

## Before Starting the CoC Application

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

The Collaborative Applicant is responsible for:

- Reviewing the FY 2015 CoC Program Competition NOFA in its entirety for specific application and program requirements.
- Using the CoC Application Detailed Instructions for assistance with completing the application in e-snaps.
- Answering all questions in the CoC Application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing so, please keep in mind that:

- This year, CoCs will see that a few responses have been imported from the FY 2013/FY 2014 CoC Application. Due to significant changes to the CoC Application questions, most of the responses from the FY 2013/FY 2014 CoC Application could not be imported.

- For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses.

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

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

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

For Detailed Instructions click [here](#).

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

### **Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**1A-1. CoC Name and Number:** KY-501 - Louisville-Jefferson County CoC

**1A-2. Collaborative Applicant Name:** Coalition for the Homeless, Inc.

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

**1A-4. HMIS Lead:** Coalition for the Homeless, Inc.

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

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

**1B-1a. Describe in detail how the CoC solicits and considers the full range of opinions from individuals or organizations with knowledge of homelessness in the geographic area or an interest in preventing and ending homelessness in the geographic area. Please provide two examples of organizations or individuals from the list in 1B-1 to answer this question.  
(limit 1000 characters)**

The Louisville CoC works hard to include the opinions of various homeless persons, advocates and service providers as well as others who have contact with the homeless. We do this through monthly meetings and membership on the advisory group, committees and CoC board. We are excited about our partnership with the local jail with a seat on the CoC board. This has led to a project called FACE where those exiting jail are transitioned to a safe place to stay versus released to the streets. We also saw the need for input from youth representatives and created the Coalition Supporting Young Adults. This group now meets monthly to address the needs of homeless youth and advise the Louisville CoC. They are considering the need for a youth shelter and training shelter staff on working with LGBTQ clients. We reach out through email, speaking engagements and social media to solicit new members to the CoC and new projects to fill gaps. These projects are considered equally with renewals.

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

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings within the last 12 months (between October 1, 2014 and November 15, 2015).	Sat on the CoC Board as active member or official at any point during the last 12 months (between October 1, 2014 and November 15, 2015).
YMCA Safe Place	Yes	Yes	Yes
Home of the Innocents	No	Yes	No

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

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings within the last 12 months (between October 1, 2014 and November 15, 2015).	Sat on CoC Board as active member or official at any point during the last 12 months (between October 1, 2014 and November 15, 2015).
Center for Women and Families	Yes	No

**1B-2. Does the CoC intend to meet the timelines for ending homelessness as defined in Opening Doors?**

Opening Doors Goal	CoC has established timeline?
End Veteran Homelessness by 2015	Yes
End Chronic Homelessness by 2017	Yes
End Family and Youth Homelessness by 2020	Yes
Set a Path to End All Homelessness by 2020	Yes

**1B-3. How does the CoC identify and assign the individuals, committees, or organizations responsible for overseeing implementation of specific strategies to prevent and end homelessness in order to meet the goals of Opening Doors?  
(limit 1000 characters)**

In 2014, the Metro CoC updated the Blueprint to End Homelessness to align with the goals of the Opening Doors plan. This update includes goals and a timeline for ending veteran, chronic, family, youth and all homelessness. Committees address specific aspects, but an additional coordinating committee was established to end homelessness for each population identified. This committee, called Rx: Housing Louisville meets monthly to oversee the plan, create a by name list of those to be served, coordinate referrals to appropriate solutions, coordinate with local gov't resources, access additional resources (including vouchers) and track progress. Rx: Housing is working on the plan to end veteran homelessness. Our outreach has far exceeded the expected numbers but we have acquired adequate subsidies and reached functional zero on November 11. To date, over 420 homeless veterans have been housed and 150 are in transitional housing.

**1B-4. Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for any new projects in 2015. (limit 1000 characters)**

The Metro Louisville works informally throughout the year to meet individually with groups interested in serving the homeless and invite interested groups to attend CoC meetings. This is the best way to educate groups about the CoC funding application as well as other funding opportunities. Once a year, we also post an invitation to the CoC to submit proposals for funding as well as on our website, on Facebook and in our weekly e-newsletter, Word on the Street. Once the NOFA is issued, we also email all CoC members and any other groups that have expressed an interest in applying for funds throughout the year, even if they have not followed through to attend a meeting. We also share the information with other organizations including the city and local housing coalition to distribute. During the application, we contact people who have expressed an interest throughout the year and treat them equally in the ranking process.

**1B-5. How often does the CoC invite new members to join the CoC through a publicly available invitation?**

Annually

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	No
Runaway and Homeless Youth (RHY)	Yes
HeadStart Program	No
Other housing and service programs funded through Federal, State and local government resources.	Yes

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

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

	Number	Percentage
Number of Con Plan jurisdictions with whom the CoC geography overlaps	1	
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	1	100.00 %
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	1	100.00 %
How many of the Con Plan jurisdictions are also ESG recipients?	1	
How many ESG recipients did the CoC participate with to make ESG funding decisions?	1	100.00 %

How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	1	100.00 %
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**1C-2a. Based on the responses selected in 1C-2, describe in greater detail how the CoC participates with the Consolidated Plan jurisdiction(s) located in the CoC's geographic area and include the frequency, extent, and type of interactions between the CoC and the Consolidated Plan jurisdiction(s).  
(limit 1000 characters)**

The Coalition for the Homeless as coordinator of the Louisville CoC and HMIS lead meets monthly with key staff of Metro Louisville, our Consolidated Plan jurisdiction. The Coalition and city work collaboratively to set the agenda and date for each meeting. Our agenda's address coordination of the CoC and ESG programs, community homeless priorities, monitoring of sub-recipient agencies and more. We work collectively to coordinate the annual PIT count and insure that this data is used in CoC and ConPlan planning. We work together to coordinate the priorities and goals that are part of the Consolidated Plan, CoC Charter and Blueprint to End Homelessness. Coalition staff and members of the CoC also attend Consolidated Plan hearings and comment in writing to draft plans. Meanwhile, the City sits on the CoC Board and advisory group and is an active CoC member.

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

Metro Louisville works with The Coalition for the Homeless board to create outcome measurements that are used in ranking and funding ESG applicants. Metro Louisville applied to HUD and received assistance in 2015 through Cloudburst to expand on these performance standards and outcomes in coordination with outcomes that will also be used in ranking projects for CoC funding. These new outcomes will include cost per successful exit, accuracy of ESG exit data, recidivism and length of homelessness. Programs are being clustered with similar projects to insure fair measurement throughout the process and Cloudburst is helping us to establish best practices in this measurement to insure the best use of limited ESG funding. An ESG representative sits on the CoC Board and Advisory Group and is a member of the CoC. All ESG recipients use HMIS.

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



First, Louisville implemented the best practice of police conducting a lethality review on each case and creating a safety plan before releasing the parties. This has lowered the persons killed but increased people referred to dv shelter by 70%. So, the general shelter system must support a larger number of dv victims in addition to those served in our only domestic violence shelter, Center for Women and Families. For that reason, the CoC provides training on serving victims to front line shelter staff each year. The single point of entry that makes reservations in shelters, works to identify those in need of domestic violence shelter during the reservation process and coordinate the best referral with the local domestic violence agency. Louisville funding was also used this year to expand the number of domestic violence shelter beds through a renovation. Funding for these units is provided by the SHP, ESG, Dept. of Justice, HHS, metro council, CDBG and more.

**1C-4. List each of the Public Housing Agencies (PHAs) within the CoC's geographic area. If there are more than 5 PHAs within the CoC's geographic area, list the 5 largest PHAs. For each PHA, provide the percentage of new admissions that were homeless at the time of admission between October 1, 2014 and March 31, 2015, and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program. (Full credit consideration may be given for the relevant excerpt from the PHA's administrative planning document(s) clearly showing the PHA's homeless preference, e.g. Administration Plan, Admissions and Continued Occupancy Policy (ACOP), Annual Plan, or 5-Year Plan, as appropriate).**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 10/1/14 to 3/31/15 who were homeless at entry	PHA has General or Limited Homeless Preference
Louisville Metro Housing Authority	37.00%	Yes-Public Housing

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

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

385 units of VASH housing, local unsubsidized rooming houses, CSBG funding for deposits and moving expenses, private funds raised by The Coalition for the Homeless and partners to meet Blueprint to End Homelessness goals, \$12 million in city bond funds used for rental housing development, city general funds used for rapid rehousing, operations and services of homeless programs, \$1 million HOME TBRA, SSVF as rapid rehousing and CDBG used to provide \$1.2 million in services for supportive housing programs. Also, the Housing Authority has set aside 100 vouchers for a Move Up Strategy in the Section 8 program.

**1C-6. Select the specific strategies implemented by the CoC to ensure that homelessness is not criminalized in the CoC's geographic area. Select all that apply. For "Other," you must provide a description (2000 character limit)**

Engaged/educated local policymakers:	<input checked="checked" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="checked" type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented:	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

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

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

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

**1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) and explain how the CoC plans to coordinate with the institution(s) to ensure persons discharged are not discharged into homelessness.  
(limit 1000 characters)**

N/A

## **1E. Centralized or Coordinated Assessment (Coordinated Entry)**

### **Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**CoCs are required by the CoC Program interim rule to establish a Centralized or Coordinated Assessment system – also referred to as Coordinated Entry. Based on the recent Coordinated Entry Policy Brief, HUD’s primary goals for coordinated entry processes are that assistance be allocated as effectively as possible and that it be easily accessible regardless of where or how people present for assistance. Most communities lack the resources needed to meet all of the needs of people experiencing homelessness. This combined with the lack of a well-developed coordinated entry processes can result in severe hardships for persons experiencing homelessness who often face long wait times to receive assistance or are screened out of needed assistance. Coordinated entry processes help communities 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. Coordinated entry processes also provide information about service needs and gaps to help communities plan their assistance and identify needed resources.**

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

The Louisville coordinated entry begins with a single point of entry that makes reservations into shelter. Once identified through the SPE, a client is referred to the coordinated assessment team for a VI-SPDAT. Outreach teams also search for those unwilling to come to shelter and conduct VI-SPDAT in camps, at day shelters or anywhere as needed to insure coverage of the full CoC and to make access accessible. Those with high scores are referred for SH based on need. Referrals are also made for rapid rehousing and public housing with plans to expand to transitional housing referral in 2016. The housing authority has provided move up vouchers that will open up supportive housing for new homeless clients. Finally, we have case managers assigned to those with low VI-SPDAT scores to help families with job readiness and mainstream employment and housing opportunities.

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

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

Health Centers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SHP providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

### Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 1F-1. For all renewal project applications submitted in the FY 2015 CoC Program Competition complete the chart below regarding the CoC's review of the Annual Performance Report(s).

How many renewal project applications were submitted in the FY 2015 CoC Program Competition?	41
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	2
How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2015 CoC Program Competition?	39
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2015 CoC Competition?	100.00%

### 1F-2. In the sections below, check the appropriate box(s) for each section to indicate how project applications were reviewed and ranked for the FY 2015 CoC Program Competition. (Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.)

Type of Project or Program (PH, TH, HMIS, SSO, RRH, etc.)	<input checked="" type="checkbox"/>
Performance outcomes from APR reports/HMIS	
Length of stay	<input checked="" type="checkbox"/>
% permanent housing exit destinations	<input checked="" type="checkbox"/>
% increases in income	<input checked="" type="checkbox"/>
destination, length of homelessness and mainstream benefits	<input checked="" type="checkbox"/>



<b>Monitoring criteria</b>	
Participant Eligibility	<input type="checkbox"/>
Utilization rates	<input checked="" type="checkbox"/>
Drawdown rates	<input type="checkbox"/>
Frequency or Amount of Funds Recaptured by HUD	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
<b>Need for specialized population services</b>	
Youth	<input checked="" type="checkbox"/>
Victims of Domestic Violence	<input checked="" type="checkbox"/>
Families with Children	<input checked="" type="checkbox"/>
Persons Experiencing Chronic Homelessness	<input checked="" type="checkbox"/>
Veterans	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None	<input type="checkbox"/>

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

As the Louisville CoC has been operating a coordinated assessment and making referrals to supportive housing and rapid rehousing based on VI-SPDAT score, all supportive housing providers are now serving equally severe needs in supportive housing including income, no income, disabilities, chronic and length of homelessness. Projects are also awarded points in ranking based on their willingness to serve high need, chronically homeless populations. There are a few agencies that focus on a specific population including domestic violence, youth or HIV/AIDS. We, therefore, evaluate the scoring to make sure these projects do not score as outliers in the ranking process or that scoring does not effect certain populations unfairly.

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

The objective criteria used to rank proposals for the 2015 CoC was based on past ranking criteria that looked at past performance, HUD and local outcome goals and type of projects (supportive housing having the greatest priority). A copy is attached and was reviewed and approved by the CoC advisory group on October 23, 2015 and the CoC Board by email vote on October 27, 2015. The local competition review, ranking and selection criteria and final ranking of projects was also posted on the Coalition for the Homeless website, emailed and presented at the full CoC meeting on November 2, 2015.

**1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts of the FY 2015 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached.)** 11/18/2015

**1F-5. Did the CoC use the reallocation process in the FY 2015 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.)** Yes

**1F-5a. If the CoC rejected project application(s) on what date did the CoC and Collaborative Applicant notify those project applicants their project application was rejected in the local CoC competition process? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.)** 11/02/2015

**1F-6. Is the Annual Renewal Demand (ARD) in the CoC's FY 2015 CoC Priority Listing equal to or less than the ARD on the final HUD-approved FY 2015 GIW?** Yes

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

### **Instructions**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

The CoC lead monitors performance throughout the year. Recipients and subrecipients of CoC funding participate in a quarterly PIT count. Agencies are required to provide a manual count and a HMIS generated APR for the day of the count and for the past quarter. The manual count is compared to the APR to ensure accurate HMIS data entry. The APRs are assessed for utilization, turnover, destination, increasing income, access to mainstream benefits, and location prior to entry (to ensure eligibility). Further metrics are assessed on an annual basis. A custom HMIS length of stay report is used to look at how long program participants are in transitional housing and the ability to quickly move participants to a permanent destination. PH projects are assessed on their ability to keep participants in housing, or exit to a permanent destination, at both six months and one year. Timely expenditure of grant funds is monitored based on information provided by grantees and HUD, when available.

**1G-2. Did the Collaborative Applicant review and confirm that all project applicants attached accurately completed and current dated form HUD 50070 and form HUD-2880 to the Project Applicant Profile in e-snaps?** Yes

**1G-3. Did the Collaborative Applicant include accurately completed and appropriately signed form HUD-2991(s) for all project applications submitted on the CoC Priority Listing?** Yes

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

### **Intructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

Yes

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

Charter page 10

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

Yes

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

Yes

**2A-4. What is the name of the HMIS software used by the CoC (e.g., ABC Software)?** Service Point  
**Applicant will enter the HMIS software name (e.g., ABC Software).**

**2A-5. What is the name of the HMIS software vendor (e.g., ABC Systems)?** Bowman Systems  
**Applicant will enter the name of the vendor (e.g., ABC Systems).**

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

### Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

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

#### 2B-2.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	\$209,577
ESG	\$0
CDBG	\$25,000
HOME	\$0
HOPWA	\$0
Federal - HUD - Total Amount	\$234,577

#### 2B-2.2 Funding Type: Other Federal

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

**2B-2.3 Funding Type: State and Local**

<b>Funding Source</b>	<b>Funding</b>
City	\$0
County	\$0
State	\$10,000
State and Local - Total Amount	\$10,000

**2B-2.4 Funding Type: Private**

<b>Funding Source</b>	<b>Funding</b>
Individual	\$5,000
Organization	\$0
Private - Total Amount	\$5,000

**2B-2.5 Funding Type: Other**

<b>Funding Source</b>	<b>Funding</b>
Participation Fees	\$25,000
Other - Total Amount	\$25,000

<b>2B-2.6 Total Budget for Operating Year</b>	<b>\$274,577</b>
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## 2C. Homeless Management Information System (HMIS) Bed Coverage

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**2C-1. Enter the date the CoC submitted the 2015 HIC data in HDX, (mm/dd/yyyy):** 05/04/2015

**2C-2. Per the 2015 Housing Inventory Count (HIC) indicate the number of beds in the 2015 HIC and in HMIS for each project type within the CoC. If a particular housing type does not exist in the CoC then enter "0" for all cells in that housing type.**

Project Type	Total Beds in 2015 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter beds	549	28	521	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	513	16	497	100.00%
Rapid Re-Housing (RRH) beds	62	0	62	100.00%
Permanent Supportive Housing (PSH) beds	1,847	0	1,461	79.10%
Other Permanent Housing (OPH) beds	0	0	0	

**2C-2a. If the bed coverage rate for any housing type is 85% or below, describe how the CoC plans to increase this percentage over the next 12 months.  
(limit 1000 characters)**

The only PSH beds that are not in HMIS are the VASH voucher beds. Since the VA is not required to enter these beds, they do not get entered. The information regarding the clients placed in VASH is captured per client through the Single Point of Entry process but the information once they enter VASH is not.

**2C-3. HUD understands that certain projects are either not required to or discouraged from participating in HMIS, and CoCs cannot require this if they are not funded through the CoC or ESG programs. This does NOT include domestic violence providers that are prohibited from entering client data in HMIS. If any of the project types listed in question 2C-2 above has a coverage rate of 85% or below, and some or all of these rates can be attributed to beds covered by one of the following programs types, please indicate that here by selecting all that apply from the list below.**  
(limit 1000 characters)

VA Domiciliary (VA DOM):	<input type="checkbox"/>
VA Grant per diem (VA GPD):	<input type="checkbox"/>
Faith-Based projects/Rescue mission:	<input type="checkbox"/>
Youth focused projects:	<input type="checkbox"/>
HOPWA projects:	<input type="checkbox"/>
Not Applicable:	<input checked="" type="checkbox"/>

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

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**2D-1. Indicate the percentage of unduplicated client records with null or missing values and the percentage of "Client Doesn't Know" or "Client Refused" during the time period of October 1, 2013 through September 30, 2014.**

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	0%	3%
3.3 Date of birth	6%	0%
3.4 Race	6%	0%
3.5 Ethnicity	6%	0%
3.6 Gender	4%	0%
3.7 Veteran status	1%	0%
3.8 Disabling condition	2%	1%
3.9 Residence prior to project entry	3%	0%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	2%	57%
3.15 Relationship to Head of Household	24%	0%
3.16 Client Location	1%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	8%	0%

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

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

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

**2D-3. If you submitted the 2015 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR?** 12

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

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

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

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

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

All of the partners listed above are participating in HMIS.

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**The data collected during the PIT count is vital for both CoCs and HUD. Communities need accurate data to determine the size and scope of homelessness at the local level so they can best plan for services and programs that will appropriately address local needs and measure progress in addressing homelessness. HUD needs accurate data to understand the extent and nature of homelessness throughout the country, and to provide Congress and the Office of Management and Budget (OMB) with information regarding services provided, gaps in service, and performance. This information helps inform Congress' funding decisions, and it is vital that the data reported is accurate and of high quality.**

**2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2015 sheltered PIT count?** Yes

**2E-2. Indicate the date of the most recent sheltered PIT count (mm/dd/yyyy):** 01/28/2015

**2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2015, was an exception granted by HUD?** Not Applicable

**2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX, (mm/dd/yyyy):** 05/04/2015

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2015 PIT count:

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

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

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

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

The Louisville CoC requires all shelters to conduct a manual count the night of the last Wed of January. Shelters manually indicate the number of people in the shelter. Each shelter runs an HMIS report for the same night. Programs compare the two reports to ensure data collected manually matches data gleaned from HMIS. If there are discrepancies, the project cleans up the data before submitting the information to the CoC lead. The CoC compares the numbers (including sub-pops) to insure accuracy. We then run an HMIS report for the entire CoC comparing the numbers and make any adjustments necessary.

This count is conducted once a quarter on the last Wednesday of the month to monitor data quality and completeness. The January PIT is part of our year long process. As HMIS unduplicates data and each project insures clean HMIS data,, the number of persons shown in HMIS is a reliably accurate number for the PIT.

**2F-4. Describe any change in methodology from your sheltered PIT count in 2014 to 2015, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to the implementation of your sheltered PIT count methodology (e.g., enhanced training and change in partners participating in the PIT count). (limit 1000 characters)**

There was no change in the methodology.

**2F-5. Did your CoC change its provider coverage in the 2015 sheltered count?** No

**2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2015 sheltered count. (limit 750 characters)**

N/A



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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

Training:	<input checked="" type="checkbox"/>
Provider follow-up:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Non-HMIS de-duplication techniques:	<input type="checkbox"/>
Comparing manual counts to HMIS data for consistency	<input checked="" type="checkbox"/>

**2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2014 to 2015 that would change data quality, including changes to training volunteers and inclusion of any partner agencies in the sheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual sheltered PIT count methodology (e.g., change in sampling or extrapolation method). (limit 1000 characters)**

There were no changes.

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

### **Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**The unsheltered PIT count assists communities and HUD to understand the characteristics and number of people with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground. CoCs are required to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, CoCs are strongly encouraged to conduct the unsheltered PIT count annually, at the same time that it does the annual sheltered PIT count. The last official PIT count required by HUD was in January 2015.**

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

**2H-2. Indicate the date of the most recent unsheltered PIT count (mm/dd/yyyy):** 01/28/2015

**2H-2a. If the CoC conducted the unsheltered PIT count outside of the last 10 days of January 2015, was an exception granted by HUD?** Not Applicable

**2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy):** 05/04/2015

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 2I-1. Indicate the methods used to count unsheltered homeless persons during the 2015 PIT count:

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

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

The unsheltered PIT is done during the early AM hours the night after the shelters do the sheltered count. This ensures people counted in the shelters are not counted again on the streets. Over 200 volunteers walk the streets to count people sleeping/living on the streets. The outreach team divides the CoC area and distributes areas to teams of four. Counters are instructed to count only people in the area assigned. Basic information is gathered from those counted. As much of the CoC as possible is covered depending on the number of volunteers. Known locations are assigned first. We are committed to doing an unsheltered count each year in January. Basic sub-population information is gathered that night and other sub-population information is gleaned by extrapolating from HMIS. The CoC chose this methodology for its likelihood of finding and counting those on the streets. It has proven to be the most effective at achieving and unduplicated count.

**2I-3. Describe any change in methodology from your unsheltered PIT count in 2014 (or 2013 if an unsheltered count was not conducted in 2014) to 2015, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training and change in partners participating in the count). (limit 1000 characters)**

We have not changed the methodology of the unsheltered count other than to gain more volunteers and thus covering more of the CoC area.

**2I-4. Does your CoC plan on conducting an unsheltered PIT count in 2016?** Yes

(If "Yes" is selected, HUD expects the CoC to conduct an unsheltered PIT count in 2016. See the FY 2015 CoC Program NOFA, Section VII.A.4.d. for full information.)

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2015 unsheltered population PIT count:

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

### 2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2014 (or 2013 if an unsheltered count was not conducted in 2014) to 2015 that would affect data quality. This includes changes to training volunteers and inclusion of any partner agencies in the unsheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual methodology (e.g., change in sampling or extrapolation method). (limit 1000 characters)

In 2015 the Louisville CoC had over 200 volunteers participate in the street count. This increase in volunteers allows for greater coverage of the Continuum of Care area. Notable volunteer increases in 2015 included volunteers from the Kentucky National Guard assisting with the Street Count for the first time.

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

### Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

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

Using the table below, indicate the number of persons who were homeless at a Point-in-Time (PIT) based on the 2014 and 2015 PIT counts as recorded in the Homelessness Data Exchange (HDX).

	2014 PIT (for unsheltered count, most recent year conducted)	2015 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1,316	1,161	-155
Emergency Shelter Total	723	661	-62
Safe Haven Total	11	0	-11
Transitional Housing Total	512	419	-93
Total Sheltered Count	1,246	1,080	-166
Total Unsheltered Count	70	81	11

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

Using HMIS data, CoCs must use the table below to indicate the number of homeless persons who were served in a sheltered environment between October 1, 2013 and September 30, 2014.

	Between October 1, 2013 and September 30, 2014
Universe: Unduplicated Total sheltered homeless persons	6,019
Emergency Shelter Total	6,721
Safe Haven Total	0
Transitional Housing Total	1,292

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

**Describe the CoC's efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors for becoming homeless for the first time.  
(limit 1000 characters)**

In 2013, the Louisville CoC began a partnership with prevention agencies coordinated through 2-1-1. The CoC works to divert those at risk of homelessness to these agencies versus referring for shelter through community outreach and the single point of entry. We also prevent homelessness among special populations coming from state and local institutions through funding provided by the state to identify these clients and provide case management to keep them out of the shelter system. In 2015, our jails created FACE which identifies every homeless person in jail and works to insure that none of them are released to the streets. This program provides a backpack with resources, appropriate medications and gets transportation to a safe place to stay upon release. The city coordinates regional homeless prevention agencies, Neighborhood Places, that make referrals to help the at risk in our community keep from becoming homeless.

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

**Describe the CoC's efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless.  
(limit 1000 characters)**

The Metro Louisville CoC began tracking length of homelessness (especially among long term stayers) in 2014. While Bowman Systems has not yet created a true length of homelessness measure in HMIS, we can run reports on the length of stay for each client at each agency. We have done this and identified anyone outside the locally established goals of 3 months in emergency shelter and 12 months in transitional housing. The CoC lead provides this list to each agency and requires that the agency provide a plan for helping each of those long stayers identified obtain permanent housing. Additionally, our CoC now uses the VI-SPDAT to rank the needs of those within our shelter system as well as those on the streets. This system uses both length of stay and vulnerability to rank those in greatest need of permanent housing and makes referral for this housing shortening our community wide length of stay.

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

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

**3A-4a. Exits to Permanent Housing Destinations:**

In the chart below, CoCs must indicate the number of persons in CoC funded supportive services only (SSO), transitional housing (TH), and rapid re-housing (RRH) project types who exited into permanent housing destinations between October 1, 2013 and September 30, 2014.

	Between October 1, 2013 and September 30, 2014
Universe: Persons in SSO, TH and PH-RRH who exited	1,416
Of the persons in the Universe above, how many of those exited to permanent destinations?	756
% Successful Exits	53.39%

**3A-4b. Exit To or Retention Of Permanent Housing:**

In the chart below, CoCs must indicate the number of persons who exited from any CoC funded permanent housing project, except rapid re-housing projects, to permanent housing destinations or retained their permanent housing between October 1, 2013 and September 31, 2014.

	Between October 1, 2013 and September 30, 2014
Universe: Persons in all PH projects except PH-RRH	1,585
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?	1,492
% Successful Retentions/Exits	94.13%

**3A-5. Performance Measure: Returns to Homelessness:**

**Describe the CoC's efforts to reduce the rate of individuals and families who return to homelessness. Specifically, describe at least three strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness. (limit 1000 characters)**



Our first effort is the creation of a by name list for the target populations in Opening Doors. As Bowman Systems has not created a way to measure an exit from homelessness, we can now only tell about exits from a program. However, with a by name list, clients are tracked until they obtain housing and we are able to see who is returning to homelessness. Our second strategy is to avoid returns to homelessness from supportive housing. Case managers are trained to work with landlords and clients to address problems early and when necessary, move without an eviction or loss of housing. Finally, we have created a coordinated assessment team that is identifying anyone new to the homeless system. They are able to see if this is someone who was assessed prior, if they were referred to housing and track where the losses occurred. Agencies with high loss rates are tracked through the CoC score card to determine if any program has poor performance measures in this area.

### **3A-6. Performance Measure: Job and Income Growth.**

**Describe specific strategies implemented by CoC Program-funded projects to increase the rate by which homeless individuals and families increase income from employment and non-employment sources (include at least one specific strategy for employment income and one for non-employment related income, and name the organization responsible for carrying out each strategy). (limit 1000 characters)**

The Metro Louisville CoC works to increase employment and income whenever possible through CoC Program-funded projects. One recent strategy is the addition of supported employment. Our WIA center has partnered with CoC Program-funded agencies to assist and provide incentive payments for programs that help clients obtain and retain employment. We also have a strong partnership with Volunteers of America to create employment opportunities for homeless veterans through a veterans workforce grant and partnerships with employers like Humana (one of the top 10 employers of veterans in the nation). Additionally, peer support programs now funded through Medicaid are excellent employment opportunities for the formerly homeless and another CoC agency, Wellspring, have just received a supported employment grant for a new program.

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

The Louisville CoC has a Mainstream Benefits committee that meets monthly. This group includes administrators of mainstream benefits including Medicaid MCOs, food stamp and TANF employees and employers. They work to get information to each agency about employment, job fairs, and benefit opportunities. Their work has resulted in Kentucky having the greatest increase in Medicaid coverage of any state and a higher employment rate in shelter than most similar sized communities. The Kentucky Interagency Council on Homelessness had all state agencies responsible for state benefits including TANF, food stamps, SSI/SSDI, and Medicaid to sign an agreement to insure benefits are available to all homeless. Kentucky is working to expand it's Medicaid application to allow anyone to register for all benefits at this single site. Family Health Centers coordinates a strong SOAR program and hired eight Medicaid outreach workers to help homeless clients access SSI and Medicaid.

### **3A-7. Performance Measure: Thoroughness of Outreach.**

**How does the CoC ensure that all people living unsheltered in the CoC's geographic area are known to and engaged by providers and outreach teams?**

**(limit 1000 characters)**

First, several community outreach teams at Seven Counties Services, the VA hospital, Family Health Centers, Wayside, and YMCA Safe Place work to find and assist homeless persons on the streets. Once identified, they are tracked in HMIS and the Coordinated Assessment team works to find them on the streets and refer them to supportive housing. Louisville has three day shelters that enter stays for the homeless in HMIS allowing the system to follow and assist the street homeless further. This year, the CoC also began working closely with volunteer outreach teams to identify anyone that may have been missed by outreach. We hold meetings and provide resources to these volunteer groups and communicate through social media.

**3A-7a. Did the CoC exclude geographic areas from the 2015 unsheltered PIT count where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g., deserts)?**

No

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

The Louisville CoC did not purposefully exclude any part of the CoC by determining that there were no homeless people residing in those areas. We were hampered by the lack of ability to cover the entire CoC with volunteers. While we had over 200 volunteers, much higher than years past, we were still not able to cover the entire county. We did cover all areas where we knew there were homeless people and then we filled in the rest of the county as best we could.

We did use homeless persons and professional and volunteer staff to identify locations as well as locations provided by local police. We also have teams survey in known sites like hospital waiting rooms, fast food restaurants and day shelters.

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

### Objective 1: Ending Chronic Homelessness

#### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**Opening Doors, Federal Strategic Plan to Prevent and End Homelessness (as amended in 2015) establishes the national goal of ending chronic homelessness. Although the original goal was to end chronic homelessness by the end of 2015, that goal timeline has been extended to 2017. HUD is hopeful that communities that are participating in the Zero: 2016 technical assistance initiative will continue to be able to reach the goal by the end of 2016. The questions in this section focus on the strategies and resources available within a community to help meet this goal.**

**3B-1.1. Compare the total number of chronically homeless persons, which includes persons in families, in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).**

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	194	159	-35
Sheltered Count of chronically homeless persons	138	145	7
Unsheltered Count of chronically homeless persons	56	14	-42

**3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, decrease, or no change in the overall TOTAL number of chronically homeless persons in the CoC, as well as the change in the unsheltered count, as reported in the PIT count in 2015 compared to 2014. To possibly receive full credit, both the overall total and unsheltered changes must be addressed.  
(limit 1000 characters)**

The number of chronically homeless persons served through our shelters this year increased because our CoC has created a priority for this population in shelter through the single point of entry and they are getting priority for vacancies through the common assessment in outreach and permanent housing. We have greatly increased the numbers served this year but the total number of chronics in our system annually has actually decreased.

**3B-1.2. From the FY 2013/FY 2014 CoC Application: Describe the CoC's two year plan (2014-2015) to increase the number of permanent supportive housing beds available for chronically homeless persons and to meet the proposed numeric goals as indicated in the table above. Response should address the specific strategies and actions the CoC will take to achieve the goal of ending chronic homelessness by the end of 2015. (read only)**

The CoC is dedicated to increasing PH in order to end chronic homelessness. We have done this through a 100K Homes campaign that added 75 new chronic beds in 2013 and will add a minimum of 40 more chronic beds in 2014-15. These beds are not on the 3A-1.1 chart because they are funded through the housing authority and SAMHSA. We are also working with KY's Managed Care Organizations so that PH services for supportive housing serving the chronically homeless can be Medicaid billable. And KY has created a Supported Housing Academy to help with supported housing development. The CoC is initiating a common assessment team that will be ranking all clients assessed using the VI SPDAT. This means that units that are not previously dedicated to the chronically homeless and most vulnerable in the past will now serve the chronically homeless first as they rise to the top of the waiting list for housing. The common assessment team can file a grievance if these clients are not served providing accountability in the system. In addition, all 279 of our VASH vouchers are committed to the chronically homeless.

**3B-1.2a. Of the strategies listed in the FY 2013/FY 2014 CoC Application represented in 3B-1.2, which of these strategies and actions were accomplished? (limit 1000 characters)**

In 2013, the Metro Louisville CoC proposed to create 75 new chronic beds in 2013 and 40 in 2014. Both of these goals were met through housing vouchers made available by Louisville Metro Housing Authority and a SAHMSA grant for services. In addition, we have accessed an additional 55 VASH vouchers for chronically homeless veterans in 2015 and we were able to make amendments to several permanent supportive housing grants creating supportive housing for 50 new homeless persons. While not all of these units are dedicated to the chronically homeless, the common assessment and VI-SPDAT has resulted in almost all of these and all new vacancies during 2015 being dedicated to the chronically homeless who rank at the top of the common assessment ranking system. To date, we have housed 269 new chronically homeless in 2015 from that list.

**3B-1.3. Compare the total number of PSH beds (CoC Program and non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2015 Housing Inventory Count, as compared to those identified on the 2014 Housing Inventory Count.**

	2014	2015	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	363	655	292

**3B-1.3a. Explain the reason(s) for any increase, decrease or no change in the total number of PSH beds (CoC Program and non CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2015 Housing Inventory Count compared to those identified on the 2014 Housing Inventory Count.  
(limit 1000 characters)**

The largest increase in chronically dedicated beds came with the increase in HUD-VASH vouchers. This added 194 new beds. Another large infusion came when the CoC dedicated an entire project to serve the chronically homeless. This project added 67 beds. The CoC also applied for and received a new permanent supported housing project dedicated to the chronically homeless. Finally, the existing projects that are dedicated to the chronically homeless were able to serve more people due to existing tenants receiving benefits income that reduced the subsidy need. This allowed these projects to serve more of the chronically homeless population.

**3B-1.4. Did the CoC adopt the orders of priority in all CoC Program-funded PSH as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status ?**

Yes

**3B-1.4a. If “Yes”, attach the CoC’s written standards that were updated to incorporate the order of priority in Notice CPD-14-012 and indicate the page(s) that contain the CoC’s update.**

Pg 23, policies

**3B-1.5. CoC Program funded Permanent Supportive Housing Project Beds prioritized for serving people experiencing chronic homelessness in FY2015 operating year.**

Percentage of CoC Program funded PSH beds prioritized for chronic homelessness	FY2015 Project Application
Based on all of the renewal project applications for PSH, enter the estimated number of CoC-funded PSH beds in projects being renewed in the FY 2015 CoC Program Competition that are not designated as dedicated beds for persons experiencing chronic homelessness.	840
Based on all of the renewal project applications for PSH, enter the estimated number of CoC-funded PSH beds in projects being renewed in the FY 2015 CoC Program Competition that are not designated as dedicated beds for persons experiencing chronic homelessness that will be made available through turnover in the FY 2015 operating year.	108
Based on all of the renewal project applications for PSH, enter the estimated number of PSH beds made available through turnover that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.	61
This field estimates the percentage of turnover beds that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.	56.48%

**3B-1.6. Is the CoC on track to meet the goal of ending chronic homelessness by 2017?** Yes

This question will not be scored.

**3B-1.6a. If “Yes,” what are the strategies implemented by the CoC to maximize current resources to meet this goal? If “No,” what resources or technical assistance will be implemented by the CoC to reach the goal of ending chronically homeless by 2017? (limit 1000 characters)**

The Louisville CoC is part of Zero: 2106. We have a core team of housers and larger planning group that meet monthly to coordinate all resources for homeless veterans and the chronically homeless. We have a single by name list of both groups. Our housing authority has made available 100 move up vouchers that will open up that number of SH units for the chronically homeless. To date almost 270 chronically homeless have been housed. Our greatest barrier is an extremely tight rental market and extremely low fair market rent making it difficult to obtain units, but we have staff dedicated to this effort and plan to meet functional zero in 2017.

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

### Objective 2: Ending Homelessness Among Households with Children and Ending Youth Homelessness

#### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**Opening Doors outlines the goal of ending family (Households with Children) and youth homelessness by 2020. The following questions focus on the various strategies that will aid communities in meeting this goal.**

#### 3B-2.1. What factors will the CoC use to prioritize households with children during the FY2015 Operating year? (Check all that apply).

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



**3B-2.2. Describe the CoC's plan to rapidly rehouse every family that becomes homeless within 30 days of becoming homeless on the street or entering shelter.  
(limit 1000 characters)**

The first step Louisville's plan to rapidly re-house homeless families is to identify them through the Louisville Coordinated Assessment team. The Single Point of Entry maintains a need prioritized list of all families seeking emergency shelter. The list is shared with the Coordinate Assessment team for assessment via VI-SPDAT. This is used to determine priority for Rapid Re-Housing. In addition, Louisville is increasing Rapid Re-Housing availability. While the chart below shows a loss of ESG RRH, this is due more singles being served than families. However, Louisville added 40 new Rapid Re-Housing units for families through local funding, added 50 new Rapid Re-Housing units for veterans (including veteran families) through SSVF, and opened two new CoC funded RRH projects through recapture in 2014. In the FY15 competition, the CoC is applying for four new RRH projects, all of which will serve families.

**3B-2.3. Compare the number of RRH units available to serve families from the 2014 and 2015 HIC.**

	2014	2015	Difference
RRH units available to serve families in the HIC:	20	14	-6

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

CoC policies and procedures prohibit involuntary family separation:	<input checked="" type="checkbox"/>
There is a method for clients to alert CoC when involuntarily separated:	<input type="checkbox"/>
CoC holds trainings on preventing involuntary family separation, at least once a year:	<input checked="" type="checkbox"/>
There is a method for cliens to notify the city when involuntarily separated	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

**3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).**

**PIT Count of Homelessness Among Households With Children**

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	118	110	-8
Sheltered Count of homeless households with children:	118	108	-10
Unsheltered Count of homeless households with children:	0	2	2

**3B-2.5a. Explain the reason(s) for any increase, decrease or no change in the total number of homeless households with children in the CoC as reported in the 2015 PIT count compared to the 2014 PIT count. (limit 1000 characters)**

All homeless families decreased this year except those unsheltered. There was a small increase in the number of families counted in on the streets which is believed to be due to better coverage during the street count, but the overall number was still a decrease.

**3B-2.6. Does the CoC have strategies to address the unique needs of unaccompanied homeless youth (under age 18, and ages 18-24), including the following:**

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

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

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	<input checked="" type="checkbox"/>
Increase housing and service options for youth fleeing or attempting to flee trafficking:	<input checked="" type="checkbox"/>

Specific sampling methodology for enumerating and characterizing local youth trafficking:	<input type="checkbox"/>
Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	<input checked="" type="checkbox"/>
Community awareness training concerning youth trafficking:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

**3B-2.7. What factors will the CoC use to prioritize unaccompanied youth (under age 18, and ages 18-24) for housing and services during the FY2015 operating year? (Check all that apply)**

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

**3B-2.8. Using HMIS, compare all unaccompanied youth (under age 18, and ages 18-24) served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2013 (October 1, 2012 - September 30, 2013) and FY 2014 (October 1, 2013 - September 30, 2014).**

	FY 2013 (October 1, 2012 - September 30, 2013)	FY 2014 (October 1, 2013 - September 30, 2104)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	64	191	127

**3B-2.8a. If the number of unaccompanied youth and children, and youth-headed households with children served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 is lower than FY 2013, explain why.  
 (limit 1000 characters)**

N/A

**3B-2.9. Compare funding for youth homelessness in the CoC's geographic area in CY 2015 to projected funding for CY 2016.**

	Calendar Year 2015	Calendar Year 2016	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$1,965,927.00	\$2,072,295.00	\$106,368.00
CoC Program funding for youth homelessness dedicated projects:	\$323,696.00	\$326,376.00	\$2,680.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$1,642,231.00	\$1,745,919.00	\$103,688.00

**3B-2.10. To what extent have youth housing and service providers and/or State or Local educational representatives, and CoC representatives participated in each other's meetings over the past 12 months?**

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	4
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	4
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	40

**3B-2.10a. Given the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local education liaisons and State educational coordinators.  
 (limit 1000 characters)**

The Louisville Homeless Education Coordinator is an active member of the Metro Louisville CoC attending meetings and making announcements. The Metro Louisville CoC also provides regular reports to the homeless coordinator on any issues with homeless kids as needed and attends meetings with the LEA on the needs of homeless youth. The homeless coordinator works to insure that homeless children get the first slots for summer programming, after school slots, uniforms, school supplies and more. We also work collectively to host a day long county-wide training for teachers on serving homeless children and the homeless coalition provides resources to teachers about the homeless system and how to refer families in need.

**3B-2.11. How does the CoC make sure that homeless participants are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow. In addition, include how the CoC, together with its youth and educational partners (e.g. RHY, schools, juvenile justice and children welfare agencies), identifies participants who are eligible for CoC or ESG programs. (limit 2000 characters)**

Every homeless agency serving children within the Louisville homeless system has a homeless education coordinator and posted materials giving their contact information and rights to education and transportation. The homeless education coordinator also provides easy access to services through phone, on site or email. She has created goals for each student of school access and transportation within 24 hours that are tracked to insure they are met. The school system also provides after school teachers at four local family shelters to help homeless students meet education goals. The CoC also works to distribute Street Tips information about homeless resources to the school system, juvenile justice programs and neighborhood place welfare and prevention agencies. The RHY partner, YMCA Safe Place, is also an active member of the CoC and coordinates referral of homeless kids and then young adults to local homeless services or prevention as needed.

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

### Objective 3: Ending Veterans Homelessness

#### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**Opening Doors outlines the goal of ending Veteran homelessness by the end of 2015. The following questions focus on the various strategies that will aid communities in meeting this goal.**

#### 3B-3.1. Compare the total number of homeless Veterans in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	218	190	-28
Sheltered count of homeless veterans:	209	179	-30
Unsheltered count of homeless veterans:	9	11	2

#### 3B-3.1a. Explain the reason(s) for any increase, decrease or no change in the total number of homeless veterans in the CoC as reported in the 2015 PIT count compared to the 2014 PIT count. (limit 1000 characters)

In 2014 the number of HUD-VASH beds stood at 321, in 2015 HUD-VASH beds had increased to 386. This increase of 65 beds accounts for most if not all of the decrease in homeless veterans in our community. Also, by January 2015, we had already committed to participate in Zero: 2016 initiative to end veteran homelessness by the end of 201 and were already working to house veterans in our community.

**3B-3.2. How is the CoC ensuring that Veterans that are eligible for VA services are identified, assessed and referred to appropriate resources, i.e. HUD-VASH and SSVF? (limit 1000 characters)**

Louisville has a strong Zero: 2016 project that has focused on ending veteran homelessness in 2015. Louisville Mayor Greg Fischer has been a strong advocate for the project, holding meetings and hosting press events. We have a very strong outreach component coordinated through our local VA and the common assessment team. While, the Zero: 2016 program estimated we would identify 517 veterans this year, we have already identified over 800. We host two meetings monthly on ending veteran homelessness. One is to insure accuracy of the single list of veterans to be served and those who have been housed. The other is coordinate all partners, address issues and work collectively to meet the goal. In addition to housing, our plan includes referrals to the VA job training programs, per diem, VA emergency, SSVF, legal services and health care. The VA verifies veteran status for each veteran on our list.

**3B-3.3. For Veterans who are not eligible for homeless assistance through the U.S Department of Veterans Affairs Programs, how is the CoC prioritizing CoC Program-funded resources to serve this population? (limit 1000 characters)**

We have been able to identify the resources necessary to house all homeless veterans through VASH, Section 8 set asides, CoC vacancies, SAHMSA services with vouchers, and Rapid Re-Housing through SSVF. Section 8 and CoC slots are prioritized for veterans that have been assessed and are not eligible for a VASH voucher or SSVF. We also have a strong referral system where the VA assesses every veteran for status prior to the Coordinated Assessment team assigning the veteran to the appropriate housing program. If any veteran is then determined to be ineligible, they are then provided a warm hand off to the appropriate program through the Coordinated Assessment and to date all Veterans have been eligible to referral to at least one program. As of November 11, 2015, Louisville had reached functional zero in serving homeless veterans.

**3B-3.4. Compare the total number of homeless Veterans in the CoC AND the total number of unsheltered homeless Veterans in the CoC, as reported by the CoC for the 2015 PIT Count compared to the 2010 PIT Count (or 2009 if an unsheltered count was not conducted in 2010).**

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2015	% Difference
Total PIT count of sheltered and unsheltered homeless veterans:	273	190	-30.40%
Unsheltered count of homeless veterans:	28	11	-60.71%

**3B-3.5. Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2015.** Yes

This question will not be scored.

**3B-3.5a. If “Yes,” what are the strategies being used to maximize your current resources to meet this goal? If “No,” what resources or technical assistance would help you reach the goal of ending Veteran homelessness by the end of 2015? (limit 1000 characters)**

The Louisville CoC is part of Zero: 2016. We have a core team of housing providers and larger planning group that meet monthly to coordinate all resources for homeless veterans and the chronically homeless. We have a single by name list of both groups. Our housing authority has made available 100 vouchers in addition to those made available by VASH and SAHMSA. We also have a strong SSVF RRH program. To date over 400 homeless veterans have been housed and 200 are in transitional housing and moving through the system. On November 11, 2015, we met functional zero.



## 4A. Accessing Mainstream Benefits

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

**4A-2. Based on the CoC's FY 2015 new and renewal project applications, what percentage of projects have demonstrated that the project is assisting project participants to obtain mainstream benefits, which includes all of the following within each project: transportation assistance, use of a single application, annual follow-ups with participants, and SOAR-trained staff technical assistance to obtain SSI/SSDI?**

### FY 2015 Assistance with Mainstream Benefits

Total number of project applications in the FY 2015 competition (new and renewal):	40
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 3a, 3b, 3c, 4, and 4a on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	40
Percentage of renewal and new project applications in the FY 2015 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	100%

**4A-3. List the healthcare organizations you are collaborating with to facilitate health insurance enrollment (e.g. Medicaid, Affordable Care Act options) for program participants. For each healthcare partner, detail the specific outcomes resulting from the partnership in the establishment of benefits for program participants. (limit 1000 characters)**

Homeless Medicaid enrollment in Louisville was coordinated through Family Health Centers, the HCH program. They had eight staff providing outreach and assisting with sign ups in coordination with the Area Development District. Sign ups were coordinated at various homeless agencies with information distributed throughout the CoC. Louisville's homeless population has gone from 16% health coverage to over 90%. Kentucky also has the highest increase in health coverage due to the ACA of any state. Now, all newly homeless persons are assessed for health coverage when they enter services. We also work with all five MCOs, the state Medicaid office and the local university hospital through Mainstream services committees and special projects for high utilizers. This partnership has resulted in three new CoC homeless agencies getting licensed to bill Medicaid for services and a supportive housing demo project that saved the local hospital emergency room \$1 million per year.

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

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

## 4B. Additional Policies

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**4B-1. Based on the CoC's FY 2015 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH) and SSO (non-Coordinated Entry) projects in the CoC are low barrier? Meaning that they do not screen out potential participants based on those clients possessing a) too little or little income, b) active or history of substance use, c) criminal record, with exceptions for state-mandated restrictions, and d) history of domestic violence.**

### FY 2015 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2015 competition (new and renewal):	40
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2015 competition:	37
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2015 competition that will be designated as "low barrier":	93%

**4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), RRH, SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2015 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?**

### FY 2015 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2015 competition (new and renewal):	40
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2015 competition:	21
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2015 competition that will be designated as Housing First:	53%

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

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

**4B-4. Compare the number of RRH units available to serve any population from the 2014 and 2015 HIC.**

	2014	2015	Difference
RRH units available to serve any population in the HIC:	40	35	-5

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

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

N/A

**4B-7. Is the CoC requesting to designate one or more of its SSO or TH projects to serve families with children and youth defined as homeless under other Federal statutes?**

No

**4B-7a. If "Yes" in Question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons defined as homeless in accordance with 24 CFR 578.89. Description must include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)**

N/A

**4B-8. Has the project been affected by a major disaster, as declared by President Obama under Title IV of the Robert T. Stafford Act in the 12 months prior to the opening of the FY 2015 CoC Program Competition?**

No

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

N/A

**4B-9. Did the CoC or any of its CoC program recipients/subrecipients request technical assistance from HUD in the past two years (since the submission of the FY 2012 application)? This response does not affect the scoring of this application.**

Yes

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

This response does not affect the scoring of this application.

CoC Governance:	<input type="checkbox"/>
CoC Systems Performance Measurement:	<input checked="" type="checkbox"/>
Coordinated Entry:	<input type="checkbox"/>
Data reporting and data analysis:	<input type="checkbox"/>
HMIS:	<input type="checkbox"/>
Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	<input type="checkbox"/>
Maximizing the use of mainstream resources:	<input checked="" type="checkbox"/>
Retooling transitional housing:	<input type="checkbox"/>
Rapid re-housing:	<input type="checkbox"/>
Under-performing program recipient, subrecipient or project:	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

**4B-9b. If TA was received, indicate the type(s) of TA received, using the categories listed in 4B-9a, the month and year it was received and then indicate the value of the TA to the CoC/recipient/subrecipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.**

This response does not affect the scoring of this application.

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance
Systems Performance	05/01/2015	4
Maximizing Mainstream Services	07/01/2015	3
Addressing Recaptured Funds	05/01/2015	4

## 4C. Attachments

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

For required attachments related to rejected projects, if the CoC did not reject any projects then attach a document that says "Does Not Apply".

Document Type	Required?	Document Description	Date Attached
01. 2015 CoC Consolidated Application: Evidence of the CoC's Communication to Rejected Projects	Yes	Verification of N...	11/17/2015
02. 2015 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure	Yes	Rating & Review P...	11/13/2015
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	KY-501 FY2015 Web...	11/16/2015
05. CoCs Process for Reallocating	Yes	Reallocation Plan	11/13/2015
06. CoC's Governance Charter	Yes	KY-501 Governance...	11/16/2015
07. HMIS Policy and Procedures Manual	Yes	KY-501 Policies a...	11/16/2015
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	LMHA ACOP - Appli...	11/16/2015
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No	MOU CA & HMIS	11/17/2015
11. CoC Written Standards for Order of Priority	No	KY-501 Policies a...	11/18/2015
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes	No		
13. Other	No		
14. Other	No		
15. Other	No		

## **Attachment Details**

**Document Description:** Verification of NO Rejected Projects

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Rating & Review Procedure with meeting minutes

## **Attachment Details**

**Document Description:** KY-501 FY2015 Website Postings

## **Attachment Details**

**Document Description:** Reallocation Plan

## **Attachment Details**

**Document Description:** KY-501 Governance Charter

## **Attachment Details**



**Document Description:** KY-501 Policies and Procedures

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** LMHA ACOP - Applicable Pages Only

## **Attachment Details**

**Document Description:** MOU CA & HMIS

## **Attachment Details**

**Document Description:** KY-501 Policies and Procedures

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Rating and Review Addendum Project Ranking

## Attachment Details

**Document Description:**

## Attachment Details

**Document Description:**

## Submission Summary

Page	Last Updated
1A. Identification	11/13/2015
1B. CoC Engagement	11/16/2015
1C. Coordination	11/16/2015
1D. CoC Discharge Planning	11/13/2015
1E. Coordinated Assessment	11/18/2015
1F. Project Review	11/18/2015
1G. Addressing Project Capacity	11/16/2015
2A. HMIS Implementation	11/13/2015
2B. HMIS Funding Sources	11/13/2015
2C. HMIS Beds	11/18/2015
2D. HMIS Data Quality	11/17/2015
2E. Sheltered PIT	11/16/2015
2F. Sheltered Data - Methods	11/18/2015
2G. Sheltered Data - Quality	11/13/2015
2H. Unsheltered PIT	11/16/2015
2I. Unsheltered Data - Methods	11/18/2015
2J. Unsheltered Data - Quality	11/18/2015
3A. System Performance	11/18/2015
3B. Objective 1	11/16/2015
3B. Objective 2	11/18/2015
3B. Objective 3	11/18/2015
4A. Benefits	11/13/2015
4B. Additional Policies	11/13/2015
4C. Attachments	Please Complete
Submission Summary	No Input Required



Louisville/Jefferson County Continuum of Care  
KY-501  
November 17, 2015

All projects submitted to the CoC by the CoC deadline of October 17, 2015 were accepted for submission.

Mary Frances Schafer  
CoC Lead  
Director of Community Coordination  
Coalition for the Homeless

## LOUISVILLE CONTINUUM OF CARE RATING AND REVIEW PROCEDURE FY2015

All projects requesting funding during the FY15 CoC funding competition are rated on the following metrics. Projects will be ranked from highest to lowest based on numeric score. In the event of a tie the project with the highest Housing (measure 4) score will be listed first. In the event of a further tie, the project with this highest Housing First/Low Barrier (measure 8) will be listed first. If there is still a tie in score, projects will be listed by grant number in ascending order.

Projects that refuse to provide data for any measure, and are not legally prohibited from providing such data, will receive zero points for that measure.

There is a maximum of 50 possible points.

The final project ranking will be determined by the Continuum of Care Board of Directors.

### **MEASURE 1: PROJECT TYPE**

- **Universe:** All CoC funded renewal projects and new projects.
- **Measure:** Project type.
- **Data Source:** GIW and new project applications.
- **Points:** 10 points maximum.
  - 10 points: Permanent Supportive Housing and Rapid Re-Housing
  - 10 points: HMIS
  - 10 points: SSO – Common Assessment
  - 10 points: Transitional Housing exclusively for Homeless Youth
  - 3 points: Transitional Housing
  - 1 point: SSO

### **MEASURE 2: FUNDING RETURNED TO HUD**

- **Universe:** All CoC funded renewal projects and new projects.
- **Measure:** Funds returned during FY13 program year.
- **Data Source:** Provided by HUD HQ.
- **Points:** 4 points maximum.
  - 4 points: No returned funds
  - 3 points: 1% – 5% returned funds
  - 2 points: 6% – 10% returned funds **OR** enough funding to house one household
  - 0 Points: Greater than 10% returned funds **OR** enough funding to housing two or more households
  - 4 points: New projects/projects that have not finished one operating year

### **MEASURE 3: LEVERAGE**

- **Universe:** All CoC funded renewal projects and new projects.
- **Measure:** Leverage provided during the FY14 funding competition.

- **Data Source:** FY14 project applications.
- **Points:** 3 points maximum.
  - 3 points: Greater than 200%
  - 2 points: Between 150% - 200%
  - 1 point: Less than 150%
  - 0 points: No leverage
  - 3 points: New project

#### **MEASURE 4: HOUSING**

##### **Measure 4-1a:**

- **Universe:** All CoC funded renewal Permanent Supportive Housing, Rapid Re-Housing projects, and SSO Housing Project Specific programs.
- **Measure:** Percentage of program participants who maintain permanent housing for one year or exit to permanent housing. Stayers of less than one year are not included in the measure, as they have not yet had the potential to exceed one year.
- **Data Source:** Custom ART report – Louisville Length of Stay, July 2014 – June 2015.
- **Points:** 5 points maximum.
  - 5 points: 90% - 100%
  - 4 points: 80% - 89%
  - 3 points: 75% -79%
  - 2 points: 70% - 74%
  - 0 points: 69% or less

##### **Measure 4-1b:**

- **Universe:** All CoC funded renewal Permanent Supportive Housing, Rapid Re-Housing projects, and SSO Housing Project Specific programs.
- **Measure:** Percentage of program participants who maintain permanent housing for 6 months or exit to permanent housing. Stayers of less than six months are not included in the measure, as they have not yet had the potential to exceed six months.
- **Data Source:** Custom ART report – Louisville Length of Stay, July 2014 – June 2015.
- **Points:** 5 points maximum.
  - 5 points: 90% - 100%
  - 4 points: 80% - 89%
  - 3 points: 75% -79%
  - 2 points: 70% - 74%
  - 0 points: 69% or less

##### **Measure 4-2a:**

- **Universe:** All CoC Funded Transitional Housing or SSO Standalone Supportive Services projects.
- **Measure:** Percentage of program participants who exited to permanent housing.
- **Data Source:** HMIS Generated CoC APR, July 2014 – June 2015, questions 29a1 and 29a2.
- **Points:** 5 points maximum.

- 5 points: 83% - 100%
- 4 points: 67% - 82%
- 2 points: 55% - 66%
- 0 points: 54% or less

**Measure 4-2b:**

- **Universe:** All CoC Funded Transitional Housing or SSO Standalone Supportive Services projects.
- **Measure:** Of all program participants who exited the program or had been in the program for more than 365 days, the percentage who had been in the program for less than 365 days (i.e., how many program participants exited the program within one year). Stayers for less than one year are not included in the measure, as they have the potential to exceed one year.
- **Data Source:** Custom ART report – Louisville Length of Stay, July 2014 – June 2015.
- **Points:** 5 points maximum.
  - 5 points: 90% to 100%
  - 4 points: 80% to 89%
  - 3 points: 70% to 79%
  - 2 points: 60% to 69%
  - 1 point: 50% to 59%
  - 0 points: 49% or less

**Measure 4-3:**

- **Universe:** All CoC funded Supportive Services Only Street Outreach projects.
- **Measure:** Percentage of program participants that entered some form of shelter/housing (e.g., ES, TH, PSH, PH, RRH, etc.).
- **Data Source:** HMIS Generated CoC APR, July 2014 – June 2015, questions 29a1 and 29a2.
- **Points:** 10 points maximum.
  - 10 points: 83% - 100%
  - 8 points: 67% - 82%
  - 4 points: 55% - 66%
  - 0 points: 54% or less

**Measure 4-4:**

- **Universe:** All CoC funded HMIS, SSO Common Assessment, projects that have not completed one operating year, and new projects.
- **Measure:** All programs in universe.
- **Data Source:** None.
- **Points:** 10 points maximum.
  - 10 points: All projects

**MEASURE 5: PROGRAM CAPACITY**

- **Universe:** All CoC funded projects and new projects.
- **Measure:** Percentage of clients in project on four established point in time dates compared to stated project capacity. The four point in time counts are totaled and divided by capacity x 4.

- **Data Source:** HMIS Generated CoC APR for last Wednesday in July 2014, October 2014, January 2015, and April 2015; verified by manual PIT count.
- **Points:** 4 points maximum.
  - 4 points: 90% - 100%
  - 3 points: 80% - 89%
  - 2 points: 70% - 79%
  - 1 point: 69% or less
  - 4 points: HMIS, SSO Common Assessment, projects that have not completed one operating year, and new projects

#### **MEASURE 6: PARTICIPANT INCOME**

- **Universe:** All CoC funded projects and new projects.
- **Measure:** Percentage of all adult program participants who had some form of cash income.
- **Data Source:** HMIS Generated CoC APR, July 2014 – June 2015, questions 25a2 and 25b2.
- **Points:** 2 points maximum.
  - 2 points: 75% - 100%
  - 1 point: 25% - 74%
  - 0 points: 24% or less
  - 2 points: HMIS, SSO Common Assessment, projects that have not completed one operating year, and new projects

#### **MEASURE 7: PARTICIPANT EMPLOYMENT**

- **Universe:** All CoC funded projects and new projects.
- **Measure:** Percentage of all adult program participants who had employment income.
- **Data Source:** HMIS Generated CoC APR, July 2014 – June 2015, questions 25a1 and 25b1.
- **Points:** 1 point maximum.
  - 1 point: 20% or greater
  - 0 points: 19% or less
  - 1 point: HMIS, SSO Common Assessment, projects that have not completed one operating year, and new projects

#### **MEASURE 8: HOUSING FIRST/LOW BARRIER PROJECTS**

##### **Measure 8-1:**

- **Universe:** All CoC funded renewal Permanent Supportive Housing, Rapid Re-Housing projects, and SSO Housing Project Specific programs.
- **Measure:** Percentage of Housing First/Low Barrier questions out of 10 answered in a manner that affirms Housing First/Low Barrier principles.
- **Data Source:** Housing First/Low Barrier Project Questionnaire (attached).
- **Points:** 10 points maximum.
  - 10 points: 11 questions answered affirmatively
  - 9 points: 10 questions answered affirmatively
  - 8 points: 9 questions answered affirmatively



- 7 points: 8 questions answered affirmatively
- 6 points: 7 questions answered affirmatively
- 5 points: 6 questions answered affirmatively
- 4 points: 5 questions answered affirmatively
- 3 points: 4 questions answered affirmatively
- 2 points: 3 questions answered affirmatively
- 1 point: 1-2 questions answered affirmatively
- 0 points: 0 questions answered affirmatively

**Measure 8-2:**

- **Universe:** All CoC Funded Transitional Housing or SSO Standalone Supportive Services projects.
- **Measure:** Percentage of Housing First/Low Barrier questions out of 16 answered in a manner that affirms Housing First/Low Barrier principles.
- **Data Source:** Housing First/Low Barrier Project Questionnaire (attached).
- **Points:** 10 points maximum.
  - 10 points: 16 questions answered affirmatively
  - 9 points: 15 questions answered affirmatively
  - 8 points: 14 questions answered affirmatively
  - 7 points: 13 questions answered affirmatively
  - 6 points: 11-12 questions answered affirmatively
  - 5 points: 9-10 questions answered affirmatively
  - 4 points: 7-8 questions answered affirmatively
  - 3 points: 5-6 questions answered affirmatively
  - 2 points: 3-4 questions answered affirmatively
  - 1 point: 1-2 questions answered affirmatively
  - 0 points: 0 questions answered affirmatively

**Measure 8-3:**

- **Universe:** All CoC funded HMIS and SSO Common Assessment projects.
- **Measure:** All programs in universe.
- **Data Source:** None.
- **Points:** 10 points maximum.
  - 10 points: All projects

**MEASURE 9: TURNOVER TO CHRONICALLY HOMELESS**

- **Universe:** All CoC funded projects and new projects.
- **Measure:** Increase in number of chronically homeless individuals/households served July 2014 – June 2015 over July 2013 – June 2014.
- **Data Source:** Custom HMIS report – Louisville Chronic Report, July 2013 – June 2014 and July 2014 – June 2015.
- **Points:** 1 point maximum.
  - 1 Point: Dedicated CH Project
  - 1 Point: Increase or same number of CH clients served in PSH or RRH projects

- 0 Points: Decrease in CH clients served
- 0 Points: TH or SSO project
- 1 Point: HMIS, SSO Common Assessment, projects that have not completed two operating years, and new projects.

#### **MEASURE 10: CENTRALIZED ASSESSMENT/COORDINATED ENTRY PARTICIPATION**

- **Universe:** All CoC funded projects and new projects.
- **Measure:** Program accepts referrals from the Louisville CoC Centralized Assessment/Coordinates Entry process.
- **Data Source:** Centralized Assessment Supervisor.
- **Points:** 1 point maximum.
  - 1 point: Accepts referrals
  - 0 points: Does not accept referrals
  - 1 point: All projects not currently mandated to accept referrals (TH, SSO, HMIS) and new projects

#### **MEASURE 11: LEVERAGING MAINSTREAM RESOURCES**

- **Universe:** All CoC funded projects and new projects.
- **Measure:** Percentage of adult program participants who have non-cash benefits.
- **Data Source:** HMIS Generated CoC APR, July 2014 – June 2015, questions 26a2 and 26b2.
- **Points:** 2 points maximum.
  - 2 points: 75% - 100%
  - 1 point: 50% - 74%
  - 0 points: 49% or less
  - 2 points: HMIS, SSO Common Assessment, projects that have not completed one operating year, and new projects

#### **MEASURE 12: HMIS QUALITY**

- **Universe:** All CoC funded projects and new projects.
- **Measure:** Missing data elements on ART 625, question 7.
- **Data Source:** HMIS Generated CoC APR, July 2014 – June 2015, question 7.
- **Points:** 1 point maximum.
  - 1 point: No missing data
  - 0 points: Any missing data
  - 1 point: HMIS, SSO Common Assessment, projects that have not completed one operating year, and new projects

#### **MEASURE 12: HMIS QUANTITY**

- **Universe:** All CoC funded projects and new projects.
- **Measure:** HMIS data matches manual point in time counts.
- **Data Source:** HMIS Generated CoC APR for last Wednesday in July 2014, October 2014, January 2015, and April 2015 and manual PIT count occurring on same days.
- **Points:** 1 point maximum.

- 1 point: ART 625 and manual PIT count match
- 0 points: ART 625 and manual PIT count do not match
- 1 point: HMIS, SSO Common Assessment, projects that have not completed one operating year, and new projects

## **CONTINUUM OF CARE PRIORITY/NEED BONUS POINTS**

Projects will be awarded bonus points based on housing and services provided to underrepresented or high need populations.

Points are awarded based on project type to allow all projects a maximum of 11 points for that measure. For instance, a RRH project that was dedicated homeless youth could earn one bonus point, bringing their project type score to 11 (10 original points plus one bonus point). Similarly, a TH project that was dedicated families with children could earn 8 bonus points, bringing their project type score to 11 (3 original points plus 8 bonus points).

### **BONUS MEASURE 1**

- **Universe:** All CoC funded PSH, RRH, TH, and SSO projects.
- **Measure:** Project is dedicated families with children.
- **Data Source:** FY15 project application.
- **Points:** 10 points maximum.
  - 1 point: PSH and RRH projects
  - 8 points: TH projects
  - 10 points: SSO projects

### **BONUS MEASURE 2**

- **Universe:** All CoC funded PSH, RRH, TH, and SSO projects.
- **Measure:** Project is dedicated homeless youth, up to age 25.
- **Data Source:** FY15 project application.
- **Points:** 10 points maximum.
  - 1 point: PSH, RRH, and TH exclusively for Homeless Youth projects
  - 8 points: TH projects
  - 10 points: SSO projects

### **BONUS MEASURE 3**

- **Universe:** All CoC funded PSH, RRH, TH, and SSO projects.
- **Measure:** Project is dedicated street outreach.
- **Data Source:** FY15 project application.
- **Points:** 10 points maximum.
  - 1 point: PSH and RRH projects
  - 8 points: TH projects
  - 10 points: SSO projects

## **RATING AND REVIEW**

### **ADDENDUM 1: PROJECT RANKING**

All new and renewal projects were assigned a numeric score based on the criteria described in the Rating and Review and procedure. The initial Review and Rating procedure was presented to the full Continuum of Care on October 5, 2015. It was further reviewed by the Continuum of Care Advisory Board on October 23, 2015 and the Continuum of Care Board of Directors on October 8, 2015. Meeting minutes for all of the above are attached. The Continuum of Care Board of Directors voted via email to adopt the rating and review procedure on November 2, 2015.

While all projects were scored on the same criteria, they were ranked taking into account local needs by the Continuum of Care Board of Directors, on the advice of the CoC Advisory Board. Project Ranking was approved via email on November 2, 2015.

The final Rating and Review procedure and project ranking was presented to the full Continuum of Care in a public meeting on November 2, 2015.

The following adjustments were made to project ranking:

- All new projects, with two exceptions, were ranked at the bottom of Tier 2.
- Common Assessment 2, a critically needed expansion of the Louisville Continuum of Care's Coordinated Assessment process was placed in Tier 1.
- Home of the Innocents Rapid Re-Housing was placed in Tier 1. In order to fund this project, Home of the Innocents gave up participating in two Permanent Supportive Housing projects. The shift to Rapid Re-Housing was recognized to be a better fit for the population served, homeless youth aged 18-24.
- Louisville HMIS 4 was determined to be the least critical new project and was ranked next to last.
- Home of the Innocents Permanent Housing for Adults with Disabilities was ranked last. While preserving all Permanent Supportive Housing is critically important, the shift to Rapid Re-Housing for the population served by this project, homeless youth aged 18-24, made preserving this particular program less of a priority.

**Louisville Metro Continuum of Care  
2015 Final Ranking**

Agency	Project	Type	Description	Request
<b>Tier 1</b>				
CFH	HMIS/SPE	HMIS	Single Point of Entry operations	\$79,502
FHC-Phoenix	Comm Assess	CA	Initial Common Assessment project	\$188,168
FHC-Phoenix	CA-2	CA	Common Assessment expansion (New)	\$111,488
CFH	HMIS-2	HMIS	Funds HMIS	\$5,434
CWF	RRH	PSH	Rapid Rehousing for domestic violence victims	\$51,631
HOTI	RRH	RRH	Rapid Rehousing for youth age 18-24 (New)	\$419,954
CFH	HMIS	HMIS	Funds HMIS	\$124,641
F&C PI	RRH - 1	PSH	Rapid Rehousing for families and individuals	\$109,414
WCM	PSH Men	PSH	Permanent Supportive Housing for single men	\$113,224
Wellsp	Murray/McK	PSH	Permanent Supportive Housing for mentally ill	\$30,624
Wellsp	Journey	PSH	Permanent Supportive Housing for mentally ill	\$223,244
WCM	PSH Women #1	PSH	Permanent Supportive Housing for single women	\$28,560
CFH	PSHCH	PSH	Permanent Supportive Housing for chronically homeless	\$468,601
NDHC	TS	TH	Transitional Housing for Families	\$59,355
VOA	TH	TH	Transitional Housing for Families	\$378,690
WCM	PSH Women #2	PSH	Permanent Supportive Housing for single women	\$86,536
CFH	THYA/HOTI	TH	Transitional Housing for Young Adults - Home of Innocents	\$230,605
LMG	de Paul	PSH	Permanent Supportive Housing for singles and families	\$94,303
CFH	SHCH/SJ	PSH	Supportive Housing for Chronically Homeless - St John Cntr	\$304,491
LMG	PSHnonCH #2	PSH	Permanent Supportive Housing for non chronic homeless	\$190,558
SA	TH	TH	Transitional Housing for Families	\$122,285
CFH	PSHYA	PSH	Permanent Supportive Housing for Youth and Adults	\$185,652
7 Co	MHOT	SSO	Mental Health Outreach Team - Street outreach team	\$94,833
LMG	PSHnonCH #1	PSH	Permanent Supportive Housing for non chronic homeless	\$152,274
SSVdP	Homes w/Hope	PSH	Permanent Supportive Housing for singles and families	\$121,985
LMG	Simon	PSH	Permanent Supportive Housing for single men	\$38,926
SSVdP	CHI	PSH	Permanent Supportive Housing for non chronic homeless	\$463,890
Wellsp	Baxter	PSH	Permanent Supportive Housing for mentally ill	\$22,425
SSVdP	Homes	PSH	Permanent Supportive Housing for singles and families	\$333,556

LMG	Kersey	PSH	Permanent Supportive Housing for those with HIV/AIDS	\$30,321
LMG	TBRA	PSH	Permanent Supportive Housing for singles and families	\$1,915,485
HoR	Homes w/Heart	PSH	Permanent Supportive Housing for those with HIV/AIDS	\$147,606
CFH	CH2	PSH	Permanent Supportive Housing for chronically homeless	\$642,116
CFH	LASH	PSH	Permanent Supportive Housing for singles and families	\$585,346
<b>Tier 2</b>				
Choices	PSH	PSH	Permanent Supportive Housing for singles and families	\$73,798
SSVdP	De Paul (Jude)	TH	Transitional Housing for families	\$140,565
HoR	Glade House	TH	Transitional Housing for those with HIV/AIDS	\$155,618
CWF	West End	TH	Transitional Housing for domestic violence victims	\$50,825
LMG	CM	SSO	Case Management for permanent supportive housing	\$38,977
FHC	SSAT	SSO	Support Services Assessment Team	\$260,006
CFH	SAFAH	SSO	Case Management for emergency shelter & follow-up	\$444,105
<b>Tier 2 Under Renewal Line</b>				
LMG/SP	RRH 3	RRH	Rapid Rehousing for youth age 18-24 (New)	\$120,714
F&C PI	RRH - 2	RRH	Rapid Rehousing for individuals and families (New)	\$246,514
LMG	RRH	RRH	Rapid Rehousing for individuals and families (New)	\$184,597
CFH	HMIS-4	HMIS	Funding for HMIS	\$78,487
HOTI	PHAD	PSH	Permanent Supportive Housing for singles and families	\$95,771
				<hr/>
				\$10,045,700



## **Minutes for Metro Louisville Continuum of Care (CoC) Meeting – October 6, 2015**

Mary Frances Schafer welcomed the members of the Metro Louisville CoC. Mary Frances then gave an update on the U.S. Department of Housing and Urban Development (HUD) CoC funding announcement. See attached outline, but key details include:

- 1) The project deadline to the Coalition for the Homeless is Saturday, October 17 at midnight, and project applications are due to Mary Frances. (Submit on this date NO MATTER WHAT! It can always be sent it back to you.)
- 2) November 2 is the deadline for the posting of the final ranking.
- 3) Tuesday, November 17, the application is due to HUD for additional points.
- 4) Louisville is eligible for a bonus of up to \$1,361,088. (Bonus money must be used for Permanent Supported Housing for Chronics or Rapid Rehousing for individuals and/or families). Anyone interested must contact Mary Frances by Tuesday.
- 5) The NOFA allows for reallocation. Several existing projects have relinquished all or parts of their funding to be reallocated. Reallocated funds can be used for PSH for Chronics, Rapid Rehousing, Common Assessment or HMIS. Several agencies have requested a portion. Anyone else interested must contact Mary Frances by Tuesday.
- 6) The funding line – Tier 1 – is pretty high, which means that more projects will fall into Tier 2.
- 7) HUD has put forth how they will be scoring projects. See NOFA and NOFA Summary.

Mary Frances reminded everyone to read the full NOFA and the NOFA summary.

Next, Mary Frances described the ranking system for the Metro Louisville CoC:

- I. The Metro Louisville CoC will continue to use the existing ranking system (see attached).
  - i. Housing goal: Maintaining PSH for 6 mo or more (80%)/percentage of people moving from TH to PH (80%)
  - ii. Capacity
  - iii. Funds returned
  - iv. Income
  - v. Employment
  - vi. Leverage
  - vii. HMIS quality and quantity (New ART 260 which measures data quality – and is directly linked to the HUD APR report.)
  - viii. Common Assessment/Single point of entry participation
- II. Metro Louisville will also rank projects according to HUD's four outcomes measurements



- i. Maintaining PSH for 1 year or more (80%)/The average time it takes to move those in TH to permanent housing
- ii. Focusing PSH turnover vouchers/units on serving the chronically homeless
- iii. Those using Housing First
- iv. Those leveraging mainstream services

Mary Frances then gave an update on the HMIS meeting which was held prior to this meeting. A new APR report is coming November 1. It will be able to be run in real time. The ART 631 (APR detailed report) will be going away. The new report will include two new goals:

A. Length of Stay

ART 631 to determine who is exceeding the following guidelines

- 1. Transitional Housing: Over 365 days (1 year) and over 2 years which is the maximum stay for TH
- 2. Emergency Shelter: Over 180 days (6 months)
- 3. SSOs: Over 730 days (2 years)

Identify by name who has exceeded the above and determine why

- 4. There may be very reasonable reasons why someone has exceeded the above but please identify who and why and determine if there is anything that could be done to expedite their exiting the homeless provider system.
- 5. I have given the Common Assessment team the reports that include names that have exceeded a 1 year stay to determine if all of these folks have been assessed by the Common Assessment team.
- 6. If the person is no longer in your program, please exit them from HMIS as soon as possible using the backdate mode and as close to their exit date as possible.

B. Reoccurrences (Recidivism)

- i. We are beginning to get clues as to what a "Reoccurrence" is. Bowman has received the specs on how to create reports to tell us this information so we will be using HMIS to learn how each project is doing and more importantly how the CoC is doing with folks leaving shelters/programs and returning either to the same or a different project within the CoC system. Will and I are studying the specs and already know that EVERYONE needs to be diligent in completing their HMIS records as cleanly and completely as possible. (You do not want to get into a situation where you need to do a lot of clean up!!) Do it right the first time!





There is also a new report for measuring HUD Outcomes (ART 252) that has been updated to give you a better idea of how you are doing with HMIS data quality. This report uses a different but more accurate way of indicating whether you are putting in all the information that will be needed for the HUD reports.

This report was run for all agencies and programs that receive CoC money for Jan 2015 – June 2015. This report will be used to monitor HMIS participation in the future – NOT NOW. We gave each agency your report last month so you could see what it measures and how to get up to speed in your data entry. HUD is indicating that the data used to produce the report using this information will pull from a year prior. This is to determine “Reoccurrence”. So the sooner you begin to enter the information in the new required categories the better it will be.

Mary Frances then gave an update on Zero 2016 (January – September 2015)

\* Total Housed: 452 (Veterans Housed: 331, Chronics Housed: 258)

Announcements followed:

Natalie Harris shared that several trainings are coming soon:

- 1) Motivational Interviewing will be offered in November,
- 2) De-escalation will be offered in January, and
- 3) A three-day training for all shelter staff will be held the second week in January

Joe Hamilton shared that Stand Down/Operation Homeless Connect will take place at Salvation Army on Wednesday, October 7, 2015.

Brandi shared that the FMRs increased about 7% starting on October 1, 2015 and reminded all CoC applicants to submit match and leverage letters for their projects. Metro Louisville needs a collective leverage amount of 150% to get full points.

The next meeting will be held on November 2, 2015 at 3:30 at Metro United Way.



## **Minutes for Board of Directors of the Metro Louisville Continuum of Care Meeting – October 8, 2015**

The Board of Directors of the Louisville Metro Continuum of Care met on October 8, 2015 at the offices of the Coalition of the Homeless.

BOARD MEMBERS PRESENT: Rosemary Lockett, Stewart Pope, Ramona Johnson, Wade Jordhal, Pat McKiernan, Maria Price, Mark Bolton, Michelle Neuhauser, Giselle Danger-Mercaderes, Joe Hamilton, Jennifer Clark, Donna Trabue, Ken Lanham, Jr.

GUESTS PRESENT: Mary Frances Schafer, Natalie Harris

The meeting was called to order at 4:05 p.m.

LOUISVILLE METRO CONTINUUM OF CARE CHARTER AND POLICIES AND PROCEDURES: The meeting began with a discussion and review of the Louisville Metro Continuum of Care Policies and Procedures and Continuum of Care Charter. Members noted that in the CoC goals listed on page 2, the 50% diverted rate from the homeless system is too high because there are too few diversion locations. The board determined to retain the goal of diverting from the homeless provider system but to delete the percentage.

For the goal of moving people and families out of homelessness, the board voted to change these three goals to the following: \* New clients in the homeless system will exit emergency shelter within six months and transitional housing within 12 months. \* 80% of those who enter transitional housing will move to permanent housing. \* 80% of those placed in permanent housing will remain for 12 months or longer.

The board voted to increase the goal to 90% of the number of shelter beds entered into HMIS and that 30% of those entered into HMIS will have an exit destination.

On page 7 of the policies, the board determined that the Governance Charter should be signed by the CoC board rather than all parties.

On page 9 of the policies, committee meetings and names were updated to reflect the changes in the past year and on page 10, the Blueprint priorities were updated to reflect the new priorities both in the Charter and policies.

The board amended the first sentence of Single Point of Entry on page 13 to read that the CoC requires universal data... rather than stating 13 data elements.

The board approved an amendment on page 23 of the policies to include the new prioritization of those served through the common assessment.



The board accepted the previously suggested changes to the Policies and Procedures without modification and accepted the entire Policies and Procedures as amended.

GOVERNANCE CHARTER: The board reviewed and discussed proposed changes to the Governance Charter. Wayside was deleted as the designated meeting site on page 9, of the Targeting Chronic Homelessness/Long-Term Stayers Committee.

The board approved the Governance Charter as amended and all board members present signed the charter.

NOFA: The board reviewed and discussed the NOFA Summary created by Mary Francis and posted on the Coalition website and the proposed CoC rating and review procedure also to be posted.

Mary Frances advised that there is approximately \$1, 361,000.00 available as a bonus this year for Permanent Supported Housing for the chronically homeless and/or for Rapid Rehousing for individuals and families.

Mary Frances advised that HUD places an emphasis on young adults, veterans and the chronic homeless and that Louisville is eligible to receive a larger planning grant this year.

There is also at least \$180,000 available in recaptured funds that can be used for Rapid Rehousing, Permanent Supportive Housing for Chronically Homeless, HMIS or Common Assessment.

The board reviewed and discussed the proposed ranking system. The board then reviewed agency requests for funds, ranking and scores as well as placement of agencies within the tier system. To date, there is more funding available than being requested. Board members recommended additional calls for applications but did not approve the ranking system or final ranking until they have the opportunity to see the full list of requests.

GENERAL: The board reviewed the number of homeless housed through Rx: Housing Veterans as of September 2015 and compared how these numbers fit with targets.

The meeting was adjourned at 5:40 p.m.



## **Minutes for Louisville CoC Advisory Committee Minutes – October 23, 2015**

Members present: Jennifer Clark, Maria Price, Rosemary Luckett, Melinda Collett, and Donna Trabue

Staff present: Mary Frances Schafer and Natalie Harris

The meeting began at 9:10.

Mary Frances began by explaining that all applications for the 2015 CoC were submitted by the deadline of October 17, 2015 at midnight except Interlink who called the Friday before the deadline to start the application but then called again on Monday to request an extension. Mary Frances contacted HUD to decide the best course. They stated that it is best to stick with the deadline but, if not, everyone would have to be offered the extended deadline.

Mary Frances then went through the list of proposals that were submitted. Six are new proposals for supportive housing and rapid rehousing. Even so, there is still over \$300,000 in funding not requested that was available. She then went through the scoring system to explain the areas being measured and the staff's proposed scores and ranking (see attached). The proposed scoring is up to 50, but includes bonus points for type of project based on HUD priorities. The staff also proposed adding points for outreach even though it is not a HUD priority due to local need.

Mary Frances then discussed the ranking process and what projects would stay within tier one versus tier two of the ranking. She also explained where our funding would stop based on the Annual Renewal Demand. Mary Frances then discussed the tier 2 scoring process that includes the ARD plus bonus amount requested totaling \$2,332,868. Using this, she proposed three ranking options for tier 2 with the goal of fairness and the best results for the full CoC taking into account HUD scoring, Housing First and renewals versus new projects.

Rosemary discussed a need to give the CoC board a recommendation along with a description of the strengths of each option. She pointed out that option 1 is the most objective and aligned with HUD goals. Maria recommended option 3 as the preference because it is the most fair to the full CoC and aligned with local priorities of existing projects. Those new projects at the bottom of the scoring present also agreed this was the best decision. Rosemary asked that the number of units on the line for each project also be included on the chart to help the CoC board with their recommendation. The advisory group recommended option 3 (see attached) with option 1 as their second choice and not presenting option 2 since it doesn't have any strengths above the other two.

The meeting ended at 10:52.



### **Minutes for Metro Louisville Continuum of Care (CoC) Meeting – November 2, 2015**

Mary Frances Schafer began the meeting at 3:37 p.m. She explained that the Continuum of Care application is in full swing. The first deadline for project applications has passed and today is the deadline to post the ranking process and ranking of projects. She shared that the CoC was eligible to apply for up to \$1,361,088 in bonus or new funding and that all but \$389,309 was requested. The total request will be \$10,317,918.

Sheets were distributed showing the rating and review procedure and actual list of projects in order (see attached). Both were reviewed by the Advisory Committee and voted on by the CoC Board. Mary Frances explained that the projects in tier one are fairly safe unless ineligible. Also there is one project that is in both tiers and HUD has said it will make every effort to fund the full grant. The remaining projects will be ranked according to a formula created by HUD based on our ranking which is included on the list of projects. She was asked and explained that she did not know when funding would be announced, but that the announcements will all be together this year versus two tiers. She is hopeful that it could be as early as March.

Mary Frances then discussed other aspects of the CoC application. She is reviewing project proposals and still has some folks to call with changes but there are no large issues. Also, applicants have already submitted more than the required leverage to get the maximum points. All projects must be submitted for the second time by November 10, 2015 so that Mary Frances can complete the full application and submit by November 17, 2015.

Mary Frances reminded everyone that a new HMIS report will be coming in December or January.

Natalie Harris announced that the Louisville Police Dept. is holding a meeting at Salvation Army to discuss a need to address the number of people now staying under the viaduct on Breckinridge. Please attend on November 19 at 11:00 a.m. at Salvation Army. She also explained that we will be ready to start planning for the new Move Up vouchers at the December meeting, so start thinking now about applicants for that opportunity.

Elizabeth Fick Koppen shared that fairness training in shelters will take place in January over three days. She is requesting that front line staff of all agencies attend.

The meeting ended at 4:35 p.m. Next month's meeting will be held on December 7, 2015.



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CoC / Metro Louisville CoC FY15 Project Ranking and Review

November 3, 2015

## Metro Louisville CoC FY15 Project Ranking and Review

The Metro Louisville CoC has posted the following documents relevant to the FY15 project ranking and review:

- [Metro Louisville CoC Minutes – November 2015](#)
- [Metro Louisville CoC Board of Directors Meeting – October 2015](#)
- [Metro Louisville CoC Advisory Committee Minutes – October 2015](#)
- [Metro Louisville CoC Rating and Review Procedure 2015](#)
- [Metro Louisville Continuum of Care 2015 Final Ranking](#)
- [Metro Louisville CoC Project Ranking Addendum FY15](#)
- [Metro Louisville CoC Reallocation Plan](#)

Please note that all projects listed in the ranking have been accepted for submission. No projects submitted by the established deadline were rejected.

If you have questions or need more information, please contact Mary Frances Schafer, Director of Community Coordination, via [email](#).

[← Bill Frisell at the Clifton Center \(Thurs. 11/19\)](#)

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Louisville Metro Continuum of Care  
2015 Final Ranking

Agency	Project	Type	Description	Request
Tier 1				
CFH	HMIS/SPE	HMIS	Single Point of Entry operations	\$79,502
FHC-Phoenix	Comm Assess	CA	Initial Common Assessment project	\$188,168
FHC-Phoenix	CA-2	CA	Common Assessment expansion (New)	\$111,488
CFH	HMIS-2	HMIS	Funds HMIS	\$5,434
CWF	RRH	PSH	Rapid Rehousing for domestic violence victims	\$51,631
HOTI	RRH	RRH	Rapid Rehousing for youth age 18-24 (New)	\$419,954
CFH	HMIS	HMIS	Funds HMIS	\$124,641
F&C PI	RRH - 1	PSH	Rapid Rehousing for families and individuals	\$109,414
WCM	PSH Men	PSH	Permanent Supportive Housing for single men	\$113,224
Wellsp	Murray/McK	PSH	Permanent Supportive Housing for mentally ill	\$30,624
Wellsp	Journey	PSH	Permanent Supportive Housing for mentally ill	\$223,244
WCM	PSH Women #1	PSH	Permanent Supportive Housing for single women	\$28,560
CFH	PSHCH	PSH	Permanent Supportive Housing for chronically homeless	\$468,601
NDHC	TS	TH	Transitional Housing for Families	\$59,355
VOA	TH	TH	Transitional Housing for Families	\$378,690
WCM	PSH Women #2	PSH	Permanent Supportive Housing for single women	\$86,536
CFH	THYA/HOTI	TH	Transitional Housing for Young Adults - Home of Innocents	\$230,605
LMG	de Paul	PSH	Permanent Supportive Housing for singles and families	\$94,303
CFH	SHCH/SJ	PSH	Supportive Housing for Chronically Homeless - St John Cntr	\$304,491
LMG	PSHnonCH #2	PSH	Permanent Supportive Housing for non chronic homeless	\$190,558
SA	TH	TH	Transitional Housing for Families	\$122,285
CFH	PSHYA	PSH	Permanent Supportive Housing for Youth and Adults	\$185,652
7 Co	MHOT	SSO	Mental Health Outreach Team - Street outreach team	\$94,833
LMG	PSHnonCH #1	PSH	Permanent Supportive Housing for non chronic homeless	\$152,274
SSVdP	Homes w/Hope	PSH	Permanent Supportive Housing for singles and families	\$121,985
LMG	Simon	PSH	Permanent Supportive Housing for single men	\$38,926
SSVdP	CHI	PSH	Permanent Supportive Housing for non chronic homeless	\$463,890
Wellsp	Baxter	PSH	Permanent Supportive Housing for mentally ill	\$22,425
SSVdP	Homes	PSH	Permanent Supportive Housing for singles and families	\$333,556

LMG	Kersey	PSH	Permanent Supportive Housing for those with HIV/AIDS	\$30,321
LMG	TBRA	PSH	Permanent Supportive Housing for singles and families	\$1,915,485
HoR	Homes w/Heart	PSH	Permanent Supportive Housing for those with HIV/AIDS	\$147,606



## LOUISVILLE CONTINUUM OF CARE RATING AND REVIEW PROCEDURE FY2015

All projects requesting funding during the FY15 CoC funding competition are rated on the following metrics. Projects will be ranked from highest to lowest based on numeric score. In the event of a tie the project with the highest Housing (measure 4) score will be listed first. In the event of a further tie, the project with this highest Housing First/Low Barrier (measure 8) will be listed first. If there is still a tie in score, projects will be listed by grant number in ascending order.

Projects that refuse to provide data for any measure, and are not legally prohibited from providing such data, will receive zero points for that measure.

There is a maximum of 50 possible points.

The final project ranking will be determined by the Continuum of Care Board of Directors.

### MEASURE 1: PROJECT TYPE

- **Universe:** All CoC funded renewal projects and new projects.
- **Measure:** Project type.
- **Data Source:** GIW and new project applications.
- **Points:** 10 points maximum.
  - 10 points: Permanent Supportive Housing and Rapid Re-Housing
  - 10 points: HMIS
  - 10 points: SSO – Common Assessment
  - 10 points: Transitional Housing exclusively for Homeless Youth
  - 3 points: Transitional Housing
  - 1 point: SSO

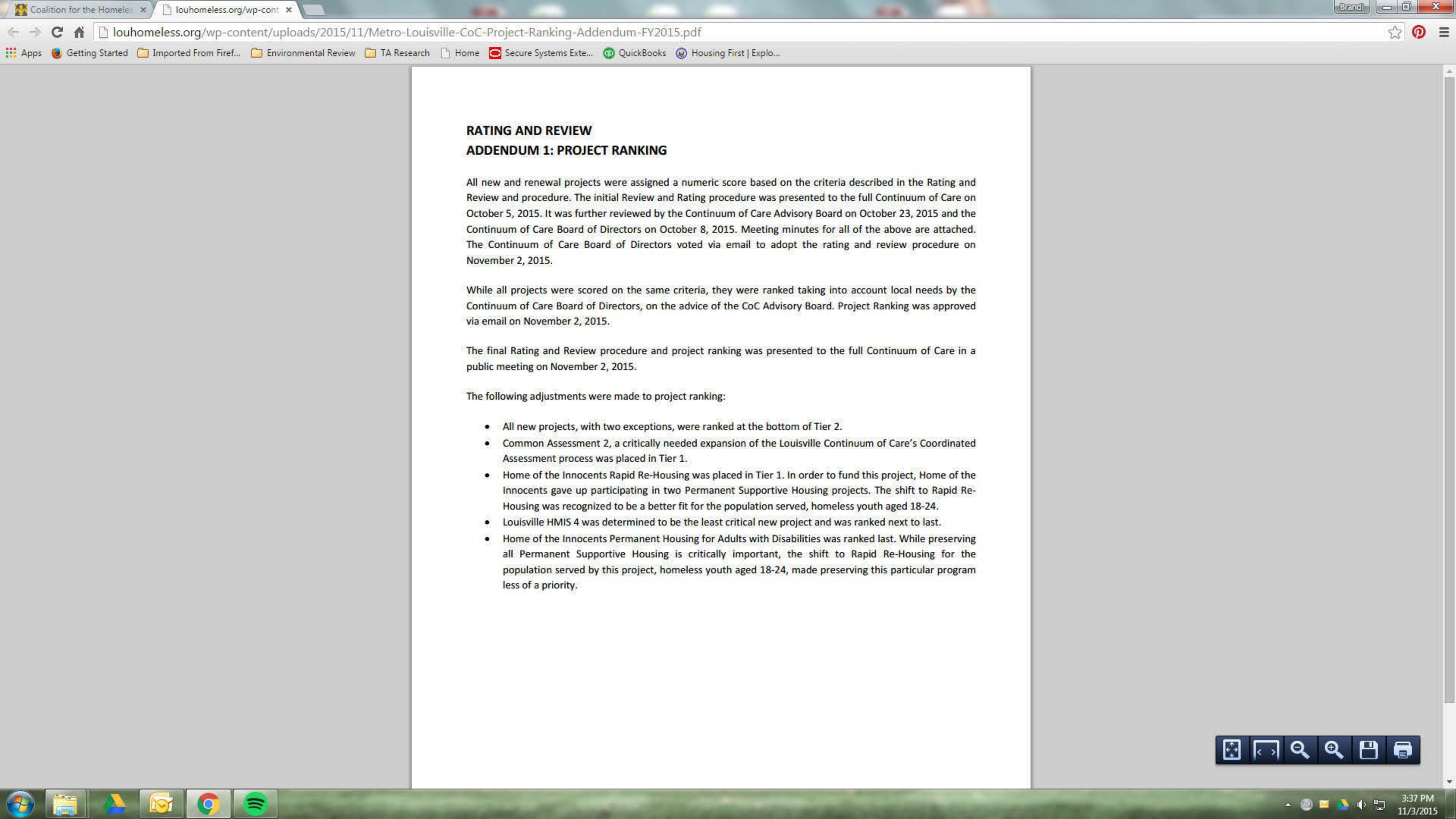
### MEASURE 2: FUNDING RETURNED TO HUD

- **Universe:** All CoC funded renewal projects and new projects.
- **Measure:** Funds returned during FY13 program year.
- **Data Source:** Provided by HUD HQ.
- **Points:** 4 points maximum.
  - 4 points: No returned funds
  - 3 points: 1% – 5% returned funds
  - 2 points: 6% – 10% returned funds **OR** enough funding to house one household
  - 0 Points: Greater than 10% returned funds **OR** enough funding to housing two or more households
  - 4 points: New projects/projects that have not finished one operating year

### MEASURE 3: LEVERAGE

- **Universe:** All CoC funded renewal projects and new projects.





## RATING AND REVIEW

### ADDENDUM 1: PROJECT RANKING

All new and renewal projects were assigned a numeric score based on the criteria described in the Rating and Review and procedure. The initial Review and Rating procedure was presented to the full Continuum of Care on October 5, 2015. It was further reviewed by the Continuum of Care Advisory Board on October 23, 2015 and the Continuum of Care Board of Directors on October 8, 2015. Meeting minutes for all of the above are attached. The Continuum of Care Board of Directors voted via email to adopt the rating and review procedure on November 2, 2015.

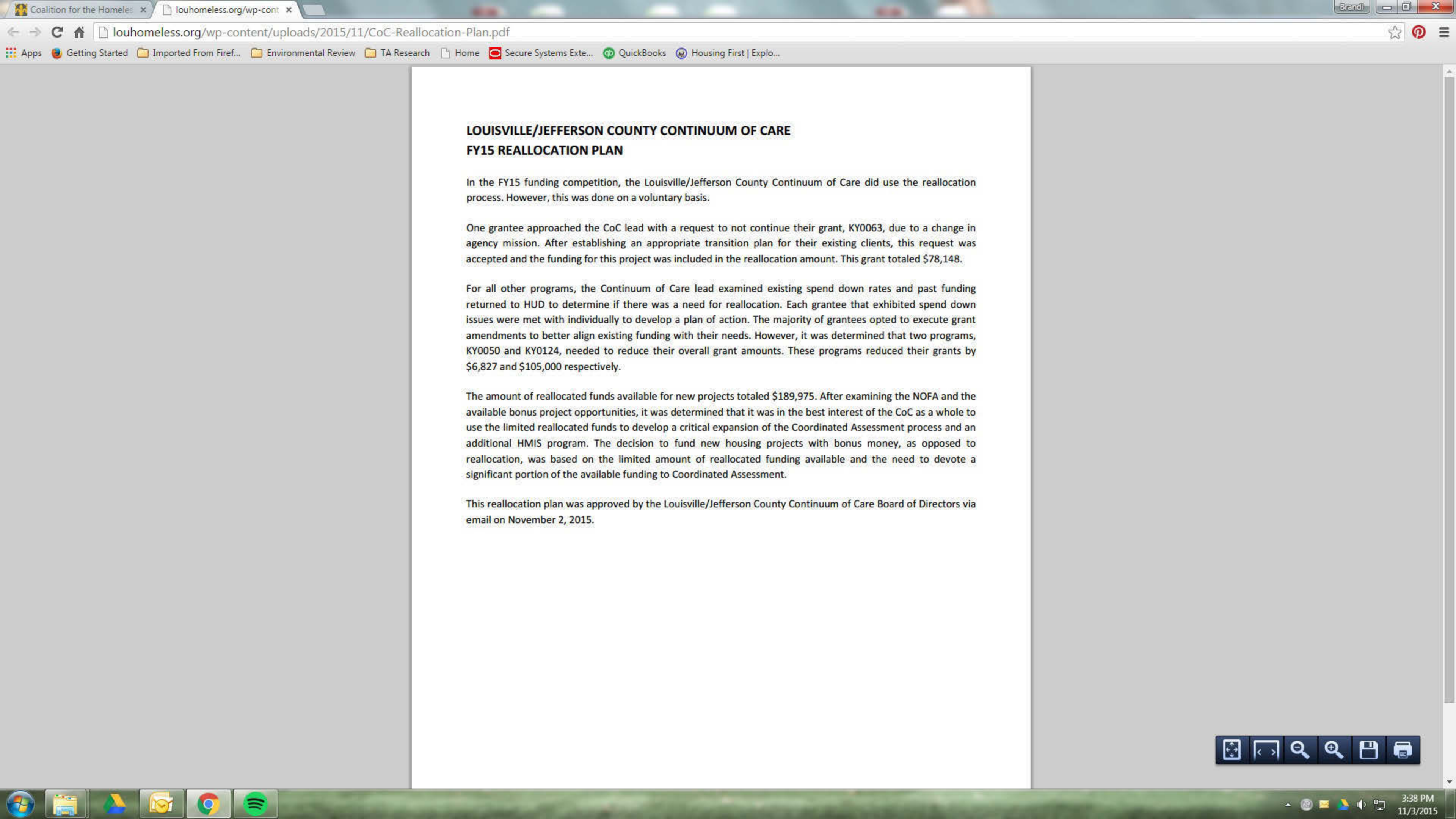
While all projects were scored on the same criteria, they were ranked taking into account local needs by the Continuum of Care Board of Directors, on the advice of the CoC Advisory Board. Project Ranking was approved via email on November 2, 2015.

The final Rating and Review procedure and project ranking was presented to the full Continuum of Care in a public meeting on November 2, 2015.

The following adjustments were made to project ranking:

- All new projects, with two exceptions, were ranked at the bottom of Tier 2.
- Common Assessment 2, a critically needed expansion of the Louisville Continuum of Care's Coordinated Assessment process was placed in Tier 1.
- Home of the Innocents Rapid Re-Housing was placed in Tier 1. In order to fund this project, Home of the Innocents gave up participating in two Permanent Supportive Housing projects. The shift to Rapid Re-Housing was recognized to be a better fit for the population served, homeless youth aged 18-24.
- Louisville HMIS 4 was determined to be the least critical new project and was ranked next to last.
- Home of the Innocents Permanent Housing for Adults with Disabilities was ranked last. While preserving all Permanent Supportive Housing is critically important, the shift to Rapid Re-Housing for the population served by this project, homeless youth aged 18-24, made preserving this particular program less of a priority.





## LOUISVILLE/JEFFERSON COUNTY CONTINUUM OF CARE FY15 REALLOCATION PLAN

In the FY15 funding competition, the Louisville/Jefferson County Continuum of Care did use the reallocation process. However, this was done on a voluntary basis.

One grantee approached the CoC lead with a request to not continue their grant, KY0063, due to a change in agency mission. After establishing an appropriate transition plan for their existing clients, this request was accepted and the funding for this project was included in the reallocation amount. This grant totaled \$78,148.

For all other programs, the Continuum of Care lead examined existing spend down rates and past funding returned to HUD to determine if there was a need for reallocation. Each grantee that exhibited spend down issues were met with individually to develop a plan of action. The majority of grantees opted to execute grant amendments to better align existing funding with their needs. However, it was determined that two programs, KY0050 and KY0124, needed to reduce their overall grant amounts. These programs reduced their grants by \$6,827 and \$105,000 respectively.

The amount of reallocated funds available for new projects totaled \$189,975. After examining the NOFA and the available bonus project opportunities, it was determined that it was in the best interest of the CoC as a whole to use the limited reallocated funds to develop a critical expansion of the Coordinated Assessment process and an additional HMIS program. The decision to fund new housing projects with bonus money, as opposed to reallocation, was based on the limited amount of reallocated funding available and the need to devote a significant portion of the available funding to Coordinated Assessment.

This reallocation plan was approved by the Louisville/Jefferson County Continuum of Care Board of Directors via email on November 2, 2015.





### Minutes for Metro Louisville Continuum of Care (CoC) Meeting – October 6, 2015

Mary Frances Schafer welcomed the members of the Metro Louisville CoC. Mary Frances then gave an update on the U.S. Department of Housing and Urban Development (HUD) CoC funding announcement. See attached outline, but key details include:

- 1) The project deadline to the Coalition for the Homeless is Saturday, October 17 at midnight, and project applications are due to Mary Frances. (Submit on this date NO MATTER WHAT! It can always be sent it back to you.)
- 2) November 2 is the deadline for the posting of the final ranking.
- 3) Tuesday, November 17, the application is due to HUD for additional points.
- 4) Louisville is eligible for a bonus of up to \$1,361,088. (Bonus money must be used for Permanent Supported Housing for Chronics or Rapid Rehousing for individuals and/or families). Anyone interested must contact Mary Frances by Tuesday.
- 5) The NOFA allows for reallocation. Several existing projects have relinquished all or parts of their funding to be reallocated. Reallocated funds can be used for PSH for Chronics, Rapid Rehousing, Common Assessment or HMIS. Several agencies have requested a portion. Anyone else interested must contact Mary Frances by Tuesday.
- 6) The funding line – Tier 1 – is pretty high, which means that more projects will fall into Tier 2.
- 7) HUD has put forth how they will be scoring projects. See NOFA and NOFA Summary.

Mary Frances reminded everyone to read the full NOFA and the NOFA summary.

Next, Mary Frances described the ranking system for the Metro Louisville CoC:

- I. The Metro Louisville CoC will continue to use the existing ranking system (see attached).
  - i. Housing goal: Maintaining PSH for 6 mo or more (80%)/percentage of people moving from TH to PH (80%)
  - ii. Capacity
  - iii. Funds returned
  - iv. Income
  - v. Employment
  - vi. Leverage
  - vii. HMIS quality and quantity (New ART 260 which measures data quality – and is directly linked to the HUD APR report.)
  - viii. Common Assessment/Single point of entry participation
- II. Metro Louisville will also rank projects according to HUD's four outcomes measurements







#### **Minutes for Board of Directors of the Metro Louisville Continuum of Care Meeting – October 8, 2015**

The Board of Directors of the Louisville Metro Continuum of Care met on October 8, 2015 at the offices of the Coalition of the Homeless.

**BOARD MEMBERS PRESENT:** Rosemary Luckett, Stewart Pope, Ramona Johnson, Wade Jordhal, Pat McKiernan, Maria Price, Mark Bolton, Michelle Neuhauser, Giselle Danger-Mercaderes, Joe Hamilton, Jennifer Clark, Donna Trabue, Ken Lanham, Jr.

**GUESTS PRESENT:** Mary Frances Schafer, Natalie Harris

The meeting was called to order at 4:05 p.m.

**LOUISVILLE METRO CONTINUUM OF CARE CHARTER AND POLICIES AND PROCEDURES:** The meeting began with a discussion and review of the Louisville Metro Continuum of Care Policies and Procedures and Continuum of Care Charter. Members noted that in the CoC goals listed on page 2, the 50% diverted rate from the homeless system is too high because there are too few diversion locations. The board determined to retain the goal of diverting from the homeless provider system but to delete the percentage.

For the goal of moving people and families out of homelessness, the board voted to change these three goals to the following: \* New clients in the homeless system will exit emergency shelter within six months and transitional housing within 12 months. \* 80% of those who enter transitional housing will move to permanent housing. \* 80% of those placed in permanent housing will remain for 12 months or longer.

The board voted to increase the goal to 90% of the number of shelter beds entered into HMIS and that 30% of those entered into HMIS will have an exit destination.

On page 7 of the policies, the board determined that the Governance Charter should be signed by the CoC board rather than all parties.

On page 9 of the policies, committee meetings and names were updated to reflect the changes in the past year and on page 10, the Blueprint priorities were updated to reflect the new priorities both in the Charter and policies.

The board amended the first sentence of Single Point of Entry on page 13 to read that the CoC requires universal data... rather than stating 13 data elements.

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### Minutes for Louisville CoC Advisory Committee Minutes – October 23, 2015

Members present: Jennifer Clark, Maria Price, Rosemary Luckett, Melinda Collett, and Donna Trabue

Staff present: Mary Frances Schafer and Natalie Harris

The meeting began at 9:10.

Mary Frances began by explaining that all applications for the 2015 CoC were submitted by the deadline of October 17, 2015 at midnight except Interlink who called the Friday before the deadline to start the application but then called again on Monday to request an extension. Mary Frances contacted HUD to decide the best course. They stated that it is best to stick with the deadline but, if not, everyone would have to be offered the extended deadline.

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**GOVERNANCE CHARTER  
FOR THE LOUISVILLE METRO CONTINUUM OF CARE  
(INCLUDING CoC-HMIS GOVERNANCE AGREEMENT)**

November 13, 2013 (Updated October 8, 2015)

**ARTICLE I - NAME, CORE VALUES, PURPOSE, GOALS AND RESPONSIBILITIES**

**A. Name**

The name of this unincorporated association is the Louisville Metro Continuum of Care (hereinafter referred to as the CoC or Continuum).

**B. Geographic Area**

The Louisville Metro CoC geographic area is defined as Louisville Metro with the six digit code of 211374. This area includes all of Jefferson County, KY.

**C. Core Values**

- We value programs with outcomes that demonstrate progress toward reducing and ending homelessness as quickly as possible with an ultimate goal of no more than 30 days.
- We value innovative and diverse programming that addresses gaps in community services.
- We value quality programming that is accountable to the community through outcomes measurement.
- We value the effort to access the maximum amount of funding available to the Louisville Metro area.
- We value the commitment to serve all people who are in need of assistance regardless of race, gender, age, national origin, sexual orientation, gender identity and class and to be in compliance with all applicable laws regarding program accessibility for all people.
- We value and respect the decisions and choices of those who find themselves homeless and seek to optimize self-sufficiency.

**D. Purpose**

The purpose of the Louisville Metro CoC: promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and State and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effective utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.

**E. Louisville Metro CoC Goals**

The goals of the Louisville Metro CoC are fully stated in the “Blueprint to End Homelessness” (Louisville Plan to End Homelessness) and include the following goals that directly tie to the goals of the HEARTH Act and the Louisville Metro Consolidated Plan.

- Increase Leadership, Collaboration and Civic Engagement
- Increase Access to Stable and Affordable Housing
- Increase Economic Security



- Increase Health and Stability
- Retool Crisis Response

#### F. Responsibilities

The Continuum will fulfill the responsibilities of Continuums of Care as set forth by HUD under Title 24, Part 578 of the Code of Federal Regulations including to:

- Operate the Continuum of Care
- Designate and operate an HMIS
- Plan for the CoC

Although the Continuum may delegate certain of its responsibilities to others such as the Collaborative Applicant, it remains responsible for its responsibilities set forth by HUD.

## ARTICLE II - CONTINUUM OF CARE MEMBERS

#### A. Eligibility for Membership

Agencies who serve the homeless population, agencies who serve those who are at risk of homelessness, governmental departments charged with addressing homelessness, individuals who are interested in addressing the issue of homelessness in the Louisville Metro area and other relevant organizations within the CoC's geographic area are eligible for membership in the Continuum of Care. "Relevant organizations" include, nonprofit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve veterans and homeless and formerly homeless individuals.

#### B. Procedure to Become a Member

CoC meetings are open to all who care to attend; however, requirements for voting are set forth below in Article II (F)(2); a Membership Packet must be completed.

#### C. Term and Renewal of Membership

All members must formally renew their membership annually, which includes completion of required forms relating to attendance, voting rights, etc. at the beginning of the Continuum year (July).

#### D. Invitation for New Members

At least once per year, the COC will make an invitation for new members to join publicly available within the geographic area.

#### E. Responsibilities of Members

1. The full membership body is responsible for:
  - Electing 9 – 13 CoC Board Members;
  - Providing information and advice to the CoC Board regarding best practices in homeless services;
  - Establishing and providing oversight of the HMIS system and designating an HMIS administrator;

- Designating an entity to write the application for funding in response to HUD's annual CoC Program NOFA for homeless assistance resources;
- Developing a plan that includes coordinating the implementation of a housing and services system that meets the needs of the homeless population (encompassing outreach, engagement, assessment, shelter, prevention strategies, etc.)
- Conducting a Point-in-Time count of homeless persons, at least biennially, in compliance with regulation 24 CFR 578.7(c)(2);
- Conducting an annual gaps analysis of the homeless needs and services available within the geographic area;
- Providing information required to complete the Consolidated Plan;
- Consulting with State and local government ESG program recipients on the plan for allocating ESG program funds and reporting on and evaluating the performance of ESG program recipients and sub-recipients;
- Striving to provide the best services to each of the community's specific homeless populations;
- Establishing and providing oversight of the monitoring standards for agencies providing services and designating appropriate oversight agencies;
- Working within the CoC homeless provider system to provide comprehensive and appropriate services to move homeless persons as quickly and appropriately as possible;
- Participating on CoC Committees and in monthly full membership meetings;
- Adopting and following a written process to select a board to act on behalf of the Continuum of Care. The Process must be reviewed, updated and approved by the Continuum at least once every 5 years;
- In consultation with the Collaborative Applicant and the HMIS lead, developing, following and updating annually a governance charter, which will include all procedures and policies needed to comply with subpart B of 24 CFR Part 578 (HUD regulation on CoC Program) and with HMIS requirements as prescribed by HUD and a code of conduct and recusal process for the Board, its chair(s) and any person acting on behalf of the Board;
- Determining eligibility, approving and ranking projects to be included in the community CoC and insuring that all discussion on review and ranking procedures are reflected in the minutes and posted for community review;
- Consulting with recipients and sub-recipients to establish performance targets appropriate for population and program type, monitoring the performance of recipients and sub-recipients, evaluating outcomes, and taking action against poor performers;
- Evaluating and reporting to HUD outcomes of ESG and CoC projects and consulting with ESG and CoC applicants regarding allocations;
- Establishing and providing oversight of a coordinated assessment system and single point of entry and designating a lead for each, in compliance with regulation 24 CFR 578.7(a)(8);
- Consulting with recipients of ESG funds to establish and oversee compliance with written standards for providing CoC assistance, which must include policies and procedures for evaluating individuals and families' eligibility for assistance; for

determining and prioritizing which eligible individuals and families will receive transitional housing; for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance (including % or amount of rent required); for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance; for high performing communities, if applicable.

2. Other responsibilities of member agencies include:

- Demonstrating the ability and willingness to work with others in the community by collaborating with agencies to provide services;
- Providing documentation of homelessness and other required information to other member agencies in order to facilitate a seamless provision of care, in compliance with each agency's Privacy Policy;
- Fully participating in the Louisville Metro Homeless Management Information System (HMIS).

F. Rights of Members

1. Funding Proposals

Members have the right to submit new and renewal proposals within the guidelines and specifications of the U.S. Dept. of Housing and Urban Development.

2. Voting Rights

The CoC community is the ultimate decision-making body for the Louisville Metro CoC. The community itself holds the responsibility of deciding the needs of the community, how the process is to be administered, endorsing the projects to be submitted for funding consideration and the community priority rankings.

a) Agency Member

- Holds one vote;
- Designates a delegate and an alternate at the beginning of the Continuum year (July), who are authorized to cast the agency vote when such action is needed;
- Is allowed to send more than these designated people to the CoC meetings but when a vote is taken, only the delegate or alternate is eligible to cast a vote;
- Is required to send a representative to at least 10 out of the last 12 CoC meetings prior to the vote in order to be eligible to cast any vote including projects to be submitted in the HUD CoC application or the election and approval of CoC Board Members;
- If an agency is unable to send either the delegate or alternate, that agency may send a representative to the meeting and receive credit for attendance. However, only a delegate or alternate has the right to vote on an issue, unless this person is approved by the CoC coordinator in advance of the meeting;
- Is not eligible to vote on any issue regarding a project where that agency has a financial interest or serves the project's agency in any capacity.

b) Individual Member

- Holds one vote;

- Is required to attend at least 10 out of the last 12 community meetings prior to the vote in order to be eligible to cast any vote including projects to be submitted in the HUD CoC application or the election and approval of CoC Board Members;
- Is not eligible to vote on any issue regarding a project where that individual has a financial interest.
- No individual member may vote if he or she is an employee of a member agency or serving on the Board of a member agency.

#### G. Responsibilities of the Delegate and Alternate

Each member entity of the Louisville Metro CoC full membership designates a delegate and alternate at the beginning of the Continuum year (July). Their responsibilities include:

- Attending CoC community meetings so that those voting are fully informed of the circumstances and ramifications of their vote;
- Sharing information with agency directors and staff;
- Representing the interests of their member agency while considering the needs of the community as a whole;
- Determining the projects that are sent to HUD Washington for funding consideration;
- Attending mandatory meetings, as notified by CoC Coordinator.

#### H. Regular Meetings

Meetings of the full membership, with published agendas shall take place monthly at such times and places as designated in the notice for the meeting.

#### I. Notice of Meetings

The CoC Coordinator will schedule meetings and ensure that each agency/member has sufficient notice.

#### J. Quorum

A majority of voting members constitutes a quorum.

#### K. Manner of Action and Voting Procedure

Matters will be decided by a majority of eligible voting members, present and voting, at a meeting at which a quorum is present, except:

- All eligible voting members shall have the opportunity to cast a vote regarding funding decisions and Board elections. Ballots may be cast at a CoC meeting; however, absent eligible voting members shall have the opportunity to cast their vote through other means (email, U.S. Postal Service, FAX) as long as each completed ballot is:
  - Designated for an eligible voting agency/member;
  - The ballot contains the signature of the CoC delegate/alternate or individual member; and
  - In compliance with any other requirements, such as being received by a specific date.
- The Board may authorize membership voting outside of a meeting, through other means (email, U.S. Postal Service, FAX) as needed.

L. Minutes

The Board secretary shall take minutes of all membership meetings recording attendance and any votes taken.

**ARTICLE III - BOARD OF DIRECTORS**

A. General Powers

The Board shall have the authority to act on behalf of the Continuum.

B. Responsibilities

The Board shall:

- Designate the Collaborative Applicant entity that is to write the application for funding in response to HUD's annual CoC Program NOFA for homeless assistance resources;
- Design, operate and follow a collaborative process for developing the application and approving its submission;
- Establish priorities for funding projects in the CoC geographic area;
- Review the monitoring of all providers and determine appropriate action when benchmarks are not met;
- Provide a vision, priorities and goals for the CoC community;
- Establish a process for funding recommendations through HUD and other funding streams available in the community and insure that all discussion on review and ranking procedures are reflected in the minutes and posted for community review;
- Oversee progress of HMIS entry, common assessment and single point of entry and make recommendations for improvement;
- Review HMIS policies and procedures and update annually to insure compliance with HUD. This includes a review of the security, data quality and privacy procedures.
- Carry out such other duties, tasks and responsibilities as delegated by the membership

C. Board Composition

The Louisville Metro CoC Board is made up of no less than 13 and no more than 17 voting members and will include:

- Board members elected by the CoC membership from the CoC membership or larger community. The elected members must:
  - o Include at least one homeless or formerly homeless individual
  - o Represent the relevant organizations and projects serving homeless subpopulations including:
    - Persons with substance use disorders,
    - Persons with HIV/AIDs,
    - Veterans,
    - The chronically homeless,
    - Families with children,
    - Unaccompanied youth,
    - The seriously mentally ill, and
    - Victims of domestic violence, dating violence, sexual assault and stalking
  - o Include a member from at least one Emergency Solutions Grants program (ESG) recipient's agency

- Include a member representing the Veterans Administration
- Include a member representing the state (Kentucky Housing Corporation)
- Include a member representing Louisville Metro Gov't (ESG recipient)
- It should always have an odd number of members;
- A representative of the Collaborative Applicant will attend all board meetings and may participate in discussions, but is not considered a member of the board and holds no vote.

#### D. Term of Office

Board Members:

- Shall serve two-year staggered terms;
- Can serve two consecutive two-year terms but must be off the Board for one year before being elected again.

#### E. Limitations

- Only one person per agency may serve on the Board at any given time;
- Agencies represented on the Board can have a proposal on the table, although they cannot vote on the proposal;
- Must adhere to the Conflict of Interest policy as set forth below in Article VII of this document

#### F. Election Process

Elections will be held each year for one-half of the Board. The Board or its Nominating Committee will solicit nominations for vacant seats from the full membership and present the slate to the Board for approval. The Board will screen and select nominees in accordance with the requirements of the CoC Governance Charter. The prospective CoC Board members will then be presented to the CoC members for approval. Each recommended member for the CoC Board must be approved by the majority of the CoC membership in order to be appointed. Voting shall be carried out in accordance with Article II (K), Manner of Action and Voting Procedure.

#### G. Vacancies

Any vacancies in the Board shall be filled for the remainder of the term using the same election process as referenced above.

#### H. Board Meetings

- The CoC Board shall meet at least quarterly.
- The date, place and time of each meeting shall be set by the Chair or other officer acting on behalf of the Chair.
- All meetings shall be open to the public. The Board members may, however, by a simple majority vote of those Board members present, a quorum being present, vote to hold a meeting or portion thereof in executive session. Notice shall be given in a regular open meeting of the general nature of the business to be discussed in closed session and the reason for the closed session. No final action may be taken at a closed meeting. No matters may be discussed at a closed meeting other than those publicly announced prior to convening the closed meeting.
- Special meetings may be called by the Chair or upon request of three (3) Board members.

- Notice of all meetings shall be mailed or emailed to Board members not less than five (5) nor more than thirty (30) days prior to the day of the meeting.

I. Quorum and Manner of Acting

- A majority of the Board shall constitute a quorum for the transaction of business at any meeting of the Board. Matters shall be decided by majority vote of board members, present and voting, at a meeting at which a quorum is present.
- Voting outside a meeting shall be rare and constitute an emergency situation. Further, an outside vote may not occur unless all members have sufficient knowledge about the issue and the ramifications of the vote. Said voting may occur by U.S. mail or email to properly document each member's vote. Matters shall be decided by majority vote of the respondents.

J. Removal

A Board member may be removed by majority vote of the Board.

## ARTICLE IV - OFFICERS

A. Officers

The officers of the CoC shall be a Chair and Secretary. The Board may elect or appoint such other officers including a Co-Chair and Assistant Secretary as it deems necessary or convenient. Such officers shall have the authority and perform the duties assigned by the Board.

B. Chair

The Chair of the Board shall

- preside over all meetings of the Board and membership;
- plan, in consultation with the other officers, the agenda for all Board and membership meetings;
- carry out all other duties incident to the office of Chair or prescribed by the Board.

C. Secretary

The Secretary of the Board shall:

- keep minutes of all Board and membership meetings, recording all votes taken;
- ensure that proper notice is given for all meetings;
- keep a list of the name and address of each member
- carry out all other duties incident to the office of Secretary or prescribed by the Board.

D. Election and Term of Office

The officers shall be elected by and from the Board at its first meeting following the annual Board election and shall take office at that meeting. Election shall be by a simple majority vote of the Board members present, a quorum being present, and may be by a show of hands or secret ballot as the Board may choose. All officers shall serve a one-year term of office and may not serve consecutive terms.

E. Vacancies

Vacancies in any office shall be filled for the remainder of the term of office by majority vote of the Board at a Board meeting.

F. Resignation

An officer may resign at any time by delivering a written resignation to the Chair or the Secretary in the event of the resignation of the Chair.

G. Removal

Any officer elected or appointed by the Board may be removed from office by majority vote of the Board whenever in its judgment the best interests of the CoC would be served thereby.

## **ARTICLE V - COMMITTEES**

A. Louisville Metro CoC Committees

The Louisville Metro CoC Full Membership may see fit to create new committees to conduct the work of the Louisville Metro CoC at any time. At this time, the following CoC Committees have been established:

- HMIS User Group

The HMIS User Group meets quarterly before the full membership meeting to discuss changes and issues with the Louisville Metro CoC HMIS system. The committee is open to all but is made up primarily of those who enter HMIS data at each of the homeless service agencies.

- Institutional Discharge/ Homeless Prevention Pilot

The Institutional Discharge Committee meets quarterly to discuss ways to improve the discharge planning from state and local institutions including prisons, jails, mental hospitals and institutions, hospitals and foster care. The committee is open to all and includes representatives of these institutions as well as staff who participate in the homeless prevention program which serves those exiting state institutions.

- Targeting Chronic Homelessness/Long-Term Stayers

The Targeting Chronic Homelessness/Long-Term Stayers Committee meets quarterly to create housing solutions for those who have been identified as the longest term stayers in the CoC system. They will also help to train the system on best practices like Housing First.

- Consumer Participation

The Client Engagement Committee meets monthly to seek input from clients of homeless services. The committee is open to anyone but includes four volunteers representing ESG, SHP and two persons with no conflict of interest. Information is gathered from forums held at various shelters in the community over the course of the year and annually at the Project Connect/Stand Down where all people who are experiencing homelessness are invited to receive services at a one stop shop offered over the course of a full day.

- Common Assessment Steering Committee

The Common Assessment Steering Committee meets monthly to create and oversee the Louisville Metro CoC Common Assessment. They also insure that the common assessment



includes a process to assess and refer each CoC client for all appropriate mainstream and CoC services. This committee will also oversee the training and implementation of the common assessment.

- Accessing Mainstream Benefits

The Accessing Mainstream Benefits Committee meets monthly to implement CoC-wide practices that insure that homeless clients can access mainstream benefits efficiently. Their efforts include SSI, Medicaid, VA benefits, TANF, food stamps, job training and education.

- Coalition Supporting Young Adults

The Coalition Supporting Young Adults was created in response to the rising number of young adults staying in Louisville adult shelters. This committee is made up of agencies that serve 16-24 year olds in crisis without support throughout the city. Their role is to make recommendations to lower the number of young adults in crisis and prevent the cycle of homelessness in the next generation.

## **ARTICLE VI - DESIGNATION OF COLLABORATIVE APPLICANT AND HMIS LEAD**

As required by HUD, the CoC will designate a Collaborative Applicant and an HMIS Lead and will set forth the responsibilities of such agents in the policies and procedures that are incorporated into this Charter as an appendix.

## **ARTICLE VII – RESPONSIBILITIES OF THE COLLABORATIVE APPLICANT**

It is the role of the Collaborative Applicant to:

- Complete the electronic application in response to HUD's annual CoC Program NOFA for homeless assistance resources,
- Present a timeline and deadlines to all project applicants for individual project plans,
- Collect all data and submit a renewal chart to HUD of all projects planning to reapply,
- Create the housing inventory chart,
- Create the grant inventory worksheet,
- Establish priorities for funding projects in the CoC geographic area,
- Lead process for ranking applications with guidance of CoC full membership,
- Monitor outcomes of CoC and ESG recipients,
- Oversee committees and volunteers,
- Create agendas for CoC full membership and Board meetings in collaboration with the Board Chair,
- Notify others that they can join the CoC full membership annually, and
- Monitor who is eligible to vote on the full membership.

## **ARTICLE VIII - RESPONSIBILITIES OF THE HMIS LEAD**

The CoC HMIS administrator is responsible for:

1. Maintaining compliance with the latest HMIS Data and Technical standards published by HUD,
2. Accurately calculating the size and needs of the homeless population,
3. Tracking service and demand for homeless programs and understanding where improvements need to be made,
4. Overseeing the reporting process for the CoC,
5. Training agencies on accurate HMIS entry,
6. Reviewing the licenses of member agencies each year to determine which have been unused and recapture a needed, and
7. Coordinating a single point of entry to insure new clients are eligible for services and entered correctly.
8. Reporting as necessary to various entities such as Louisville Metro Government, the Kentucky Housing Corporation, the U.S. Department of Housing and Urban Development, etc.

## **ARTICLE IX - CODE OF CONDUCT**

The CoC submits a Code of Conduct annually through the CoC application; it is ratified by and applicable to all members. It includes:

- Conflict of Interest

HUD regulation: No Board member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents. In these cases, the member with a conflict, must recuse themselves from participation in conversation as well as voting.

All members of the CoC Board are required to sign a conflict of interest form stating their association with agencies and projects that can reasonably be expected to apply for and/or receive funding through the CoC process. All associations will be made public to the full membership prior to any process that will determine funding recipients. Members with a conflict of interest are expected to recuse themselves from discussions and decisions where there is a real or perceived conflict of interest.

- Confidentiality

Information contained in the ESG and CoC applications and reports is considered proprietary and confidential and may not be released to any person or party without approval of that applicant agency.

Any client information shared within the CoC is also confidential and should not be released to any other entity without a release of information signed by the client.

## ARTICLE X - GRIEVANCES

All members of the Metro Louisville CoC full membership are encouraged to report any grievances with the Metro Louisville CoC or CoC Board through this procedure without fear of reprisal. Grievances should be submitted as soon as possible to ensure proper responses.

First, the CoC member should submit their grievance in writing or in person to the CoC and try to work the problem out at that level. The CoC Board should respond in writing with their response or decision within 7 working days of receiving the grievance.

If the member is dissatisfied with the outcome or decision, they should submit a written request to present their grievance at the following CoC full membership meeting. The membership will vote and give a decision at that meeting.

All members also have the right to file a complaint against the Louisville Metro CoC to the U.S. Department of Housing and Urban Development (HUD). However, we encourage members to use the grievance process above first as filing a grievance with HUD can affect the score of all CoC applicants.

## ARTICLE XI - AMENDMENT AND REVIEW

### A. Amendment

The Governance charter may be amended by majority vote of the membership at any meeting of the membership provided that the proposed amendment(s) have been submitted in writing to the membership at least ten (10) business days in advance of the meeting.

### B. Regular Review

- In consultation with the Collaborative Applicant and the HMIS Lead, the membership will annually review and update the governance charter.
- In addition, at least once every five years, membership will review, update and approve the Board selection process.

## APPENDICES

Louisville Metro CoC procedures and policies created to comply with 24 CFR 578 Subpart B and Kentucky HMIS policies and procedures created to comply with HMIS requirements as prescribed by HUD.

CoC Board Member Signatures:

*Harmon Johnson* *Arnell* *Sharon*  
*Nicole Neuhouser*  
*W. H. D.* *Ken Lamborn* *W. H. D.* *W. H. D.*  
*W. H. D.*  
*Donna Crabbe* *Jennifer Clark* *Rosetta Luckett*

# **Louisville Metro Continuum of Care Policies and Procedures**

In 1987, Congress passed the first federal law specifically addressing homelessness. The Stewart B. McKinney Homeless Assistance Act of 1987, later renamed the McKinney-Vento Homeless Assistance Act, provides federal financial support for a variety of programs to meet the many needs of individuals and families who are homeless. The housing programs it authorizes are administered by the Department of Housing and Urban Development's (HUD) Office of Special Needs Assistance Programs (SNAPS). Since 1994, HUD has required each community to come together to submit a single comprehensive Continuum of Care (CoC) application rather than allowing applications from individual providers in the community. HUD's intent in creating this structured application process was to stimulate community-wide planning and coordination of programs for individuals and families who are homeless. (HUD's Homeless Assistance Programs: Continuum of Care 101, June, 2009)

In 2009, the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 was signed into law. The HEARTH Act amends and reauthorizes the McKinney-Vento Homeless Assistance Act with several substantial changes. Traditional beliefs around what is most effective in addressing homelessness have been evaluated and there are aggressive expectations for programs to move people into permanent housing as soon as possible. The task of keeping people in permanent housing is also receiving new attention with goals addressing recidivism and length of stay in permanent housing.

The Louisville Metro CoC is participating in the nationwide effort to evaluate and improve homeless service provision. The Louisville Metro CoC takes seriously the new HUD mandates and seeks to incorporate them in ways that make sense for this community at this time in history. To that end, the Louisville Metro CoC seeks to establish its governance, its policies and its procedures to not only align with HUD's expectations but to create a service provision system that first and foremost provides appropriate services to those who find themselves homeless and assists them in permanently moving out of homelessness. It is the intent of the Louisville Metro CoC to create an understanding of the reality of homeless in Louisville Metro and encourage a community wide response to reducing and eliminating it.

## **Louisville Metro Continuum of Care (CoC) Geographic Area**

- The Louisville Metro CoC geographic area is defined as Louisville Metro with the six digit code of 211374. This area includes all of Jefferson County, KY.

## **Louisville Metro CoC Values, Priorities and Goals**

### **Louisville Metro CoC Values**

- We value programs with outcomes that demonstrate progress toward reducing and ending homelessness as quickly as possible with an ultimate goal of no more than 30 days.
- We value innovative and diverse programming that addresses gaps in community services.
- We value quality programming that is accountable to the community through outcomes measurement.

# **Louisville Metro Continuum of Care Policies and Procedures**

- We value the effort to access the maximum amount of funding available to the Louisville Metro area.
- We value the commitment to serve all people who are in need of assistance regardless of race, gender, age, national origin, sexual orientation, gender identity and class and to be in compliance with all applicable laws regarding program accessibility for all people.
- We value and respect the decisions and choices of those who find themselves homeless and seek to optimize self-sufficiency.

## **Louisville Metro CoC Priorities**

- Moving people and families out of homeless is our number one priority.
- Provide safe shelter to those in need who choose to use the shelter system.
- Provide timely assistance to those seeking to move out of homelessness regardless of shelter use or choice.
- Make all available services accessible to those who find themselves homeless.
- There is a comprehensive and holistic approach to identifying and providing services to assist those who find themselves homeless before, during and after moving to permanent housing.
- The goals and objectives of those whose funding is used to provide shelter and services are respected.
- There is a focused effort to refer and connect those who find themselves homeless to mainstream services outside the homeless provider system.
- Providers seek choice, safety, affordability, integration, accessibility and supports when helping clients' access permanent housing.

## **Louisville Metro CoC Goals**

These are only a few of the goals of the Louisville Metro CoC "Blueprint to End Homelessness" that directly tie to the goals of the HEARTH Act.

- To divert people and families from the experience of homelessness.
  - Whenever possible, those who present themselves to the single point of entry will be diverted from the homeless provider system.
- To move people and families out of homelessness.
  - New clients to the homeless service system will exit emergency shelter on average in 6 months and transitional housing on average in 12 months.
  - 85% of those who enter the Rapid Re-housing program will not re-enter the homeless provider system within 6 months of the end of their Rapid Re-housing assistance.
  - 80% of those who enter transitional housing programs will move to permanent housing.
  - 80% of those placed in permanent housing will remain there for 12 months or longer.
- HMIS data will be used to determine the outcomes of individual projects and the CoC as a whole.
  - 90% of shelter beds will be entered into HMIS.

# **Louisville Metro Continuum of Care Policies and Procedures**

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- 30% of those entered in HMIS will have an exit destination.

## **Louisville Metro CoC Full Membership**

At the center of the Louisville Metro CoC process is the CoC full membership made up of nonprofit agencies, individuals, private businesses and government representatives at all levels. It is the body that ultimately holds the responsibility for making the decisions regarding the process and the final submission of the CoC grant as well as setting benchmarks to monitor both CoC and ESG Programs. The Louisville Metro CoC full membership has found that by working together the final product is one that the whole community can embrace and to which it can be committed.

### Full Membership Responsibilities

The Louisville Metro Full Membership is made up of agencies who serve the homeless population, agencies who serve those who are at risk of homelessness, governmental departments charged with addressing homelessness and individuals who are interested in addressing the issue of homelessness in the Louisville Metro community. The full membership body is responsible for:

- Electing four of its members to represent the full membership on the CoC Board and approving the remaining CoC Board membership annually,
- Providing information and advice to the CoC Board regarding best practices in homeless services,
- Establishing and providing oversight of the HMIS system and designating an HMIS administrator,
- Striving to provide the best services to each of the community's specific homeless populations,
- Establishing monitoring standards and outcomes and providing oversight of the implementation of this monitoring through the city and CoC,
- Working within the CoC homeless provider system to provide comprehensive and appropriate services to move homeless persons as quickly and appropriately as possible,
- Participating on CoC Committees and in monthly full membership meetings,
- Reviewing, endorsing and establishing policies and procedures including the process of Board selection,
- Approving and ranking projects to be included in the community CoC application and designating a collaborative applicant and insuring that all discussion on review and ranking procedures are reflected in the minutes and posted for community review ,
- Developing and following a governance charter detailing the responsibilities of all parties,
- Consulting with recipients and subrecipients to establish performance targets appropriate for population and program type, monitoring the performance of recipients and subrecipients, evaluating outcomes, and taking action against poor performers,
- Evaluating and reporting to HUD outcomes of ESG and CoC projects and consulting with ESG and CoC applicants regarding allocations,

# Louisville Metro Continuum of Care Policies and Procedures

- Establishing and providing oversight of a coordinated assessment system and single point of entry and designating a lead for each,
- Conducting a Point-in-Time count of homeless persons, at least biennially,
- Conducting an annual gaps analysis, and
- Providing information required to complete the Consolidated Plan.

## Full Membership and Voting Rights

The CoC community is the ultimate decision making body for the Louisville Metro CoC. The community itself holds the responsibility of deciding the needs of the community, how the process is to be administered, endorsing the projects to be submitted for funding consideration and the community priority rankings.

It is the policy of the Louisville Metro CoC that each CoC member/agency:

- Holds one vote,
- Designates a delegate and an alternate who are authorized to cast the agency vote when such action is needed,
- Is allowed to send more than these designated people to the community meetings but when a vote is taken, only the delegate or alternate is eligible to cast a vote,
- Is required to send a representative to at least 10 out of the last 12 community meetings prior to the vote in order to be eligible to cast a vote,
  - If an agency is unable to send either the delegate or alternate, that agency may send a representative to the meeting and receive credit for attendance. However, only a delegate or alternate has the right to vote on any issue.
  - If an agency has not been a member of the CoC for a full twelve months at the time of a vote, the number of absences allowed that agency will be proportional to the number of months they have been a member of the CoC.
- Is not eligible to vote on any issue regarding a project where that agency/member has a financial interest or serves the project's agency in any capacity, and
- Has the right to submit new and renewal proposals within the guidelines and specifications of the U.S. Dept. of Housing and Urban Development. (The full membership then has the right and responsibility to decide which projects are to be included in the CoC application.)

The CoC community voting procedure for funding decisions and representation on the Advisory Group may be carried out within a CoC meeting of the members or through other means (email, U.S. Postal Service, FAX) as long as each completed ballot is:

- Designated for an eligible voting member (agency), and
- The ballot contains the signature of the CoC delegate or alternate.

According to HUD requirements, the membership of the Louisville Metro CoC must be inclusive of the many facets of the community which it represents. The Louisville Metro CoC membership consists of over 80 entities representing:

- The Public Sector
  - State government agencies

# Louisville Metro Continuum of Care Policies and Procedures

- Local government agencies
- Public housing agencies
- School systems and universities
- Law enforcement and corrections
- Local Workforce Investment Act boards
- Other state and national level groups and persons
- The Private Sector
  - Non-Profit organizations
  - Faith-Based organizations
  - Funders and advocacy groups
  - Businesses including banks, developers and business associations
  - Hospitals and medical representatives
  - Homeless persons

Each member entity of the continuum holds the right to cast one vote per question. This means that entities sending more than one representative to the community meetings are restricted to casting one vote per question. Individuals representing themselves also have the right to cast one vote per question. A delegate and an alternate are designated by the participating entity at the beginning of the continuum year (July).

Other responsibilities of member agencies include:

- Demonstrating the ability and willingness to work with others in the community by collaborating with agencies to provide services,
- Providing documentation of homelessness and other required information to other member agencies in order to facilitate a seamless provision of care, and (This is expected to be done with the understanding that the person seeking assistance has granted a release of the information.)
- Fully participating in the Louisville Metro Homeless Management Information System (HMIS).

## Responsibilities of the Delegate and Alternate

Each member entity of the Louisville Metro CoC full membership designates a delegate and alternate at the beginning of the continuum year (July). Their responsibilities include:

- Attendance at CoC community meetings: Each entity must have a representative present at community meetings in order to cast a ballot regarding submission of projects to HUD for funding. (See Attendance Policy) This is to insure that when questions come up for a vote, those voting are fully informed of the circumstances and ramifications of the question. It is hoped that this will lead to more informed decision making by those voting.
- Sharing information with agency directors and staff: it is the responsibility of the delegate and alternate to share all relevant CoC information with agency Director and necessary staff so the best decisions are made in terms of continuum votes and



# **Louisville Metro Continuum of Care Policies and Procedures**

applications. Information shared by the CoC Coordinator at the CoC monthly meetings is critical when making important funding decisions.

- Representing the interests of their member agency while considering the needs of the community as a whole: It is important that those representing member entities represent the interests of those entities. It is the responsibility of the delegate and alternate to put aside personal preferences and goals in order to truly represent their entity. It is also important for the delegate and alternate to be able to examine the needs of the community as a whole. When casting a vote on a particular question it is sometimes necessary to cast the vote for the good of the community putting aside the immediate need of the entity the person is representing. This is a delicate balance requiring insight and good judgment.
- Determining the projects that are sent to HUD Washington for funding consideration: Delegates and alternates must consider the best interest of homeless clients and the community as a whole in selecting projects for funding and ensuring those projects are ranked by the CoC community.

## **Attendance Policy**

The Louisville Metro Continuum of Care full membership values the input and participation of a wide range of community volunteers, agencies, civic organizations, business partners and government officials. The Louisville Metro CoC full membership also believes that in order to insure the most informed and objective decisions regarding homeless issues and funding it is necessary that voting members of the CoC make every effort to attend the monthly CoC meetings. Therefore the following policy has been adopted:

- Each voting entity will designate a delegate and alternate for the purpose of voting.
- The delegate or alternate must attend 10 out of the last 12 monthly meetings prior to a vote being taken.
- In case of emergency, a third person representing the agency can be sent as a note taker to a meeting but this person does not have the right to cast a ballot unless this person is approved by the CoC coordinator in advance of the meeting.
- There will be some meetings that require mandatory attendance of the delegate or alternate.
- Delegates and alternates will be notified of mandatory meetings by the Coalition staff.
- Voting entities that fail to have a delegate, alternate or, in case of an emergency, a third person to act as a note taker at 10 of the last 12 monthly meetings prior to a vote and/or fails to have the same representing the entity at the mandatory meetings will not be able to cast a ballot regarding projects to be submitted in the U.S. Dept of Housing and Urban Development CoC application or the election and approval of CoC Board Members.

## **Louisville Metro CoC Board**

To carry out the primary purpose of the CoC Program, HUD requires representatives of relevant organizations (e.g., nonprofit organizations, victim services providers, local governments) to

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form a CoC to serve a specific geographic area. In addition, each CoC must establish a board to act on its behalf, and the CoC may appoint additional committees or workgroups to fulfill its responsibilities. (Introductory Guide to the CoC Program, HUD, July 2012)

## Governance Charter

A Governance Charter outlining the roles and responsibilities of the Louisville Metro CoC Board, Full Membership, HMIS Administrator, Collaborative Applicant, and Agency Members must be updated and signed by the CoC board prior to the submission of the Louisville Metro CoC application each year.

## Role of the Board

It is the responsibility of the Louisville Metro CoC Board to:

- Designate the entity that is to write the application for funding in response to HUD's annual CoC Program NOFA for homeless assistance resources,
- Design, operate and follow a collaborative process for developing the application and approving its submission,
- Establish priorities for funding projects in the CoC geographic area,
- Review the monitoring of all providers and determine appropriate action when benchmarks are not met,
- Provide a vision, priorities and goals for the CoC community,
- Establish a process for funding recommendations through HUD and other funding streams available in the community and insure that all discussion on review and ranking procedures are reflected in the minutes and posted for community review, and
- Oversee progress of HMIS entry, common assessment and single point of entry and make recommendations for improvement.

## Louisville Metro CoC Board Membership

The Louisville Metro CoC Board is elected from the full membership at a CoC full membership meeting or through other means (email, U.S. Postal Service, FAX) and must:

- Include at least one homeless or formerly homeless individual and
- Represent the relevant organizations and projects serving the homeless including:
  - Persons with substance use disorders,
  - Persons with HIV/AIDs,
  - Veterans,
  - The chronically homeless,
  - Families with children,
  - Unaccompanied youth,
  - The seriously mentally ill, and
  - Victims of domestic violence, dating violence, sexual assault and stalking.

The Louisville Metro CoC Board is made up of no less than 15 and no more than 21 members. It should always have an odd number of members including:

- Four representatives of the Membership Body,
  - Elected by the membership body for two year staggered terms, and

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- These representatives can serve two consecutive 2 year terms but must be off the board for one year before being elected by the membership body again.
- A homeless or formerly homeless person,
- A representative of the ESG recipient (Louisville Metro Government), and
- Community representatives and leaders.

In order to do binding business, there must be a quorum of at least 51% present for a Board vote. The Board will elect its own Chairperson, CoC Coordinator and any other roles as seen fit by the Board. Only one person per agency may serve on the Board at any given time and provider agencies represented on the Board can have a proposal on the table although they should not vote on these issues.

## Qualities and Skills of the Louisville Metro CoC Board

In order to carry out the role and function of the CoC Board, it is recommended that the following qualities and skills be represented within the Board.

- The ability to remain open and flexible to the needs of the service providers, the regulations presented by HUD, the needs and wishes of the CoC full membership and the needs of the homeless population.
- The ability to consider conflicting needs and come to resolution in the best interest of the CoC full membership.
- The ability to understand and evaluate a budget.
- The ability to understand and evaluate program outcomes in relation to the Louisville Metro community and HUD guidance.
- The ability to see and understand the “big picture”

## Code of Conduct

The Louisville Metro CoC submits a Code of Conduct annually through the CoC application which should be voted on and followed by the full membership. It includes:

- **Conflict of Interest**

All members of the CoC Board are required to sign a conflict of interest form stating their association with agencies and projects that can reasonably be expected to apply for and/or receive funding through the CoC process. All associations will be made public to the full membership prior to any process that will determine funding recipients. Members with a conflict of interest are expected to recuse themselves from discussions and decisions where there is a real or perceived conflict of interest.

- **Confidentiality**

Information contained in the ESG and CoC applications and reports is considered proprietary and confidential and may not be released to any person or party without approval of that applicant agency.

Any client information shared within the CoC is also confidential and should not be released to any other entity without a release of information signed by the client.

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## **Louisville Metro CoC Committees**

The Louisville Metro CoC Full Membership may see fit to create new committees to conduct the work of the Louisville Metro CoC at any time. At this time, the following CoC Committees have been established:

### HMIS

The HMIS Committee meets quarterly before the full membership meeting to discuss changes and issues with the Louisville Metro CoC HMIS system. The committee is open to all but is made up primarily of those who enter HMIS data at each of the homeless service agencies.

### Discharge Planning/Homeless Prevention Pilot

The Discharge Planning Committee meets quarterly to discuss ways to improve the discharge planning from state and local institutions including prisons, jails, mental hospitals and institutions, hospitals and foster care. The committee is open to all and includes representatives of these institutions as well as staff who participate in the homeless prevention program which serves those exiting state institutions.

### Housing First

The Housing First Committee meets quarterly to discuss the progress of Housing First programs in Louisville Metro. The committee is made up of persons involved in the SAHMSA Housing First Projects, SHP Housing First Projects and Rx: Housing Project (100K Homes).

### Consumer Participation

The Client Engagement Committee meets as needed to seek input from clients of homeless services. The committee is open to anyone but includes four volunteers representing ESG, SHP and two persons with no conflict of interest. Information is gathered from forums held at various shelters in the community over the course of the year and annually at the Project Connect/Stand Down where all people who are experiencing homelessness are invited to receive services at a one stop shop offered over the course of a full day.

### Common Assessment/ Mainstream Services

The Common Assessment/Mainstream Services Committee meets as needed to create and oversee the Louisville Metro CoC Common Assessment. They also insure that the common assessment includes a process to assess and refer each CoC client for all appropriate mainstream services. To date, the committee has created the assessment tool and helped to create a funding plan for the assessment and staffing. The next step is to develop the details of how it will be implemented at each of Louisville's emergency shelters and then to monitor implementation and provide comment.

### Coalition Supporting Young Adults

The Coalition Supporting Young Adults was created in response to the rising number of young adults staying in Louisville adult shelters in 2012 (555). This committee is made up of agencies that serve 16-24 year olds in crisis without support throughout the city. Their role is to make recommendations to lower the number of young adults in crisis and prevent the cycle of homelessness in the next generation.

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## **Louisville Metro CoC Collaborative Applicant**

Because the Louisville Metro CoC Board is made up of volunteers, they will need to select a Collaborative Applicant to submit the CoC application to HUD each year.

### **Role of the Collaborative Applicant**

It is the responsibility of the Louisville Metro CoC full membership to designate a collaborative applicant best able to insure a successful submission of the CoC proposal. It is the role of the Collaborative Applicant to:

- Complete the electronic application in response to HUD's annual CoC Program NOFA for homeless assistance resources,
- Present a timeline and deadlines to all project applicants for individual project plans,
- Collect all data and submit a renewal chart to HUD of all projects planning to reapply,
- Create the housing inventory chart,
- Create the grant inventory worksheet,
- Establish priorities for funding projects in the CoC geographic area,
- Create process for ranking applications with full participation of CoC full membership,
- Oversee committees and volunteers,
- Create agendas for CoC full membership and Board meetings in collaboration with the Board Chair,
- Notify others that they can join the CoC full membership annually, and
- Monitor who is eligible to vote on the full membership.

## **The Louisville Blueprint to End Homelessness**

### **History**

In 2000, members of the Coalition for the Homeless began work on a plan entitled "Reducing and Ending Homelessness: A Blueprint for the Future." This report was released in 2002 and outlined ten goals with action steps for eliminating homelessness in Jefferson County, Kentucky. In 2007, the Coalition for the Homeless joined forces with Louisville Metro's Office on Homelessness to update the plan. It was updated again in 2012 to include the newly established federal policies in the federal "Opening Doors" Plan.

### **Louisville Metro CoC Blueprint Priorities**

- Increase Leadership, Collaboration and Civic Engagement
- Increase Access to Stable and Affordable Housing
- Increase Economic Security
- Increase Health and Stability
- Retool Crisis Response

The full plan with specific goals is available at The Coalition for the Homeless website – [www.louhomeless.org](http://www.louhomeless.org).

### **Update Process**

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Each year, The Coalition for the Homeless documents progress made on each of the “Blueprint” goals and presents to the Louisville Metro CoC full membership as an annual report. These numbers are also included in the CoC application for funding.

## **Annual Point in Time / Quarterly Shelter Point in Time/Census**

The Louisville CoC conducts its annual point in time on the last Wednesday of January. This point in time count includes both a shelter count and a street count. The Louisville CoC also conducts a quarterly point in time on the last Wednesday of the first month of each quarter. (January, April, July and October). The April, July and October quarterly point in time counts are limited to those using the shelter system. During the quarterly point in time counts, shelter bed and unit counts are also conducted. HMIS data is used to determine information needed to account for sub populations. This information is extrapolated to the persons staying on the streets that night.

### **Street Count**

As required by the U.S. Department of Housing and Urban Development, The Coalition for the Homeless conducts a one-day, point-in-time count of homeless persons the last week of January each year. The Coalition solicits local volunteers who go out in groups to count homeless persons at day shelters and on the streets. Meanwhile, night shelters complete the surveys at their facilities. The volunteers are asked to survey a minimum of one-third of those counted using a survey created by Kentucky Housing Corporation. This survey is used statewide on the same day. The Coalition collects personal items to also be distributed to homeless persons during the survey to increase the willingness of people to participate and provide items needed for safety and security when sleeping on the streets in the dead of winter.

Once the one-day survey is completed, The Coalition for the Homeless uses the survey data along with HMIS data to extrapolate the survey answers of persons who were counted but not surveyed to get a better understanding of those who are homeless on a given night in Louisville Metro.

### **Homeless Census**

In addition to the one-day survey, The Coalition for the Homeless collects information on all persons served in the Louisville Metro homeless system in a given year. This information is gathered from the HMIS data provided by agencies and through the new single point of entry.

Each June, the Point-In-Time and Annual Homeless Census information is released to the public and media. The Coalition for the Homeless also studies this information to determine what changes could improve the CoC.

## **Homeless Management Information System (HMIS) and Single Point of Entry**

### **HMIS Roles and Requirements**

Uniform, longitudinal data is necessary to understand the extent and scope of homelessness in individual communities and across the country. It provides the community with a tool to collect and analyze ongoing data on people using homeless service programs. Accurately calculating

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the size and needs of the homeless population as well as the outcomes of specific interventions provides a means for tracking service and demand for homeless programs and understanding where improvements need to be made.

The Louisville Metro CoC full membership chose The Coalition for the Homeless to serve as the administrator of the U.S. Department of Housing and Urban Development (HUD) mandated HMIS for Louisville Metro. The Louisville CoC is part of a state-wide HMIS system, called Kentucky HMIS. KYHMIS is managed by the Kentucky Housing Corporation in Frankfort, KY and uses Servicepoint software.

The Coalition for the Homeless manages the Louisville Metro CoC HMIS through a full-time HMIS Coordinator. This staff salary and the expenses of the HMIS system, including Servicepoint software licenses for Coalition agency members, are paid for through a HUD CoC HMIS grant and match funds raised locally. The HMIS Coordinator reviews the licenses each year to determine which have been unused and recaptures those licenses. Each CoC agency member can purchase one license per program at half price and all others must pay full price. Agencies are charged for these additional licenses annually. Small homeless agencies with no federal funding can receive one free license per year.

The CoC HMIS administrator is responsible for:

1. Maintaining compliance with the latest HMIS Data and Technical standards published by HUD,
2. Accurately calculating the size and needs of the homeless population,
3. Tracking service and demand for homeless programs and understanding where improvements need to be made,
4. Overseeing the reporting process for the CoC,
5. Training agencies on accurate HMIS entry,
6. Reviewing the licenses of member agencies each year to determine which have been unused and recapture as needed, and
7. Coordinating a single point of entry to insure new clients are eligible for services and entered correctly.
8. Reporting as necessary to various entities such as Louisville Metro Government, the Kentucky Housing Corporation, the U.S. Department of Housing and Urban Development, etc.

Kentucky Housing Corporation assigns a security officer to oversee all security issues related to the Kentucky HMIS. Anyone with concerns should immediately contact the security officer. Also, the HMIS Coordinator performs an annual check on the Louisville Metro HMIS to insure that all security standards are being met.

### Single Point of Entry

The Louisville Metro CoC requires universal data elements be collected on each new CoC client. This information is collected by The Coalition for the Homeless through the single point of entry. This information can be collected by phone or in person at the single point of entry

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office. The client is asked to sign a release of information and these data elements are made available to all HMIS users. It is also the responsibility of the CoC single point of entry staff to:

- Record numbers of those they serve daily,
- Evaluate eligibility for homeless assistance programs,
- Divert anyone who is appropriate to homeless prevention services versus shelter,
- Reserve a bed in a local shelter for anyone who qualifies,
- Make a referral for shelter overflow if no beds are available, and
- Create a scan card for all newly entered clients that they can use for entry to future homeless services.

Once a client arrives for services at a homeless service agency after the single point of entry assessment, HMIS allows the agency to see if the client was already entered for prior services so they do not duplicate entry. The service provider is responsible for updated HMIS when new services are provided to a client, when their income or housing changes, once a year for an annual update and at program exit. A privacy notice is given to clients and posted at shelters informing them that their data will be entered in HMIS. It also specifies the data protection standards that are to be followed. If a client arrives at a shelter after hours and has not presented at the single point of entry, they should not be denied services if a bed is available. Instead, they can complete a hard copy form for entry, fax it to The Coalition for the Homeless the following day for HMIS entry and refer the client when appropriate to get a scan card.

## **HMIS Technical Assistance and Training**

The Coalition maintains an HMIS help desk through Outlook. When a request for assistance is received, it is automatically logged in the system. When the concern is addressed, this is logged by The Coalition for the Homeless staff for future tracking of technical assistance. Requests can be as little as forgetting a password or as great as hiring a new staff member who needs to be trained on the system.

The Coalition provides individualized, on-site technical support to member agencies as needed.

The HMIS Coordinator discusses HMIS changes with agency members at Louisville Metro CoC full membership meetings.

## **HMIS Quality Monitoring**

During the time of the quarterly point in time counts two HMIS data quality processes are conducted.

- Agencies are expected to submit a manual count of the persons staying in each homeless program along with a manual count of the beds and units available on that particular night.
- A one night point in time report is also run from HMIS by the agency and compared to the manual count. Any discrepancies in the numbers should be resolved before the reports are submitted to The Coalition for the Homeless.



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- The combined information of number of available beds/units and the manual count of persons staying in the shelter is compared to establish a project's capacity rating for that night.

## **Minimum Data Sets and Data Quality**

The Coalition for the Homeless manages the HMIS database in Louisville Metro and works with the CoC Board to establish minimum data sets the data quality (DQ) standards. Data Quality is checked once each quarter to coincide with the Point in Time dates.

## **Data quality standards**

There are two parts to Louisville data quality standards: data quality and data accuracy. For data quality, the program must have the minimum data sets entered for each client client at exit. For the data accuracy standard, the client and household counts in HMIS must equal the hand counts submitted by the agency. While the data quality is inspected quarterly, it is the expectation of the Louisville Metro CoC that each agency will update all clients including program exits within a week.

The Coalition for the Homeless will publicize Data Quality results during the monthly CoC full membership meetings and share this information with agency funders.

## **Housing Inventory Chart**

It is the policy of the Louisville Metro CoC that the following guidelines and requirements be met in order for agencies and programs serving the homeless in the Louisville Metro community to be included in the U.S. Department of Housing and Urban Development's Housing Inventory Chart. This chart is meant to include all facilities and programs that provide sleeping accommodations to the homeless residing in the Louisville Metro CoC community regardless of whether HUD funding is received or used.

This chart is updated on a yearly basis at the time of the official HUD required Point in Time homeless count. The U.S. Department of Housing and Urban Development requires that local continuums conduct a point in time count bi-annually during the last week of January. The Louisville Metro CoC has elected to conduct the local point in time homeless count on a yearly basis. The annual count takes place on the last Wednesday of January and includes both those staying in shelter and those staying on the street.

Because HUD uses this chart to determine the capacity to serve the homeless, it is extremely important that facilities be identified as:

- serving only persons who meet the HUD definition of homeless or
- if only a portion of the facility's accommodations are provided to persons meeting the HUD homeless definition, only those accommodations actually providing service to persons meeting the HUD homeless definition be included in the Housing Inventory Chart.

The U.S. Department of Housing and Urban Development definition for homeless persons is as follows.

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A person or family is considered to be homeless ONLY when he/she meets one or more of the categories below.

Category 1	Literally Homeless	<p>1. Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none"> <li>a. Has a primary nighttime residence that is a public or private place not meant for human habitation;</li> <li>b. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs: OR</li> <li>c. Is exiting an institution where (s)he has resided for 90 days or less AND who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.</li> </ul>
Category 2	Imminent Risk of Homelessness	<p>2. Individual or family who will imminently lose their primary nighttime residence, provided that:</p> <ul style="list-style-type: none"> <li>a. Residence will be lost within 14 days of the date of application for homeless assistance;</li> <li>b. No subsequent residence has been identified; AND</li> <li>c. The individual or family lacks the resources or support networks needed to obtain other permanent housing.</li> </ul>
Category 3	<p>Homeless under other Federal statutes</p> <p>The Louisville Metro CoC has chosen NOT to recognize this category at this time.</p>	<p>3. Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</p> <ul style="list-style-type: none"> <li>a. Are defined as homeless under the other listed federal statutes;</li> <li>b. Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;</li> <li>c. Have experienced persistent instability as</li> </ul>

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		<p>measured by two moves or more during the preceding 60 days; AND</p> <p>d. Can be expected to continue in such status for an extended period of time due to special needs or barriers.</p>
Category 4	Fleeing/Attempting to Flee Domestic Violence	<p>4. Any individual or family who:</p> <p>a. Is fleeing, or is attempting to flee, domestic violence;</p> <p>b. Has no other residence; AND</p> <p>c. Lacks the resources or support networks to obtain other permanent housing.</p>

Facilities listed on the Housing Inventory Chart are expected to maintain the following:

- A current license for serving homeless persons issued by Louisville Metro Government.
  - In the case where the Director of the Louisville Metro Department of Codes and Regulations deems it more appropriate for the facility to obtain a conditional use permit in place of the license, such a permit will meet the need for a license.
- Only those beds/units designated for persons meeting the HUD definition of homeless can be included in the Housing Inventory Chart.
- Documentation for each person being provided accommodations stating that one or more of the HUD identified conditions is true if that person is being served as someone meeting the HUD definition of homeless.
- All persons identified as a person meeting the HUD definition of homeless must be entered into the Homeless Management Information System (HMIS) through the single point of entry. Domestic violence shelters are exempt from this requirement but are required to enter comparable information into a comparable data base.
- Participation in the annual point in time homeless count administered by The Coalition for the Homeless during the last week of January. Those persons included in the annual count must meet the HUD definition for being homeless.
- Quarterly participation in the Louisville CoC's shelter utilization count on the last Wednesday of the first month of each quarter. Those persons included in the quarterly count must meet the HUD definition for being homeless.

### Application Process

The Louisville Metro CoC Process is a year round process that includes quarterly shelter point in time counts, HMIS data quality monitoring and an expectation that CoC members attend 10 of 12 monthly CoC full membership meetings. The full membership body holds the responsibility of making final funding and policy decisions but also has the right to delegate any of its authority and responsibility to the Louisville Metro CoC Board, Collaborative Applicant, HMIS Administrator, Common Assessment Administrator or others when needed.

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## Grant Inventory Worksheet

The Grant Inventory Worksheet is a tool used by HUD and the CoC to determine the amount of CoC funding needed to support the projects currently receiving funding through the CoC process. The Coalition for the Homeless, acting as the Collaborative Applicant, works with the applicant agencies to accurately reflect the grant funding provided by HUD during the most recent renewal or as amended. When the CoC, HUD and the agencies/projects agree that the information is correct, the CoC submits the worksheet per HUD's instruction.

## Louisville Metro CoC Policy for Funding Consideration

HUD provides funding for homeless assistance programs authorized under the Stewart B. McKinney Act through the CoC competition. Annually, HUD releases a Notice of Funding Availability (NOFA) which details the requirements for the application. One requirement is that there be one Collaborative Applicant for all projects in the CoC. The Collaborative Applicant is responsible for submitting a comprehensive application that includes all projects seeking funding within the CoC geographic area.

To be eligible for funding consideration, applicants must meet the following criteria:

- Applicants must meet all HUD eligibility criteria.
- Applicants must meet the application deadlines set by the Louisville Metro CoC.
- Applicants must be a 501(c) 3, 501 (c) 4, PHA, or local government.
- Applicants must possess legal authority to apply for and receive funds and carry out activities authorized by the CoC Program.
- Applicants must provide the supplementary match funds required by HUD.
- Applicants must comply with HUD's standards for participation in a local Homeless Management Information System (HMIS) and the collection and reporting of client-level information.
- Applicants must participate fully in the CoC process to coordinate and integrate with other mainstream programs for which homeless populations may be eligible.
- Applicants must assume ultimate responsibility for preparing an accurate and complete application for submission to HUD that meets all federal rules and regulations.
- Applicants must be in compliance with all local, state, and federal civil rights laws and Executive Orders as well as all standards outlined by the U.S. Department of Housing and Urban Development.
- Applicants must agree to comply with federal Section 3 and Energy Star Compliance requirements.
- Applicants must insure that all kids under 18 are allowed to stay in shelter with their other family members.
- Applicants must insure that all children are enrolled in school.

In order to meet the local needs in serving the homeless population, the following guidelines have been established. These guidelines in no way prohibit any HUD eligible project from applying for HUD funding but rather state the community's priorities, encourage projects that

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respond to local needs and position the community to bring maximum benefit to serving our homeless population.

## New Applicants

- Housing related projects have been identified by the Louisville Metro CoC to be our highest priority and will be considered as such.
- HUD has indicated that the ideal ratio of housing to services dollars is 80/20. Projects with a ratio that is over 20% services dollars must be approved by the CoC full membership.
- New applicants must include homeless persons in the design, the implementation and/or the evaluation of programs and services.
- New nonprofit applicants must submit a copy of their current IRS form 990 and current list of volunteer board of directors.
- New applicants are required to describe how implementing the community's HMIS program will be funded.
- At the time of pre-application, new applicants are required to submit three (3) letters of support indicating the need for this project.

## Renewal Applicants

- Renewal applicants must be current with the HMIS system and have accurately entered 75% of their client records as determined by the HMIS Coordinator.
- Renewal applicants must have submitted their most current APR and review letter from HUD to the CoC Board.
- Where applicable, renewal applicants must be in compliance with Louisville Metro Licensing requirements and the community's monitoring standards.

## Beginning the process for application

The CoC Collaborative Applicant establishes the timeline for renewal and new project application in collaboration with the CoC Board. This is done in consideration of HUD timelines and the CoC's responsibility to respond to HUD requests.

At a time determined by the CoC Collaborative Applicant, the Pre-Application is made available to renewal and new projects. This Pre-Application determines what projects intend to apply for renewal funding and, if guidance is available for the opportunity for new funding, gives agencies the opportunity to indicate their intention for applying for new projects. Using the latest guidance from HUD, the CoC Collaborative Applicant reviews the pre-applications for application consistency with HUD guidelines. Ultimately, the purpose of the Pre-Application is to give the agency/project a template from which the actual application can be taken. The Pre-Application also provides the CoC Collaborative Applicant with budgetary information to begin to determine the amount of funding needed compared to the amount available.

Working with the agencies that have indicated an intention to apply for funding, the CoC Collaborative Applicant prepares the information to be reviewed by the CoC Board for further

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guidance and critical evaluation. During this process the CoC Collaborative Applicant, along with the CoC Board, work to identify opportunities for the community to:

- Take advantage of specific HUD opportunities for funding,
- Present a clear case for the need for funding in the community, and
- Maximize the community's ability to retain and obtain as much funding as HUD makes available to the community.

While it is the responsibility of the CoC Collaborative Applicant to be educated about HUD rules and procedures, it is also the responsibility of the CoC full membership and applicant agencies to read HUD guidance and apply that guidance to the individual project applications and execution of the grants if received. It is also the responsibility of the agency/project applying and receiving funds to keep the CoC Collaborative Applicant informed of any changes that take place within the project. It is particularly important to inform the CoC Collaborative Applicant of changes in:

- Population served,
- Budget,
- Project funding and spending, and
- Basic design of the project.

In order to facilitate this process throughout the funding cycle, projects are required to submit the following to the Collaborative Applicant:

- The annual performance report (APR) at the same time it is submitted to HUD. HUD requires the APR to be submitted 90 days after the end of the project's operating year.
- The letter received from local HUD that the APR was received and approved.
- The HMIS report that mirrors the project's APR report (ART 625).
- A communication if the project did not spend the amount of funding received from HUD. The amount turned back should be included in a letter from HUD. It is generally accepted practice that projects can turn back approximately 5% of their grant and not be seen lacking the capacity to spend the money allotted to them. If the project is a rental assistance project, turning back the amount or rental assistance equal to or less than the amount of funds needed to house one household unit for 12 months using the smallest bedroom size allowed in the grant is generally accepted.
- All information required to complete the quarterly point in time counts – including the manual counts, HMIS reports and program capacity reports.
- All information required to complete the Housing Inventory Chart.
- All information required to complete the Grant Inventory Worksheet.
- The cost of services for each homeless program.
- All other information required to assemble the CoC application for funding.

It is expected that projects submit information on the required forms in a timely manner or communicate the need for an extension of a deadline – prior to the deadline – to the CoC Collaborative Applicant. The CoC Collaborative Applicant will make every effort to accommodate the need for deadline extensions in the case of emergencies and other

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reasonable requests. It is paramount, however, that extensions do not adversely affect the timely submission of the community application and the timely submissions of other information required by HUD.

## **Late Submission of Pre-Applications, Applications and Other Required Information**

In accordance with the U.S. Department of Housing and Urban Development (HUD) guidelines, the Louisville Metro CoC in no way prohibits any HUD eligible project from applying for HUD funding if done within the guidelines set up by the U.S. Department of Housing and Urban Development. However, in order for the Louisville Metro CoC to submit the best overall application for funding, certain guidelines and deadlines have been established.

It is the policy of the Louisville Metro CoC that when Pre-Applications are submitted after the stated CoC due date, whether for new or renewal projects, the following procedure will be followed:

- The pre-application will be reviewed using the process used for all other pre-application submissions. Since the primary purpose of the community's review process is to assist projects in submitting the best possible grant application, it is in the best interest of the entire community that all grants associated with the Louisville Metro CoC be reviewed for accuracy and completeness and be given the opportunity to improve the grant pre-application.
- The Louisville Metro CoC community holds the responsibility of approving projects to be included in the HUD application. As part of this process, voting members are given information regarding each renewal project's success in meeting both HUD and community goals. Information regarding new projects will include the agency's success in meeting HUD and community expectations in the past. The timeliness of a project's pre-application is included in this information.
- The Louisville Metro CoC full membership has several options open to it regarding the late submission of a pre-application. It can vote to:
  - Allow the project to proceed through the process with a warning but essentially unencumbered.
  - Allow the project to proceed through the process with the understanding that during the next funding application cycle another agency will be given the opportunity, within HUD guidelines, to assume the terms of the grant. This implies that the basic project will remain in the community under the new management of another agency.
  - Allow the project to proceed through the process with the understanding that during the next funding application cycle the CoC will invoke the HUD Reallocation process where another agency will be given the opportunity, within HUD guidelines, to submit a new permanent housing project within the budget constraints of the original project. This implies the current project will be discontinued at the time of HUD approval of the reallocation.
  - The CoC invokes the HUD Reallocation process where another agency is given the opportunity, within HUD guidelines, to submit a new permanent housing

## Louisville Metro Continuum of Care Policies and Procedures

project within the budget constraints of the original project. This implies the current project will be discontinued at the time of HUD approval of the reallocation.

- The CoC invokes the HUD Reallocation process using the opportunity to fund a new HMIS project.
- Defund the project during the current application process understanding that the funds normally allocated to this project are lost to the community.

It is the policy of the Louisville Metro CoC that when a new or renewal project fails to submit the Application within the CoC's stated deadline the following procedure will be followed:

- The Louisville Metro CoC Collaborative Applicant must first decide if there is time before the official HUD deadline to work with the application without putting all other projects in jeopardy of a late submission to HUD. This decision is made with consultation with the CoC Board.
- If it is decided that the project's application should be included in the submission, it will be the responsibility of the CoC Board to make a recommendation to the Louisville Metro CoC full membership for further action. The Louisville Metro CoC full membership will make the final decision regarding the matter.
- If it is decided that there is not sufficient time before the official HUD deadline, the CoC Collaborative Applicant will attempt to identify a reasonable way for the funds to be preserved within the CoC community. If such a way exists, the CoC Collaborative Applicant will work with the CoC Board to pursue such an option. If such a way does not exist, the funds are not applied for in the overall CoC application and the funds are lost to the community.

### Identifying Community Need for New and Expanded Services and Reallocation of Existing Funds for Maximum Use

It is the responsibility of the CoC full membership, the CoC Board and the CoC Collaborative Applicant to constantly be looking for:

- The need for new or expanded services to the community,
- The need to discontinue services when they are no longer needed,
- The need to adjust services when realignment is necessary in order to best serve the homeless population of the Louisville Metro CoC,
- The Opportunity within the community and offered by HUD to improve services and pay for services once unable to be funded, and
- Creative ways to maximize the funding dollars available through HUD and other funding sources.

Meeting this responsibility is done in a variety of formal and informal ways, including:

- Conducting the yearly Homeless Point in Time Count that includes both a street count and a shelter count,
- Conducting the annual Homeless Census Count,



## Louisville Metro Continuum of Care Policies and Procedures

- Conducting the quarterly Homeless Point in Time Count that consists of only the shelter count,
- Comparing these counts to the Housing Inventory Chart to identify gaps in services,
- Listening to CoC members and their experiences of project capacity or lack thereof,
- Examining individual project outcomes in relation to CoC and overall HUD goals, and
- Examining overall CoC outcomes in relation to CoC and overall HUD goals.
- Using evidenced-based measurement tools created by HUD and HUD TA providers.

### Ranking Projects

Each year, the U.S. Department of Housing and Urban Development creates priorities for funding of CoC projects. However, they first fund all eligible projects in tier one (above the renewal amount from last year) before funding those projects in tier two. Therefore, those projects in tier one are more likely to receive funding.

In order to determine the ranking of projects into these two tiers, the Louisville Metro CoC Board establishes priorities for ranking based on the CoC benchmarks already established by the CoC (see above). Presently, the established priorities are:

1. Permanent Supported Housing
2. Meeting the appropriate permanent housing goal (77% of PSH staying in PH 6+mo. - this is now 80% / 65% of TH leaving for PH)
3. Reasonable capacity rates and the lesser of: no more than 5% of funds returned or no more than what it would take to house one household for one year.

Any project that has not met the CoC goals listed above in priority two or the capacity rates listed above in priority three is asked to present their project and address these shortfalls at a CoC meeting. Then each CoC representative is asked to vote on the following to establish the ranking:

- A. First, you are asked to indicate any project you feel should not be included in the application submission.
- B. Second, you are asked to indicate how you would rank any projects that did not meet their HUD housing goal or that would be ranked in tier two.

### **Common Assessment**

In order to help homeless persons move more quickly and consistently through the Louisville Metro CoC, the CoC has created a common assessment to be conducted with each client within 14 days of shelter entry. This assessment is led by staff of a common assessment team.

### Common Assessment Team Roles

It is also the responsibility of the CoC common assessment staff to:

- Record numbers of those they assess,
- Seek to assess each shelter client within 14 days of shelter entry,
- Evaluate eligibility for homeless assistance programs,
- Prioritize who receives transitional housing,

# **Louisville Metro Continuum of Care Policies and Procedures**

- Prioritize who receives rapid rehousing,
- Make referrals as appropriate to permanent supportive housing,
- Make referrals for mainstream services, and
- Insure that the needs of special needs clients are addressed and referrals are made for special services.
- Provide assessment information to referral agency and post in HMIS.

## **Prioritization of Those Waiting to be Housed Through Common Assessment Referrals**

For CoC SHP openings dedicated to the chronically homeless, the following priorities are used:

- 1) First Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.
- 2) Second Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness.
- 3) Third Priority—Chronically Homeless Individuals and Families with the Most Severe Service Needs.
- 4) Fourth Priority—All Other Chronically Homeless Individuals and Families.

For CoC SHP openings not dedicated to the chronically homeless, the following priorities are used:

- 1) First Priority—Homeless Individuals and Families with a Disability with the Most Severe Service Needs.
- 2) Second Priority—Homeless Individuals and Families with a Disability with a Long Period of Continuous or Episodic Homelessness.
- 3) Third Priority—Homeless Individuals and Families with Disability Coming from Places Not Meant for Human Habitation, Safe Havens, or Emergency Shelters.
- 4) Fourth Priority—Homeless Individuals and Families with a Disability Coming from Transitional Housing.

These priorities can only be met when the size and design of the facility opening also fits the need of the next person identified using these priorities. If not, the common assessment team will serve the next person on the list. These priorities will be used in combination with special set asides made available as part of the federal goals outlined in Opening Doors. Therefore, units set aside for veterans will only be used for that population, however, the veterans will still be referred in the order listed above.

## **Monitoring Standards**

The Coalition for the Homeless introduced the concept of setting standards for local shelter providers in 1990. While other communities had established standards in the areas of health and safety, Louisville created an additional set of standards in the area of programming. In 2011, Louisville Metro creating licensing for shelters so The Coalition now monitors a list of standards created by the CoC separate from the licensing standards.

# Louisville Metro Continuum of Care Policies and Procedures

## Standard Process

These unmandated standards are coupled with a city zoning and inspection process that focuses on building safety and health standards. These standards can provide the client, the shelter and the larger community with the assurance that the client is being given the best possible opportunity to move back into a stable living environment and achieve self-sufficiency outside the shelter system.

Monitoring outcomes and standards are monitored through HMIS reports, items submitted to the Coalition electronically and on-site visits as needed.

## Blueprint University Training

The Coalition staff identifies training needs of member agencies each year and conducts a minimum of six trainings for front-line shelter staff in these areas. These free trainings are provided to member agencies as part of their membership fee. Other community members are welcome to attend as space permits.

Past Blueprint University topics have included: chemical dependency, child sexual abuse, client interaction and confidentiality, crisis intervention, communicable diseases, cultural diversity, domestic violence, food service, mental health issues, and universal precautions. Some topics may differ yearly depending on the needs of the homeless service community. The trainings are conducted by local experts.

# **LOUISVILLE METRO HOUSING AUTHORITY**

## **ADMISSIONS AND CONTINUED OCCUPANCY POLICY (ACOP)**

**Adopted: March 2014  
Effective: April 2014**

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## **10.0 TENANT SELECTION AND ASSIGNMENT PLAN**

### **10.1 PREFERENCES**

The LMHA will select families based on the following preferences within each bedroom size category based on our local housing needs and priorities:

- A. ***Former Clarksdale residents who were relocated by the LMHA as a result of the Housing Authority's HOPE VI Revitalization of the site receive a preference for the Liberty Green development only.*** These families should apply through the Liberty Green site-based waiting list;
- B. ***Former Sheppard Square residents who were relocated by the LMHA as a result of the Housing Authority's HOPE VI Revitalization of the site receive a preference for the revitalized Sheppard Square development only.*** These families should apply through the Sheppard Square site-based waiting list;
- C. ***Participants successfully graduating from the YouthBuild Louisville program.*** This preference only applies to participants living in subleased LMHA public housing at the time of program completion. Such individuals receive a preference for either the Housing Choice Voucher or Public Housing Program, but not both;
- D. ***Working families receive a preference for 3-bedroom, scattered-site, single-family detached houses only.*** All adult family members must be full-time students or employed (working at least 20 hours per week) unless elderly (62+) or disabled. In households containing elderly or disabled adults, at least one adult family member must be working or a full-time student. See Glossary for definition of Work or Working.

In addition, all adult family members must agree to participate in an approved case management program and meet annual self-sufficiency goals as defined in their case management plan. Participation in the LMHA's Public Housing Family Self-Sufficiency (FSS) program fulfills the case management requirement.

Finally, applicants should be aware that these sites have a five-year residency time limit. At the end of five years, families will be required either to relinquish their assistance, or if they are otherwise lease-compliant, will be permitted to transfer to a non-scattered-site public housing unit.

Families who have made significant progress toward their self-sufficiency goals, but are not quite ready to enter the private housing market, may request a temporary extension to the residency time limit. The LMHA will work with each approved family to update all outstanding goal dates in their case management plan and to determine when the temporary residency extension will expire. The LMHA may revoke the family's residency extension at any point if the family fails to complete

remaining self-sufficiency goals in a manner consistent with the updated case management plan. The Housing Authority expects that all families receiving a temporary residency extension will be prepared to move to non-subsidized housing by the time their extension expires.

Working families will only be selected from the central waiting list when there are no eligible families on the LMHA's internal Scattered Site Unit Referral List.

E. ***An involuntarily displaced individual or family.*** Meaning:

1. An individual or family displaced by government action;
2. An individual or family that includes a member who is unable to use critical elements of their current rental unit due to a mobility impairment and where the owner is neither legally obligated nor willing to make adaptive modifications;
3. An individual or family that is facing an eviction action due to reasons beyond their control or cause;
4. An individual or family that has been forced to vacate their home due to a fire that was beyond their control or cause; or
5. An individual or family whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized by a unit of local, state, or federal government;

F. ***An individual or family residing in substandard housing.*** Meaning a housing unit that exhibits one or more of the following characteristics:

1. Should, but does not have:
  - a. A useable toilet;
  - b. A useable tub or shower; or
  - c. A useable kitchen.

This category excludes housing units that would not be expected to have these features, for example single room occupancy units or congregate housing dwellings, unless said features are not available elsewhere on the premises for the use of the family;

2. Where there is no electricity or the electricity is unsafe;
3. Has no safe or adequate source of heat; or
4. Is declared unfit for habitation by a government agency;

- G. *An individual or family paying more than 50% of their household's gross income for rent and/or utilities for at least the past three months;*
- H. *An individual or family displaced as a result of physical violence.* This includes:
1. Victims of domestic violence where the most recent incident of abuse occurred no more than thirty calendar days before the submission of the pre-application;
  2. Victims of recent hate crimes, where a hate crime is defined as actual or threatened physical violence or intimidation that is directed against a person or their property and is based on the person's race, color, religion, sex, perceived or actual sexual orientation or gender identity, national origin, handicap, or familial status. It must have occurred recently or be of a continuing nature; or
  3. Police informants for whom the law enforcement agency has recommended re-housing in order to avoid or minimize the risk of violence against family members.

**I. *A homeless applicant.* See Glossary for definition of "Homeless."**

The above preferences shall all be treated equally. Any applicant qualifying for more than one preference shall be treated no differently from an applicant qualifying for only one preference. All applicants qualifying for a preference(s) shall be housed before applicants who do not qualify for any preference.

The date and time of pre-application will be used to determine the sequence in which applicants who qualify for a preference are housed.

Notwithstanding the above, individuals who are elderly, disabled, or displaced will be offered housing before other single persons.

**Buildings Designed for the Elderly (55+) and Disabled (Mixed Population**

**Developments):** Avenue Plaza, William E. Seay Plaza, Dosker Manor, and Lourdes Hall have been designed to meet the needs of the elderly (55+) and disabled. Preference will be given to elderly and disabled families. If there are no elderly or disabled families on the list, preference will then be given to near-elderly families. All such families will be selected from the waiting list using the preferences as outlined above. No person under the age of 18 is eligible to reside in these developments.

**Elderly-Only (62+) Housing:** St. Catherine Court and the Weathers Building (Park Duvalle) are open only to families whose head of household, co-head, or spouse is at least 62 years of age. No person under the age of 55 is eligible to reside at St. Catherine Court. In filling vacancies in these developments, first priority will be given to elderly families. If there are no elderly families on the list, next priority will be given to those age 55 or over. Using these priorities, families will be selected from the waiting list using the preferences as outlined above.



**Head of Household:** The adult member of the family who is the head of the household for purposes of determining income eligibility and rent. (24 CFR 5.504(b))

**Homeless:** An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- a. An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or
- b. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
- c. 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 place not meant for human habitation immediately before entering that institution;

**OR**

Any individual or family who:

- a. Is fleeing, or is 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, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; and
- b. Has no other residence; and
- c. Lacks the resources or support networks, e.g. family, friends, and faith-based or other social networks, to obtain other permanent housing.

**Household Members:** All members of the household including members of the family, live-in aides, foster children, and foster adults. All household members are listed on the lease, and no one other than household members are listed on the lease.

**HUD 50058 MTW:** The HUD form that MTW housing authorities are required to complete and electronically submit to HUD for each assisted household in public housing to record information used in the certification and re-certification process and, at the option of the housing authority, for interim reexaminations. Housing Authorities must retain at a minimum the last three years of the form 50058 MTW, and supporting documentation, during the term of each assisted lease, and for a period of at least three years from the end of participation date. Electronic retention of form HUD 50058 MTW and HUD 50058-FSS and supporting documentation fulfills the record retention requirement.

**Immediate Family Member:** A spouse, parent, brother or sister, or child of the person, or an individual to whom that person stands *in loco parentis* (in place of a parent); or any other person living in the household of that person and related to that person by blood or marriage.

## MEMORANDUM OF UNDERSTANDING

between

The Coalition for the Homeless, Inc.  
1300 South 4<sup>th</sup> St.  
Louisville, KY 40208

and Louisville Continuum of Care Board of Directors

SUBJECT: The Coalition for the Homeless Serving as the Collaborative Applicant and HMIS Lead.

The purpose of this memorandum of understanding (MOU) is to comply with the U.S. Department of Housing and Urban Development (HUD) interim rule. The interim rule states in 24 CFR § 578.9 (a)(3)(i) that the Continuum of Care must "...If more than one application will be submitted, designate an eligible applicant to be the collaborative applicant that will collect and combine the required application information from all applicants and for all projects within the geographic area that the Continuum has selected funding. The collaborative applicant will also apply for Continuum of Care planning activities." It states in 24 CFR § 578.7 (b) "The Continuum of Care must: (1) Designate an eligible applicant to manage the Continuum's HMIS, which will be known as the HMIS Lead;..."

The Coalition for the Homeless and the Louisville Continuum of Care Board of Directors agree that the Coalition for the Homeless will serve as the Collaborative Applicant and HMIS Lead on behalf of the Louisville Continuum of Care as defined in the Code of Federal Regulations 24 CFR § 578.3: "*Collaborative Applicant* means the eligible applicant that has been designated by the Continuum of Care to apply for a grant for Continuum of Care planning funds under this part on behalf of the Continuum. " "*Homeless Management Information System (HMIS)* means the information system designated by the Continuum of Care to comply with the HMIS requirements prescribed by HUD. *HMIS Lead* means the entity designated by the Continuum of Care in accordance with this part to operate the Continuum's HMIS on its behalf."

### Responsibilities of the Coalition for the Homeless as Collaborative Applicant

- Complete the electronic application in response to HUD's annual CoC Program NOFA for homeless assistance resources.
- Complete the Housing Inventory Chart as required by HUD for the CoC application.
- Complete the Grant Inventory Worksheet as required by HUD for the CoC application.
- Register the CoC for access to the electronic application for CoC funding.
- Work with agencies to complete the application process as it relates to completing the overall CoC application for funding.
- Set reasonable deadlines for submission of agency information and applications in relation to HUD deadlines for the overall CoC application for funding.
- Monitor HUD communications as they relate to the CoC application for funding.
- Inform the CoC regarding HUD requirements, deadlines and HUD regulations as they relate to the annual funding application.

### Responsibilities of the Louisville Continuum of Care Board of Directors to the Collaborative Applicant

- Make every effort to take advantage of funding opportunities to ensure that the Coalition for the Homeless receives reimbursement for its expenses in carrying out the role of Collaborative Applicant.
- Comply with deadlines set by the collaborative applicant for agency information and applications for the overall CoC application for funding.
- Participate on CoC Committees and in full membership meetings,
- Evaluate and approve projects to be included in the community CoC application.

*MOU: The Coalition for the Homeless Serving as the Collaborative Applicant and HMIS Lead*

- Consult with recipients and subrecipients to establish performance targets appropriate for population and program type, evaluate outcomes, and take action against poor performers.

The Continuum of Care Board of Directors retains all of its responsibilities, including the responsibility to approve the Continuum of Care application.

The Continuum of Care Board of Directors shall indemnify, hold harmless, and defend The Coalition for the Homeless, its elected and appointed officials, employees, agents and successors in interest from all claims, damages, losses and expenses, including attorney's fees, arising out of or resulting, directly or indirectly, from The Coalition for the Homeless performance, or breach of this Agreement provided that such claim, damage, loss or expense is: (1) attributable to personal injury, bodily injury, sickness, death, or to injury to or destruction of property, including the loss of use resulting there from, or breach of contract, and (2) not caused by the negligent act, omission, or willful misconduct of The Coalition for the Homeless, its elected and appointed officials, and employees acting within the scope of their employment. This Hold Harmless and Indemnification Clause shall in no way be limited by any financial responsibility, and shall survive the termination of this Agreement.

As established in 24 CFR § 578.39 The Coalition for the Homeless, as the Collaborative Applicant, shall use up to 3 percent of the Final Pro Rata Need, or a maximum amount to be established by the NOFA, for costs of designing and carrying out the collaborative process for development of the HUD application, evaluating outcomes of projects, and participating in the consolidated plan.

Responsibilities of the Coalition for the Homeless as HMIS Lead

- Propose an HMIS privacy plan, security plan, and data quality plan for the CoC to review, revise, and approve.
- Ensure the HMIS is administered in compliance with requirements prescribed by HUD.
- Maintain compliance with the latest HMIS Data and Technical standards published by HUD.
- Calculate the size of the homeless population and identify service gaps.
- Track service and demand for homeless programs and recommend based on this data.
- Coordinate the reporting process for the CoC.
- Train agencies on accurate HMIS entry.
- Report to appropriate external entities such as Louisville Metro Government, the Kentucky Housing Corporation, the U.S. Department of Housing and Urban Development, and others as required, in accordance with HMIS client privacy requirements.


Responsibilities of the Louisville Continuum of Care Board of Directors to the HMIS Lead

- Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS.
- Ensure consistent participation of recipients and subrecipients in the HMIS.
- Make every effort to take advantage of funding opportunities to ensure that the Coalition for the Homeless continues to receive reimbursement for its expenses in carrying out the role of HMIS Lead.
- (each agency) Pay the agency portion for additional HMIS licenses above one per program.

Amendments to this MOU can take place only by the mutual written consent of both parties. This MOU will remain in effect until either party cancels the agreement, or for a maximum of five years from the last date of signature. Cancellation of this agreement by either party is contingent upon 90 days written notice. However, this agreement may not be canceled by either party from the date of HUD issuance of

*MOU: The Coalition for the Homeless Serving as the Collaborative Applicant and HMIS Lead*

the Continuum of Care Notice of Funding Availability until the submission of the consolidated CoC Application.

  
(signature)  
Natalie Harris  
Executive Director

The Coalition for the Homeless, Inc.  
with the approval of the Board by vote

11/17/15  
(date)

  
(signature)  
Rosemary Lockett

Chairperson of the Board  
Louisville Continuum of Care  
with the approval of the Continuum  
membership by vote

11-16-15  
(date)



# **Louisville Metro Continuum of Care Policies and Procedures**

In 1987, Congress passed the first federal law specifically addressing homelessness. The Stewart B. McKinney Homeless Assistance Act of 1987, later renamed the McKinney-Vento Homeless Assistance Act, provides federal financial support for a variety of programs to meet the many needs of individuals and families who are homeless. The housing programs it authorizes are administered by the Department of Housing and Urban Development's (HUD) Office of Special Needs Assistance Programs (SNAPS). Since 1994, HUD has required each community to come together to submit a single comprehensive Continuum of Care (CoC) application rather than allowing applications from individual providers in the community. HUD's intent in creating this structured application process was to stimulate community-wide planning and coordination of programs for individuals and families who are homeless. (HUD's Homeless Assistance Programs: Continuum of Care 101, June, 2009)

In 2009, the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 was signed into law. The HEARTH Act amends and reauthorizes the McKinney-Vento Homeless Assistance Act with several substantial changes. Traditional beliefs around what is most effective in addressing homelessness have been evaluated and there are aggressive expectations for programs to move people into permanent housing as soon as possible. The task of keeping people in permanent housing is also receiving new attention with goals addressing recidivism and length of stay in permanent housing.

The Louisville Metro CoC is participating in the nationwide effort to evaluate and improve homeless service provision. The Louisville Metro CoC takes seriously the new HUD mandates and seeks to incorporate them in ways that make sense for this community at this time in history. To that end, the Louisville Metro CoC seeks to establish its governance, its policies and its procedures to not only align with HUD's expectations but to create a service provision system that first and foremost provides appropriate services to those who find themselves homeless and assists them in permanently moving out of homelessness. It is the intent of the Louisville Metro CoC to create an understanding of the reality of homeless in Louisville Metro and encourage a community wide response to reducing and eliminating it.

## **Louisville Metro Continuum of Care (CoC) Geographic Area**

- The Louisville Metro CoC geographic area is defined as Louisville Metro with the six digit code of 211374. This area includes all of Jefferson County, KY.

## **Louisville Metro CoC Values, Priorities and Goals**

### **Louisville Metro CoC Values**

- We value programs with outcomes that demonstrate progress toward reducing and ending homelessness as quickly as possible with an ultimate goal of no more than 30 days.
- We value innovative and diverse programming that addresses gaps in community services.
- We value quality programming that is accountable to the community through outcomes measurement.

# Louisville Metro Continuum of Care Policies and Procedures

- We value the effort to access the maximum amount of funding available to the Louisville Metro area.
- We value the commitment to serve all people who are in need of assistance regardless of race, gender, age, national origin, sexual orientation, gender identity and class and to be in compliance with all applicable laws regarding program accessibility for all people.
- We value and respect the decisions and choices of those who find themselves homeless and seek to optimize self-sufficiency.

## Louisville Metro CoC Priorities

- Moving people and families out of homeless is our number one priority.
- Provide safe shelter to those in need who choose to use the shelter system.
- Provide timely assistance to those seeking to move out of homelessness regardless of shelter use or choice.
- Make all available services accessible to those who find themselves homeless.
- There is a comprehensive and holistic approach to identifying and providing services to assist those who find themselves homeless before, during and after moving to permanent housing.
- The goals and objectives of those whose funding is used to provide shelter and services are respected.
- There is a focused effort to refer and connect those who find themselves homeless to mainstream services outside the homeless provider system.
- Providers seek choice, safety, affordability, integration, accessibility and supports when helping clients' access permanent housing.

## Louisville Metro CoC Goals

These are only a few of the goals of the Louisville Metro CoC "Blueprint to End Homelessness" that directly tie to the goals of the HEARTH Act.

- To divert people and families from the experience of homelessness.
  - Whenever possible, those who present themselves to the single point of entry will be diverted from the homeless provider system.
- To move people and families out of homelessness.
  - New clients to the homeless service system will exit emergency shelter on average in 6 months and transitional housing on average in 12 months.
  - 85% of those who enter the Rapid Re-housing program will not re-enter the homeless provider system within 6 months of the end of their Rapid Re-housing assistance.
  - 80% of those who enter transitional housing programs will move to permanent housing.
  - 80% of those placed in permanent housing will remain there for 12 months or longer.
- HMIS data will be used to determine the outcomes of individual projects and the CoC as a whole.
  - 90% of shelter beds will be entered into HMIS.

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- 30% of those entered in HMIS will have an exit destination.

## **Louisville Metro CoC Full Membership**

At the center of the Louisville Metro CoC process is the CoC full membership made up of nonprofit agencies, individuals, private businesses and government representatives at all levels. It is the body that ultimately holds the responsibility for making the decisions regarding the process and the final submission of the CoC grant as well as setting benchmarks to monitor both CoC and ESG Programs. The Louisville Metro CoC full membership has found that by working together the final product is one that the whole community can embrace and to which it can be committed.

### Full Membership Responsibilities

The Louisville Metro Full Membership is made up of agencies who serve the homeless population, agencies who serve those who are at risk of homelessness, governmental departments charged with addressing homelessness and individuals who are interested in addressing the issue of homelessness in the Louisville Metro community. The full membership body is responsible for:

- Electing four of its members to represent the full membership on the CoC Board and approving the remaining CoC Board membership annually,
- Providing information and advice to the CoC Board regarding best practices in homeless services,
- Establishing and providing oversight of the HMIS system and designating an HMIS administrator,
- Striving to provide the best services to each of the community's specific homeless populations,
- Establishing monitoring standards and outcomes and providing oversight of the implementation of this monitoring through the city and CoC,
- Working within the CoC homeless provider system to provide comprehensive and appropriate services to move homeless persons as quickly and appropriately as possible,
- Participating on CoC Committees and in monthly full membership meetings,
- Reviewing, endorsing and establishing policies and procedures including the process of Board selection,
- Approving and ranking projects to be included in the community CoC application and designating a collaborative applicant and insuring that all discussion on review and ranking procedures are reflected in the minutes and posted for community review ,
- Developing and following a governance charter detailing the responsibilities of all parties,
- Consulting with recipients and subrecipients to establish performance targets appropriate for population and program type, monitoring the performance of recipients and subrecipients, evaluating outcomes, and taking action against poor performers,
- Evaluating and reporting to HUD outcomes of ESG and CoC projects and consulting with ESG and CoC applicants regarding allocations,



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- Establishing and providing oversight of a coordinated assessment system and single point of entry and designating a lead for each,
- Conducting a Point-in-Time count of homeless persons, at least biennially,
- Conducting an annual gaps analysis, and
- Providing information required to complete the Consolidated Plan.

## Full Membership and Voting Rights

The CoC community is the ultimate decision making body for the Louisville Metro CoC. The community itself holds the responsibility of deciding the needs of the community, how the process is to be administered, endorsing the projects to be submitted for funding consideration and the community priority rankings.

It is the policy of the Louisville Metro CoC that each CoC member/agency:

- Holds one vote,
- Designates a delegate and an alternate who are authorized to cast the agency vote when such action is needed,
- Is allowed to send more than these designated people to the community meetings but when a vote is taken, only the delegate or alternate is eligible to cast a vote,
- Is required to send a representative to at least 10 out of the last 12 community meetings prior to the vote in order to be eligible to cast a vote,
  - If an agency is unable to send either the delegate or alternate, that agency may send a representative to the meeting and receive credit for attendance. However, only a delegate or alternate has the right to vote on any issue.
  - If an agency has not been a member of the CoC for a full twelve months at the time of a vote, the number of absences allowed that agency will be proportional to the number of months they have been a member of the CoC.
- Is not eligible to vote on any issue regarding a project where that agency/member has a financial interest or serves the project's agency in any capacity, and
- Has the right to submit new and renewal proposals within the guidelines and specifications of the U.S. Dept. of Housing and Urban Development. (The full membership then has the right and responsibility to decide which projects are to be included in the CoC application.)

The CoC community voting procedure for funding decisions and representation on the Advisory Group may be carried out within a CoC meeting of the members or through other means (email, U.S. Postal Service, FAX) as long as each completed ballot is:

- Designated for an eligible voting member (agency), and
- The ballot contains the signature of the CoC delegate or alternate.

According to HUD requirements, the membership of the Louisville Metro CoC must be inclusive of the many facets of the community which it represents. The Louisville Metro CoC membership consists of over 80 entities representing:

- The Public Sector
  - State government agencies

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- Local government agencies
- Public housing agencies
- School systems and universities
- Law enforcement and corrections
- Local Workforce Investment Act boards
- Other state and national level groups and persons
- The Private Sector
  - Non-Profit organizations
  - Faith-Based organizations
  - Funders and advocacy groups
  - Businesses including banks, developers and business associations
  - Hospitals and medical representatives
  - Homeless persons

Each member entity of the continuum holds the right to cast one vote per question. This means that entities sending more than one representative to the community meetings are restricted to casting one vote per question. Individuals representing themselves also have the right to cast one vote per question. A delegate and an alternate are designated by the participating entity at the beginning of the continuum year (July).

Other responsibilities of member agencies include:

- Demonstrating the ability and willingness to work with others in the community by collaborating with agencies to provide services,
- Providing documentation of homelessness and other required information to other member agencies in order to facilitate a seamless provision of care, and (This is expected to be done with the understanding that the person seeking assistance has granted a release of the information.)
- Fully participating in the Louisville Metro Homeless Management Information System (HMIS).

## Responsibilities of the Delegate and Alternate

Each member entity of the Louisville Metro CoC full membership designates a delegate and alternate at the beginning of the continuum year (July). Their responsibilities include:

- Attendance at CoC community meetings: Each entity must have a representative present at community meetings in order to cast a ballot regarding submission of projects to HUD for funding. (See Attendance Policy) This is to insure that when questions come up for a vote, those voting are fully informed of the circumstances and ramifications of the question. It is hoped that this will lead to more informed decision making by those voting.
- Sharing information with agency directors and staff: it is the responsibility of the delegate and alternate to share all relevant CoC information with agency Director and necessary staff so the best decisions are made in terms of continuum votes and

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applications. Information shared by the CoC Coordinator at the CoC monthly meetings is critical when making important funding decisions.

- Representing the interests of their member agency while considering the needs of the community as a whole: It is important that those representing member entities represent the interests of those entities. It is the responsibility of the delegate and alternate to put aside personal preferences and goals in order to truly represent their entity. It is also important for the delegate and alternate to be able to examine the needs of the community as a whole. When casting a vote on a particular question it is sometimes necessary to cast the vote for the good of the community putting aside the immediate need of the entity the person is representing. This is a delicate balance requiring insight and good judgment.
- Determining the projects that are sent to HUD Washington for funding consideration: Delegates and alternates must consider the best interest of homeless clients and the community as a whole in selecting projects for funding and ensuring those projects are ranked by the CoC community.

## **Attendance Policy**

The Louisville Metro Continuum of Care full membership values the input and participation of a wide range of community volunteers, agencies, civic organizations, business partners and government officials. The Louisville Metro CoC full membership also believes that in order to insure the most informed and objective decisions regarding homeless issues and funding it is necessary that voting members of the CoC make every effort to attend the monthly CoC meetings. Therefore the following policy has been adopted:

- Each voting entity will designate a delegate and alternate for the purpose of voting.
- The delegate or alternate must attend 10 out of the last 12 monthly meetings prior to a vote being taken.
- In case of emergency, a third person representing the agency can be sent as a note taker to a meeting but this person does not have the right to cast a ballot unless this person is approved by the CoC coordinator in advance of the meeting.
- There will be some meetings that require mandatory attendance of the delegate or alternate.
- Delegates and alternates will be notified of mandatory meetings by the Coalition staff.
- Voting entities that fail to have a delegate, alternate or, in case of an emergency, a third person to act as a note taker at 10 of the last 12 monthly meetings prior to a vote and/or fails to have the same representing the entity at the mandatory meetings will not be able to cast a ballot regarding projects to be submitted in the U.S. Dept of Housing and Urban Development CoC application or the election and approval of CoC Board Members.

## **Louisville Metro CoC Board**

To carry out the primary purpose of the CoC Program, HUD requires representatives of relevant organizations (e.g., nonprofit organizations, victim services providers, local governments) to

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form a CoC to serve a specific geographic area. In addition, each CoC must establish a board to act on its behalf, and the CoC may appoint additional committees or workgroups to fulfill its responsibilities. (Introductory Guide to the CoC Program, HUD, July 2012)

## Governance Charter

A Governance Charter outlining the roles and responsibilities of the Louisville Metro CoC Board, Full Membership, HMIS Administrator, Collaborative Applicant, and Agency Members must be updated and signed by the CoC board prior to the submission of the Louisville Metro CoC application each year.

## Role of the Board

It is the responsibility of the Louisville Metro CoC Board to:

- Designate the entity that is to write the application for funding in response to HUD's annual CoC Program NOFA for homeless assistance resources,
- Design, operate and follow a collaborative process for developing the application and approving its submission,
- Establish priorities for funding projects in the CoC geographic area,
- Review the monitoring of all providers and determine appropriate action when benchmarks are not met,
- Provide a vision, priorities and goals for the CoC community,
- Establish a process for funding recommendations through HUD and other funding streams available in the community and insure that all discussion on review and ranking procedures are reflected in the minutes and posted for community review, and
- Oversee progress of HMIS entry, common assessment and single point of entry and make recommendations for improvement.

## Louisville Metro CoC Board Membership

The Louisville Metro CoC Board is elected from the full membership at a CoC full membership meeting or through other means (email, U.S. Postal Service, FAX) and must:

- Include at least one homeless or formerly homeless individual and
- Represent the relevant organizations and projects serving the homeless including:
  - Persons with substance use disorders,
  - Persons with HIV/AIDs,
  - Veterans,
  - The chronically homeless,
  - Families with children,
  - Unaccompanied youth,
  - The seriously mentally ill, and
  - Victims of domestic violence, dating violence, sexual assault and stalking.

The Louisville Metro CoC Board is made up of no less than 15 and no more than 21 members. It should always have an odd number of members including:

- Four representatives of the Membership Body,
  - Elected by the membership body for two year staggered terms, and

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- These representatives can serve two consecutive 2 year terms but must be off the board for one year before being elected by the membership body again.
- A homeless or formerly homeless person,
- A representative of the ESG recipient (Louisville Metro Government), and
- Community representatives and leaders.

In order to do binding business, there must be a quorum of at least 51% present for a Board vote. The Board will elect its own Chairperson, CoC Coordinator and any other roles as seen fit by the Board. Only one person per agency may serve on the Board at any given time and provider agencies represented on the Board can have a proposal on the table although they should not vote on these issues.

## Qualities and Skills of the Louisville Metro CoC Board

In order to carry out the role and function of the CoC Board, it is recommended that the following qualities and skills be represented within the Board.

- The ability to remain open and flexible to the needs of the service providers, the regulations presented by HUD, the needs and wishes of the CoC full membership and the needs of the homeless population.
- The ability to consider conflicting needs and come to resolution in the best interest of the CoC full membership.
- The ability to understand and evaluate a budget.
- The ability to understand and evaluate program outcomes in relation to the Louisville Metro community and HUD guidance.
- The ability to see and understand the “big picture”

## Code of Conduct

The Louisville Metro CoC submits a Code of Conduct annually through the CoC application which should be voted on and followed by the full membership. It includes:

- **Conflict of Interest**

All members of the CoC Board are required to sign a conflict of interest form stating their association with agencies and projects that can reasonably be expected to apply for and/or receive funding through the CoC process. All associations will be made public to the full membership prior to any process that will determine funding recipients. Members with a conflict of interest are expected to recuse themselves from discussions and decisions where there is a real or perceived conflict of interest.

- **Confidentiality**

Information contained in the ESG and CoC applications and reports is considered proprietary and confidential and may not be released to any person or party without approval of that applicant agency.

Any client information shared within the CoC is also confidential and should not be released to any other entity without a release of information signed by the client.

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## **Louisville Metro CoC Committees**

The Louisville Metro CoC Full Membership may see fit to create new committees to conduct the work of the Louisville Metro CoC at any time. At this time, the following CoC Committees have been established:

### HMIS

The HMIS Committee meets quarterly before the full membership meeting to discuss changes and issues with the Louisville Metro CoC HMIS system. The committee is open to all but is made up primarily of those who enter HMIS data at each of the homeless service agencies.

### Discharge Planning/Homeless Prevention Pilot

The Discharge Planning Committee meets quarterly to discuss ways to improve the discharge planning from state and local institutions including prisons, jails, mental hospitals and institutions, hospitals and foster care. The committee is open to all and includes representatives of these institutions as well as staff who participate in the homeless prevention program which serves those exiting state institutions.

### Housing First

The Housing First Committee meets quarterly to discuss the progress of Housing First programs in Louisville Metro. The committee is made up of persons involved in the SAHMSA Housing First Projects, SHP Housing First Projects and Rx: Housing Project (100K Homes).

### Consumer Participation

The Client Engagement Committee meets as needed to seek input from clients of homeless services. The committee is open to anyone but includes four volunteers representing ESG, SHP and two persons with no conflict of interest. Information is gathered from forums held at various shelters in the community over the course of the year and annually at the Project Connect/Stand Down where all people who are experiencing homelessness are invited to receive services at a one stop shop offered over the course of a full day.

### Common Assessment/ Mainstream Services

The Common Assessment/Mainstream Services Committee meets as needed to create and oversee the Louisville Metro CoC Common Assessment. They also insure that the common assessment includes a process to assess and refer each CoC client for all appropriate mainstream services. To date, the committee has created the assessment tool and helped to create a funding plan for the assessment and staffing. The next step is to develop the details of how it will be implemented at each of Louisville's emergency shelters and then to monitor implementation and provide comment.

### Coalition Supporting Young Adults

The Coalition Supporting Young Adults was created in response to the rising number of young adults staying in Louisville adult shelters in 2012 (555). This committee is made up of agencies that serve 16-24 year olds in crisis without support throughout the city. Their role is to make recommendations to lower the number of young adults in crisis and prevent the cycle of homelessness in the next generation.

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## **Louisville Metro CoC Collaborative Applicant**

Because the Louisville Metro CoC Board is made up of volunteers, they will need to select a Collaborative Applicant to submit the CoC application to HUD each year.

### **Role of the Collaborative Applicant**

It is the responsibility of the Louisville Metro CoC full membership to designate a collaborative applicant best able to insure a successful submission of the CoC proposal. It is the role of the Collaborative Applicant to:

- Complete the electronic application in response to HUD's annual CoC Program NOFA for homeless assistance resources,
- Present a timeline and deadlines to all project applicants for individual project plans,
- Collect all data and submit a renewal chart to HUD of all projects planning to reapply,
- Create the housing inventory chart,
- Create the grant inventory worksheet,
- Establish priorities for funding projects in the CoC geographic area,
- Create process for ranking applications with full participation of CoC full membership,
- Oversee committees and volunteers,
- Create agendas for CoC full membership and Board meetings in collaboration with the Board Chair,
- Notify others that they can join the CoC full membership annually, and
- Monitor who is eligible to vote on the full membership.

## **The Louisville Blueprint to End Homelessness**

### **History**

In 2000, members of the Coalition for the Homeless began work on a plan entitled "Reducing and Ending Homelessness: A Blueprint for the Future." This report was released in 2002 and outlined ten goals with action steps for eliminating homelessness in Jefferson County, Kentucky. In 2007, the Coalition for the Homeless joined forces with Louisville Metro's Office on Homelessness to update the plan. It was updated again in 2012 to include the newly established federal policies in the federal "Opening Doors" Plan.

### **Louisville Metro CoC Blueprint Priorities**

- Increase Leadership, Collaboration and Civic Engagement
- Increase Access to Stable and Affordable Housing
- Increase Economic Security
- Increase Health and Stability
- Retool Crisis Response

The full plan with specific goals is available at The Coalition for the Homeless website – [www.louhomeless.org](http://www.louhomeless.org).

### **Update Process**

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Each year, The Coalition for the Homeless documents progress made on each of the “Blueprint” goals and presents to the Louisville Metro CoC full membership as an annual report. These numbers are also included in the CoC application for funding.

## **Annual Point in Time / Quarterly Shelter Point in Time/Census**

The Louisville CoC conducts its annual point in time on the last Wednesday of January. This point in time count includes both a shelter count and a street count. The Louisville CoC also conducts a quarterly point in time on the last Wednesday of the first month of each quarter. (January, April, July and October). The April, July and October quarterly point in time counts are limited to those using the shelter system. During the quarterly point in time counts, shelter bed and unit counts are also conducted. HMIS data is used to determine information needed to account for sub populations. This information is extrapolated to the persons staying on the streets that night.

### **Street Count**

As required by the U.S. Department of Housing and Urban Development, The Coalition for the Homeless conducts a one-day, point-in-time count of homeless persons the last week of January each year. The Coalition solicits local volunteers who go out in groups to count homeless persons at day shelters and on the streets. Meanwhile, night shelters complete the surveys at their facilities. The volunteers are asked to survey a minimum of one-third of those counted using a survey created by Kentucky Housing Corporation. This survey is used statewide on the same day. The Coalition collects personal items to also be distributed to homeless persons during the survey to increase the willingness of people to participate and provide items needed for safety and security when sleeping on the streets in the dead of winter.

Once the one-day survey is completed, The Coalition for the Homeless uses the survey data along with HMIS data to extrapolate the survey answers of persons who were counted but not surveyed to get a better understanding of those who are homeless on a given night in Louisville Metro.

### **Homeless Census**

In addition to the one-day survey, The Coalition for the Homeless collects information on all persons served in the Louisville Metro homeless system in a given year. This information is gathered from the HMIS data provided by agencies and through the new single point of entry.

Each June, the Point-In-Time and Annual Homeless Census information is released to the public and media. The Coalition for the Homeless also studies this information to determine what changes could improve the CoC.

## **Homeless Management Information System (HMIS) and Single Point of Entry**

### **HMIS Roles and Requirements**

Uniform, longitudinal data is necessary to understand the extent and scope of homelessness in individual communities and across the country. It provides the community with a tool to collect and analyze ongoing data on people using homeless service programs. Accurately calculating



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the size and needs of the homeless population as well as the outcomes of specific interventions provides a means for tracking service and demand for homeless programs and understanding where improvements need to be made.

The Louisville Metro CoC full membership chose The Coalition for the Homeless to serve as the administrator of the U.S. Department of Housing and Urban Development (HUD) mandated HMIS for Louisville Metro. The Louisville CoC is part of a state-wide HMIS system, called Kentucky HMIS. KYHMIS is managed by the Kentucky Housing Corporation in Frankfort, KY and uses Servicepoint software.

The Coalition for the Homeless manages the Louisville Metro CoC HMIS through a full-time HMIS Coordinator. This staff salary and the expenses of the HMIS system, including Servicepoint software licenses for Coalition agency members, are paid for through a HUD CoC HMIS grant and match funds raised locally. The HMIS Coordinator reviews the licenses each year to determine which have been unused and recaptures those licenses. Each CoC agency member can purchase one license per program at half price and all others must pay full price. Agencies are charged for these additional licenses annually. Small homeless agencies with no federal funding can receive one free license per year.

The CoC HMIS administrator is responsible for:

1. Maintaining compliance with the latest HMIS Data and Technical standards published by HUD,
2. Accurately calculating the size and needs of the homeless population,
3. Tracking service and demand for homeless programs and understanding where improvements need to be made,
4. Overseeing the reporting process for the CoC,
5. Training agencies on accurate HMIS entry,
6. Reviewing the licenses of member agencies each year to determine which have been unused and recapture as needed, and
7. Coordinating a single point of entry to insure new clients are eligible for services and entered correctly.
8. Reporting as necessary to various entities such as Louisville Metro Government, the Kentucky Housing Corporation, the U.S. Department of Housing and Urban Development, etc.

Kentucky Housing Corporation assigns a security officer to oversee all security issues related to the Kentucky HMIS. Anyone with concerns should immediately contact the security officer. Also, the HMIS Coordinator performs an annual check on the Louisville Metro HMIS to insure that all security standards are being met.

### Single Point of Entry

The Louisville Metro CoC requires universal data elements be collected on each new CoC client. This information is collected by The Coalition for the Homeless through the single point of entry. This information can be collected by phone or in person at the single point of entry

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office. The client is asked to sign a release of information and these data elements are made available to all HMIS users. It is also the responsibility of the CoC single point of entry staff to:

- Record numbers of those they serve daily,
- Evaluate eligibility for homeless assistance programs,
- Divert anyone who is appropriate to homeless prevention services versus shelter,
- Reserve a bed in a local shelter for anyone who qualifies,
- Make a referral for shelter overflow if no beds are available, and
- Create a scan card for all newly entered clients that they can use for entry to future homeless services.

Once a client arrives for services at a homeless service agency after the single point of entry assessment, HMIS allows the agency to see if the client was already entered for prior services so they do not duplicate entry. The service provider is responsible for updated HMIS when new services are provided to a client, when their income or housing changes, once a year for an annual update and at program exit. A privacy notice is given to clients and posted at shelters informing them that their data will be entered in HMIS. It also specifies the data protection standards that are to be followed. If a client arrives at a shelter after hours and has not presented at the single point of entry, they should not be denied services if a bed is available. Instead, they can complete a hard copy form for entry, fax it to The Coalition for the Homeless the following day for HMIS entry and refer the client when appropriate to get a scan card.

## HMIS Technical Assistance and Training

The Coalition maintains an HMIS help desk through Outlook. When a request for assistance is received, it is automatically logged in the system. When the concern is addressed, this is logged by The Coalition for the Homeless staff for future tracking of technical assistance. Requests can be as little as forgetting a password or as great as hiring a new staff member who needs to be trained on the system.

The Coalition provides individualized, on-site technical support to member agencies as needed.

The HMIS Coordinator discusses HMIS changes with agency members at Louisville Metro CoC full membership meetings.

## HMIS Quality Monitoring

During the time of the quarterly point in time counts two HMIS data quality processes are conducted.

- Agencies are expected to submit a manual count of the persons staying in each homeless program along with a manual count of the beds and units available on that particular night.
- A one night point in time report is also run from HMIS by the agency and compared to the manual count. Any discrepancies in the numbers should be resolved before the reports are submitted to The Coalition for the Homeless.

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- The combined information of number of available beds/units and the manual count of persons staying in the shelter is compared to establish a project's capacity rating for that night.

## **Minimum Data Sets and Data Quality**

The Coalition for the Homeless manages the HMIS database in Louisville Metro and works with the CoC Board to establish minimum data sets the data quality (DQ) standards. Data Quality is checked once each quarter to coincide with the Point in Time dates.

## **Data quality standards**

There are two parts to Louisville data quality standards: data quality and data accuracy. For data quality, the program must have the minimum data sets entered for each client client at exit. For the data accuracy standard, the client and household counts in HMIS must equal the hand counts submitted by the agency. While the data quality is inspected quarterly, it is the expectation of the Louisville Metro CoC that each agency will update all clients including program exits within a week.

The Coalition for the Homeless will publicize Data Quality results during the monthly CoC full membership meetings and share this information with agency funders.

## **Housing Inventory Chart**

It is the policy of the Louisville Metro CoC that the following guidelines and requirements be met in order for agencies and programs serving the homeless in the Louisville Metro community to be included in the U.S. Department of Housing and Urban Development's Housing Inventory Chart. This chart is meant to include all facilities and programs that provide sleeping accommodations to the homeless residing in the Louisville Metro CoC community regardless of whether HUD funding is received or used.

This chart is updated on a yearly basis at the time of the official HUD required Point in Time homeless count. The U.S. Department of Housing and Urban Development requires that local continuums conduct a point in time count bi-annually during the last week of January. The Louisville Metro CoC has elected to conduct the local point in time homeless count on a yearly basis. The annual count takes place on the last Wednesday of January and includes both those staying in shelter and those staying on the street.

Because HUD uses this chart to determine the capacity to serve the homeless, it is extremely important that facilities be identified as:

- serving only persons who meet the HUD definition of homeless or
- if only a portion of the facility's accommodations are provided to persons meeting the HUD homeless definition, only those accommodations actually providing service to persons meeting the HUD homeless definition be included in the Housing Inventory Chart.

The U.S. Department of Housing and Urban Development definition for homeless persons is as follows.

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A person or family is considered to be homeless ONLY when he/she meets one or more of the categories below.

Category 1	Literally Homeless	<p>1. Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none"> <li>a. Has a primary nighttime residence that is a public or private place not meant for human habitation;</li> <li>b. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs: OR</li> <li>c. Is exiting an institution where (s)he has resided for 90 days or less AND who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.</li> </ul>
Category 2	Imminent Risk of Homelessness	<p>2. Individual or family who will imminently lose their primary nighttime residence, provided that:</p> <ul style="list-style-type: none"> <li>a. Residence will be lost within 14 days of the date of application for homeless assistance;</li> <li>b. No subsequent residence has been identified; AND</li> <li>c. The individual or family lacks the resources or support networks needed to obtain other permanent housing.</li> </ul>
Category 3	<p>Homeless under other Federal statutes</p> <p>The Louisville Metro CoC has chosen NOT to recognize this category at this time.</p>	<p>3. Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</p> <ul style="list-style-type: none"> <li>a. Are defined as homeless under the other listed federal statutes;</li> <li>b. Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;</li> <li>c. Have experienced persistent instability as</li> </ul>

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		<p>measured by two moves or more during the preceding 60 days; AND</p> <p>d. Can be expected to continue in such status for an extended period of time due to special needs or barriers.</p>
Category 4	Fleeing/Attempting to Flee Domestic Violence	<p>4. Any individual or family who:</p> <p>a. Is fleeing, or is attempting to flee, domestic violence;</p> <p>b. Has no other residence; AND</p> <p>c. Lacks the resources or support networks to obtain other permanent housing.</p>

Facilities listed on the Housing Inventory Chart are expected to maintain the following:

- A current license for serving homeless persons issued by Louisville Metro Government.
  - In the case where the Director of the Louisville Metro Department of Codes and Regulations deems it more appropriate for the facility to obtain a conditional use permit in place of the license, such a permit will meet the need for a license.
- Only those beds/units designated for persons meeting the HUD definition of homeless can be included in the Housing Inventory Chart.
- Documentation for each person being provided accommodations stating that one or more of the HUD identified conditions is true if that person is being served as someone meeting the HUD definition of homeless.
- All persons identified as a person meeting the HUD definition of homeless must be entered into the Homeless Management Information System (HMIS) through the single point of entry. Domestic violence shelters are exempt from this requirement but are required to enter comparable information into a comparable data base.
- Participation in the annual point in time homeless count administered by The Coalition for the Homeless during the last week of January. Those persons included in the annual count must meet the HUD definition for being homeless.
- Quarterly participation in the Louisville CoC's shelter utilization count on the last Wednesday of the first month of each quarter. Those persons included in the quarterly count must meet the HUD definition for being homeless.

### Application Process

The Louisville Metro CoC Process is a year round process that includes quarterly shelter point in time counts, HMIS data quality monitoring and an expectation that CoC members attend 10 of 12 monthly CoC full membership meetings. The full membership body holds the responsibility of making final funding and policy decisions but also has the right to delegate any of its authority and responsibility to the Louisville Metro CoC Board, Collaborative Applicant, HMIS Administrator, Common Assessment Administrator or others when needed.

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## Grant Inventory Worksheet

The Grant Inventory Worksheet is a tool used by HUD and the CoC to determine the amount of CoC funding needed to support the projects currently receiving funding through the CoC process. The Coalition for the Homeless, acting as the Collaborative Applicant, works with the applicant agencies to accurately reflect the grant funding provided by HUD during the most recent renewal or as amended. When the CoC, HUD and the agencies/projects agree that the information is correct, the CoC submits the worksheet per HUD's instruction.

## Louisville Metro CoC Policy for Funding Consideration

HUD provides funding for homeless assistance programs authorized under the Stewart B. McKinney Act through the CoC competition. Annually, HUD releases a Notice of Funding Availability (NOFA) which details the requirements for the application. One requirement is that there be one Collaborative Applicant for all projects in the CoC. The Collaborative Applicant is responsible for submitting a comprehensive application that includes all projects seeking funding within the CoC geographic area.

To be eligible for funding consideration, applicants must meet the following criteria:

- Applicants must meet all HUD eligibility criteria.
- Applicants must meet the application deadlines set by the Louisville Metro CoC.
- Applicants must be a 501(c) 3, 501 (c) 4, PHA, or local government.
- Applicants must possess legal authority to apply for and receive funds and carry out activities authorized by the CoC Program.
- Applicants must provide the supplementary match funds required by HUD.
- Applicants must comply with HUD's standards for participation in a local Homeless Management Information System (HMIS) and the collection and reporting of client-level information.
- Applicants must participate fully in the CoC process to coordinate and integrate with other mainstream programs for which homeless populations may be eligible.
- Applicants must assume ultimate responsibility for preparing an accurate and complete application for submission to HUD that meets all federal rules and regulations.
- Applicants must be in compliance with all local, state, and federal civil rights laws and Executive Orders as well as all standards outlined by the U.S. Department of Housing and Urban Development.
- Applicants must agree to comply with federal Section 3 and Energy Star Compliance requirements.
- Applicants must insure that all kids under 18 are allowed to stay in shelter with their other family members.
- Applicants must insure that all children are enrolled in school.

In order to meet the local needs in serving the homeless population, the following guidelines have been established. These guidelines in no way prohibit any HUD eligible project from applying for HUD funding but rather state the community's priorities, encourage projects that

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respond to local needs and position the community to bring maximum benefit to serving our homeless population.

## New Applicants

- Housing related projects have been identified by the Louisville Metro CoC to be our highest priority and will be considered as such.
- HUD has indicated that the ideal ratio of housing to services dollars is 80/20. Projects with a ratio that is over 20% services dollars must be approved by the CoC full membership.
- New applicants must include homeless persons in the design, the implementation and/or the evaluation of programs and services.
- New nonprofit applicants must submit a copy of their current IRS form 990 and current list of volunteer board of directors.
- New applicants are required to describe how implementing the community's HMIS program will be funded.
- At the time of pre-application, new applicants are required to submit three (3) letters of support indicating the need for this project.

## Renewal Applicants

- Renewal applicants must be current with the HMIS system and have accurately entered 75% of their client records as determined by the HMIS Coordinator.
- Renewal applicants must have submitted their most current APR and review letter from HUD to the CoC Board.
- Where applicable, renewal applicants must be in compliance with Louisville Metro Licensing requirements and the community's monitoring standards.

## Beginning the process for application

The CoC Collaborative Applicant establishes the timeline for renewal and new project application in collaboration with the CoC Board. This is done in consideration of HUD timelines and the CoC's responsibility to respond to HUD requests.

At a time determined by the CoC Collaborative Applicant, the Pre-Application is made available to renewal and new projects. This Pre-Application determines what projects intend to apply for renewal funding and, if guidance is available for the opportunity for new funding, gives agencies the opportunity to indicate their intention for applying for new projects. Using the latest guidance from HUD, the CoC Collaborative Applicant reviews the pre-applications for application consistency with HUD guidelines. Ultimately, the purpose of the Pre-Application is to give the agency/project a template from which the actual application can be taken. The Pre-Application also provides the CoC Collaborative Applicant with budgetary information to begin to determine the amount of funding needed compared to the amount available.

Working with the agencies that have indicated an intention to apply for funding, the CoC Collaborative Applicant prepares the information to be reviewed by the CoC Board for further

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guidance and critical evaluation. During this process the CoC Collaborative Applicant, along with the CoC Board, work to identify opportunities for the community to:

- Take advantage of specific HUD opportunities for funding,
- Present a clear case for the need for funding in the community, and
- Maximize the community's ability to retain and obtain as much funding as HUD makes available to the community.

While it is the responsibility of the CoC Collaborative Applicant to be educated about HUD rules and procedures, it is also the responsibility of the CoC full membership and applicant agencies to read HUD guidance and apply that guidance to the individual project applications and execution of the grants if received. It is also the responsibility of the agency/project applying and receiving funds to keep the CoC Collaborative Applicant informed of any changes that take place within the project. It is particularly important to inform the CoC Collaborative Applicant of changes in:

- Population served,
- Budget,
- Project funding and spending, and
- Basic design of the project.

In order to facilitate this process throughout the funding cycle, projects are required to submit the following to the Collaborative Applicant:

- The annual performance report (APR) at the same time it is submitted to HUD. HUD requires the APR to be submitted 90 days after the end of the project's operating year.
- The letter received from local HUD that the APR was received and approved.
- The HMIS report that mirrors the project's APR report (ART 625).
- A communication if the project did not spend the amount of funding received from HUD. The amount turned back should be included in a letter from HUD. It is generally accepted practice that projects can turn back approximately 5% of their grant and not be seen lacking the capacity to spend the money allotted to them. If the project is a rental assistance project, turning back the amount or rental assistance equal to or less than the amount of funds needed to house one household unit for 12 months using the smallest bedroom size allowed in the grant is generally accepted.
- All information required to complete the quarterly point in time counts – including the manual counts, HMIS reports and program capacity reports.
- All information required to complete the Housing Inventory Chart.
- All information required to complete the Grant Inventory Worksheet.
- The cost of services for each homeless program.
- All other information required to assemble the CoC application for funding.

It is expected that projects submit information on the required forms in a timely manner or communicate the need for an extension of a deadline – prior to the deadline – to the CoC Collaborative Applicant. The CoC Collaborative Applicant will make every effort to accommodate the need for deadline extensions in the case of emergencies and other



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reasonable requests. It is paramount, however, that extensions do not adversely affect the timely submission of the community application and the timely submissions of other information required by HUD.

## **Late Submission of Pre-Applications, Applications and Other Required Information**

In accordance with the U.S. Department of Housing and Urban Development (HUD) guidelines, the Louisville Metro CoC in no way prohibits any HUD eligible project from applying for HUD funding if done within the guidelines set up by the U.S. Department of Housing and Urban Development. However, in order for the Louisville Metro CoC to submit the best overall application for funding, certain guidelines and deadlines have been established.

It is the policy of the Louisville Metro CoC that when Pre-Applications are submitted after the stated CoC due date, whether for new or renewal projects, the following procedure will be followed:

- The pre-application will be reviewed using the process used for all other pre-application submissions. Since the primary purpose of the community's review process is to assist projects in submitting the best possible grant application, it is in the best interest of the entire community that all grants associated with the Louisville Metro CoC be reviewed for accuracy and completeness and be given the opportunity to improve the grant pre-application.
- The Louisville Metro CoC community holds the responsibility of approving projects to be included in the HUD application. As part of this process, voting members are given information regarding each renewal project's success in meeting both HUD and community goals. Information regarding new projects will include the agency's success in meeting HUD and community expectations in the past. The timeliness of a project's pre-application is included in this information.
- The Louisville Metro CoC full membership has several options open to it regarding the late submission of a pre-application. It can vote to:
  - Allow the project to proceed through the process with a warning but essentially unencumbered.
  - Allow the project to proceed through the process with the understanding that during the next funding application cycle another agency will be given the opportunity, within HUD guidelines, to assume the terms of the grant. This implies that the basic project will remain in the community under the new management of another agency.
  - Allow the project to proceed through the process with the understanding that during the next funding application cycle the CoC will invoke the HUD Reallocation process where another agency will be given the opportunity, within HUD guidelines, to submit a new permanent housing project within the budget constraints of the original project. This implies the current project will be discontinued at the time of HUD approval of the reallocation.
  - The CoC invokes the HUD Reallocation process where another agency is given the opportunity, within HUD guidelines, to submit a new permanent housing

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project within the budget constraints of the original project. This implies the current project will be discontinued at the time of HUD approval of the reallocation.

- The CoC invokes the HUD Reallocation process using the opportunity to fund a new HMIS project.
- Defund the project during the current application process understanding that the funds normally allocated to this project are lost to the community.

It is the policy of the Louisville Metro CoC that when a new or renewal project fails to submit the Application within the CoC's stated deadline the following procedure will be followed:

- The Louisville Metro CoC Collaborative Applicant must first decide if there is time before the official HUD deadline to work with the application without putting all other projects in jeopardy of a late submission to HUD. This decision is made with consultation with the CoC Board.
- If it is decided that the project's application should be included in the submission, it will be the responsibility of the CoC Board to make a recommendation to the Louisville Metro CoC full membership for further action. The Louisville Metro CoC full membership will make the final decision regarding the matter.
- If it is decided that there is not sufficient time before the official HUD deadline, the CoC Collaborative Applicant will attempt to identify a reasonable way for the funds to be preserved within the CoC community. If such a way exists, the CoC Collaborative Applicant will work with the CoC Board to pursue such an option. If such a way does not exist, the funds are not applied for in the overall CoC application and the funds are lost to the community.

## **Identifying Community Need for New and Expanded Services and Reallocation of Existing Funds for Maximum Use**

It is the responsibility of the CoC full membership, the CoC Board and the CoC Collaborative Applicant to constantly be looking for:

- The need for new or expanded services to the community,
- The need to discontinue services when they are no longer needed,
- The need to adjust services when realignment is necessary in order to best serve the homeless population of the Louisville Metro CoC,
- The Opportunity within the community and offered by HUD to improve services and pay for services once unable to be funded, and
- Creative ways to maximize the funding dollars available through HUD and other funding sources.

Meeting this responsibility is done in a variety of formal and informal ways, including:

- Conducting the yearly Homeless Point in Time Count that includes both a street count and a shelter count,
- Conducting the annual Homeless Census Count,

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- Conducting the quarterly Homeless Point in Time Count that consists of only the shelter count,
- Comparing these counts to the Housing Inventory Chart to identify gaps in services,
- Listening to CoC members and their experiences of project capacity or lack thereof,
- Examining individual project outcomes in relation to CoC and overall HUD goals, and
- Examining overall CoC outcomes in relation to CoC and overall HUD goals.
- Using evidenced-based measurement tools created by HUD and HUD TA providers.

### Ranking Projects

Each year, the U.S. Department of Housing and Urban Development creates priorities for funding of CoC projects. However, they first fund all eligible projects in tier one (above the renewal amount from last year) before funding those projects in tier two. Therefore, those projects in tier one are more likely to receive funding.

In order to determine the ranking of projects into these two tiers, the Louisville Metro CoC Board establishes priorities for ranking based on the CoC benchmarks already established by the CoC (see above). Presently, the established priorities are:

1. Permanent Supported Housing
2. Meeting the appropriate permanent housing goal (77% of PSH staying in PH 6+mo. - this is now 80% / 65% of TH leaving for PH)
3. Reasonable capacity rates and the lesser of: no more than 5% of funds returned or no more than what it would take to house one household for one year.

Any project that has not met the CoC goals listed above in priority two or the capacity rates listed above in priority three is asked to present their project and address these shortfalls at a CoC meeting. Then each CoC representative is asked to vote on the following to establish the ranking:

- A. First, you are asked to indicate any project you feel should not be included in the application submission.
- B. Second, you are asked to indicate how you would rank any projects that did not meet their HUD housing goal or that would be ranked in tier two.

### **Common Assessment**

In order to help homeless persons move more quickly and consistently through the Louisville Metro CoC, the CoC has created a common assessment to be conducted with each client within 14 days of shelter entry. This assessment is led by staff of a common assessment team.

### Common Assessment Team Roles

It is also the responsibility of the CoC common assessment staff to:

- Record numbers of those they assess,
- Seek to assess each shelter client within 14 days of shelter entry,
- Evaluate eligibility for homeless assistance programs,
- Prioritize who receives transitional housing,

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- Prioritize who receives rapid rehousing,
- Make referrals as appropriate to permanent supportive housing,
- Make referrals for mainstream services, and
- Insure that the needs of special needs clients are addressed and referrals are made for special services.
- Provide assessment information to referral agency and post in HMIS.

## **Prioritization of Those Waiting to be Housed Through Common Assessment Referrals**

For CoC SHP openings dedicated to the chronically homeless, the following priorities are used:

- 1) First Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.
- 2) Second Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness.
- 3) Third Priority—Chronically Homeless Individuals and Families with the Most Severe Service Needs.
- 4) Fourth Priority—All Other Chronically Homeless Individuals and Families.

For CoC SHP openings not dedicated to the chronically homeless, the following priorities are used:

- 1) First Priority—Homeless Individuals and Families with a Disability with the Most Severe Service Needs.
- 2) Second Priority—Homeless Individuals and Families with a Disability with a Long Period of Continuous or Episodic Homelessness.
- 3) Third Priority—Homeless Individuals and Families with Disability Coming from Places Not Meant for Human Habitation, Safe Havens, or Emergency Shelters.
- 4) Fourth Priority—Homeless Individuals and Families with a Disability Coming from Transitional Housing.

These priorities can only be met when the size and design of the facility opening also fits the need of the next person identified using these priorities. If not, the common assessment team will serve the next person on the list. These priorities will be used in combination with special set asides made available as part of the federal goals outlined in Opening Doors. Therefore, units set aside for veterans will only be used for that population, however, the veterans will still be referred in the order listed above.

## **Monitoring Standards**

The Coalition for the Homeless introduced the concept of setting standards for local shelter providers in 1990. While other communities had established standards in the areas of health and safety, Louisville created an additional set of standards in the area of programming. In 2011, Louisville Metro creating licensing for shelters so The Coalition now monitors a list of standards created by the CoC separate from the licensing standards.

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## Standard Process

These unmandated standards are coupled with a city zoning and inspection process that focuses on building safety and health standards. These standards can provide the client, the shelter and the larger community with the assurance that the client is being given the best possible opportunity to move back into a stable living environment and achieve self-sufficiency outside the shelter system.

Monitoring outcomes and standards are monitored through HMIS reports, items submitted to the Coalition electronically and on-site visits as needed.

## Blueprint University Training

The Coalition staff identifies training needs of member agencies each year and conducts a minimum of six trainings for front-line shelter staff in these areas. These free trainings are provided to member agencies as part of their membership fee. Other community members are welcome to attend as space permits.

Past Blueprint University topics have included: chemical dependency, child sexual abuse, client interaction and confidentiality, crisis intervention, communicable diseases, cultural diversity, domestic violence, food service, mental health issues, and universal precautions. Some topics may differ yearly depending on the needs of the homeless service community. The trainings are conducted by local experts.