agency. This access can range from read-only, aggregate data to client file level access. Similarly, though the data collected and packaged from the HMIS is often published and made available for use in grants, research and educational material, all such data aggregations and analysis belong to the packager, not the consumer who may be using that data for their own purposes.

## **Protocol for requesting data removal from the CRHMIS:**

### **Client (Subject) Request for Data Removal**

Please send a written, signed request to

CARES, Inc.  
C/O Director of the HMIS Program and Services  
200 Henry Johnson Blvd, Suite 4  
Albany NY 12210

Or fax to (518) 489-2237



Make sure to include your full name and which agency/agencies you visited and wish your records removed from. If you would like to also include your contact information, the HMIS Director of the HMIS Program and Services will verify your data removal once complete.

#### **Agency (Creator) Request for Data Removal**

Please send a written, signed request on agency letterhead to

CARES, Inc.  
C/O Director of the HMIS Program and Services  
200 Henry Johnson Blvd, Suite 4  
Albany NY 12210

Or fax to (518) 489-2237

Please specify if you would like to have a copy made of the data in CSV format, burned to CD. Make sure to include all programs you would like purged from the database, remembering that, once gone, there is no way to retrieve the information. The HMIS Director of the HMIS Program and Services will verify your data removal once complete.

## **Interagency Data Sharing for Coordinated Care**

A change in the way data sharing works will go into effect on February 1<sup>st</sup> 2017; the AWARDS feature of Expanded Consent and Client View. Agencies may opt OUT of data sharing at the program level and all consumers have to consent to the data share for each intake they complete with any agency, ensuring control of their own information remains in the consumer's hands. Please see below for more information on the process.

1. There are 3 levels of consent for the consumer; the intake staff must become familiar with the form and guide the consumer to ensure that they are choosing the option that best reflects their preference
2. Consumer data sharing will be covered by the overall consent form being used by the CRHMIS, however, the form within the HMIS will serve to indicate the level of interagency data sharing that occurs.
3. Refusal to participate in data sharing in no way impacts the ability of the project to enter the consumer into HMIS or serve the consumer; it simply prohibits the sharing of data with other participating agencies.
4. HIV/AIDS, DV, Behavioral Health and notes/logs are NEVER shared via the HMIS. This is to protect the privacy of consumers.
5. Any consumer in a project who has NOT agreed to share data MUST leave the default setting for user agreements. We are unable to completely remove this option from those agencies, so this will be monitored for compliance.
6. Substance Abuse, Mental Health, Runaway Homeless Youth (RHY) and HIV specific projects are NOT allowed to participate in data sharing at this time. The data share page must be left on the default of no sharing.
7. The signed ROI must match the consumer preference as recorded in the HMIS and be kept in the consumer file (electronic or physical) for monitoring purposes.

A PDF of the data sharing screen is available from your CARES, Inc. representative. Please contact them for



additional information and training.

## **Disclosure of Inclusion in the CRHMIS**

A change in the disclosure of inclusion in the CRHMIS goes into effect on January 1, 2017. Previously a posted sign was sufficient for consumer disclosure, however the CRHMIS Advisory Committee, in conjunction with the System Administrator, have made the move to a signed Release of Information and Informed Consent form. These may be found both on the CARES website and in the appendix of this manual. This ROI must match the consumer data sharing preferences as stated above and be kept in the consumer file (electronic or physical) for monitoring purposes.

As per HUD policy, no agency may decline to provide services to a client based on refusal to be included in the HMIS. While it is desirable to include as many clients as possible in the CRHMIS for both internal and external reporting as well as community planning, we operate on a client-first model and work within the comfort level of those we serve.

If you have clients who refuse all HMIS data entry make sure that you keep an intake record separately so that, for agency level reporting, you will be able to include those households in the report.

## **Distribution of HMIS Data**

CARES Inc. will provide quarterly and yearly reports on the aggregate data collected within the HMIS to the corresponding CoCs as well as the Advisory Committee. CARES, Inc. will also make any AHAR data accepted by HUD available to the CoCs. This is public information and a copy of the latest and historical reports will be provided to anyone, upon written request. These reports are also published on the CARES, Inc. website after CoC approval.

Continuum-wide, aggregate data will be provided to HUD annually as required through the HMIS Annual Performance Report, Annual Homeless Assessment Report and CoC Grant Application.

In general practice, aggregate county-wide and individual agency-level data may be provided to users and administration of that agency upon request for data-quality reasons or to meet agency needs. Non-users within an agency requesting any aggregate or individual data must have the written consent of the agency Executive-Director.

Protected Personal Information (PPI), agency-level information, or any data that may potentially point out an individual or single agency will not be distributed in any community level or published reporting. Individuals, agencies or governing bodies who wish to obtain individual or agency-level data may request such data from the agency Director.

In limited circumstances, HMIS data, including PPI, may be used for the purposes of care coordination or research. In these cases, the minimum amount of information required to coordinate care shall be disclosed; it is up to the professional judgement of staff to determine what information will be shared. Because situations and circumstances differ, there is no set protocol for what information to disclose when—Codifying specific guidelines in this regard may in fact undermine the ability to coordinate services. Additionally, an MOU between the organization(s) and CARES, Inc. defining and limiting the scope of data use must be in place before any data may be distributed. Depending on the specific circumstances of the project, an MOU may also be put in place between CARES, Inc. and agency or agencies participating in the project. This MOU must clearly articulate the scope of work, how the data is accessed, which data elements are shared, the goals of the project and limitations of data usage. The CARES, Inc. Executive Director or Director of HMIS Programs and Services must approve and sign off on each MOU that includes the sharing of PPI.



A list of projects in which HMIS is participating and the level of data sharing occurring is listed on the website at [caresny.org/privacy](http://caresny.org/privacy) for consumers to review. This list must be kept up to date and agencies must be informed when additions are made via the AWARDS Messages module and/or the CRHMIS list serve.

Consumers may choose to have their data removed from the database at any time by contacting the HMIS System Administrator and submitting a written request. All agencies with data concerning that consumer will be informed of the purge beforehand so that consumer records may be printed and stored according to agency policy.

### **Reporting with the HMIS**

The Director of the HMIS Program and Services regularly exports a system-wide aggregation of data. This data is analyzed to determine which agencies are compliant with the system and regulations. It is also used to identify areas of policy or data requirements that must be more thoroughly defined for individual agencies. Additional training or technical assistance is made available based on need.

Quarterly and annual reports are generated to share with the participants of the CARES Regional HMIS. These reports include a summary of the number and demographics of individuals and families participating in services in each program type for the given time period. **Aggregate reports do not include names, social security numbers, or any other identifying characteristics of individual clients.** Trends in the quarterly and annual reports are then examined and reported to the CoC governing body annually. Under no circumstances is client-level data distributed.

## **Grievance Policy**

### **For Clients**

All grievances regarding the handling of your personal information by an agency within the HMIS should be addressed to that agency. If you believe your grievance has not been sufficiently resolved by your agency, you may make a complaint to the HMIS Director of the HMIS Program and Services at:

CARES Inc  
ATTN: HMIS Director of the HMIS Program and Services 200  
Henry Johnson Blvd, Suite 4  
Albany NY 12210  
Phone: (518) 489-4013 fax (518) 489-2237

*CARES will attempt a voluntary resolution of the complaint and by ensuring that the participating agency is acting with accordance to the HMIS agency agreement. Note that CARES does **not** provide legal services.*

### **For Participating Agencies**

Complaints regarding the administration of the HMIS may be made to either CARES Inc.'s HMIS Director of the HMIS Program and Services or Executive Director at:

CARES Inc  
ATTN: HMIS Director of the HMIS Program and Services/Executive Director  
200 Henry Johnson Blvd, Suite 4  
Albany NY 12210  
Phone: (518) 489-4013 fax (518) 489-2237

Telephone complaints may be recorded for better customer care. CARES will follow up each complaint in writing



and, as appropriate, bring the complaint to the CoC leads and/or the CARES Regional HMIS Advisory Committee.

## **HIPAA Compliance**

Compliance with HIPAA regulations is only required for covered entities, such as community service providers that are also health care providers. For agencies that meet these criteria, participation in the HMIS requires compliance with HIPAA as defined and arranged within the agency. CARES, as the Director of the HMIS Program and Services, follows HIPAA precautions with ALL consumers in ALL agencies, runs background checks on all System level users and requires HIPAA and EHR training for all HMIS Administrative staff.

### **HIPAA Compliance within HOPWA Programs**

On October 9<sup>th</sup>, 2014 the Office of HIV/AIDS Housing released an updated Confidentiality User Guide. These policies and procedures have been modified to be compliant with this version of the guide. The HMIS is inherently HIPAA (and HITECH) compliant, but the CRHMIS team is aware that additional precautions must be made as a support team with access to PPI. As required by HOPWA Regulation 24 CFR 574 and 27F, proper security is taken with all electronic and physical documentation of identifying consumer data, written procedures are in effect, HIPAA training is undertaken by all CRHMIS staff and the revised Agency Agreement found at the back of this document acts as an MOU between each participating agency and CARES, Inc. For copies of these policies or questions about physical or electronic security, please contact the CRHMIS System Administrator at (518) 489-4130 x103 or at [hmis@caresny.org](mailto:hmis@caresny.org).

## **Monitoring of Participating Programs**

In order to ensure compliance with this manual and HUD privacy and security requirements, CARES, Inc. will do periodic monitoring of all programs participating in the HMIS; both mandated and voluntary. This monitoring will review data quality, data completeness, and compliance with the electronic and physical privacy and security procedures outlined in this manual.

Programs found to be out of compliance with the above will be evaluated by the HMIS Director of the HMIS Program and Services and a Plan of Correction; including additional training, measurable goals, a realistic timeline for correction and further monitoring, will be put in place.

Frequency of monitoring visits within a community, agency or program will be at the discretion of the HMIS Director of the HMIS Program and Services. Monitoring Visit results will be shared with the Collaborative Applicant and/or CoC leads for the community and may be discussed with the HMIS Advisory Committee.

## **Participation**

All recipients of HUD McKinney-Vento funds are required to participate in the HMIS. This includes recipients of Emergency Solutions Grants (ESG), Supportive Housing Program (SHP), Shelter Plus Care (S+C) and Section 8 Mod Rehab for SRO.

In addition to McKinney-Vento-funded recipients, other housing assistance programs may require participation as a condition of funding. Agencies who receive funding via the Housing Opportunities for Persons with AIDS (HOPWA) program and are dedicated to serving homeless persons must participate. Providers of Grant and Per Diem, Supportive Services for Veteran Families (SSVF) or Veteran Affairs Supportive Housing (VASH) voucher programs by the Department of Veterans Affairs (VA) are also subject to ongoing participation mandates, as are some NYS OTDA funded programs including the Solutions to End Homelessness Program (STEHP). CARES, Inc. works closely with HUD and NYS OTDA to ensure the program data collection and reporting requirements are consistently met by the



database and administration of this program.

While not all service agencies are mandated to participate, both HUD and local Continuums of Care encourage participation by all agencies who serve the homeless population, including those funded by other federal programs or non-government sources. Participation by organizations that do not receive HUD Continuum of Care funding is voluntary (other than for the exceptions noted), but strongly encouraged in order to achieve an accurate picture of homeless services in the region. Because overall participation by all agencies that provide homeless housing services is rated by HUD annually through the CoC Grant Application process.

### **Benefits to Non-Mandated Programs**

Voluntary participation by non-mandated programs and agencies helps the community meet the threshold for new funding and retain current funding for current homeless housing, create new homeless housing and assist with community planning and development. Through this collaborative effort, non-mandated agencies receive the benefit of a more sophisticated homeless services network in their community, better access to data for research, grant writing and program planning and representation for those they serve to HUD and other Federal partners through standard HMIS reports such as the HMIS Dedicated Grantee Annual Progress Report and the Annual Homeless Assessment Report. Additionally, and perhaps most importantly, access to more and better housing opportunities for persons and households experiencing homelessness is potentially created through renewals, new projects and bonus projects through the CoC Grant process, thus reducing the burden of local agencies, both not-for-profit and government, trying to assist and house homeless persons and families.

### **Benefits to Continuums of Care**

In addition to fulfilling the HUD requirements, participation in the HMIS enables the participating counties to report accurate statistical data to funders and policy makers regarding topics such as financial resources, county of origin, housing utilization and more. It ensures that all local providers are using a common intake instrument, thereby providing the most effective and efficient service to clients while allowing cross-agency data analysis for the community. The reporting capabilities allow agencies to generate accurate and timely reports, reducing time spent away from client services for monitoring, reporting and case review. Electronic management of client records also allows for remote access, reduced use of office resources such as paper, printer ink and office supplies while providing consistent, neat, easily accessed files to present to reviewers, some of whom are allowing remote monitoring and auditing at this time.

### **Privacy**

Baseline privacy standards are required of all programs and must balance the need to protect the confidentiality of client data with the practical realities of homeless service provision. Each agency is required to review and/or develop a privacy policy specific to the individual agency's needs which includes HMIS activities as it pertains to confidential client data in electronic and hard-copy formats. A copy of the above-referenced agency privacy policy must be provided to CARES, Inc., as the HMIS Director of the HMIS Program and Services and, if the agency has a website, must be published thereon in accordance with HUD's 2004 Privacy and Security standards.

CARES, Inc. applies strict privacy policies and procedures internally, compliant with all HIPAA, HOPWA and HITECH rules. For copies of these policies, please contact or questions about physical or electronic security, please contact the CARES, Inc. Security Officer, Tersha Choy, at [tchoy@caresny.org](mailto:tchoy@caresny.org) or via phone at (518) 489-4130x101.

### **Participation Fees**

Fees for participating in the HMIS vary from community to community and project to project and may require a



contract with CARES, Inc. for inclusion in the HMIS. Please contact the Director of the CARES HMIS Program and Services department for information regarding your specific project type and community at [athlessen@caresny.org](mailto:athlessen@caresny.org) or (518) 489-4130.

## **Responsibilities**

Participating agencies and users have specific responsibilities when using the HMIS to ensure proper functioning of the system, accurate data collection, as well as the privacy and security of all consumers. These responsibilities are outlined below.

### ***Participating Agency Responsibilities***

CARES will enter into a Business Associates Agreement with agencies that are eligible to participate in the HMIS. The Business Associates Agreement will outline the specific manner in which CARES will utilize the data submitted in the HMIS.

The participating agency is responsible for all activities associated with agency staff access and use of the Foothold Software System (AWARDS). The agency will be held responsible for any misuse of the software system by the designated staff.

Each participating agency must:

1. Establish operating practices to ensure organizational adherence to the HMIS Policies and Procedures.
2. Establish a privacy policy to ensure the protection of confidential client data. A copy of this policy should be provided to the Director of the HMIS Program and Services and, if an agency website exists, be published thereon.
3. Communicate operating practices, including privacy protection and user responsibilities, to all agency users. Agencies should document that each user understands and accepts the responsibilities associated with use.
4. Monitor user compliance and periodically review control decisions.
5. Edit and update agency information, including staff, location, and capacity, as needed.
6. Notify all users in their agency of interruptions in service.
7. Detect and respond to violations of the Policies and Procedures or agency procedures.
8. Maintain complete and accurate client records for participating programs within the HMIS.
9. Monitor that users respectfully collect data for all required fields in the intake and discharge, indicated by an asterisk, to the best of their ability. This includes required fields that may not be required by HUD for all program types but are used for reporting at the local, State and Federal level, and as such are important to the proper collection and interpretation of data from the HMIS as well as the assurance of continued funding.

Agencies must follow all privacy and security requirements outlined in this manual in order to participate in the CARES Regional HMIS.

### **User Responsibilities**

Each user within a participating agency is responsible for maintaining client privacy and protecting each client's protected personal information. A User ID and Password will be provided to each User within the agency by the Director of the HMIS Program and Services at the written request of the Agency Executive or Program Director once training has been completed.





All Users must understand and accept the following responsibilities for utilizing the HMIS:

1. The User ID and Password are to be used by the assigned user only and must not be shared with anyone. All Users will take all reasonable means to keep passwords physically secure.
2. All Users will log-off the system before leaving the work area.
3. Users must **not** decline services to a client or potential client if that person refuses to allow entry of information in the HMIS (except if that policy is over-riden by agency policy or if the information is required to be collected as a condition of receiving services).
4. The user has primary responsibility for information entered by the user. Information entered by users is truthful, accurate and complete to the best of the user's knowledge.
5. Users will not solicit from or enter non-required information about clients into the HMIS unless the information is required for a legitimate program purpose such as to provide services to the client.
6. Any hard copies of personally identifiable (client-level) information printed from the HMIS must be kept in a secure file, and destroyed when no longer needed.
7. All Users must immediately notify the Agency Executive Director should a breach in security be recognized or suspected.
8. Users may only access the HMIS from a designated terminal, following agency guidelines for electronic access of records. Access to the HMIS from public or unsecured computers and networks is prohibited.
9. Users may not send identifying information on clients through standard e-mail but, instead, should utilize the secure messaging feature of the HMIS-AWARDS system for all client-based communications, preferably through a helpdesk ticket.
10. Users agree to respectfully collect all required fields in the intake and discharge, indicated by an asterisk, to the best of their ability. This includes required fields that may not be required by HUD for all program types but are used for reporting at the local, State and Federal level, thus are important to the proper collection and interpretation of data from the HMIS as well as the assurance of continued funding.

### **Lead Agency (CARES, Inc.) Responsibilities**

CARES, Inc., as the Lead agency for the CRHMIS, will monitor compliance with the established policies and procedures while providing the following services:

1. Internal compliance with all HUD, HIPAA and HITECH regulations
2. Monitoring of privacy and security compliance of all participating programs
3. Access for questions and concerns with the Software Solution Provider, Foothold Technology
4. Assistance with HUD mandated reporting on an agency/CoC level
5. AHAR and CoC Grant Application reporting
6. Annual and Quarterly CoC reports on basic, aggregate client demographics
7. Creation, deletion and monitoring of user log-ins and passwords
8. Daily helpdesk (work days) for standard helpdesk issues
9. Evaluations and strategies for better use of the HMIS in regards to HUD reporting and data quality
10. Monitoring of HUD policy and procedure regarding HMIS with regular CoC updates
11. Monthly New User Trainings (in a group setting)
12. Remote access to all in-house trainings upon request
13. Regular updates on HMIS policy, procedure and the database via a variety of mediums
14. Rapid turn-around for addressing all help desk tickets
15. Ongoing CoC level data quality checks and follow-up

**Additional fees may be assessed for HMIS TA services that are not within the normal scope of CARES Inc.'s HMIS Director of the HMIS Program and Services duties; including, but not limited to, the following:**

- Agency/Program evaluation for use of the database beyond CoC requirements
- Agency specific report and form building
- Agency specific training on non-HUD mandated features of the database



- Customized internal or external reports not related to HUD
- Large helpdesk requests due to user error
- Program level data quality and clean-up assistance
- Training on basic computer skills which complement the use of the HMIS, including but not limited to; internet, Excel, keyboarding and MS Word Document creation

### **CoC Lead Responsibilities**

The CoC leads in each community will be presented with a Memorandum of Understanding (MOU) which requires close involvement in the reporting and regulation of HMIS data. By signing this, the CoC leads, on behalf of their CoC, agree to the terms and conditions outlined therein.

## **Security**

Certain electronic security precautions are required of each agency:

- Install and maintain a firewall on the user's computer or the agency network
- Password protected screensavers set at no more than 5 minute intervals
- Automatically updating antivirus software installed and maintained on every internet-accessible computer
- Keep the Operating System on each HMIS access computer terminal up to date with the latest security devices
- All users must attend a formal HMIS training prior to being assigned a username and password in the database.

This will ensure that proper training on security, policy and procedure has been established for all users in the database. Sharing of usernames and log-ins is strictly prohibited for security reasons.

In the event a user no longer needs access to a program or leaves the employ of the agency, the program manager or Executive Director **MUST** contact the HMIS Director of the HMIS Program and Services within 24 hours of the end of employment so that the active user account can be disabled. This can be done in advance, so Directors and administrative staff are encouraged to alert the Director of the HMIS Program and Services as soon as it is known that a user account will no longer be needed.

In order to facilitate the privacy and security of HMIS consumers, any user account that is inactive for 30 days will be deactivated **until the HMIS Director of the HMIS Program and Services is contacted by a program manager or agency officer in writing** (an e-mail from the agency email address is adequate). If the user is inactive for more than 90 days, or if there has been a significant data elements or policy change during the time off the system, retraining may be required prior to regaining access to the HMIS.

It is recommended that a Written Information Security Policy (WISP), with an electronic information policy, be in place for all agencies using HMIS. For a copy of the CARES, Inc. WISP, please contact the HMIS Director at [hmis@caresny.org](mailto:hmis@caresny.org) or via phone at (518) 489-4139 x103.

### **User access to the HMIS**

The AWARDS software is a web-based software system accessed via the Internet. Each agency user is assigned a unique log-in name and a password to access the system. Within the agency's set-up in the HMIS, each user is assigned specific permissions to view and work only with those programs and records to which he or she has been assigned. A user in one program within an agency is prohibited from viewing or modifying any records in another program area unless express permission has been given by a program supervisor or Executive Director. No user can access the files of any other agency. All users are reminded to never share their log-in names or passwords with anyone else, and not to keep reminder notes in obvious areas.



Access to the HMIS is granted by the Director of the HMIS Program and Services. When an agency needs to add or remove a user, there must be a written request (e-mail, FAX or AWARDS message) from the Program or Executive Director requesting the action. All new users must attend training prior to being assigned a username and password.

## **Software Security**

Maintaining individual client privacy is among the highest priorities in managing the HMIS. The AWARDS software uses the highest encryption currently allowable by law along with the use of SSL (Secure Sockets Layer) technology. Foothold Technology uses several hardware and software firewalls and AWARDS keeps warm backups locally and sends daily backups to a separate data center. All data is stored in two data centers in two different states on 8 different electric grids. Warm copies are available in 2-hour intervals and daily copies are available in 24-hour intervals. Information sent from individual agency sites cannot be unscrambled. In addition, a highly sophisticated series of user names and passwords protect data from unauthorized viewing and manipulation within individual agencies, ensuring no one has access to information they should not see. Data security is also monitored by the Director of the HMIS Program and Services through regular reports and activities. For questions about physical or electronic security of the AWARDS software, please contact the CARES, Inc. Security Officer, Tersha Choy, at [tchoy@caresny.org](mailto:tchoy@caresny.org) or via phone at (518) 489-4130 x101.

## **Software**

As selected by the HMIS Implementation Committee, CARES, Inc. has contracted with Foothold Technology as the software vendor for the CARES Regional HMIS. Foothold's software, AWARDS, is a web-based system in which users access the system via the Internet and includes a comprehensive case management system that each agency can utilize for managing client records, case notes, and referral information if desired. For more information on how to fully utilize these components, please contact your customer service rep or the Director of the HMIS Program and Services at [hmis@caresny.org](mailto:hmis@caresny.org) or by phone at (518) 489-4130

## **Technical Assistance**

All concerns with utilizing the HMIS system should be directed to the HMIS Director of the HMIS Program and Services at CARES, who can be reached by phone at (518) 489-4130 x103, by e-mail at [hmis@caresny.org](mailto:hmis@caresny.org) or through the HMIS (AWARDS) internal messaging and helpdesk modules for confidential e-mail capability. CARES offers assistance to agencies who would like to better integrate the use of the HMIS software into existing procedures through telephone and web conferences as well as occasional site visits. Assistance in gathering agency-wide or county-wide aggregate information for funding sources and grant writing is also available when a written request is made at least a week in advance.

### **CARES will provide, at no additional fees, the following TA services:**

- Access for questions and concerns with the SSP, Foothold Technology
- AHAR and CoC Grant Application reporting
- Annual and Quarterly CoC reports on basic, aggregate client demographics
- Creation, deletion and monitoring of user log-ins and passwords
- Daily helpdesk (work days) for standard helpdesk issues
- Evaluations and strategies for better use of the HMIS in regards to HUD reporting
- Monitoring of HUD policy and procedure regarding HMIS with regular CoC updates
- Monthly New User Trainings (in a group setting)
- Monthly user-groups on topics chosen with user-input
- Quarterly Advanced User Trainings (in a group setting)



- Remote access to all in-house trainings upon request
- Regular updates on HMIS policy, procedure and the database via a variety of mediums
- Rapid turn-around for addressing all help desk tickets (one business day)
- Ongoing CoC level data quality checks and follow-up
- Access to social networking for updates and networking among users and administrators

**Additional fees may be assessed for HMIS TA services that are not within the normal scope of CARES Inc's HMIS**

**System Administer duties; including, but not limited to, the following:**

- Agency/Program evaluation for use of the database beyond HUD requirements
- Agency specific report and form building
- Agency specific training on non-HUD mandated features of the database
- Customized internal or external reports not related to HUD
- Large helpdesk requests due to user error
- Program level data quality and clean-up assistance
- Training on basic computer skills which complement the use of the HMIS, including but not limited to; internet, Excel, keyboarding and MS Word Document creation

## **Training**

CARES offers on-going user training for new and current users who need a refresher on the basics. Training sessions will be provided in 1-4 hour sessions for which attendees are required to sign up in advance. Users participating in each training session are expected to be computer-literate and to attend the full training session. No individual will be given access to the database until initial training has been completed. Access permission for each new user must be given to the Director of the HMIS Program and Services prior to new user set-up. The Executive Director or Program Manager may e-mail or fax permission information to CARES Inc. While users will be allowed to attend training prior to this verification, no active agency access will be given until the permission has been received and processed.

Additionally, Advanced User trainings, Program Director and Administrator trainings, recurring user-groups and periodic CoC updates will be held regularly to help agencies best use and monitor the HMIS system and accompanying software. A list of all available trainings and groups, along with registration information, is available and regularly updated on CARES' website (<http://www.caresny.org>) and all social networking mediums. All trainings and user-groups are available remotely via webinar to accommodate those who cannot attend in person. Remote access requires either a microphone and speaker system, or a regular telephone in conjunction with a computer.

## **User Access to the Database**

Each program within an agency will be permitted 15 user accounts to access the HMIS. The HMIS Director of the HMIS Program and Services will have the ability to add these users to the system as needed. Agencies exceeding the permitted number of system users will be charged an additional monthly software fee\* plus a service fee for additional CARES' staff time to be determined after a scope of work has been completed.



## **Addendum A: Costs of Additional Services**

### *Pricing Structure*

#### **Agency and Community level projects:**

Pricing for projects is variable and based on a rate of \$80 per hour. Please contact the HMIS Director of the HMIS Program and Services at (518) 489-4130 x103 for more information on individual projects including, but not limited to:

- Basic computer instruction
- Agency level training on non-CoC features of the HMIS
- Operational design and the HMIS
- Data quality issue resolutions
- Large help-desk ticket resolution
- Database customization via form and report building

#### **Continuum of Care inclusion in the CARES Regional HMIS**

There are standard contracts available for CoCs interested in joining with the CARES Regional HMIS. Please contact CARES, Inc. for more information. We are dedicated to working with the communities we serve in order to create a service and price base that meets the individual needs of those we serve. Please contact the HMIS Director of the HMIS Program and Services at (518) 489-4130 x103 for more information.

#### **Non-Continuum of Care Agencies and Programs**

As more and more program types which are not covered under the CoC umbrella are mandated to participate in the HMIS, CARES, Inc. has developed pricing strategies to address their specific needs and help their compliance via inclusion within the HMIS. Please contact the HMIS Director of the HMIS Program and Services at (518) 489-4130 x103 for more information.

#### **Domestic Violence Dedicated Programs**

DV programs are prohibited from participating in the HMIS by the Violence Against Women Act (VOWA). There are some funding types, however, which require a comparable database to the HMIS for these programs. While each agency is responsible for creating/contracting for this database, your HMIS Director of the HMIS Program and Services is responsible for ensuring that this database meets HMIS regulations. Contact the HMIS Director of the HMIS Program and Services at (518) 489-4130 x103 for more information on this topic and to help ensure the compliance of your database with the dynamic structure of the HMIS.

#### **Additional Users**

Each program within an agency will be permitted 15 user accounts to access the HMIS. The HMIS Director of the HMIS Program and Services will have the ability to add these users to the system as needed. Agencies exceeding the permitted number of system users will be charged an additional monthly fee.

16-30 users total \$500 monthly

31-45 users total \$1000 monthly

46-60 users total \$1,500 monthly

61-75 users total \$2,000 monthly

76+ users must separately contract with the vendor, Foothold Technology, and upload to the HMIS

*\*These fees are based on set costs from the software vendor. There is no intermediate category for additional 10-15 users and CARES, Inc. does not receive any administrative income from additional user fees, however, administrative fees for staff time may be assessed depending on the scope of the project.*



## CRHMIS Client Informed Consent and Release of Information

\_\_\_\_\_ (*agency name*) \_\_\_\_\_ participates in the CARES Regional Homeless Management Information System (CRHMIS). This means that we collect information about your household and input it into a secure and private database that allows us to keep track of that information to better assess and serve your needs. The CRHMIS is dedicated to the privacy and safeguarding of the information collected and input into the HMIS database and does not publish identifying, client level data. For more information, please see our complete policy and procedure manual, which includes information on opting out of the HMIS, data ownership and a list of research and coordination projects that use HMIS information at [www.caresny.org/HMIS-policies](http://www.caresny.org/HMIS-policies).

To better assist in the coordination and provision of services, we are requesting your permission to share limited information about you with other homeless services providers. As the owner of your own information within the CRHMIS, you have the right to choose whether or not other users of the system can see any of your personal information and on what level. HIV/AIDS information, Domestic Violence information, Behavioral health (mental illness and substance abuse) and client notes are NOT shared through the HMIS. This consent will be in effect for a minimum of 36 months but may be revoked at any time.

**Please check the (1) box below which indicates the level at which you are willing to share your information with the homeless services coordinators and providers in the community;**

I agree to share my name, gender and program enrollment history through the HMIS with other provider homeless services agencies.

I agree to share my name, gender, program enrollment history, demographic, income and contact information through the HMIS with other partner homeless services agencies.

I do NOT agree to share any of my information through the HMIS with other partner homeless services agencies.

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

\_\_\_\_\_  
PRINTED name of Client

\_\_\_\_\_  
Signature of Client, Guardian or Power of Attorney

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



### CARES Regional HMIS Consumer Information Consent Form



Information collected in the HMIS database is protected in compliance with the standards set forth in the Health Insurance Portability and Accountability Act (HIPAA) and the U.S. Department of Housing and Urban Development HMIS Data Standards. Every person and agency that is authorized to read or enter information into the database has signed an agreement to maintain the security and confidentiality of the information. Any person or agency that is found to violate their agreement may have their access rights terminated and may be subject to further penalties.

**I UNDERSTAND THAT:**

The partner agencies may share limited identifying information about the people they serve with other parties working to end homelessness.

The release of my information does not guarantee that I will receive assistance. This release of information includes public funded cash disbursements received during the past 3 years.

This authorization will remain in effect for a minimum of 36 months unless I revoke it in writing, and I may revoke authorization at any time by signing a written statement or Revocation form.

The following personal information will not be shared with any HMIS partner agencies via this HMIS computer system.

1. HIV/AIDS information, such as status, diagnostic test results, mode of transmission, sexuality.
2. Domestic violence information, such as abuse history, abuser information, trauma information.
3. Behavioral health information, such as substance and alcohol abuse and mental illness.
4. Clients supportive services contacts, medication information and case notes.

If I revoke my authorization, all information about me already in the database will remain, but will become invisible to all of the partner agencies, except public (county, state or federal) cash disbursements.

If I am applying for county, state or federal cash disbursements such as ESG or SSVF, this information will be shared with Collaborative users and State agencies.

By signing this form, I agree to share the following level of information with other partner agencies via the HMIS computer system:

- I agree to share my name (first, middle, last), gender, program enrollment, and exit dates information via the HMIS system with other partner agencies.
- I agree to share my name, gender, ancestry, program enrollment and exit dates, demographic information, miscellaneous section, and contacts information, cash disbursements via the HMIS system with other partner agencies.
- I do not agree to share any of my information via the HMIS system with other HMIS partner agencies via the HMIS computer system. Exception is cash disbursements as noted above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Agency: \_\_\_\_\_ Program: \_\_\_\_\_



## Expanded Consent and Client View Guide


### AWARDS QUICK REFERENCE GUIDE

The Expanded Consent and Client View feature allows users to view certain client details within Consumer Lookup for clients who have multiple program histories between agencies. These details include the last four digits of the client's SSN, and events recorded within the Client History Report. This guide will describe what details are visible under various circumstances.

To view client details, complete the following steps:

1. From the AWARDS Opening Menu page, click **Consumer Lookup**. The *Consumer Lookup* page is displayed.
2. For full access to client details, enter the client's full SSN in the **SSN** field, and in the **First Name** and **Last Name** fields, type the first two letters of the consumer's first and last names, respectively.
3. Click the **Limit Search Results** to drop-down arrow and select the number of matches that should be displayed in the lookup results.
4. Click **SEARCH**. The *Consumer Lookup Results* page is displayed. For clients who have program histories in multiple agencies, the last four SSN digits and Client History Report icon may be available, depending on consent and search information used. Refer to the chart below.

Search Information Used:	Consent Given by Client within OTHER Agency	Appear in search results?	Last 4 SSN digits show?	Client History Report available?
First Name Last Name Full SSN	A	YES	YES	NO
First Name Last Name Full SSN	B	YES	YES	YES
First Name Last Name Full SSN	C	NO	n/a	n/a
First Name Last Name No SSN	A or B	YES	YES	NO
First Name Last Name No SSN	C	NO	n/a	n/a
Any	A, B or C - marked as EXPIRED	NO	n/a	n/a

5. If displayed, click the Client History Report icon  to the left of the client and agency records to be viewed. This version of the report will include any program histories that contain an effective level B consent, and list events in chronological order *without* links to view details.

The process of viewing client details is now complete.





*ULSTER COUNTY  
CONTINUUM of CARE*

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**Attachment 3A-6: HDX Competition Report**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit

## 2018 HDX Competition Report

### PIT Count Data for NY-608 - Kingston/Ulster County Coc

#### Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT
<b>Total Sheltered and Unsheltered Count</b>	<b>328</b>	<b>411</b>	<b>464</b>
Emergency Shelter Total	262	346	403
Safe Haven Total	0	0	0
Transitional Housing Total	28	31	29
<b>Total Sheltered Count</b>	<b>290</b>	<b>377</b>	<b>432</b>
<b>Total Unsheltered Count</b>	<b>38</b>	<b>34</b>	<b>32</b>

#### Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT
<b>Total Sheltered and Unsheltered Count of Chronically Homeless Persons</b>	<b>34</b>	<b>14</b>	<b>32</b>
Sheltered Count of Chronically Homeless Persons	8	6	23
Unsheltered Count of Chronically Homeless Persons	26	8	9

**2018 HDX Competition Report  
PIT Count Data for NY-608 - Kingston/Ulster County Coc**

**Homeless Households with Children PIT Counts**

	2016 PIT	2017 PIT	2018 PIT
<b>Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children</b>	<b>49</b>	<b>68</b>	<b>91</b>
Sheltered Count of Homeless Households with Children	47	64	89
Unsheltered Count of Homeless Households with Children	2	4	2

**Homeless Veteran PIT Counts**

	2011	2016	2017	2018
<b>Total Sheltered and Unsheltered Count of the Number of Homeless Veterans</b>	<b>13</b>	<b>13</b>	<b>8</b>	<b>5</b>
Sheltered Count of Homeless Veterans	7	10	8	3
Unsheltered Count of Homeless Veterans	6	3	0	2

## 2018 HDX Competition Report

### HIC Data for NY-608 - Kingston/Ulster County CoC

#### HMIS Bed Coverage Rate

Project Type	Total Beds in 2018 HIC	Total Beds in 2018 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	89	17	72	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	30	0	30	100.00%
Rapid Re-Housing (RRH) Beds	8	8	0	NA
Permanent Supportive Housing (PSH) Beds	138	0	138	100.00%
Other Permanent Housing (OPH) Beds	20	0	20	100.00%
<b>Total Beds</b>	<b>285</b>	<b>25</b>	<b>260</b>	<b>100.00%</b>

## 2018 HDX Competition Report

### HIC Data for NY-608 - Kingston/Ulster County CoC

#### PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	15	17	21

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

Households with Children	2016 HIC	2017 HIC	2018 HIC
RRH units available to serve families on the HIC	0	0	5

#### Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC
RRH beds available to serve all populations on the HIC	2	2	8

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

#### Summary Report for NY-608 - Kingston/Ulster County CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HIMS System. There are seven performance measures. Each measure may have one or more "metrics" used to measure the system performance. Click through each tab above to enter FY2017 data for each measure and associated metrics.

**RESUBMITTING FY2017 DATA:** If you provided revised FY2017 data, the original FY2017 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

**ERRORS AND WARNINGS:** If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HIMS data and generate a new HIMS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and "save" before closing.

#### Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

## 2018 HDX Competition Report FY2017 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)				
	Submitted FY 2016	Revised FY 2016	FY 2017	Submitted FY 2016	Revised FY 2016	FY 2017	Difference	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
1.1 Persons in ES and SH	1372		1413	92		84	-8	55		48	-7
1.2 Persons in ES, SH, and TH	1435		1479	96		89	-7	56		52	-4

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client's entry date, effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.

	Universe (Persons)			Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)				
	Submitted FY 2016	Revised FY 2016	FY 2017	Submitted FY 2016	Revised FY 2016	FY 2017	Difference	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	1387		1424	100		106	6	59		60	1
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	1450		1490	106		112	6	60		64	4

## 2018 HDX Competition Report FY2017 - Performance Measurement Module (Sys PM)

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

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

After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)			Returns to Homelessness in Less than 6 Months			Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years	
	Revised FY 2016	FY 2017		Revised FY 2016	FY 2017	% of Returns	Revised FY 2016	FY 2017	% of Returns	Revised FY 2016	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO	0			0			0			0			0	
Exit was from ES	543			67		12%	37		7%	46		8%	150	28%
Exit was from TH	24			4		17%	2		8%	2		8%	8	33%
Exit was from SH	0			0			0			0			0	
Exit was from PH	79			1		1%	0		0%	1		1%	2	3%
<b>TOTAL Returns to Homelessness</b>	<b>646</b>			<b>72</b>		<b>11%</b>	<b>39</b>		<b>6%</b>	<b>49</b>		<b>8%</b>	<b>160</b>	<b>25%</b>

### Measure 3: Number of Homeless Persons

#### Metric 3.1 – Change in PIT Counts

9/6/2018 1:52:16 PM



## 2018 HDX Competition Report FY2017 - Performance Measurement Module (Sys PM)

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

	January 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	328	411	83
Emergency Shelter Total	262	346	84
Safe Haven Total	0	0	0
Transitional Housing Total	28	31	3
Total Sheltered Count	290	377	87
Unsheltered Count	38	34	-4

### Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	1446		1479	33
Emergency Shelter Total	1382		1424	42
Safe Haven Total	0		0	0
Transitional Housing Total	75		77	2

## 2018 HDX Competition Report FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	32		33	1
Number of adults with increased earned income	10		5	-5
Percentage of adults who increased earned income	31%		15%	-16%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	32		33	1
Number of adults with increased non-employment cash income	7		4	-3
Percentage of adults who increased non-employment cash income	22%		12%	-10%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	32		33	1
Number of adults with increased total income	16		9	-7
Percentage of adults who increased total income	50%		27%	-23%

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

#### Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	63		57	-6
Number of adults who exited with increased earned income	5		9	4
Percentage of adults who increased earned income	8%		16%	8%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	63		57	-6
Number of adults who exited with increased non-employment cash income	19		19	0
Percentage of adults who increased non-employment cash income	30%		33%	3%

#### Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	63		57	-6
Number of adults who exited with increased total income	23		28	5
Percentage of adults who increased total income	37%		49%	12%

## 2018 HDX Competition Report FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1215		1240	25
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	264		271	7
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	951		969	18

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1308		1309	1
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	289		297	8
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	1019		1012	-7

2018 HDX Competition Report  
**FY2017 - Performance Measurement Module (Sys PM)**

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

This Measure is not applicable to CoCs in FY2017 (Oct 1, 2016 - Sept 30, 2017) reporting period.

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

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	0		0	0
Of persons above, those who exited to temporary & some institutional destinations	0		0	0
Of the persons above, those who exited to permanent housing destinations	0		0	0
% Successful exits				

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

## 2018 HDX Competition Report FY2017 - Performance Measurement Module (Sys PM)

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing destinations	1101		1168	67
Of the persons above, those who exited to permanent housing	740		778	38
% Successful exits	67%		67%	0%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	250		247	-3
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	247		216	-31
% Successful exits/retention	99%		87%	-12%

# 2018 HDX Competition Report

## FY2017 - SysPM Data Quality

### NY-608 - Kingston/Ulster County Coc

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

# 2018 HDX Competition Report

## FY2017 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH			All Street Outreach				
	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017				
1. Number of non-DV Beds on HIC	60	60	68	68	30	30	30	30	169	165	170	170				2				
2. Number of HMIS Beds	60	60	68	68	30	30	30	30	169	165	170	170				2				
3. HMIS Participation Rate from HIC ( % )	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00				100.00				
4. Unduplicated Persons Served (HMIS)	1359	1359	1385	1429	83	79	75	77	246	267	394	220	213	235	11	8	0	0	0	0
5. Total Leavers (HMIS)	1090	1158	1079	1154	56	53	49	48	64	90	86	67	143	179	8	7	0	0	0	0
6. Destination of Don't Know, Refused, or Missing (HMIS)	270	385	85	40	5	4	6	3	1	1	0	1	14	14	0	0	0	0	0	0
7. Destination Error Rate (%)	24.77	33.25	7.88	3.47	8.93	7.55	12.24	6.25	1.56	1.11	0.00	1.49	9.79	7.82	0.00	0.00				



2018 HDX Competition Report  
 Submission and Count Dates for NY-608 - Kingston/Ulster County Coc

Date of PIT Count

Date	Received HUD Waiver
1/29/2018	

Report Submission Date in HDX

Submitted On	Met Deadline
2018 PIT Count Submittal Date	4/26/2018
2018 HIC Count Submittal Date	4/26/2018
2017 System PM Submittal Date	5/30/2018



*ULSTER COUNTY*  
*CONTINUUM of CARE*

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**Attachment 3B-2: Order of Priority in Written Standards**

**Refer to page 2 #4**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



# *ULSTER COUNTY CONTINUUM of CARE*

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## **Written Standards**

### **1. Continuum of Care Code of Conduct**

The following Code of Conduct provides a foundation of ethics for the Ulster County Continuum of Care (Continuum)

The Continuum prohibits the solicitation and acceptance of gifts or gratuities (anything of monetary value) by officers, employees and agents for their personal benefit.

- A. The Continuum promotes impartiality in performing official duties, and prohibits any activity representing a conflict of interest. You should not act on a matter if a responsible person who knew the circumstances of the situation could legitimately question your fairness.
- B. The Continuum prohibits the misuse of position; You cannot use your position with the Continuum for your own personal gain or the benefit of family or friends.
- C. The Continuum shall put forth honest effort in the performance of their duties.
- D. The Continuum shall not knowingly make unauthorized commitments or promises of any kind purporting to bind the Continuum without previous Board Approval.
- E. The Continuum shall adhere to all laws and regulation that provide equal opportunity for all Americans regardless of race, color, religion, sex, national origin age or handicap.

The code has been distributed to the Continuum's Board of Directors, and is made available to the public.

Adoption Date: October 2015

### **2. Grievance Policy and Procedure for Written and Verbal Complaints**

#### *Policy Statement*

It is the policy of the Ulster County Continuum of Care (UCCOC) to provide its members with a fair and efficient process to present and resolve complaints and grievances. In the case of complaints about programs, it must be clear that the CoC is not an official oversight entity but does have oversight responsibility for CoC activities. .



# *ULSTER COUNTY CONTINUUM of CARE*

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Each HUD funded organization shall have a grievance procedure and shall implement the procedure when applicable.

Adoption Date: October 2015

### **3. HMIS Data Sharing and Exporting**

1. CoC agencies or programs in the Kingston/Ulster County CoC with a separate AWARDS with Foothold Technology may upload into the CARES Regional HMIS instead of inputting data directly. Uploads should occur on a monthly basis, and be completed by the 15<sup>th</sup> of each month for reporting purposes.
2. In order for the CoC and the Data Committee to be able to attain accurate data from the HMIS for planning purposes, CoC agencies sign an agreement to disseminate program level data for the data committee to use for planning purposes.
3. C of C participating agencies agree to allow CARES, our HIMS Lead Agency to fulfill requests by the Data committee for program level aggregate data for use in CoC planning and program performance. This data will not contain any personal identifying information and will only be reviewed in aggregate form.

Adoption Date: April 2014

### **4. Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Populations in Permanent Supportive Housing**

The UCCOC is committed to providing permanent supportive housing placements for chronically homeless individuals and families. Following the guidance issued by HUD in Notice CPD-16-11 Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Populations in Permanent Supportive Housing, all CoC funded agencies administering HUD funded programs will prioritize placement for chronically homeless persons for beds that are made available through annual turnover. *Refer to Appendix 1 for CPD Notice*

Adoption Date: April 2014



## *ULSTER COUNTY CONTINUUM of CARE*

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### **5. UCCOC Ranking Procedure and Process**

#### **Annual Rating and Ranking Procedure of the CoC Project Ranking:**

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

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

Deadlines for applications will be based each year on the Notice of Funding Allocation (NOFA). Each NEW and RENEWAL project sponsor shall submit the appropriate application along with the required documents in a single electronic submission to the CA. The CA will forward all submissions to the Evaluation Subcommittee. Applications will only be accepted from Local Continua which are members of the UCCOC.

In order to better track progress on individual organizational projects in relation to overall performance goals established by the UCCOC Board, the Evaluation Subcommittee will review projects for expenditures and progress at 6-month intervals.

#### **Ranking Process**

The scoring tool used to review and rank projects will be revised annually based upon HUD requirements and recommendations from the Ranking Committee with input from CoC applicants.

The Ranking Committee members are identified based upon the procedures listed above. The CA prepares the renewal application packet used for ranking and provides instructions and training for the applicants. Applicants are offered Technical Assistance from the CA in completing their packets to ensure accuracy.

The CA prepares the information for the Ranking Committee including a scoring tool. The Ranking Committee receives the information at least 7 days before the ranking meeting. The Ranking Committee reviews all renewal applications and are offered an opportunity to interview applicants before final scoring is completed. The Ranking Committee scores



## *ULSTER COUNTY CONTINUUM of CARE*

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the applications and the CA summarizes the results and process and sends back to committee members for approval.

The Ranking Committee reports the results of the scoring to the Board that approves the recommendations.

After the scoring is finalized, the CA meets with each applicant to review their scoring and notifies in writing any applicant that is rejected from the CoC annual submission.

Adoption Date: April 2014

### **UCCOC Ranking Appeal Process**

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

The process consists of the following steps:

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

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

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

- The Ranking Committee also acts as the Appeals Committee – the Committee will be notified of the written appeals received.



## *ULSTER COUNTY CONTINUUM of CARE*

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- The Ranking Committee will meet to review the request. If deemed appropriate changes to the scoring may be made at the time. If necessary, a meeting with the project appealing will be scheduled for further discussion in regards to the appeals, after which a decision will be made.
- Agencies will be notified of the outcome of their appeals within two days of the Appeals Committee's decision. The Appeals Committee decision is final.

Adoption Date: June 2015

### **6. Written Standards for Determining Assistance**

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

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

#### **Reallocation Process**

Once the Ranking and Performance Committee completes the scoring of renewal programs and meets with the project applicants to review their scores, they compile the final ranking scores that are sent to the board for their review and approval. The committee report will include additional technical assistance suggestions that can improve the underperforming programs(s). If this is the case, the application is included for renewal and technical assistance is arranged and follow up reviews are scheduled at quarterly intervals. If the program continues to be underperforming after a year of assistance, the program is reviewed by the board to determine if the project should be considered for reallocation the following year. If the Ranking and



## *ULSTER COUNTY CONTINUUM of CARE*

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Performance Committee determines through objective evidence that any underperforming project(s) will not benefit from additional assistance, they will schedule a meeting with the applicant and the board to discuss the possibility of reallocation. If a project is recommended for reallocation, the agency is notified as soon as possible but at least 14 days prior to the due date of the CoC application to HUD.

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

When the CoC is able to request project applications from the community due to availability of funds through bonuses, pro-rata, or reallocation, the CoC will advertise in the local newspaper and distribute to its membership a public notice requesting application. The CoC's priorities and details of eligible applications, as defined by the current year's NOFA, will be reviewed with the board and membership. The due date for submission to the CoC will be at least 30 days prior to the due date of the CoC Collaborative Application. If there is no availability of funds for new applications through bonuses, pro-rata or reallocation, the CoC will post a public notice that it is not accepting new applications for the current CoC Application.

### **Ranking of Projects for the Collaborative Application Project Listing**

The Ranking and Performance Committee will rank both renewal and new projects selected to be included in the CoC Collaborative Application using their percentage score. The Ranking and Performance Committee may apply bonus points based on HUD's priorities as articulated in the NOFA.

Scoring results are delivered to applicants with a reminder about the appeal process.

- Applications which do not meet the threshold requirements will not be included in the Priority List in Exhibit 1, and therefore will not be forwarded to HUD for consideration.
- If the dollar amount of the Annual Renewal Demand (ARD) is less than the total of the funding requested by applicants, the lowest-scoring applications will not be included in the Priority List in Exhibit 1, and therefore will not be forwarded to HUD for consideration.
- Applications may be considered for the next fiscal year's CoC application to HUD.





## *ULSTER COUNTY CONTINUUM of CARE*

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### **7. Anti- Discrimination Policy for Ulster County Continuum of Care**

#### **Purpose of the Policy**

The Ulster County Continuum of Care (UCCOC) aims to end homelessness, providing services that increase stabilization of individuals and families, monitoring progress of existing programs and services for homeless, and advocating for funding to promote decent, safe, and affordable housing for all. UCCOC recognizes that individuals must not be discriminated against on the basis of their sexual orientation or gender identity when seeking support from its housing programs and services. Thus, in accordance with HUD's "Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs," UCCOC does and shall not discriminate against Lesbian, Gay, Bisexual, Transgender individuals and families. It is the policy of UCCOC that any discrimination against LGBT individuals and families seeking equal access to all eligible HUD funded housing programs and services is prohibited.

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

#### **Anti-Discrimination Laws**

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

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



# *ULSTER COUNTY CONTINUUM of CARE*

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## **Application of Policy**

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

Adoption Date: September 20, 2017

## **8. Written Standards for Monitoring of Applicants**

**Operating the Continuum of Care.** The CoC interim rule provides that the Continuum of Care must abide by certain operational requirements. These requirements will ensure the effective management of the Continuum of Care process and ensure that the process is inclusive and fair.

- **Section 578.7(6)** requires the CoC to monitor project performance, evaluate outcomes (for both CoC and ESG funded programs) and take action against poor performers;
- **Section 578.7(7)** requires the CoC to evaluate ESG and CoC project outcomes and report to HUD. The Operations Committee, alongside the Systems Committee, will consider how project level performance contributes to system level performance.

The UCCOC will monitor project applicants as prescribed below to meet Hearth guidelines. The purpose of the monitoring will be to ensure data is reported accurately and provide the CoC with information on how projects are contributing to meet HUD System Performance Measures. The CA and HMIS Lead will provide technical assistance to agencies to correct deficiencies. Monitoring results will be reported to the board and Rank and Review Committee.

### **Annual Progress Report (APR) Reviews**

- The CA will provide agencies with a request for APR information at least annually. Agencies will pull APR's for each HUD funded program for the calendar year with the dates stated in the request. Agencies will provide a PDF of APR('s) to the CA within the required timeframe. Agencies are encouraged to review the APR data for accuracy before submitting to CA. DV programs are excluded from this monitoring.
- The CA will select APR questions to be reviewed based upon HUD's priorities and System Performance. They may include # served, % that exited to permanent housing destination, income for leavers and stayers, and data quality review.



## *ULSTER COUNTY CONTINUUM of CARE*

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- Discrepancies and final reviews of the APR monitoring will be communicated to agencies who will have an opportunity to correct information. If the agency does not take steps to correct any findings, the CA may bring the issue to the Board.

### **On-Site Technical Assistance Review**

- The CA will conduct on-site technical assistance visits. The areas of technical assistance to be focused on during each visit will be predetermined by the board and communicated to the agency being monitored in advance. The CA will offer technical assistance prior to the site visit.
- Following a site visit, the CA will draft a report and send to the agency contact. Agencies will have an opportunity to correct deficiencies or findings. If there are any remaining findings, an action plan will be written within the report. If the agency does not take steps to remediate any findings, the CA will share the findings with the Board.

Adoption Date: April 18, 2018

## **9. EMERGENCY TRANSFER PLAN FOR VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT OR STALKING**

### **Emergency Transfers**

The Ulster County Care Continuum of Care (UCCOC) is concerned about the safety of the tenants of the housing programs within its geographic area that are funded by Continuum of Care (CoC) Grant funds and such concern extends to tenants who are victims of domestic violence, dating violence, sexual assault, or stalking. In accordance with the Violence Against Women Act (VAWA), CoC-funded programs providing permanent housing or transitional housing, except safe havens, must allow tenants who are victims of domestic violence, dating violence, sexual assault, or stalking to request an emergency transfer from the tenant's current unit to another unit.

The ability of a housing program to honor such a request for tenants currently receiving rental assistance, however, may depend upon a preliminary determination that the tenant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, and on whether the housing



## *ULSTER COUNTY CONTINUUM of CARE*

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provider has another dwelling unit that is available and is safe to offer the tenant for temporary or more permanent occupancy.

This plan identifies tenants who are eligible for an emergency transfer; the documentation needed to request an emergency transfer; confidentiality protections; and how an emergency transfer may occur. In addition, it provides guidance for tenants on safety and security. The plan is based on a model emergency transfer plan published by the U.S. Department of Housing and Urban Development (HUD), the federal agency which ensures that the UCCOC and the CoC funded providers within its geographic area in compliance with VAWA.

### **Eligibility for Emergency Transfers**

A tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking, as provided in HUD's regulations at 24 CFR part 5, subpart L, is eligible for an emergency transfer, if: The tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant remains within the same unit; or The tenant is a victim of a sexual assault, and the sexual assault occurred on the premises within the 90-day period preceding a request for an emergency transfer. A tenant requesting an emergency transfer must expressly request the transfer in accordance with the procedures described in this plan.

To request an emergency transfer, a tenant must notify the housing program's administrator or manager and submit a written request for a transfer to that individual. The tenant's written request for an emergency transfer should include either:

1. A statement expressing why the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant remains in the same dwelling unit assisted under the housing provider's program; or
2. A statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premises during the 90-day period preceding the tenant's request for an emergency transfer.

The housing program may request additional documentation from a tenant in accordance with the documentation policies of HUD's regulations at 24 CFR part 5, subpart L.



# *ULSTER COUNTY CONTINUUM of CARE*

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## **Confidentiality**

The housing program will keep confidential any information that the tenant submits in requesting an emergency transfer, unless the tenant gives the housing program written permission to release the information or disclosure of the information is required by law or in the course of an eviction or termination proceeding. This includes keeping confidential the new location of the dwelling unit of the tenant, if one is provided, from the person or persons that committed the act or acts of domestic violence, dating violence, sexual assault, or stalking against the tenant.

## **Emergency Transfer Timing and Availability**

The housing program cannot guarantee that a transfer request will be approved or how long it will take to process a transfer request. However, the housing program will act as quickly as possible to move a tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking to another unit, subject to the availability and safety of a unit. If the housing program does not expect to have another unit available within a reasonable period of time, it will contact other housing programs in the area to determine whether they have an available unit. If a unit is available, the tenant must agree to abide by the terms and conditions that govern occupancy in the unit to which the tenant is being transferred.

## **Safety and Security of Tenants**

Pending processing of the transfer and the actual transfer, if it is approved and occurs, the tenant is urged to take all reasonable precautions to be safe. The tenant is encouraged to contact the National Domestic Violence Hotline at 1-800-799-7233, or a local domestic violence shelter, for assistance in creating a safety plan. For persons with hearing impairments, that hotline can be accessed by calling 1-800-787-3224 (TTY).

**Attachment 1: LOCAL ULSTER COUNTY ORGANIZATIONS OFFERING SERVICES TO VICTIMS OF DOMESTIC VIOLENCE**

**Attachment 2: LOCAL ULSTER COUNTY ORGANIZATIONS OFFERING ASSISTANCE TO VICTIMS OF DOMESTIC VIOLENCE**

Adoption Date August 20, 2018



## *ULSTER COUNTY CONTINUUM of CARE*

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### **10. UCCOC Written Standards – Linkages to Provide Educational Services**

The UCCOC requires HUD funded programs that assist household with children will:

- Designate a staff person as the educational liaison that will ensure children are enrolled in school, connected to appropriate services in the community, including early childhood project such as Head Start, Part C of the Individuals with Disabilities Education Act, and the McKinney Vento education ...

- Programs must coordinate and collaborate with other service providers within the geographic area (such as housing, social services, employment, education and youth programs, etc).

As well as programmatic specifics:

- Indicating that the CoC collaborates with youth education providers (McKinney-Vento LEA & school districts) by conducting an annual review of the access, assessment & referral process for families at risk. Family/unaccompanied youth service providers participate in monthly LEA meetings to coordinate parallel services.

- The CoC has formal partnerships w/ BOCES to coordinate prevention services & to promote the rights of education services. Adopted procedures to inform households of eligibility for education services include: consistent promotion of rights to services and outreach to educate families and youth on education services for those with special needs.

- CoC policy requires providers to inform participants of education services by providing the NYS TEACHES pamphlet on education service rights for students in temporary housing. To ensure children are enrolled in early childhood programs, CoC policy requires providers to collaborate w/ school liaisons.

Adoption Date: August 20, 2018



# *ULSTER COUNTY CONTINUUM of CARE*

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## **Appendices for Written Standards**

I. Written Standard #4 HUD Notice CPD-16-11 Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Populations in Permanent Supportive Housing

II. Written Standard #9

Attachment 1: LOCAL ULSTER COUNTY ORGANIZATIONS OFFERING SERVICES TO VICTIMS OF DOMESTIC VIOLENCE

Attachment 2: LOCAL ULSTER COUNTY ORGANIZATIONS OFFERING ASSISTANCE TO VICTIMS OF DOMESTIC VIOLENCE

## Appendix I

HUD Notice CPD-16-11 Prioritizing Persons Experiencing  
Chronic Homelessness and Other Vulnerable Populations  
in Permanent Supportive Housing





U.S. Department of Housing and Urban Development  
Office of Community Planning and Development

**Special Attention of:**  
All Secretary's  
Representatives

**Notice: CPD-16-11**  
**Issued: July 25, 2016**  
**Expires:** This Notice is effective until it is  
amended, superseded, or rescinded

**Issued:**  
All Regional Directors for  
CPD

**Cross Reference:** 24 CFR Parts 578 and  
42 U.S.C. 11381, *et seq.*

**Expires:**  
All CPD Division Directors  
Continuums of Care (CoC)  
Recipients of the Continuum of Care (CoC)  
Program

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**Subject: Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other  
Vulnerable Homeless Persons in Permanent Supportive Housing**

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## I. Purpose

This Notice supersedes Notice CPD-14-012 and provides guidance to Continuums of Care (CoC) and recipients of Continuum of Care (CoC) Program (24 CFR part 578) funding for permanent supportive housing (PSH) regarding the order in which eligible households should be served in all CoC Program-funded PSH. This Notice reflects the new definition of chronically homeless as defined in CoC Program interim rule as amended by the Final Rule on Defining “Chronically Homeless” (herein referred to as the Definition of Chronically Homeless final rule) and updates the orders of priority that were established under the prior Notice. CoCs that previously adopted the orders of priority established in Notice CPD-14-012, which this Notice supersedes, and who received points for having done so in the FY2015 CoC Program Competition are encouraged to update their written standards to reflect the updates to the orders of priority as established in this Notice. CoCs that have not previously adopted the orders of priority established in Notice CPD-14-012 are also encouraged to incorporate the orders of priority included in this Notice into their written standards

### A. Background

In June 2010, the Obama Administration released *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (Opening Doors)*, in which HUD and its federal partners set goals to end Veteran and chronic homelessness by 2015, and end family and youth homelessness by 2020. Although progress has been made there is still a long way to go. In 2015, the United States Interagency Council on Homelessness extended the goal timeline for achieving the goal of ending chronic homelessness nationally from 2015 to 2017. In 2015, there were still 83,170 individuals and 13,105 persons in families with children that were identified as chronically homeless in the United States. To end chronic homelessness, it is critical that CoCs ensure that limited resources awarded through the CoC Program Competition are being used in the most effective manner and that households that are most in need of assistance are being prioritized.

Since 2005, HUD has encouraged CoCs to create new PSH dedicated for use by persons experiencing chronic homelessness (herein referred to as dedicated PSH). As a result, the number of dedicated PSH beds funded through the CoC Program for persons experiencing chronic homelessness has increased from 24,760 in 2007 to 59,329 in 2015. This increase has contributed to a 30.6 percent decrease in the number of chronically homeless persons reported in the Point-in-Time Count between 2007 and 2015. Despite the overall increase in the number of dedicated PSH beds, this only represents 31.6 percent of all CoC Program-funded PSH beds.

To ensure that all PSH beds funded through the CoC Program are used as strategically and effectively as possible, PSH needs to be targeted to serve persons with the highest needs and greatest barriers towards obtaining and maintaining housing on their own—persons experiencing chronic homelessness. HUD’s experience has shown that many communities and recipients of CoC Program-funded PSH continue to serve persons on a “first-come, first-serve” basis or based on tenant selection processes that screen-in those who are most likely to succeed while screening out those with the highest level of need. These approaches to tenant

selection have not been effective in reducing chronic homelessness, despite the increase in the number of PSH beds nationally.

## **B. Goals of this Notice**

The overarching goal of this Notice is to ensure that those individuals and families who have spent the longest time in places not meant for human habitation, in emergency shelters, or in safe havens and who have the most severe service needs within a community are prioritized for PSH. By ensuring that persons with the longest histories of homelessness and most severe service needs are prioritized for PSH, progress towards the Obama Administration's goal of ending chronic homelessness will increase. In order to guide CoCs in ensuring that all CoC Program-funded PSH beds are used most effectively, this Notice revises the orders of priority related to how persons should be selected for PSH as previously established in Notice CPD-14-012 to reflect the changes to the definition of chronically homeless as defined in the Definition of Chronically Homeless final rule. CoCs are strongly encouraged to adopt and incorporate them into the CoC's written standards and coordinated entry process.

HUD seeks to achieve two goals through this Notice:

1. Establish a recommended order of priority for dedicated and prioritized PSH which CoCs are encouraged to adopt in order to ensure that those persons with the longest histories residing in places not meant for human habitation, in emergency shelters, and in safe havens and with the most severe service needs are given first priority.
2. Establish a recommended order of priority for PSH that is not dedicated or prioritized for chronic homelessness in order to ensure that those persons who do not yet meet the definition of chronic homelessness but have the longest histories of homelessness and the most severe service needs, and are therefore the most at risk of becoming chronically homeless, are prioritized.

## **C. Applicability**

The guidance in this Notice is provided to all CoCs and all recipients and subrecipients of CoC Program funds—the latter two groups referred to collectively as recipients of CoC Program-funded PSH. CoCs are strongly encouraged to incorporate the order of priority described in this Notice into their written standards, which CoCs are required to develop per 24 CFR 578.7(a)(9), for their CoC Program-funded PSH. Recipients of CoC Program funds are required to follow the written standards for prioritizing assistance established by the CoC (see 24 CFR 578.23(c)(10)); therefore, if the CoC adopts these recommended orders of priority for their PSH, all recipients of CoC Program-funded PSH will be required to follow them as required by their grant agreement. CoCs that adopted the orders of priority established in Notice CPD-14-012, which this Notice supersedes, and who received points for having done so in the most recent CoC Program Competition are strongly encouraged to update their written standards to reflect the updates to the orders of priority as established in this Notice. Lastly, where a CoC has chosen to not adopt HUD's recommended orders of priority into their written standards, recipients of CoC Program-funded PSH are encouraged to follow these standards for selecting participants into their programs as long as it is not inconsistent with the CoC's written standards.

## D. Key Terms

1. **Housing First.** A model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions for entry (such as sobriety or a minimum income threshold). HUD encourages all recipients of CoC Program-funded PSH to follow a Housing First approach to the maximum extent practicable.
2. **Chronically Homeless.** The definition of “chronically homeless”, as stated in Definition of Chronically Homeless final rule is:
  - (a) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:
    - i. lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
    - ii. Has been homeless and living as described in paragraph (a)(i) continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (a)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;
  - (b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;
  - (c) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.
3. **Severity of Service Needs.** This Notice refers to persons who have been identified as having the most severe service needs.
  - (a) For the purposes of this Notice, this means an individual for whom at least one of the following is true:
    - i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; and/or

- ii. Significant health or behavioral health challenges, substance use disorders, or functional impairments which require a significant level of support in order to maintain permanent housing.
- iii. For youth and victims of domestic violence, high risk of continued trauma or high risk of harm or exposure to very dangerous living situations.
- iv. When applicable CoCs and recipients of CoC Program-funded PSH may use an alternate criteria used by Medicaid departments to identify high-need, high cost beneficiaries.

(b) Severe service needs as defined in paragraphs i.-iv. above should be identified and verified through data-driven methods such as an administrative data match or through the use of a standardized assessment tool and process and should be documented in a program participant's case file. The determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual. The determination cannot be made based on any factors that would result in a violation of any nondiscrimination and equal opportunity requirements, see 24 C.F.R. § 5.105(a).

## **II. Dedication and Prioritization of Permanent Supportive Housing Strategies to Increase Number of PSH Beds Available for Chronically Homeless Persons**

### **A. Increase the number of CoC Program-funded PSH beds that are dedicated to persons experiencing chronic homelessness.**

Dedicated PSH beds are those which are required through the project's grant agreement to only be used to house persons experiencing chronic homelessness unless there are no persons within the CoC that meet that criteria. If there are no persons within the CoC's geographic area that meet the definition of chronically homeless at a point in which a dedicated PSH bed is vacant, the recipient may then follow the order of priority for non-dedicated PSH established in this Notice, if it has been adopted into the CoC's written standards. The bed will continue to be a dedicated bed, however, so when that bed becomes vacant again it must be used to house a chronically homeless person unless there are still no persons who meet that criterion within the CoC's geographic area at that time. These PSH beds are also reported as "CH Beds" on a CoC's Housing Inventory Count (HIC).

### **B. Prioritize non-dedicated PSH beds for use by persons experiencing chronic homelessness.**

Prioritization means implementing an admissions preference for chronically homeless persons for CoC Program-funded PSH beds. During the CoC Program competition project applicants for CoC Program-funded PSH indicate the number of non-dedicated beds that will be prioritized for use by persons experiencing chronic homelessness during the operating year of that grant, when awarded. These projects are then required to prioritize chronically homeless persons in their non-dedicated CoC Program-funded PSH beds for the applicable operating year as the project application is incorporated into the

grant agreement. All recipients of non-dedicated CoC Program-funded PSH are encouraged to change the designation of their PSH to dedicated, however, at a minimum are encouraged to prioritize the chronically homeless as beds become vacant to the maximum extent practicable, until there are no persons within the CoC's geographic area who meet that criteria. Projects located in CoCs where a sub-CoC approach to housing and service delivery has been implemented, which may also be reflected in a sub-CoC coordinated entry process, need only to prioritize assistance within their specified area. For example, if a Balance of State CoC has chosen to divide the CoC into six distinct regions for purposes of planning and housing and service delivery, each region would only be expected to prioritize assistance within its specified geographic area.<sup>1</sup>

The number of non-dedicated beds designated as being prioritized for the chronically homeless may be increased at any time during the operating year and may occur without an amendment to the grant agreement.

### **III. Order of Priority in CoC Program-funded Permanent Supportive Housing**

The definition of chronically homeless included in the final rule on “Defining Chronically Homeless”, which was published on December 4, 2015 and went into effect on January 15, 2016, requires an individual or head of household to have a disability and to have been living in a place not meant for human habitation, in an emergency shelter, or in a safe haven for at least 12 months either continuously or cumulatively over a period of at least 4 occasions in the last 3 years. HUD encourages all CoCs adopt into their written standards the following orders of priority for all CoC Program-funded PSH. CoCs that adopted the orders of priority established in Notice CPD-14-012, which this Notice supersedes, and who received points for having done so in the most recent CoC Program Competition are strongly encouraged to update their written standards to reflect the updates to the orders of priority as established in this Notice. Where a CoC has chosen to not incorporate HUD's recommended orders of priority into their written standards, recipients of CoC Program-funded PSH are encouraged to follow these standards for selecting participants into their programs as long as it is not inconsistent with the CoC's written standards.

As a reminder, recipients of CoC Program-funded PSH are required to prioritize otherwise eligible households in a nondiscriminatory manner. Program implementation, including any prioritization policies, must be implemented consistent with the nondiscrimination provisions of the Federal civil rights laws, including, but not limited to the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Title II or III of the Americans with Disabilities Act, as applicable. For example, while it is acceptable to prioritize based on level of need for the type of assistance being offered, prioritizing based on specific disabilities would not be consistent with fair housing requirements or program regulations.

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<sup>1</sup> For the State of Louisiana grant originally awarded pursuant to “Department of Housing and Urban Development—Permanent Supportive Housing” in chapter 6 of title III of the Supplemental Appropriations Act, 2008 (Public Law 110-252; 122 Stat. 2351), projects located within the geographic area of a CoC that is not the CoC through which the State is awarded the grant may prioritize assistance within that geographic area instead of within the geographic area of the CoC through which the State is awarded the grant.

**A. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Dedicated or Prioritized for Occupancy by Persons Experiencing Chronic Homelessness**

1. CoCs are strongly encouraged to revise their written standards to include an order of priority, determined by the CoC, for CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness that is based on the length of time in which an individual or family has resided in a place not meant for human habitation, a safe haven, or an emergency shelter and the severity of the individual's or family's service needs. Recipients of CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness would be required to follow that order of priority when selecting participants for housing, in a manner consistent with their current grant agreement.
2. Where there are no chronically homeless individuals and families within the CoC's geographic area, CoCs and recipients of CoC Program-funded PSH are encouraged to follow the order of priority in Section III.B. of this Notice. For projects located in CoC's where a sub-CoC approach to housing and service delivery has been implemented, which may also be reflected in a sub-CoC coordinated entry process, need only to prioritize assistance within their specified sub-CoC area.<sup>2</sup>
3. Recipients of CoC Program-funded PSH should follow the order of priority above while also considering the goals and any identified target populations served by the project. For example, a CoC Program-funded PSH project that is permitted to target homeless persons with a serious mental illness should follow the order of priority under Section III.A.1. of this Notice to the extent in which persons with serious mental illness meet the criteria. In this example, if there were no persons with a serious mental illness that also met the criteria of chronically homeless within the CoC's geographic area, the recipient should follow the order of priority under Section III.B for persons with a serious mental illness.
4. Recipients must exercise due diligence when conducting outreach and assessment to ensure that chronically homeless individuals and families are prioritized for assistance based on their total length of time homeless and/or the severity of their needs. HUD recognizes that some persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients of CoC Program-funded PSH are not required to allow units to remain vacant indefinitely while waiting for an identified chronically homeless person to accept an offer of PSH. CoC Program-funded PSH providers are encouraged to follow a Housing First approach to the maximum extent practicable. Therefore, a person experiencing chronic homelessness should not be forced to refuse an offer of PSH if they do not want to participate in the project's services, nor should a PSH

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<sup>2</sup> For the State of Louisiana grant originally awarded pursuant to “Department of Housing and Urban Development—Permanent Supportive Housing” in chapter 6 of title III of the Supplemental Appropriations Act, 2008 (Public Law 110-252; 122 Stat. 2351), projects located within the geographic area of a CoC that is not the CoC through which the State is awarded the grant may prioritize assistance within that geographic area instead of within the geographic area of the CoC through which the State is awarded the grant.



project have eligibility criteria or preconditions to entry that systematically exclude those with severe service needs. Street outreach providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and where the CoC has adopted these orders of priority into their written standards, these chronically homeless persons must continue to be prioritized for PSH until they are housed.

**B. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Not Dedicated or Not Prioritized for Occupancy by Persons Experiencing Chronic Homelessness**

1. CoCs are strongly encouraged to revise their written standards to include the following order of priority for non-dedicated and non-prioritized PSH beds. If adopted into the CoCs written standards, recipients of CoC Program-funded PSH that is not dedicated or prioritized for the chronically homeless would be required to follow this order of priority when selecting participants for housing, in a manner consistent with their current grant agreement.

**(a) First Priority—Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs**

An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months and has been identified as having severe service needs.

**(b) Second Priority—Homeless Individuals and Families with a Disability with Severe Service Needs.**

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

**(c) Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.**

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

**(d) Fourth Priority—Homeless Individuals and Families with a Disability Coming from Transitional Housing.**

An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

2. Recipients of CoC Program-funded PSH should follow the order of priority above, as adopted by the CoC, while also considering the goals and any identified target populations served by the project. For example, non-dedicated or non-prioritized CoC Program-funded PSH that is permitted to target youth experiencing homelessness should follow the order of priority under Section III.B.1. of this Notice, as adopted by the CoC, to the extent in which youth meet the stated criteria.
3. Recipients must exercise due diligence when conducting outreach and assessment to ensure that persons are prioritized for assistance based on their length of time homeless and the severity of their needs following the order of priority described in this Notice, and as adopted by the CoC. HUD recognizes that some persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant indefinitely while waiting for an identified eligible individual or family to accept an offer of PSH (see [FAQ 1895](#)). Recipients of CoC Program-funded PSH are encouraged to follow a Housing First approach to the maximum extent practicable. Street outreach providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and where the CoC has adopted these orders of priority into their written standards, these individuals and families must continue to be prioritized until they are housed.

#### **IV. Using Coordinated Entry and a Standardized Assessment Process to Determine Eligibility and Establish a Prioritized Waiting List**

##### **A. Coordinated Entry Requirement**

Provisions at 24 CFR 578.7(a)(8) requires that each CoC, in consultation with recipients of Emergency Solutions Grants (ESG) program funds within the CoC's geographic area, establish and operate either a centralized or coordinated assessment system (referred to in this Notice as coordinated entry or coordinated entry process) that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. CoCs that adopt the order of priority in Section III of this Notice into the CoC's written standards are strongly encouraged to use a coordinated entry process to ensure that there is a single prioritized list for all CoC Program-funded PSH within the CoC. The [Coordinated Entry Policy Brief](#), provides recommended criteria for a quality coordinated entry process and standardized assessment tool and process. Under no circumstances shall the order of priority be based upon diagnosis or disability type,

but instead on the length of time an individual or family has been experiencing homelessness and the severity of needs of an individual or family.

**B. Written Standards for Creation of a Single Prioritized List for PSH**

CoCs are also encouraged to include in their policies and procedures governing their coordinated entry system a requirement that all CoC Program-funded PSH accept referrals only through a single prioritized list that is created through the CoCs coordinated entry process, which should also be informed by the CoCs street outreach. Adopting this into the CoC's policies and procedures for coordinated entry would further ensure that CoC Program-funded PSH is being used most effectively, which is one of the goals in this Notice. The single prioritized list should be updated frequently to reflect the most up-to-date and real-time data as possible.

**C. Standardized Assessment Tool Requirement**

CoCs must utilize a standardized assessment tool, in accordance with 24 CFR 578.3, or process. The Coordinated Entry Policy Brief, provides recommended criteria for a quality coordinated entry process and standardized assessment tool.

**D. Nondiscrimination Requirements**

CoCs and recipients of CoC Program-funded PSH must continue to comply with the nondiscrimination provisions of Federal civil rights laws, including, but not limited to, the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Titles II or III of the Americans with Disabilities Act, as applicable. See 24 C.F.R. § 5.105(a).

**V. Recordkeeping Recommendations for CoCs that have Adopted the Orders of Priority in this Notice**

24 CFR 578.103(a)(4) outlines documentation requirements for all recipients of dedicated and non-dedicated CoC Program-funded PSH associated with determining whether or not an individual or family is chronically homeless for the purposes of eligibility. In addition to those requirements, HUD expects that where CoCs have adopted the orders of priority in Section III. of this Notice into their written standards. The CoC, as well as recipients of CoC Program-funded PSH, will maintain evidence of implementing these priorities. Evidence of following these orders of priority may be demonstrated by:

- A. Evidence of Severe Service Needs.** Evidence of severe service needs is that by which the recipient is able to determine the severity of needs as defined in Section I.D.3. of this Notice using data-driven methods such as an administrative data match or through the use of a standardized assessment. The documentation should include any information pertinent to how the determination was made, such as notes associated with case-conferencing decisions.
- B. Evidence that the Recipient is Following the CoC's Written Standards for Prioritizing Assistance.** Recipients must follow the CoC's written standards for prioritizing assistance, as adopted by the CoC. In accordance with the CoC's adoption of

written standards for prioritizing assistance, recipients must in turn document that the CoC's revised written standards have been incorporated into the recipient's intake procedures and that the recipient is following its intake procedures when accepting new program participants into the project.

**C. Evidence that there are no Households Meeting Higher Order of Priority within CoC's Geographic Area.**

- (a) When dedicated and prioritized PSH is used to serve non-chronically homeless households, the recipient of CoC Program-funded PSH should document how it was determined that there were no chronically homeless households identified for assistance within the CoC's geographic area – or for those CoCs that implement a sub-CoC<sup>3</sup> planning and housing and service delivery approach, the smaller defined geographic area within the CoC's geographic area – at the point in which a vacancy became available. This documentation should include evidence of the outreach efforts that had been undertaken to locate eligible chronically homeless households within the defined geographic area and, where chronically homeless households have been identified but have not yet accepted assistance, the documentation should specify the number of persons that are chronically homeless that meet this condition and the attempts that have been made to engage the individual or family. Where a CoC is using a single prioritized list, the recipient of PSH may refer to that list as evidence.
- (b) When non-dedicated and non-prioritized PSH is used to serve an eligible individual or family that meets a lower order of priority, the recipient of CoC Program-funded PSH should document how the determination was made that there were no eligible individuals or families within the CoC's geographic area - or for those CoCs that implement a sub-CoC planning and housing and service delivery approach, the smaller defined geographic area within the CoC's geographic area - that met a higher priority. Where a CoC is using a single prioritized list, the recipient of PSH may refer to that list as evidence that there were no households identified within the CoC's geographic area that meet a higher order of priority.

**VI. Questions Regarding this Notice**

Questions regarding this notice should be submitted to HUD Exchange Ask A Question (AAQ) Portal at: <https://www.hudexchange.info/get-assistance/my-question/>.

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<sup>3</sup> For the State of Louisiana grant originally awarded pursuant to “Department of Housing and Urban Development—Permanent Supportive Housing” in chapter 6 of title III of the Supplemental Appropriations Act, 2008 (Public Law 110–252; 122 Stat. 2351), projects located within the geographic area of a CoC that is not the CoC through which the State is awarded the grant may prioritize assistance within that geographic area instead of within the geographic area of the CoC through which the State is awarded the grant.

## Appendix II

**Attachment 1: LOCAL ULSTER COUNTY ORGANIZATIONS  
OFFERING SERVICES TO VICTIMS OF DOMESTIC VIOLENCE**

**Attachment 2: LOCAL ULSTER COUNTY ORGANIZATIONS  
OFFERING ASSISTANCE TO VICTIMS OF DOMESTIC  
VIOLENCE**

ATTACHMENT 1

**LOCAL ULSTER COUNTY ORGANIZATIONS OFFERING SERVICES TO VICTIMS OF DOMESTIC VIOLENCE**

**Family of Woodstock Inc.** – a non-profit organization assisting persons who are physically, emotionally, verbally, sexually, and/or financially abused by their intimate partners.

**24-hour Domestic Violence Hotline 1-800-799-7233 OR Family of Woostocks, 24 hour hotline 845-338-2370**

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All calls are confidential. We provide information, crisis intervention, counseling, referral, and/or shelter. **The hotline is available to victims, friends, family, and other concerned individuals. Collect calls accepted.**

**People**

Domestic Violence Services are available to all victims and their dependent children, regardless of gender, age, ethnicity, or sexual orientation.

**Programs**

**All Domestic Violence services are confidential and free of charge.** 24-Hour Hotline Services, 24-Hour Safe Housing, Support and Assistance in Decision Making, Advocacy and Referrals: Legal, Medical, Dental, Housing, Counseling and Social Services, Information & Education: Spouse Abuse, Child Abuse, Family Violence, Self Esteem and Parenting, Peer Support Groups and Child care. Follow-up Support Services, Temporary Emergency Shelter for Pets, Community Preventions, Outreach & Education, Jemison Place Transitional Housing Program.

**Purpose**

To offer people a CHANCE to escape the traumas of abuse, to heal the emotional and physical bruises, to live in an environment of comfort and protection, to take the first step in making a CHANGE for a better, safer, happier life.

## ATTACHMENT 2

# LOCAL ULSTER COUNTY ORGANIZATIONS OFFERING SERVICES TO VICTIMS OF DOMESTIC VIOLENCE

**Family of Woodstock Inc.** Licensed Domestic Violence and 24/7 Shelter domestic, Emergency housing, Counseling: individual and group, Advocacy, Criminal justice accompaniment, Information referrals, Crisis intervention, Assistance with Crime Victim Board applications, Community education, Both residential and non-residential services available.

### **24-hour Domestic Violence Hotline 1-845-338-2370**

All calls are confidential. We provide information, crisis intervention, counseling, referral, and/or shelter. **The hotline is available to victims, friends, family, and other concerned individuals. Collect calls accepted.**

#### **People**

Domestic Violence Services are available to all victims and their dependent children, regardless of gender, age, ethnicity, or sexual orientation.

#### **Programs**

**All Domestic Violence services are confidential and free of charge.** Agency Programs Abuse and Crisis Intervention Services at Safehouse and Ulster County Domestic Violence Program



*ULSTER COUNTY  
CONTINUUM of CARE*

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**Attachment 3B-5: Racial Disparity Summary**

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Michael Berg, Chair  
Lauren Sheeley, Vice Chair  
Tracy VanWagenen, Secretary  
Joan Eck, Finance Audit



Ulster County  
Starting a Conversation about Race with Data

**Ulster County: General Population**

According to the American Community Survey 2012-2016 5-Year Estimate, Ulster County was made-up of persons of the following races and ethnicities:

Race	Number of People	Percentage of Population
White	155,184/ 17,494*	86.7%/ 73.2%*
Black or African American	10,982/ 3478*	6% / 14.6%*
American Indian and Alaska Native	597/ 111*	.3% /.5%*
Asian	3,106/ 432*	1.7%/ 1.7%*
Native Hawaiian and other Pacific Islander	624/ 8*	.1% / .0%*
Other	4,542/ 1181*	2.5%/ 5%*
Two or more races	5,048/ 1189*	2.8%/ 5%*
Total	182,493/ 23,461	100% / 100%

Ethnicity	Number of People	Percentage of Population
Hispanic or Latino	15,909/ 3,202*	8.7%/ 13.4%*
Non-Hispanic or Latino	166,584 /20,690*	91.3%/ 86.6%*
Total	182,493/ 23,892*	100%

\* Indicates City of Kingston Demographics

**Those Served by the Homelessness System**

The below numbers reflect information from the Homeless Management Information System (HMIS), and depict racial and ethnic breakdowns among those in the homelessness system in 2017, broken down by project type.

The data below shows us that *(either the homeless system is reflective of the community at large, OR that there are racial disparities, and certain races are overrepresented in the homeless system than others).*

Ulster County Homeless Population – Number and Percentage of persons utilizing homeless services in 2017 broken down by race and ethnicity

Race	Number of People	Percentage of Population
White	1239	63.9%
Black or African American	494	25.5%
American Indian and Alaska Native	12	0.6%
Asian	4	0.2%
Native Hawaiian and other Pacific Islander	4	0.2%
No Data	45	2.4%
Two or more races	142	7.3%
Total	1940	100.0%

<b>Ethnicity</b>	<b>Number of People</b>	<b>Percentage of Population</b>
Hispanic or Latino	265	13.7%
Non-Hispanic or Latino	1621	83.6%
No Data	54	2.8%
<b>Total</b>	<b>1940</b>	<b>100.0%</b>

Emergency Shelter – Number and percentage of persons in Emergency Shelter in 2017 broken down by race and ethnicity.

<b>Race</b>	<b>Number of People</b>	<b>Percentage of Homeless Population, as reported in HMIS in 2017</b>
White	841	62.4%
Black or African American	376	27.9%
American Indian and Alaska Native	5	0.4%
Asian	4	0.3%
Native Hawaiian and other Pacific Islander	1	0.07%
No Data	4	0.3%
Two or more races	116	8.6%
<b>Total</b>	<b>1347</b>	<b>100.0%</b>

<b>Ethnicity</b>	<b>Number of People</b>	<b>Percentage of Homeless Population, as reported in HMIS in 2017</b>
Hispanic or Latino	208	15.4%
Non-Hispanic or Latino	1135	84.3%
No Data	4	0.3%
<b>Total</b>	<b>1347</b>	<b>100.0%</b>

Transitional Housing – Number and percentage of persons in Transitional Housing in 2017 broken down by race and ethnicity.

<b>Race</b>	<b>Number of People</b>	<b>Percentage of Homeless Population, as reported in HMIS in 2017</b>
White	39	68.4%
Black or African American	8	14.0%
American Indian and Alaska Native	0	N/A
Asian	0	N/A
Native Hawaiian and other Pacific Islander	3	5.3%
No Data	1	1.7%
Two or more races	6	10.5%

Total	57	100.0%
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Ethnicity	Number of People	Percentage of Homeless Population, as reported in HMIS in 2017
Hispanic or Latino	8	14.0%
Non-Hispanic or Latino	49	86.0%
No Data	0	N/A
Total	57	100.0%

Permanent Supportive Housing – Number and percentage of persons in Permanent Supportive Housing in 2017 broken down by race and ethnicity.

Race	Number of People	Percentage of Homeless Population, as reported in HMIS in 2017
White	359	67.0%
Black or African American	110	20.5%
American Indian and Alaska Native	7	1.3%
Asian	0	N/A
Native Hawaiian and other Pacific Islander	0	N/A
No Data	40	7.5%
Two or more races	20	3.7%
Total	536	100.0%

Ethnicity	Number of People	Percentage of Homeless Population, as reported in HMIS in 2017
Hispanic or Latino	49	9.2%
Non-Hispanic or Latino	437	81.5%
No Data	50	9.3%
Total	536	100.0%

Rapid Rehousing – Number and percentage of persons in Rapid Rehousing in 2017 broken down by race and ethnicity.

Race	Number of People	Percentage of Homeless Population, as reported in HMIS in 2017
White	N/A	N/A
Black or African American	N/A	N/A
American Indian and Alaska Native	N/A	N/A
Asian	N/A	N/A
Native Hawaiian and other Pacific Islander	N/A	N/A
No Data	N/A	N/A

Two or more races	N/A	N/A
Total	N/A	N/A

<b>Ethnicity</b>	<b>Number of People</b>	<b>Percentage of Homeless Population, as reported in HMIS in 2017</b>
Hispanic or Latino	N/A	N/A
Non-Hispanic or Latino	N/A	N/A
No Data	N/A	N/A
Total	N/A	N/A

**Exits to Permanent Destinations**

The below numbers reflect information from the Homeless Management Information System (HMIS), and depict exits to permanent destinations broken down by race and ethnicity among those in the homelessness system in 2017, broken down by project type. Comparing information in the last column indicates if certain races and/or ethnicities are more successfully being connected to housing than others, indicating if there are racial/ethnic disparities in service provision in the homelessness system.

Ulster County Homeless Population – Number and Percentage of persons utilizing homeless services in 2017 broken down by race and ethnicity

<b>Race</b>	<b>Total Number of People Exited in Homeless System, as reported in HMIS in 2017</b>	<b>Total Number of exits to positive destinations, as reported in HMIS in 2017</b>	<b>Percentage of exits to positive destinations by race.</b>
White	1013	662	65.3%
Black or African American	419	286	68.2%
American Indian and Alaska Native	8	5	62.5%
Asian	4	3	75.0%
Native Hawaiian and other Pacific Islander	3	3	100.0%
No Data	28	18	64.3%
Two or more races	114	88	77.2%
Total	1589	1065	67.0%

<b>Ethnicity</b>	<b>Total Number of People Exited in Homeless System, as reported in HMIS in 2017</b>	<b>Total Number of exits to positive destinations, as reported in HMIS in 2017</b>	<b>Percentage of exits to positive destinations by ethnicity.</b>
Hispanic or Latino	234	150	64.1%
Non-Hispanic or Latino	1329	898	67.6%
No Data	26	17	65.4%
Total	1589	1065	67.0%

Emergency Shelter – Number and percentage of persons exited Emergency Shelter in 2017 broken down by race and ethnicity.

<b>Race</b>	<b>Total Number of People Exited in Homeless System, as reported in HMIS in 2017</b>	<b>Total Number of exits to PSH, as reported in HMIS in 2017</b>	<b>Percentage of exits to PSH by race.</b>	<b>Total Number of exits to other permanent destinations, as reported in HMIS in 2017</b>	<b>Percentage of exits to other permanent destinations by race.</b>
White	814	1	0.1%	519	63.7%
Black or African American	365	10	2.7%	230	63.0%
American Indian and Alaska Native	5	0	N/A	2	40.0%
Asian	4	0	N/A	3	75.0%
Native Hawaiian and other Pacific Islander	1	0	N/A	1	100.0%
No Data	4	0	N/A	4	100.0%
Two or more races	105	6	5.7%	74	70.5%
<b>Total</b>	<b>1298</b>	<b>17</b>	<b>1.3%</b>	<b>833</b>	<b>64.1%</b>

<b>Ethnicity</b>	<b>Total Number of People Exited in Homeless System, as reported in HMIS in 2017</b>	<b>Total Number of exits to PSH, as reported in HMIS in 2017</b>	<b>Percentage of exits to PSH by ethnicity.</b>	<b>Total Number of exits to other permanent destinations, as reported in HMIS in 2017</b>	<b>Percentage of exits to other permanent destinations by ethnicity.</b>
Hispanic or Latino	204	3	1.5%	118	57.8%
Non-Hispanic or Latino	1090	14	1.3%	712	65.3%
No Data	4	0	N/A	3	75.0%
<b>Total</b>	<b>1298</b>	<b>17</b>	<b>1.3%</b>	<b>833</b>	<b>64.1%</b>

Transitional Housing – Number and percentage of persons exited in Transitional Housing in 2017 broken down by race and ethnicity.

<b>Race</b>	<b>Total Number of People Exited in Homeless System, as reported in HMIS in 2017</b>	<b>Total Number of exits to PSH, as reported in HMIS in 2017</b>	<b>Percentage of exits to PSH by race.</b>	<b>Total Number of exits to other permanent destinations, as reported in HMIS in 2017</b>	<b>Percentage of exits to other permanent destinations by race.</b>
White	31	0	N/A	13	41.9%
Black or African American	7	0	N/A	6	85.7%
American Indian and Alaska Native	0	0	N/A	0	N/A
Asian	0	0	N/A	0	N/A
Native Hawaiian and other Pacific Islander	2	0	N/A	2	100.0%
No Data	1	0	N/A	0	N/A
Two or more races	4	0	N/A	3	75.0%
<b>Total</b>	<b>45</b>	<b>0</b>	<b>N/A</b>	<b>24</b>	<b>53.3%</b>

<b>Ethnicity</b>	<b>Total Number of People Exited in Homeless System, as reported in HMIS in 2017</b>	<b>Total Number of exits to PSH, as reported in HMIS in 2017</b>	<b>Percentage of exits to PSH by ethnicity.</b>	<b>Total Number of exits to other permanent destinations, as reported in HMIS in 2017</b>	<b>Percentage of exits to other permanent destinations by ethnicity.</b>
Hispanic or Latino	5	0	N/A	5	100.0%
Non-Hispanic or Latino	40	0	N/A	19	47.5%
No Data	0	0	N/A	0	N/A
<b>Total</b>	<b>45</b>	<b>0</b>	<b>N/A</b>	<b>24</b>	<b>53.3%</b>

%

Rapid Rehousing – Number and percentage of persons exited in Rapid Rehousing in 2017 broken down by race and ethnicity.

<b>Race</b>	<b>Total Number of People Exited in Homeless System, as reported in HMIS in 2017</b>	<b>Total Number of exits to PSH, as reported in HMIS in 2017</b>	<b>Percentage of exits to PSH by race.</b>	<b>Total Number of exits to other permanent destinations, as reported in HMIS in 2017</b>	<b>Percentage of exits to other permanent destinations by race.</b>
White	N/A	N/A	N/A	N/A	N/A
Black or African American	N/A	N/A	N/A	N/A	N/A
American Indian and Alaska Native	N/A	N/A	N/A	N/A	N/A
Asian	N/A	N/A	N/A	N/A	N/A
Native Hawaiian and other Pacific Islander	N/A	N/A	N/A	N/A	N/A
No Data	N/A	N/A	N/A	N/A	N/A
Two or more races	N/A	N/A	N/A	N/A	N/A
Total	N/A	N/A	N/A	N/A	N/A

<b>Ethnicity</b>	<b>Total Number of People Exited in Homeless System, as reported in HMIS in 2017</b>	<b>Total Number of exits to PSH, as reported in HMIS in 2017</b>	<b>Percentage of exits to PSH by ethnicity.</b>	<b>Total Number of exits to other permanent destinations, as reported in HMIS in 2017</b>	<b>Percentage of exits to other permanent destinations by ethnicity.</b>
Hispanic or Latino	N/A	N/A	N/A	N/A	N/A
Non-Hispanic or Latino	N/A	N/A	N/A	N/A	N/A
No Data	N/A	N/A	N/A	N/A	N/A
Total	N/A	N/A	N/A	N/A	N/A

Permanent Supportive Housing – Number and percentage of persons exited in Permanent Supportive Housing in 2017 broken down by race and ethnicity.

<b>Race</b>	<b>Total Number of People Exited in Homeless System, as reported in HMIS in 2017</b>	<b>Total Number of exits to positive destinations, as reported in HMIS in 2017</b>	<b>Percentage of exits to positive destinations by race.</b>	<b>Total Number of people enrolled in PH in HMIS in 2017</b>	<b>Total Number of people who remained in PH</b>	<b>Percentage of people who remained in PH by race.</b>
White	168	129	76.8%	359	191	53.2%
Black or African American	47	40	85.1%	110	63	57.3%
American Indian and Alaska Native	3	3	100.0%	7	4	57.1%
Asian	0	0	N/A	0	0	N/A
Native Hawaiian and other Pacific Islander	0	0	N/A	0	0	N/A
No Data	23	15	65.2%	40	17	42.5%
Two or more races	5	5	100.0%	20	15	75.0%
<b>Total</b>	<b>246</b>	<b>192</b>	<b>78.0%</b>	<b>536</b>	<b>290</b>	<b>54.1%</b>

<b>Ethnicity</b>	<b>Total Number of People Exited in Homeless System, as reported in HMIS in 2017</b>	<b>Total Number of exits to positive destinations, as reported in HMIS in 2017</b>	<b>Percentage of exits to positive destinations by race.</b>	<b>Total Number of people enrolled in PH in HMIS in 2017</b>	<b>Total Number of people who remained in PH</b>	<b>Percentage of people who remained in PH by ethnicity</b>
Hispanic or Latino	25	24	96.0	49	24	49.0
Non-Hispanic or Latino	199	154	77.4	437	238	54.5
No Data	22	14	63.6	50	28	56.0
<b>Total</b>	<b>246</b>	<b>192</b>	<b>78.0</b>	<b>536</b>	<b>290</b>	<b>54.1</b>



Assessment of Data: There appears to be consistency in throughout the demographics of persons served throughout all tables. On page one, we added the City of Kingston demographics that appeared to be more in line with demographics of those served compared to statistics county-wide