

Before Starting the CoC Application

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

The Collaborative Applicant is responsible for:

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

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

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

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

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

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

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

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

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

1A. Continuum of Care (CoC) Identification

Instructions:

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

1A-1. CoC Name and Number: NY-604 - Yonkers, Mount Vernon/Westchester County CoC

1A-2. Collaborative Applicant Name: Westchester County Dept. of Community Mental Health

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Westchester County Dept. of Social Services

1B. Continuum of Care (CoC) Engagement

Instructions:

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

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

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board	Sits on CoC Board
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
Law Enforcement	Yes	No	No
Local Jail(s)	No	No	No
Hospital(s)	No	No	No
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	Yes
Non-CoC Funded Youth Homeless Organizations	No	No	No
School Administrators/Homeless Liaisons	Yes	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	No	No
Street Outreach Team(s)	Yes	Yes	Yes
Youth advocates	Yes	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	No	No
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Veterans Services representative	Yes	Yes	Yes
Eviction prevention services representative	Yes	Yes	Yes
Health services representative	Yes	Yes	Yes

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

Each year, our CoC hosts an Open Forum Meeting on Priorities to solicit public opinion on the needs of the community. This year, we heard from advocates for various populations, such as people with physical disabilities, sex offenders, pregnant women, people with mental health issues, & veterans & a need for more landlords. Our Annual Meeting is open to the public, & we hold monthly Board meetings. From the list above, we heard from the head of our county Veteran's Services Agency, a representative from DCMH who has worked extensively with criminal justice-involved clients to present on the needs of homeless sex offenders, & one of our victims' service providers (Hope's Door) who wanted to thank the CoC for support & assistance last year in securing a new RRH project based on our CoC DV task force developed to address issues raised at last year's Meeting on Priorities. We continue to have a school liaison, a health dept rep. & formerly homeless persons (youth and veteran) on the Board.

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

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 20, 2016.	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 20, 2016.
Children's Village	No	No	Yes
Westhab	No	Yes	Yes
Hope Community Services	No	Yes	Yes
BOCES	No	Yes	Yes
Westchester County DSS - Safe Harbor program	No	Yes	Yes

1B-1c. List the victim service providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area.

Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 30, 2016	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 30, 2016.
WestCOP Victim's Assistance	No	No
Hope's Door	Yes	Yes
My Sister's Place	No	No
Westchester County DSS	Yes	Yes

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

We hold an annual public homeless needs assessment forum. Anyone can speak and present written testimony to our board. Notice of the forum is emailed to agencies doing business with DSS, DCMH & our largest cities. We ask people to forward the email widely. These forums have led to new CoC partners serving vets, LGBTQ youth, DV survivors, people with physical disabilities, etc. When we can add projects, our CoC board sets priorities based on our needs assessment & members' diverse experience. We then widely email a notice that agencies can apply to operate these types of projects by submitting a form outlining their plan & qualifications. Our Board votes to choose the sub-recipients. We proposed new partners in 4 of the last 6 years. This year we prioritized PHB rapid rehousing for 3 groups: families/singles, youth & DV survivors. Our RFP invited preapps for each group and our Board voted to select the subrecipients.

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

1C. Continuum of Care (CoC) Coordination

Instructions:

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

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

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Not Applicable
Head Start Program	No
Housing and service programs funded through Federal, State and local government resources.	Yes

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

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

	Number
Number of Con Plan jurisdictions with whom the CoC geography overlaps	5
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	4
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	5
How many of the Con Plan jurisdictions are also ESG recipients?	2
How many ESG recipients did the CoC participate with to make ESG funding decisions?	2
How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	1

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

The CoC collaborated with 4 out of 5 Con Plan jurisdictions at monthly meetings. A Yonkers Planning Dept. staff is on our CoC Board & spends 10 hrs/week on CoC meetings, emails & calls. A Mt Vernon Planning Dept. official is on our CoC Board, chairs a local CoC group 2 hours/month & works full-time running CoC housing projects. White Plains chose its major shelter CEO to be its rep on our CoC Board. A White Plains Planning Dept. Deputy Commissioner also attends CoC meetings. New Rochelle chose the CEO of its major homeless housing group (HOPE) to be its rep on our Board. HOPE reports monthly to the City Planning Dept. The CoC meets at least 5 hours per month with these Con Plan jurisdictions.

All 4 City reps use CoC input and information to help create their local Con Plans sections on homelessness & housing using CoC PIT & HIC data, details on CoC activities & local services and identifying unmet needs. Yonkers consulted with the CoC and adopted CoC priorities in their 2016 Con Plan.

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

We have 2 ESG recipients: City of Yonkers and New York Statewide (NYS OTDA).

A CoC Board Co-Chair led the development of the current operational and evaluation plans used by Yonkers ESG to make funding decisions.

A City of Yonkers ESG representative sits on Board of the Westchester CoC, and collaborates to develop local priorities for homeless services. The CoC and Yonkers ESG have developed performance standards and monitoring tools for ESG projects. The CoC has conducted monitoring visits to Yonkers ESG annually since 2015; the last CoC monitoring visit to a Yonkers ESG project occurred on 09/02/16.

Our CoC has identified local priority needs for NYS OTDA, such as HPRP-style intermediate-term rent subsidies & services. Last year OTDA funded multiple projects addressing the needs we identified.

Our CoC provides these ESG recipients with PIT count data for the development and update to the Consolidated Plan, and HMIS database access and data sharing.

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

**security of participants and how client choice is upheld.
(limit 1000 characters)**

Safety & security are paramount whether they present at a homeless assistance provider or victim service provider. Providers refer to DSS, where the client is offered shelter & a Domestic Violence Liaison (DVL). The DVL refers to their choice of locally/ESG-funded DV shelters, & DOJ-& state-funded services in & out of county. If there is no availability or if they choose not to go, the DVL does a safety assessment & they are placed in a DSS shelter. No data is scanned & DV disclosure is not shared unless the customer signs a release of info. Interviews are conducted in a private office using the DVL assessment. All paperwork is kept in a locked, restricted-access file cabinet. If there is an order of protection, a hard copy is provided to the shelter. If the client chooses, the DVL will follow up with them through placement. A confidential hotline is also available 24/7 where other ancillary services such as Victims Assistance, survivor support, &/or legal services are made available.

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 7/1/15 to 6/30/16 who were homeless at entry	PHA has General or Limited Homeless Preference
The Municipal Housing Authority for the City of Yonkers	5.11%	No
Westchester County Housing Choice Voucher Program	0.00%	No
City of New Rochelle Housing Authority	9.64%	No
White Plains Housing Authority	3.57%	No
Town of Mamaroneck Housing Authority	5.71%	No

**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)**

Our CoC is working to target mainstream resources to homeless persons. A CoC-Board co-chair has helped New Rochelle, beginning April 2016, use HOME funds for rental assistance for 23 homeless people found on the streets or homeless shelters. NYS is using Medicaid Redesign Team funding to provide rent subsidies & services for high-cost Medicaid-eligible homeless people. We have 40 NYS-funded units: 17 for persons with mental illness+23 for substance users. NYS HHAP capital funding has created over 100 units of homeless housing in our CoC.

Westchester County and NYS locally fund an extensive network of emergency shelters with over 950 beds for homeless persons. 1,342 formerly homeless households receive ongoing county- and state-funded rent subsidies called Shelter Supplements. Over 600 persons (200 families) reside in locally-funded TH and 150+ formerly homeless reside in locally-funded PH. We have 262 HUD-VASH, 7 HCHV, and over 100 beds of GPD transitional housing for veterans.

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

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
Other:(limit 1000 characters)	
Westchester helps ensure that communities do not criminalize homelessness by offering unrestricted access to low-demand overnight emergency shelter in each of 4 regions of our county. Making it possible for police to offer access to shelter reduces the frequency of homeless people being arrested for trespass. The Westchester County Department of Community Mental Health (DCMH) also has 2 specially trained outreach workers who "ride-along" with police officers. This very successful program has helped police engage mentally ill people on the streets and link them to appropriate services. DCMH has a Transitional Management program for individuals being released from prison to help ensure shelter as needed. DCMH also trains police officers to respond appropriately to mentally ill people including those found homeless on the streets. We have city-sponsored homeless outreach programs in two major cities: New Rochelle and Mount Vernon. We also have an outreach van targeting homeless youth.	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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

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

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

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

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

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

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

1E. Centralized or Coordinated Assessment (Coordinated Entry)

Instructions:

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

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

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

Our Coordinated Entry process will begin housing participants in early 2017. We will use a no-wrong door approach with multiple ways to access our Coordinated Entry including DSS offices, outreach teams, shelters, service providers and a 24-hour number. We have 7 outreach teams that cover our entire CoC and target different populations. We have 4 low-demand overnight shelters to reach those reluctant to access services. We offer direct access to housing without shelter entry. We will use VI-SPDAT system-wide to assess severity of service needs and have trained providers, including outreach & emergency shelter staff, to administer VI-SPDAT and enter results into HMIS. Our HMIS will generate separate prioritized by-name lists for singles, families and youth based on duration of homelessness & severity of service needs. Coordinated Entry staff will make rapid housing referrals within HMIS. Teams review by-name lists of unsheltered, vulnerable & veteran homeless biweekly.

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

the screen, and then select the applicable checkboxes.

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

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

Instructions

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

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

How many renewal project applications were submitted in the FY 2016 CoC Program Competition?	28
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 2016 CoC Program Competition?	26
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2016 CoC Competition?	100.00%

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

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

Need for specialized population services:

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

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

Projects serving populations that have severe needs, are hard to serve, or are especially vulnerable were given extra points in the ranking criteria used by the Westchester County CoC.

This includes projects with target populations including participants with current or past substance use; Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status; persons with HIV; persons with significant health or behavioral health challenges or functional impairments; youth; victims of domestic violence; families with children; youth; persons experiencing chronic homelessness; and veterans.

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

Local recipients were informed of the internal competition in writing on July 22, 2016. Copies of these letters are attached.

The local ranking criteria, local scores for each project based on that criteria, and resulting ranking order for Continuum of Care projects were approved by the entire CoC Board, including all stakeholders, on 07/12/16 and 07/14/16. Minutes from these Board meetings are attached.

The local ranking criteria, local scores for each project based on that criteria, and resulting ranking order for Continuum of Care projects was posted to the internet on July 20, 2016. A screenshot of the web page is attached.

1F-4. On what date did the CoC and 09/12/2016

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

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

1F-5a. If the CoC rejected project application(s), on what date did the CoC and Collaborative Applicant notify those project applicants that their project application was rejected? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.) 07/22/2016

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

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

Instructions

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

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

The CoC conducts annual site visits to each homeless provider to audit CoC and ESG projects. Visits include random chart review, client interview, HMIS audit & fiscal audit. Participant eligibility following HUD regulations is reviewed carefully to ensure compliance, as well as bed utilization vs. HUD targets. Results are sent to the provider with a request for any needed corrective actions. When serious deficiencies are detected, TA is provided and/or another site visit is conducted that may lead to disciplinary action. Audit results are used as part of the project ranking formula for the NOFA each year.

The CoC also reviews project performance by gathering data from submitted APRs and HMIS on length of time homeless, housing stability (or exit to Permanent Housing), increases in income after enrollment, and amount of funds recaptured by HUD.

Recipient performance is reported annually to the CoC Board, including on-time APR submission and full & timely expenditure of awarded funds.

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

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

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

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

2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or attached MOU/MOA. pages 4-5 of attached Governance Charter and pages 2-3 of attached HMIS Agency Participation Agreement (pages 9-10 of pdf document)

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

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

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

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

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

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

Instructions

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

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

*** 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	\$260,000
ESG	\$0
CDBG	\$0
HOME	\$0
HOPWA	\$0
Federal - HUD - Total Amount	\$260,000

2B-2.2 Funding Type: Other Federal

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

2B-2.3 Funding Type: State and Local

Funding Source	Funding

City	\$0
County	\$65,000
State	\$0
State and Local - Total Amount	\$65,000

2B-2.4 Funding Type: Private

Funding Source	Funding
Individual	\$0
Organization	\$0
Private - Total Amount	\$0

2B-2.5 Funding Type: Other

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

2B-2.6 Total Budget for Operating Year	\$325,000
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2C. Homeless Management Information System (HMIS) Bed Coverage

Instructions:

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

2C-1. Enter the date the CoC submitted the 2016 HIC data in HDX, (mm/dd/yyyy): 04/05/2016

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

Project Type	Total Beds in 2016 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	1,052	90	929	96.57%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	966	0	966	100.00%
Rapid Re-Housing (RRH) beds	280	0	280	100.00%
Permanent Supportive Housing (PSH) beds	1,372	0	1,110	80.90%
Other Permanent Housing (OPH) beds	528	0	206	39.02%

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

PSH coverage in HMIS is below 85% entirely due to the local VA not including their HUD-VASH beds in HMIS. All 262 PSH beds not in HMIS are HUD-VASH. The Westchester CoC has in the past, and will continue in the future, to encourage HMIS participation by the VA. We will also ask the local VASH administrator to enter data for the VA.

Other Permanent Housing beds includes two local County funded projects with 206 beds. The CoC worked with these local providers and both projects were recently added to HMIS and now have 100% HMIS participation. OPH beds also includes several projects with 322 beds which are funded using a variety of sources such as tax credits, private funding, and NYS HHAP capital funding; none of these funding sources require HMIS participation. The Westchester CoC has in the past, and will continue in the future, to work with these providers to encourage HMIS participation. We plan to make future CoC support letters contingent on agency HMIS participation.

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

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

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

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

Instructions:

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

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

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	1%	5%
3.3 Date of birth	0%	0%
3.4 Race	0%	1%
3.5 Ethnicity	0%	0%
3.6 Gender	0%	0%
3.7 Veteran status	0%	0%
3.8 Disabling condition	0%	0%
3.9 Residence prior to project entry	2%	1%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	0%	4%
3.15 Relationship to Head of Household	0%	0%
3.16 Client Location	0%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	2%	1%

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

10

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

Bi-Monthly

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 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)

We currently do not have any RHY-funded projects.

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

Instructions:

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

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

2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2016 sheltered PIT count? Yes

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

2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2016, was an exception granted by HUD? Not Applicable

2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX: (mm/dd/yyyy) 04/05/2016

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

Instructions:

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

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

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

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

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

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

All Homeless persons sleeping in Emergency Shelters and Transitional Housing on the night of the PIT Count were interviewed by shelter staff using a survey provided by the Continuum of Care. Written instructions were provided to

interviewers to ensure consistent administration of the survey. The Continuum of Care followed up with shelters after the night of the count to ensure the maximum possible response rate.

The survey allowed shelter staff to obtain subpopulation data from the homeless interviewees including age, gender, race, ethnicity, disability, veteran status, length of current homeless episode, number of homeless episodes, Veteran status, and survivors of domestic violence.

Survey data was cross-checked with information in HMIS to reduce errors and discrepancies.

Using the same survey- which includes all HUD-required PIT Count data fields- in all homeless shelters allows consistent and complete collection of the number of and subpopulation data for all sheltered homeless.

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

Not applicable

2F-5. Did your CoC change its provider coverage in the 2016 sheltered count? Yes

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

One emergency shelter, Broadway Manor, ceased operation during 2015 and so was included in the 2015 count but was not part of the 2016 count. Similarly, the Vaughn Glanton Employment Residence transitional housing site was closed in 2015 and was therefore included in the 2015 count but was not part of the 2016 count.

Residents of both sites were rehoused in vacant beds at other shelters.

Per HUD instructions, we also excluded the VA Domiciliary at Montrose NY which was previously classified by HUD as an emergency shelter.

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

Instructions:

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

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

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

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

The survey instrument and instructions provided by the Continuum of Care to staff at all Emergency Shelters and Transitional Housing was revised for 2016 to reduce errors and improve data quality.

Changes made include revising how to code the race of multi-racial persons, and revised instructions on how to determine length of current homeless episode and number of homeless episodes to conform with HUD's new definition of chronic homelessness.

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

Instructions:

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

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

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

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

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

2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy): 04/05/2016

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

Instructions:

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

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

Night of the count - complete census:	<input 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 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 this unsheltered PIT count methodology. (limit 1000 characters)

Prior to the count, law enforcement, service providers, and outreach teams were surveyed to provide us with details of where they typically encounter homeless. Teams of outreach workers were assembled & assigned to various catchment areas in the CoC, including major cities. Each outreach team was partnered with a law enforcement contact. We offered the VI-SPDAT so we could not only count but begin to engage and immediately assign homeless an outreach worker.

Written instructions and training sessions were provided to enumerators to ensure consistent administration of the survey. Engagement with persons encountered was aided by the donation of food & water by a soup kitchen. Through our Planning grant, homeless who completed the PIT survey were given a gift card. We chose this methodology as the most effective & efficient use of the outreach workers we had, utilizing our law enforcement resources as well to make a concentrated effort in areas where we knew homeless individuals to be.

2I-3. Describe any change in methodology from your unsheltered PIT count in 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the count). (limit 1000 characters)

There was no change in methodology from the 2015 to 2016 count.

2I-4. Has the CoC taken extra measures to identify unaccompanied homeless youth in the PIT count? Yes

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

A Street Outreach Van operated by the Children's Village (which also operates our Sanctuary emergency shelter for unaccompanied homeless youth) participated in the PIT count, and was able to identify and survey unaccompanied homeless youth in two cities within our CoC. In addition, the survey instrument provided by the Continuum of Care to staff at all emergency shelters and transitional housing sites, and to unsheltered homeless enumerators included questions which allowed us to identify unaccompanied homeless youth; we were able to identify over 80 unaccompanied youth during the PIT count.

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

Instructions:

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

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

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

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

We greatly expanded the number of teams of enumerators from 5 to 12 teams, enabling us to cover more of the CoC geographic area more thoroughly and more swiftly. We paired experienced enumerators with new recruits so that every team had at least one member who had participated in prior counts and could advise new team members. We invited law enforcement personnel to our training and planning meetings.

We obtained meal packages from a local soup kitchen to assist engagement with homeless encountered. Incentives of gift cards were also provided to

homeless individuals willing to complete the PIT survey interview.
All of these elements strengthen the quality of the data as it gave us a greater chance of the individuals being comfortable enough & motivated to complete the surveys & provide accurate information.
The survey provided to enumerators included revised coding of race of multi-racial persons and revised coding of length of current homeless episode and # of homeless episodes.

3A. Continuum of Care (CoC) System Performance

Instructions

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

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

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

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

	2015 PIT (for unsheltered count, most recent year conducted)	2016 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1,797	1,750	-47
Emergency Shelter Total	820	916	96
Safe Haven Total	0	0	0
Transitional Housing Total	950	800	-150
Total Sheltered Count	1,770	1,716	-54
Total Unsheltered Count	27	34	7

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

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

	Between October 1, 2014 and September 30, 2015
Universe: Unduplicated Total sheltered homeless persons	4,226
Emergency Shelter Total	2,974
Safe Haven Total	0
Transitional Housing Total	1,252

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

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

(limit 1000 characters)

DSS contracts with CBOs to provide staff in each DSS office to screen people seeking homeless assistance. They refer people facing eviction to agencies who provide indepth needs assessment, budget counseling, legal services & \$200,000/year in county-funded rent arrears. DSS also directly provides rent & utility arrears. DSS won 5 years of DHHS funding to plan & pilot system reform to prevent foster care youth aging into homelessness. Our researchers identified 3 risk factors most closely associated with long-term homelessness: # of entries into care, facility transfers & AWOL episodes. Our CoC helped multiple local CBOs win 5-year NYS grants for eviction prevention counseling, legal services, & short- and intermediate-term rent subsidies. Our SSVF prevents veteran homelessness. Our CoC Self-Sufficiency Committee expands job opportunities, our Homelessness Prevention Committee coordinates prevention planning & our CoC meets monthly with top DSS managers to lead system transformation.

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)

WCDSS created a 47-person Homeless Services Division to coordinate housing & services for homeless people with complex needs & longest stays, tracked with HMIS & shelter placement records. HSD works with shelter staff to expedite rehousing. Special CoC teams expedite rehousing vets & unsheltered. CoC leadership meets monthly with DSS leaders to refocus our system on rapid rehousing & homelessness prevention. Our CoC Coordinated Assessment System planning team meets weekly to guide CAS implementation. Our CoC Board adopted CPD Notice 14-012 prioritizing those homeless the longest. We've got funding for 185 Rapid Rehousing units with Yonkers & NYS ESG, FY15 PHB & reallocated CoC funds. Our FY16 request reallocates \$493,839 from TSH & SSO to create 60 more RRH units & seeks \$793,854 in PHB for new PSH. We will use VI-SPDAT and Family SPDAT to identify Rapid Rehousing candidates. We are using our FY15 Planning Grant to analyze factors affecting our performance in this area.

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

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

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

Fill in the chart to indicate the extent to which projects exit program participants into permanent housing (subsidized or non-subsidized) or the retention of program participants in CoC Program-funded permanent supportive housing.

	Between October 1, 2014 and September 30, 2015
Universe: Persons in SSO, TH and PH-RRH who exited	542
Of the persons in the Universe above, how many of those exited to permanent destinations?	346
% Successful Exits	63.84%

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

	Between October 1, 2014 and September 30, 2015
Universe: Persons in all PH projects except PH-RRH	1,214
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?	1,166
% Successful Retentions/Exits	96.05%

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

We have a 11% 2-year recidivism rate. DSS has a 47-person Homeless Services Division to coordinate housing & services for individuals & families homeless most often. These are currently identified by DSS database; will soon be tracked via HMIS. We used FY14 Planning funds to analyze shelter records to identify those homeless most often for prioritization. Our Coordinated Entry will use HMIS to track people with repeated homeless episodes so we can target specialized housing retention services to them. Our CoC won \$2.1 million/year in FY14 CoC PSH Bonus funds to provide rent subsidies & intensive support to CH adults & families. We've created a Housing Retention Team to identify & address housing retention issues for this group. Our Prevention Committee coordinates eviction prevention. Our Self-Sufficiency subcommittee coordinates employment efforts & provides financial counseling workshops. We're using FY15 Planning Grant funds to analyze our returns to homelessness data.

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

Performance Measure: Job and Income Growth. Describe the CoC's specific strategies to assist CoC Program-funded projects to increase program participants' cash income from employment and non-employment non-cash sources. (limit 1000 characters)

In 2016 DSS revamped its employment approach, making Westhab, our largest homeless housing provider, responsible for job services for ALL employable DSS clients. Westhab has provided job services for the homeless since 1996. It places over 500 people/year in jobs. In 2013 our CoC created a Patriot Employment team to coordinate job services for homeless vets. In 2014-2015 it placed 132 vets in jobs averaging \$13.93/hour. The VA, Breaking Ground, SSVF and our local USDOL-funded Workforce Investment Board offer specialized services for vets. Our WIB also created specialized programs for youth aging out of foster care. In 2012 our CoC got SAMHSA TA to create SOAR services to give disabled homeless people expedited access to SSI/SSD. SOAR enhances housing retention for chronic homeless by giving income not subject to sanctions for treatment noncompliance. Legal Services of the Hudson Valley provides SOAR services and leverages NYS funds for SSI/SSD and other disability advocacy.

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)

In 2016 DSS revamped its job services, making Westhab, our CoC's largest CBO partner, responsible for coordinating job services for ALL employable DSS clients. Westhab provides job readiness training & links clients to job training & education, e.g. USDOL-funded Workforce Investment Board (WIB) services, ACCES-VR (NYS employment service for the disabled), colleges & adult education programs. The Urban League coordinates services for ALL non-employable DSS clients. It monitors treatment attendance to enhance employability and helps clients get SSI/SSD. 100% of our CoC programs regularly link DSS clients to job services through these 2 agencies.

Our CoC developed close ties to our local WIB. It hired 2 job counselors for vets and created a summer jobs program specifically targeting youth aging out of foster care. In 2014 our CoC created a Patriot Employment team to coordinate job services for homeless vets. Our County Executive encourages employers to provide jobs for homeless vets.

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

We use the VI-SPDAT to assess vulnerability & help determine housing priority. Our VI-SPDAT Rehousing Team (VRT) meets monthly to develop outreach and rehousing plans for all of our most vulnerable homeless including ALL unsheltered. VRT includes staff from all major outreach programs, shelters, housing providers, DSS & DCMH. EVERY unsheltered person's status, needs & plan are reviewed at EVERY meeting. The unsheltered are identified by 7

outreach teams, DSS and other partners. Client info and VI-SPDAT scores are put into HMIS. We now compile by-name lists by hand while our HMIS is being modified using CoC funds to better serve our Coordinated Entry process. Everyone is offered same-day access to low-demand overnight shelter. All DSS-eligible are also offered structured 24-hour shelter. VRT identifies appropriate PSH for each unsheltered person using Housing First strategies. VRT assigns a specific outreach worker to work with each unsheltered person until they are sheltered or housed.

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

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

NOT APPLICABLE. We did NOT exclude any specific geographic areas from our unsheltered PIT count.

3A-8. Enter the date the CoC submitted the system performance measure data into HDX. The System Performance Report generated by HDX must be attached. (mm/dd/yyyy) 07/20/2016

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

Not applicable - we submitted our System Performance Measures data to HUD via the HDX by the deadline.

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

Objective 1: Ending Chronic Homelessness

Instructions:

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

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

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

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

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	175	131	-44
Sheltered Count of chronically homeless persons	156	117	-39
Unsheltered Count of chronically homeless persons	19	14	-5

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

From 2015 to 2016 our CoC Sheltered Count of chronically homeless persons decreased by 39 (25%), and the Unsheltered Count of chronically homeless persons decreased by 5 (26%); the Total PIT count of chronically homeless persons decreased by 44 (25%).

The decrease in both sheltered & unsheltered chronic homeless is due to increased targeting of Permanent Supportive Housing beds to chronically homeless persons using CoC-wide collaborative efforts joining shelters, housing providers, outreach teams, and DSS to prioritize beds for individuals with the greatest needs (measured using the VI-SPDAT tool) and longest durations of homelessness. In addition our new Turning Point CoC Permanent Housing Bonus project began operation on 08/01/15 and that project housed over 50 chronically homeless by the date of the 2016 PIT count.

The number of chronically homeless decreased despite our 2016 PIT count having expanded geographic coverage & better instructions to count chronically homeless persons.

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

	2015	2016	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	57	154	97

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

The number of PSH beds dedicated for use by chronically homeless persons in the Westchester CoC increased by 97 from 2015 to 2016 (an increase of 170%).

99 new PSH beds dedicated to chronic homeless were added when Turning Point, our new FY2014 Permanent Supportive Housing Bonus project started operations on 08/01/15 (2 dedicated PSH beds were removed when a small project was reallocated into Coordinated Entry).

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

3B-1.3a. If “Yes” was selected for question 3B-1.3, attach a copy of the CoC’s written standards or other evidence that clearly shows the incorporation of the Orders of Priority in Notice CPD 14-012 and indicate the page(s) for all documents where the Orders of Priority are found. page 1

3B-1.4. Is the CoC on track to meet the goal of ending chronic homelessness by 2017? Yes

This question will not be scored.

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

- 1) Westchester CoC won \$2.1 million/year for our Turning Point FY2014 CoC Permanent Supportive Housing Bonus project to provide housing subsidies and intensive mobile support services to 90 chronically homeless adults and families.
- 2) Our CoC Steering Committee has adopted the rehousing priorities outlined in CPD Notice 14-012 including prioritizing those homeless the longest and with the highest service needs. Our Coordinated Entry System will prioritize people to Permanent Supportive Housing (PSH) in this priority order.
- 3) Our CoC has encouraged our PSH providers to give chronically homeless households priority for 85% of PSH turnover beds.

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

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

Instructions:

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

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

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

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Number of previous homeless episodes:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Criminal History:	<input 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 strategies including concrete steps to rapidly rehouse every household with children within 30 days of those families becoming homeless. (limit 1000 characters)

DSS created a 47-person Homeless Services Division to coordinate and expedite homeless housing & services. HSD tracks length of stay using a shelter placement database now being merged into HMIS. HSD reviews length of stay data weekly, reviews cases with shelter staff to expedite rehousing and works with our CoC to streamline rehousing. We're using FY15 Planning funds to analyze this data.

We're using the Family SPDAT to identify families whose needs are best suited to brief assistance, Rapid Rehousing, or PSH. Families are placed based only on factors affecting future housing success. We have 481 CoC beds (in 76% of our relevant renewal projects) committed to Housing First.

We now have 111 RRH units funded with Yonkers & NYS ESG plus reallocated CoC funds. We're funding 75 additional RRH units this month with FY15 CoC PHB funds & our FY16 request reallocates \$493,839 from TSH & SSO projects to create 60 new RRH units – a 125% increase in 1 year.

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

	2015	2016	Difference
RRH units available to serve families in the HIC:	118	102	-16

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

CoC policies and procedures prohibit involuntary family separation:	<input checked="" type="checkbox"/>
There is a method for clients to alert CoC when involuntarily separated:	<input type="checkbox"/>
CoC holds trainings on preventing involuntary family separation, at least once a year:	<input type="checkbox"/>
	<input 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 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

PIT Count of Homelessness Among Households With Children

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	375	362	-13
Sheltered Count of homeless households with children:	375	362	-13
Unsheltered Count of homeless households with children:	0	0	0

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

There were 13 (3.5%) fewer households with children housed in congregate family shelters and scattered-site transitional units in 2016 compared to 2015. Westchester County has made a focused effort to reduce the time homeless families spend in Transitional Housing before moving to Permanent Housing, prioritizing those households that have been homeless longest. In HMIS, the median length of time homeless for participants in our scattered-site transitional units is 418 days for 2014 down to 329 days for 2015 (a 21% decrease). Reducing the average length of homelessness has reduced the PIT count number of homeless families. Changes in PIT count methodology did not affect the count of homeless households with children.

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

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

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

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	<input 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 checked="" 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 including youth under age 18, and youth ages 18-24 for housing and services during the FY 2016 operating year? (Check all that apply)

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

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

	FY 2014 (October 1, 2013 - September 30, 2014)	FY 2015 (October 1, 2014 - September 30, 2105)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	2	27	25

3B-2.8a. If the number of unaccompanied youth and children, and youth-headed households with children served in any HMIS contributing

program who were in an unsheltered situation prior to entry in FY 2015 is lower than FY 2014 explain why. (limit 1000 characters)

During 2015 the Westchester County CoC greatly expanded the number of emergency shelter facilities participating in HMIS data entry; we went from ~70% HMIS bed coverage to over 90% HMIS bed coverage for emergency shelters by late 2015 (we now have over 96% emergency shelter HMIS bed coverage).

Many of the facilities which began to enter HMIS data by late 2015 serve unaccompanied youth who were unsheltered prior to entry. This improvement in HMIS data quality during the time period between the two comparison date ranges accounts for the increase in the observed number of unaccompanied youth who were unsheltered prior to entry.

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

	Calendar Year 2016	Calendar Year 2017	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$2,202,814.00	\$2,338,928.00	\$136,114.00
CoC Program funding for youth homelessness dedicated projects:	\$554,472.00	\$690,586.00	\$136,114.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$1,648,342.00	\$1,648,342.00	\$0.00

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

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	6
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	21
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	31

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

The homeless student liaison for So. West. BOCES is a CoC Bd member who meets regularly with over 65 school district liaisons. She consistently brings issues effecting homeless families and students to the CoC's attention, which has led to significant quality of life improvements for families transitioning from the shelter to PH. DSS identifies and assesses children in homeless families

and contracts with the Urban League to enhance attendance & improve performance of these students. Urban League staff also identify & work with students assessed to be 'high risk' due to low attendance rates. All school districts have designated staff to address the needs of homeless children. Urban League staff maintain a Homeless Students Program Database, validate registration & program placement. This data is brought back to the Board as needed.

Our CoC Co-Chair convenes monthly with Mt.Vernon CSD reps to discuss attendance barriers, inc. homelessness.

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

All ESG- & CoC-funded housing/service providers are required by the Board to have a designated staff person to ensure that any families or unaccompanied youth admitted to their programs are informed of their educational rights, & enrolled in school & receive educational services, as appropriate. On Dec 4, 2015, So.West. BOCES sponsored training on the McKinney-Vento Act; all CoC member family housing providers were mandated by the Board to attend. Having the So.West. BOCES Homeless Student Liaison on the CoC Board allows us to bring updates & info to the Board to be funneled to sub-recipients and other provider members.

All shelter/housing providers are required to collaborate with school district liaisons & Urban League Case Managers who provide educational case mgmt services.

Urban League CMs review daily shelter placement records from DSS and uses that information for individualized as well as system planning.

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

Yes. Our CoC has a written linkage agreement with the Westchester Community Opportunity Program (WestCOP), which operates nearly 2,000 Early Head Start and Head Start slots in 20 programs scattered across Westchester County. The linkage agreement is shared with and covers all of our CoC programs that serve homeless families.

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

Objective 3: Ending Veterans Homelessness

Instructions:

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

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

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

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	181	128	-53
Sheltered count of homeless veterans:	179	126	-53
Unsheltered count of homeless veterans:	2	2	0

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

Veteran homelessness in Westchester continues to decrease due to focused local effort. We have virtually eliminated veteran homelessness on the streets & in our general-population shelters. We created Patriot Housing in 2013, which meets weekly to coordinate outreach & rehousing for homeless vets. We now average 1-3 unsheltered vets after coordinated outreach. We average about 16 in our general-population overnight and 24-hour shelters. ALL of the other homeless vets are in VA programs (GPD & HCHV) with 115 beds & serve all of NYC, Long Island & the Hudson Valley. We rehouse Westchester vets there but cannot rehouse the whole NY metro region.

We have rehoused over 425 vets, many homeless for years or decades. We found vets in cellars, tents, cars, parking garages, etc. We are rehousing EVERY one of these unsheltered veterans who stay in Westchester.

We have dramatically accelerated rehousing. Our shelters have NO veterans homeless over 1 year & only 7 homeless over 90 days.

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

Since 2013, our Patriot Housing Initiative continues to meet weekly to coordinate rehousing & services. It includes DSS, DCMH & all local VAMC, HUD-VASH,SSVF, VA Grant/Per Diem, adult & family shelter & homeless outreach programs. We review the status of EVERY veteran on the streets or in our general-population shelters at EVERY weekly PHI meeting. Our VA has mobile homeless outreach. We have 5 cities: 3 have outreach workers, 1 has a homeless day drop-in center, 4 have low-demand drop-in shelters, 3 have local veteran service offices. We have 4 countywide homeless outreach teams. All are trained to identify & refer vets.

Our local VAMC Homeless Services Coordinator determines VA eligibility & coordinates VA referrals. Our HMIS prompts users to ask about veteran status, and if they respond "yes", another prompt provides them with his contact information and allows users to upload & share VA eligibility DD-214 forms. New HCHV housing fast-tracks VAMC services to those eligible.

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

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2016	% Difference
Total PIT Count of sheltered and unsheltered homeless veterans:	195	128	-34.36%
Unsheltered Count of homeless veterans:	8	2	-75.00%

3B-3.4. Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2016. No

This question will not be scored.

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

(limit 1000 characters)

We've virtually eliminated veteran homelessness on the streets & reduced it in shelters. With 100,000 Homes training & TA we created Patriot Housing in 2013. It meets weekly to coordinate outreach & rehousing for homeless vets. In 2016 with massive outreach we've averaged only 1-3 unsheltered veterans. We average only 16 in our general-population low-demand overnight and structured 24-hour shelters.

NOTE: ALL of the other homeless vets are in local VA programs which all serve all of NYC, Long Island & the Hudson Valley. We rehouse Westchester vets but we can't rehouse vets from the whole NY metro region.

We're already receiving Vets@Home TA on this issue, which we see as the major barrier to our meeting the federal definition of Functional Zero.

4A. Accessing Mainstream Benefits

Instructions:

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

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

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

FY 2016 Assistance with Mainstream Benefits

Total number of project applications in the FY 2016 competition (new and renewal):	29
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 2a, 2b and 2c on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	29
Percentage of renewal and new project applications in the FY 2016 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	100%

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

The CoC collaborates with the WC Dept of Health, DSS and MHA of Westchester to assist homeless program participants to enroll in health insurance. In 2015 the CoC recruited a Board Member from our Dept of Health who oversees insurance navigator programs catering to homeless & migrant workers.

DSS links nearly 100% of persons referred to 24-hour shelters to Medicaid or other insurance as part of its standard enrollment process. A CoC-member agency, MHA of Westchester performs comprehensive assessments including

insurance status on all individuals that register through the DSS shelter system. The agency provides Health Home Care Mgmt as well as other services. Two other CoC-member agencies (HDSW & CHOICE) that also operate Health Home Care Mgmt. programs conduct homeless outreach services to street- & shelter- homeless. These agencies can immediately register individuals for health home care mgmt. services if they qualify.

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

Educational materials:	<input checked="" type="checkbox"/>
In-Person Trainings:	<input checked="" type="checkbox"/>
Transportation to medical appointments:	<input checked="" type="checkbox"/>
	<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 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

FY 2016 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2016 competition (new and renewal):	29
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2016 competition:	28
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2016 competition that will be designated as "low barrier":	97%

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

FY 2016 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2016 competition (new and renewal):	29
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2016 competition:	22
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2016 competition that will be designated as Housing First:	76%

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:	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">X</div>
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Use of phone or internet-based services like 211:	<input checked="" type="checkbox"/>
Marketing in languages commonly spoken in the community:	<input checked="" type="checkbox"/>
Making physical and virtual locations accessible to those with disabilities:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

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

	2015	2016	Difference
RRH units available to serve all populations in the HIC:	118	111	-7

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)

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

4B-7a. If "Yes", to question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons defined as homeless in accordance with 24 CFR 578.89. Description must

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

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

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

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

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

This response does not affect the scoring of this application.

CoC Governance:	<input checked="" type="checkbox"/>
CoC Systems Performance Measurement:	<input 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 checked="" type="checkbox"/>
Maximizing the use of mainstream resources:	<input type="checkbox"/>

Retooling transitional housing:	<input type="checkbox"/>
Rapid re-housing:	<input type="checkbox"/>
Under-performing program recipient, subrecipient or project:	<input type="checkbox"/>
Fiscal management of CoC programs - Indirect Costs	<input checked="" type="checkbox"/>
Not applicable:	<input type="checkbox"/>

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

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance
HUD Exchange response related to incorrect contact listing on HUD.GOV	06/06/2016	4
Vets@Home: TA began 9/11/15 and continues today. Face to face meetings and conference calls, emails with detailed info .	09/11/2015	3
Request for Indirect Costs guidance: Emails from Washington office.	09/09/2016	3
HUD exchange response related to HUD-eligible costs under Planning grants	02/24/2016	3
HUD local office response related to classifying OTPS as Direct vs. Indirect Costs	04/19/2016	2

4C. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	NY-604 FY 2016 Ev...	08/26/2016
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	NY-604 CoC Rating...	08/26/2016
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	NY-604 CoC Rating...	08/26/2016
05. CoCs Process for Reallocating	Yes	NY-604 2016 CoC's...	09/12/2016
06. CoC's Governance Charter	Yes	Governance Charte...	09/09/2016
07. HMIS Policy and Procedures Manual	Yes	HMIS Policy and P...	09/09/2016
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	NY-604 attachment...	09/05/2016
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No	HMIS Agency Parti...	09/09/2016
11. CoC Written Standards for Order of Priority	No	NY-604 CoC Writte...	09/08/2016
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	NY-604 2016 HDX-s...	08/26/2016
14. Other	No		
15. Other	No		

Attachment Details

Document Description: NY-604 FY 2016 Evidence of the CoC's
Communication to Rejected Projects

Attachment Details

Document Description:

Attachment Details

Document Description: NY-604 CoC Rating and Review Procedure

Attachment Details

Document Description: NY-604 CoC Rating and Review Procedure
Public Posting Evidence

Attachment Details

Document Description: NY-604 2016 CoC's Process for Reallocating

Attachment Details

Document Description: Governance Charter and Signed Agreement

Attachment Details

Document Description: HMIS Policy and Procedure

Attachment Details

Document Description:

Attachment Details

Document Description: NY-604 attachment 09 - PHA Administration Plan
Not Applicable

Attachment Details

Document Description: HMIS Agency Participation Agreements

Attachment Details

Document Description: NY-604 CoC Written Standards for Order of
Priority

Attachment Details

Document Description:

Attachment Details

Document Description: NY-604 2016 HDX-system Performance Measures

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	08/12/2016
1B. CoC Engagement	09/01/2016
1C. Coordination	09/07/2016
FY2016 CoC Application	Page 62
	09/12/2016

1D. CoC Discharge Planning	08/22/2016
1E. Coordinated Assessment	09/06/2016
1F. Project Review	09/12/2016
1G. Addressing Project Capacity	09/05/2016
2A. HMIS Implementation	09/09/2016
2B. HMIS Funding Sources	08/22/2016
2C. HMIS Beds	09/06/2016
2D. HMIS Data Quality	09/01/2016
2E. Sheltered PIT	09/01/2016
2F. Sheltered Data - Methods	09/01/2016
2G. Sheltered Data - Quality	09/01/2016
2H. Unsheltered PIT	09/01/2016
2I. Unsheltered Data - Methods	08/24/2016
2J. Unsheltered Data - Quality	09/05/2016
3A. System Performance	09/06/2016
3B. Objective 1	09/06/2016
3B. Objective 2	09/12/2016
3B. Objective 3	09/09/2016
4A. Benefits	09/09/2016
4B. Additional Policies	09/09/2016
4C. Attachments	Please Complete
Submission Summary	No Input Required

Note: The Westchester County Continuum of Care (NY-604) did not reject any Project Applications for FY2016. All Project Applications were accepted and ranked.

Four projects were eliminated through reallocation.

The letters to notify those project applicants that the Westchester County CoC Board approved the reallocations affecting their projects are attached.

In addition, we are including the letters to the Project Applicants notifying them that ALL of their projects were accepted and ranked during the Competition Process.



July 22, 2016

Shawyn Patterson-Howard
Commissioner, Community Planning and Development
City of Mount Vernon
City Hall, 1 Roosevelt Square North
Mount Vernon, NY 10550

RE: FY2016 Continuum of Care application project reallocation

Dear Ms. Patterson-Howard:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA.

In addition, at VII.A.2.b., CoCs are instructed to demonstrate that they reallocate lower performing projects to create new higher performing projects. Therefore, as part of the application process, we have reviewed, in as transparent a manner as possible, all projects eligible for renewal in FY2016 for possible reallocation.

During a Board meeting held on 07/12/16, the CoC Board approved Performance Measure criteria by which to rank renewal projects, including length of time homeless, % exits to Permanent Housing destinations, % clients increasing income during enrollment, participant eligibility, utilization rates, APR timeliness, and % HUD funds recaptured. Project Component was also taken into account, with Permanent Housing receiving more points than Transitional Housing or Supportive Services Only projects. Projects that serve priority populations, or populations with special needs and projects with unique value to the CoC were also scored higher.

Projects were ranked using the above criteria, and your **Harm Reduction and Outreach** (Supportive Services Only) project was ranked 30 out of the 32 projects eligible for renewal.

During a subsequent Board meeting held on 07/14/16, the CoC Board elected to reallocate the four projects with the lowest rankings based on the Performance Measures (ranks 29 through 32), including Harm Reduction and Outreach.

Reallocated funds were approved to be used to create a new Rapid Rehousing project. Reallocation to Rapid Rehousing was determined to be the most efficient use of funds as this type of assistance will be most helpful to a larger number of our non-chronically homeless individuals and families, and HUD strongly supports the Rapid Rehousing model.

On behalf of the CoC, I want to thank you for your work to assist the homeless in Westchester County, and your participation in this difficult process of self-evaluation.

We will, of course, keep you up to date with further developments regarding the FY2016 CoC competition as they become available. If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW

Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

July 22, 2016

Joseph Shuldiner
Executive Director
Municipal Housing Authority for the City of Yonkers
1511 Central Park Avenue
P.O. Box 35
Yonkers NY 10710-0035

RE: FY2016 Continuum of Care application project reallocation

Dear Mr. Shuldiner:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA.

In addition, at VII.A.2.b., CoCs are instructed to demonstrate that they reallocate lower performing projects to create new higher performing projects. Therefore, as part of the application process, we have reviewed, in as transparent a manner as possible, all projects eligible for renewal in FY2016 for possible reallocation.

During a Board meeting held on 07/12/16, the CoC Board approved Performance Measure criteria by which to rank renewal projects, including length of time homeless, % exits to Permanent Housing destinations, % clients increasing income during enrollment, participant eligibility, utilization rates, APR timeliness, and % HUD funds recaptured. Project Component was also taken into account, with Permanent Housing receiving more points than Transitional Housing or Supportive Services Only projects. Projects that serve priority populations, or populations with special needs and projects with unique value to the CoC were also scored higher.

Projects were ranked using the above criteria, and your **Yonkers OWN** (Transitional Housing) project was ranked 29 out of the 32 projects eligible for renewal.

During a subsequent Board meeting held on 07/14/16, the CoC Board elected to reallocate the four projects with the lowest rankings based on the Performance Measures (ranks 29 through 32), including Yonkers OWN.

Reallocated funds were approved to be used to create a new Rapid Rehousing project. Reallocation to Rapid Rehousing was determined to be the most efficient use of funds as this type of assistance will be most helpful to a larger number of our non-chronically homeless individuals and families, and HUD strongly supports the Rapid Rehousing model.

On behalf of the CoC, I want to thank you for your work to assist the homeless in Westchester County, and your participation in this difficult process of self-evaluation.

We will, of course, keep you up to date with further developments regarding the FY2016 CoC competition as they become available. If you have any questions, please contact me at (914) 995-5278.

Thank you,



Annette Peters-Ruvolo, LCSW

Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 22, 2016

Joseph Shuldiner
Executive Director
Municipal Housing Authority for the City of Yonkers
1511 Central Park Avenue
P.O. Box 35
Yonkers NY 10710-0035

RE: FY2016 Continuum of Care application project reallocation

Dear Mr. Shuldiner:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA.

In addition, at VII.A.2.b., CoCs are instructed to demonstrate that they reallocate lower performing projects to create new higher performing projects. Therefore, as part of the application process, we have reviewed, in as transparent a manner as possible, all projects eligible for renewal in FY2016 for possible reallocation.

During a Board meeting held on 07/12/16, the CoC Board approved Performance Measure criteria by which to rank renewal projects, including length of time homeless, % exits to Permanent Housing destinations, % clients increasing income during enrollment, participant eligibility, utilization rates, APR timeliness, and % HUD funds recaptured. Project Component was also taken into account, with Permanent Housing receiving more points than Transitional Housing or Supportive Services Only projects. Projects that serve priority populations, or populations with special needs and projects with unique value to the CoC were also scored higher.

Projects were ranked using the above criteria, and your **Job Plus** (Transitional Housing) project was ranked 32 out of the 32 projects eligible for renewal.

During a subsequent Board meeting held on 07/14/16, the CoC Board elected to reallocate the four projects with the lowest rankings based on the Performance Measures (ranks 29 through 32) including Job Plus.

Reallocated funds were approved to be used to create a new Rapid Rehousing project. Reallocation to Rapid Rehousing was determined to be the most efficient use of funds as this type of assistance will be most helpful to a larger number of our non-chronically homeless individuals and families, and HUD strongly supports the Rapid Rehousing model.

On behalf of the CoC, I want to thank you for your work to assist the homeless in Westchester County, and your participation in this difficult process of self-evaluation.

We will, of course, keep you up to date with further developments regarding the FY2016 CoC competition as they become available. If you have any questions, please contact me at (914) 995-5278.

Thank you,

A handwritten signature in black ink, appearing to read "Annette", written over a horizontal line.

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 22, 2016

Anne Daddona
Program Administrator-Homeless Services
Westchester County Department of Social Services
85 Court Street
White Plains, NY 10601

RE: FY2016 Continuum of Care application project reallocation

Dear Ms. Daddona:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA.

In addition, at VII.A.2.b., CoCs are instructed to demonstrate that they reallocate lower performing projects to create new higher performing projects. Therefore, as part of the application process, we have reviewed, in as transparent a manner as possible, all projects eligible for renewal in FY2016 for possible reallocation.

During a Board meeting held on 07/12/16, the CoC Board approved Performance Measure criteria by which to rank renewal projects, including length of time homeless, % exits to Permanent Housing destinations, % clients increasing income during enrollment, participant eligibility, utilization rates, APR timeliness, and % HUD funds recaptured. Project Component was also taken into account, with Permanent Housing receiving more points than Transitional Housing or Supportive Services Only projects. Projects that serve priority populations, or populations with special needs and projects with unique value to the CoC were also scored higher.

Projects were ranked using the above criteria, and your **STAIR** (Transitional Housing) project was ranked 31 out of the 32 projects eligible for renewal.

During a subsequent Board meeting held on 07/14/16, the CoC Board elected to reallocate the four projects with the lowest rankings based on the Performance Measures (ranks 29 through 32), including STAIR.

Reallocated funds were approved to be used to create a new Rapid Rehousing project. Reallocation to Rapid Rehousing was determined to be the most efficient use of funds as this type of assistance will be most helpful to a larger number of our non-chronically homeless individuals and families, and HUD strongly supports the Rapid Rehousing model.

On behalf of the CoC, I want to thank you for your work to assist the homeless in Westchester County, and your participation in this difficult process of self-evaluation.

We will, of course, keep you up to date with further developments regarding the FY2016 CoC competition as they become available. If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



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c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

August 18, 2016

Ms. Danielle Scholar
Program Director
City of Mount Vernon
City Hall - Roosevelt Square
Mount Vernon, New York 10550

RE: FY2016 Continuum of Care Application Project Prioritization

Dear Ms. Scholar:

This letter serves to inform you that **all 6** Project Applications submitted by the City of Mount Vernon will be prioritized and will be submitted as part of the Westchester County CoC 2016 Consolidated Application.

The FY2016 NOFA for the Continuum of Care Program Competition released 06/28/15, requires all CoC's requesting funding to prioritize new and renewal projects into two Tiers. As discussed in Section IV.A of the NOFA, it is anticipated that the amount of funding available will be sufficient to fund all eligible renewal projects submitted in the FY2016 CoC Program Competition. However, in the event that is not the case, HUD will select projects in Tier 2 in order of point value until there are no more funds available.

HUD has given local CoC's the opportunity to rank projects and decide which projects will be listed in Tier 2 in their FY2016 application. At a meeting of the Westchester County CoC Board held on 07/14/16, the CMV RA 04 and CMV RA 05 projects were chosen as Tier 2 projects based on the scoring under criteria adopted by the Board on 07/12/16. A copy of the scoring tally details is attached. In addition, as described to you in a previous letter, the four lowest scoring project were reallocated into a new Rapid Rehousing project by the CoC Board, including Harm Reduction and Renewal.

Funding for the current operating years of these projects is unaffected. We will, of course, keep you up to date with further developments including any funding notices (expected in late 2016) from HUD informing the City of Mount Vernon of the status of projects placed in Tier 2.

If you have any questions, please contact me at (914) 995-5278.

Thank you.

Sincerely,

Annette Peters-Ruvolo, LCSW

Program Director, Westchester County Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless

Approved Westchester County CoC FY2016 Project Ranking Criteria

Ranking Criteria	Score	Source
Performance Outcomes from APR/HMIS Length of stay Percent of permanent housing exit destinations Percent increases in income	0-3 points based on in-component performance 0-3 points based on in-component performance 0-3 points based on in-component performance	last APR submitted to HUD Q27 last APR submitted to HUD Q36 Performance Measure 1 last APR submitted to HUD Q24b3
Monitoring Criteria Participant eligibility Utilization rates Frequency or amounts of funds recaptured by HUD	0-3 points 0-3 points based on in-component performance 0-3 points based on in-component performance	CoC monitoring findings letter last APR submitted to HUD Q8 last APR submitted to HUD Q30
Need for specialized population services or serves population with severe needs Youth Victims of domestic violence Families with children Persons experiencing chronic homelessness Veterans Current or past substance use; Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status HIV Significant health or behavioral health challenges or functional impairments	5 points for one or more	
APR timeliness	0-2 points (1 point for each on time APR in FY12 and FY13)	e-snaps time stamps
Unique service to CoC structure	Subjective award of 0-2 points	FY14 rankings
Feasibility to sustain without HUD funding No alternate funding identified Housing part of another program or structure Significant number of family households with TANF/ Safety Net or other alternate funding readily available	5 2 0	
Project Component PSH, RRH TH SSO	10 5 0	

maximum total = 42

HMIS is rank #1

Westchester Coordinated Entry is at top of Tier 2



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

August 18, 2016

Mark Herceg, Ph.D.
Commissioner
Westchester County Department of Community Mental Health
112 East Post Road, 2nd Floor
White Plains, New York 10601

RE: FY2016 Continuum of Care Application Project Prioritization

Dear Dr. Herceg:

This letter serves to inform you that **all 5** Project Applications submitted by the Westchester County Department of Community Mental Health will be prioritized and will be submitted as part of the Westchester County CoC 2016 Consolidated Application.

If you have any questions, please contact me at (914) 995-5278.

Thank you.

Sincerely,

Annette Peters-Ruvolo, LCSW
Program Director, Westchester County Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
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c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

August 18, 2016

Ms. Trish Quattrocchi
Office of Temporary Housing Assistance
Westchester County Department of Social Services
85 Court Street
White Plains, New York 10601

RE: FY2016 Continuum of Care Application Project Prioritization

Dear Ms. Quattrocchi:

This letter serves to inform you that **all 13** Project Applications submitted by the Westchester County DSS will be prioritized and will be submitted as part of the Westchester County CoC 2016 Consolidated Application.

The FY2016 NOFA for the Continuum of Care Program Competition released 06/28/15, requires all CoC's requesting funding to prioritize new and renewal projects into two Tiers. As discussed in Section IV.A of the NOFA, it is anticipated that the amount of funding available will be sufficient to fund all eligible renewal projects submitted in the FY2016 CoC Program Competition. However, in the event that is not the case, HUD will select projects in Tier 2 in order of point value until there are no more funds available.

HUD has given local CoC's the opportunity to rank projects and decide which projects will be listed in Tier 2 in their FY2016 application. At a meeting of the Westchester County CoC Board held on 07/14/16, the Apartment Finding Initiative and Westchester Coordinated Entry projects were chosen as Tier 2 projects based on the scoring under criteria adopted by the Board on 07/12/16. A copy of the scoring tally details is attached. In addition, as described to you in a previous letter, the four lowest scoring project were reallocated into a new Rapid Rehousing project by the CoC Board, including STAIR.

Funding for the current operating years of these projects is unaffected. We will, of course, keep you up to date with further developments including any funding notices (expected in late 2016) from HUD informing Westchester County DSS of the status of projects placed in Tier 2.

If you have any questions, please contact me at (914) 995-5278.

Thank you.

Sincerely,

Annette Peters-Ruvolo, LCSW
Program Director, Westchester County Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless

Approved Westchester County CoC FY2016 Project Ranking Criteria

Ranking Criteria	Score	Source
Performance Outcomes from APR/HMIS Length of stay Percent of permanent housing exit destinations Percent increases in income	0-3 points based on in-component performance 0-3 points based on in-component performance 0-3 points based on in-component performance	last APR submitted to HUD Q27 last APR submitted to HUD Q36 Performance Measure 1 last APR submitted to HUD Q24b3
Monitoring Criteria Participant eligibility Utilization rates Frequency or amounts of funds recaptured by HUD	0-3 points 0-3 points based on in-component performance 0-3 points based on in-component performance	CoC monitoring findings letter last APR submitted to HUD Q8 last APR submitted to HUD Q30
Need for specialized population services or serves population with severe needs Youth Victims of domestic violence Families with children Persons experiencing chronic homelessness Veterans Current or past substance use; Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status HIV Significant health or behavioral health challenges or functional impairments	5 points for one or more	
APR timeliness	0-2 points (1 point for each on time APR in FY12 and FY13)	e-snaps time stamps
Unique service to CoC structure	Subjective award of 0-2 points	FY14 rankings
Feasibility to sustain without HUD funding No alternate funding identified Housing part of another program or structure Significant number of family households with TANF/ Safety Net or other alternate funding readily available	5 2 0	
Project Component PSH, RRH TH SSO	10 5 0	

maximum total = 42

HMIS is rank #1

Westchester Coordinated Entry is at top of Tier 2



WESTCHESTER COUNTY CONTINUUM
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HOMELESS

c/o WCDCH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

August 18, 2016

Mr. Jonathan Greengrass
Vice-President, Development & Programs
Greyston Foundation
21 Park Avenue
Yonkers, New York 10703

RE: FY2016 Continuum of Care Application Project Prioritization

Dear Mr. Greengrass:

This letter serves to inform you that the 1 Project Application submitted by Greyston Health Services will be prioritized and will be submitted as part of the Westchester County CoC 2016 Consolidated Application.

If you have any questions, please contact me at (914) 995-5278.

Thank you.

Sincerely,

Annette Peters-Ruvolo, LCSW
Program Director, Westchester County Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

August 18, 2016

Ms. Carole Troum
Executive Director
HOPE Community Services
50 Washington Avenue
New Rochelle, New York 10801

RE: FY2016 Continuum of Care Application Project Prioritization

Dear Ms. Troum:

This letter serves to inform you that the 1 Project Application submitted by HOPE Community Services will be prioritized and will be submitted as part of the Westchester County CoC 2016 Consolidated Application.

If you have any questions, please contact me at (914) 995-5278.

Thank you.

Sincerely,

Annette Peters-Ruvolo, LCSW
Program Director, Westchester County Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



WESTCHESTER COUNTY CONTINUUM
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c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

August 17, 2016

Mr. Joseph Shuldiner
Executive Director
Municipal Housing Authority for the City of Yonkers
1511 Central Park Avenue
P.O. Box 35
Yonkers, New York 10710-0035

RE: FY2016 Continuum of Care Application Project Prioritization

Dear Mr. Shuldiner:

This letter serves to inform you that all 5 Project Applications submitted by the Municipal Housing Authority for the City of Yonkers will be prioritized and will be submitted as part of the Westchester County CoC 2016 Consolidated Application.

The FY2016 NOFA for the Continuum of Care Program Competition released 06/28/15, requires all CoC's requesting funding to prioritize new and renewal projects into two Tiers. As discussed in Section IV.A of the NOFA, it is anticipated that the amount of funding available will be sufficient to fund all eligible renewal projects submitted in the FY2016 CoC Program Competition. However, in the event that is not the case, HUD will select projects in Tier 2 in order of point value until there are no more funds available.

HUD has given local CoC's the opportunity to rank projects and decide which projects will be listed in Tier 2 in their FY2016 application. At a meeting of the Westchester County CoC Board held on 07/14/16, Tier 2 projects were chosen based on the scoring under criteria adopted by the Board on 07/12/16. A copy of the scoring tally details is attached. As described to you in a previous letter, the four lowest scoring project were reallocated into a new Rapid Rehousing project by the CoC Board, including Yonkers OWN and Job Plus.

Funding for the current operating years of these projects is unaffected. We will, of course, keep you up to date with further developments including any funding notices (expected in late 2016) from HUD.

If you have any questions, please contact me at (914) 995-5278.

Thank you.

Sincerely,

Annette Peters-Ruvolo, LCSW

Program Director, Westchester County Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless

Approved Westchester County CoC FY2016 Project Ranking Criteria

Ranking Criteria	Score	Source
Performance Outcomes from APR/HMIS Length of stay Percent of permanent housing exit destinations Percent increases in income	0-3 points based on in-component performance 0-3 points based on in-component performance 0-3 points based on in-component performance	last APR submitted to HUD Q27 last APR submitted to HUD Q36 Performance Measure 1 last APR submitted to HUD Q24b3
Monitoring Criteria Participant eligibility Utilization rates Frequency or amounts of funds recaptured by HUD	0-3 points 0-3 points based on in-component performance 0-3 points based on in-component performance	CoC monitoring findings letter last APR submitted to HUD Q8 last APR submitted to HUD Q30
Need for specialized population services or serves population with severe needs Youth Victims of domestic violence Families with children Persons experiencing chronic homelessness Veterans Current or past substance use; Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status HIV Significant health or behavioral health challenges or functional impairments	5 points for one or more	
APR timeliness	0-2 points (1 point for each on time APR in FY12 and FY13)	e-snaps time stamps
Unique service to CoC structure	Subjective award of 0-2 points	FY14 rankings
Feasibility to sustain without HUD funding No alternate funding identified Housing part of another program or structure Significant number of family households with TANF/ Safety Net or other alternate funding readily available	5 2 0	
Project Component PSH, RRH TH SSO	10 5 0	

maximum total = 42

HMIS is rank #1

Westchester Coordinated Entry is at top of Tier 2



WESTCHESTER COUNTY CONTINUUM
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HOMELESS

c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

August 18, 2016

Mr. Paul Anderson-Winchell
Executive Director
Lifting Up Westchester
35 Orchard Street
White Plains, New York 10607

RE: FY2016 Continuum of Care Application Project Prioritization

Dear Mr. Anderson-Winchell:

This letter serves to inform you that the 1 Project Application submitted by Lifting Up Westchester will be prioritized and will be submitted as part of the Westchester County CoC 2016 Consolidated Application.

The FY2016 NOFA for the Continuum of Care Program Competition released 06/28/15, requires all CoC's requesting funding to prioritize new and renewal projects into two Tiers. As discussed in Section IV.A of the NOFA, it is anticipated that the amount of funding available will be sufficient to fund all eligible renewal projects submitted in the FY2016 CoC Program Competition. However, in the event that is not the case, HUD will select projects in Tier 2 in order of point value until there are no more funds available.

HUD has given local CoC's the opportunity to rank projects and decide which projects will be listed in Tier 2 in their FY2016 application. At a meeting of the Westchester County CoC Board held on 07/14/16, the Another Way Home project was chosen as a Tier 2 project based on the scoring under criteria adopted by the Board on 07/12/16. A copy of the scoring tally details is attached.

Funding for the current operating years of these projects is unaffected. We will, of course, keep you up to date with further developments including any funding notices (expected in late 2016) from HUD informing Lifting Up Westchester of the status of projects placed in Tier 2.

If you have any questions, please contact me at (914) 995-5278.

Thank you.

Sincerely,

Annette Peters-Ruvolo, LCSW
Program Director, Westchester County Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless

Approved Westchester County CoC FY2016 Project Ranking Criteria

Ranking Criteria	Score	Source
Performance Outcomes from APR/HMIS Length of stay Percent of permanent housing exit destinations Percent increases in income	0-3 points based on in-component performance 0-3 points based on in-component performance 0-3 points based on in-component performance	last APR submitted to HUD Q27 last APR submitted to HUD Q36 Performance Measure 1 last APR submitted to HUD Q24b3
Monitoring Criteria Participant eligibility Utilization rates Frequency or amounts of funds recaptured by HUD	0-3 points 0-3 points based on in-component performance 0-3 points based on in-component performance	CoC monitoring findings letter last APR submitted to HUD Q8 last APR submitted to HUD Q30
Need for specialized population services or serves population with severe needs Youth Victims of domestic violence Families with children Persons experiencing chronic homelessness Veterans Current or past substance use; Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status HIV Significant health or behavioral health challenges or functional impairments	5 points for one or more	
APR timeliness	0-2 points (1 point for each on time APR in FY12 and FY13)	e-snaps time stamps
Unique service to CoC structure	Subjective award of 0-2 points	FY14 rankings
Feasibility to sustain without HUD funding No alternate funding identified Housing part of another program or structure Significant number of family households with TANF/ Safety Net or other alternate funding readily available	5 2 0	
Project Component PSH, RRH TH SSO	10 5 0	

maximum total = 42

HMIS is rank #1

Westchester Coordinated Entry is at top of Tier 2



July 22, 2016

Shawyn Patterson-Howard
Commissioner, Planning and Community Development
City of Mount Vernon
City Hall - 1 Roosevelt Square
Mount Vernon NY 10550

RE: FY2016 Continuum of Care application internal competition deadlines

Dear Ms. Patterson-Howard:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

(1) **Project Applicants.** All project applications are required to be submitted to the CoC through e-snaps no later than 7:59:59 p.m on August 15, 2016 (no later than 30 days before the application deadline to HUD).

(2) **CoC Notification to Project Applicants.** The CoC will notify all project applicants no later than 7:59:59 pm on August 30, 2016 (no later than 15 days before the application deadline to HUD) regarding whether their project applications will be submitted as part of the CoC Consolidated Application.

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We will, of course, keep you up to date with further developments regarding the FY2016 CoC competition as they become available. If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW

Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 22, 2016

Anne Daddona
Program Administrator-Homeless Services/HUD
85 Court Street
White Plains, New York 10601

RE: FY2016 Continuum of Care application internal competition deadlines

Dear Ms. Daddona:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

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Thank you,

Annette Peters-Ruvolo, LCSW

Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 22, 2016

Jonathan Greengrass
Vice-President, Development & Programs
Greyston Foundation
21 Park Avenue
Yonkers NY 10703

RE: FY2016 Continuum of Care application internal competition deadlines

Dear Mr. Greengrass:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

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Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 22, 2016

Carole Troum
Executive Director
HOPE Community Services
50 Washington Avenue
New Rochelle NY 10801

RE: FY2016 Continuum of Care application internal competition deadlines

Dear Ms. Troum:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

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Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 22, 2016

Paul Anderson-Winchell
Executive Director
Lifting Up Westchester
35 Orchard Street
White Plains NY 10607

RE: FY2016 Continuum of Care application internal competition deadlines

Dear Mr. Anderson-Winchell:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

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Thank you,

Annette Peters-Ruvolo, LCSW

Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 22, 2016

Joseph Shuldiner
Executive Director
Municipal Housing Authority for the City of Yonkers
1511 Central Park Avenue
P.O. Box 35
Yonkers NY 10710-0035

RE: FY2016 Continuum of Care application internal competition deadlines

Dear Mr. Shuldiner:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

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Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless

Please find attached:

- 1) local project ranking criteria, and**
- 2) table showing the local scores for each project based on that criteria & resulting ranking order for Continuum of Care projects.**

The project ranking criteria and resulting ranking order were approved by the entire CoC Board, including all stakeholders, on 07/12/16 and 07/14/16. Minutes from those Board meetings are attached.

Approved Westchester County CoC FY2016 Project Ranking Criteria

Ranking Criteria	Score	Source
Performance Outcomes from APR/HMIS Length of stay Percent of permanent housing exit destinations Percent increases in income	0-3 points based on in-component performance 0-3 points based on in-component performance 0-3 points based on in-component performance	last APR submitted to HUD Q27 last APR submitted to HUD Q36 Performance Measure 1 last APR submitted to HUD Q24b3
Monitoring Criteria Participant eligibility Utilization rates Frequency or amounts of funds recaptured by HUD	0-3 points 0-3 points based on in-component performance 0-3 points based on in-component performance	CoC monitoring findings letter last APR submitted to HUD Q8 last APR submitted to HUD Q30
Need for specialized population services or serves population with severe needs Youth Victims of domestic violence Families with children Persons experiencing chronic homelessness Veterans Current or past substance use; Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status HIV Significant health or behavioral health challenges or functional impairments	5 points for one or more	
APR timeliness	0-2 points (1 point for each on time APR in FY12 and FY13)	e-snaps time stamps
Unique service to CoC structure	Subjective award of 0-2 points	FY14 rankings
Feasibility to sustain without HUD funding No alternate funding identified Housing part of another program or structure Significant number of family households with TANF/ Safety Net or other alternate funding readily available	5 2 0	
Project Component PSH, RRH TH SSO	10 5 0	

maximum total = 42

HMIS is rank #1

Westchester Coordinated Entry is at top of Tier 2

**Westchester County
Continuum of Care Partnership for the Homeless**

**EMERGENCY BOARD MEETING #1 IN PREP FOR HUD NOFA
July 12, 2016
2pm**

Attendees: Annette Peters-Ruvolo (Co-Chair), Karl Bertrand (Co-Chair), Paul Anderson-Winchell, Dahlia Austin, Stephaniee Bennett, Seth Berman (phone), David Booker, Howard Charton (phone), Yolanda Cruz-Martinez, James Coughlin, Anne Daddona, Helen Frankel (phone), May Krukiel, Maria McGinty, Danielle Scholar, Laurie Smalley, Yoav Spiegel, Camille Webb.

Topic #1:	Discussion:
Review of FY16 NOFA	<ul style="list-style-type: none"> Annette presented an overview of HUD’s NOFA. Relevant parts of the NOFA were highlighted and discussed to bring all Board members up to speed.

Topic #2	
Proposed priority ranking criteria review and vote	<ul style="list-style-type: none"> Karl, Annette and Yoav reviewed the proposed priority ranking criteria and items were discussed by the Board. One item was requested to be added: the APR timeliness – and a corresponding increase to the total maximum # of points to 42. It was also decided that HMIS would be ranked #1 and Coordinated Assessment would be ranked as the first project of Tier 2. After questions were answered and any concerns discussed, a vote took place to accept the proposed ranking with that one amendment in place. 13 in favor, 0 not in favor, no abstentions.

Topic #3	
Proposed FY2016 Reallocations	<ul style="list-style-type: none"> Annette and Yoav presented possible reallocations for the FY2016 CoC competition. The Board discussed, based on last year’s project rankings and results of the FY15 competition, possible reallocation of some or all Tier 2 non-PSH projects. The Board discussed probable low-ranking projects and their corresponding funding amounts that may be reallocated. It was discussed that regardless of which projects would be selected, the reallocated funds would be used for either a new RRH or PS project(s) under DSS. It was understood that a final decision on this would be made on 7/14/16 once the project rankings were presented to the Board.

Topic #4	
Permanent Supportive Housing Bonus: HUD requirements and priorities; WC CoC priorities	<ul style="list-style-type: none"> Karl, Yoav and Annette described this year’s PSHB and proposed various ideas for the Project Application. Populations that were presented at 6/30/16’s Meeting on Priorities were reviewed. All Board members were in favor of pursuing the PSHB and agreed to discuss further on 7/14 as it was agreed that reallocation and the PSHB needed to be decided together.

Westchester County Continuum of Care Partnership for the Homeless

Topic #5	
Housing First	<ul style="list-style-type: none"> Annette presented on the concept of Housing First and asked that each grantee carefully consider their projects in relation to these concepts when completing their Project Applications. The importance of PSH projects, wherever feasible, operating as Housing First was discussed, where TH projects may not depending on the population being served.

Topic #6	Discussion:
Next steps	<ul style="list-style-type: none"> Annette reviewed upcoming important dates to carry the Board to the submission due date for all Project Applications – 8/8/16

Meeting was adjourned at 4:00pm.

Respectfully submitted: Annette Peters-Ruvolo

Date: 07/14/16

Next Meeting Date: 7/14/16

Time: 2pm

Location: DCMH EAP room

**Westchester County
Continuum of Care Partnership for the Homeless**

**EMERGENCY BOARD MEETING #2 IN PREP FOR HUD NOFA
July 14, 2016
2pm**

Attendees: Annette Peters-Ruvolo (Co-Chair), Karl Bertrand (Co-Chair), Paul Anderson-Winchell, Dahlia Austin, Ruthann Becker (phone), Stephanice Bennett, Donna Besteiro, David Booker, Nadine Burns-Lyons, Howard Charton (phone), Desh Connors, James Coughlin, Anne Daddona, Helen Frankel, CarlLa Horton, Andrea Kocsis, May Krukiel, Maria McGinty, Danielle Scholar, Yoav Spiegel, Camille Webb.

Topic #1:	Discussion:
Review of FY16 NOFA	<ul style="list-style-type: none"> Annette briefly presented a review of the purpose of the meeting and provided context for those who were not present on 7/12/16.

Topic #2	
Tier1 and Tier2/Reallocations Project ranking review and vote	<ul style="list-style-type: none"> Annette, Karl and Yoav reviewed the proposed priority ranking. The Board unanimously accepted the project ranking as presented. It was discussed and a motion was put forth to adopt the project ranking and reallocate the bottom 4 projects, totaling approximately \$493,839 in funding. The projects will be re-allocated to one (1) RRH project to be RFP'd by the CoC. 15 in favor, 0 not in favor, no abstentions.

Topic #3	
Permanent Supportive Housing Bonus: HUD requirements and priorities; WC CoC priorities	<ul style="list-style-type: none"> Karl, Yoav and Annette reviewed this year's PSHB and proposed various ideas discussed on 7/12/16. Populations that were presented at 6/30/16's Meeting on Priorities were re-reviewed. All Board members were in favor of pursuing the PSHB and agreed to an RFP for the full \$793,854, which could be developed into 1 or 2 projects, depending on the strength of the submitted RFPs. Applicants would be able to determine the capacity, population and funding amount in their proposals, but would need to choose either RRH or PSH. The CoC Board will review projects and select candidates to apply with the FY16 NOFA on 7/28/16. PD&D will draft the RFP for release on 7/15/16 with a due date of 7/25/16 by 5pm.

Topic #5	
Housing First	<ul style="list-style-type: none"> The Board revisited the concept of Housing First. The importance of PSH projects, wherever feasible, operating as Housing First was discussed, where TH projects may not depending on the population being served. All Board members present were in agreement.

Westchester County
Continuum of Care Partnership for the Homeless

Topic #6	Discussion:
Next steps	<ul style="list-style-type: none">• Annette reviewed upcoming important dates to carry the Board to the submission due date for all Project Applications – 8/8/16• Board members were asked to be cognizant of emails from Annette, Anne and/or Yoav relating to the NOFA and to make sure they respond to deadlines in order for all involved to stay on course for the 8/8/16 Project Applications deadline.

Meeting was adjourned at 4:05pm.

Respectfully submitted: Annette Peters-Ruvolo

Date: 07/14/16

Next Meeting Date: 7/28/16

Time: 2pm

Location: DCMH EAP room

Westchester County

Continuum of Care Partnership for the Homeless

FY2016 Process for Reallocation

For FY2016, the Westchester County CoC used the Reallocation process to reallocate lower performing projects to create new higher performing projects.

Projects were ranked based on Performance Measure criteria approved by the CoC Board on July 12, 2016.

All 32 CoC projects appearing on the HUD Grant Inventory Worksheet (GIW) and eligible for renewal were ranked based on those Performance Measure criteria.

The results of the Project Ranking based on those criteria were discussed by the CoC Board on July 14, 2016. At that meeting, the CoC Board reviewed all renewal projects, and weighing the priorities of the CoC as well as HUD's priorities outlined in the FY2016 CoC NOFA, decided to reallocate the four (4) projects out of 32 renewals - comprising \$493,839 total ARA - with the lowest rankings based on the Performance Measures.

Reallocated funds were approved to be used to create a new Rapid Rehousing project. Reallocation to Rapid Rehousing was determined to be the most efficient use of funds as this type of assistance would be most helpful to a larger number of our non-chronically homeless individuals and families and HUD supports the Rapid Rehousing model. An RFP to solicit proposals from all interested eligible partner agencies was widely released on July 15, 2016.

These projects are:

Rank 32 (Score 17.89 out of 42): **Job Plus (\$46,911 ARA)**

Transitional Housing project.

Recipient: Municipal Housing Authority for the City of Yonkers

Rank 31 (Score 17.95 out of 42): **STAIR (\$209,400 ARA)**

Transitional Housing project.

Recipient: Westchester County Department of Social Services

Rank 30 (Score 20.45 out of 42): **Harm Reduction and Outreach (\$50,697 ARA)**

Supportive Services Only project.

Recipient: City of Mount Vernon.

Rank 29 (Score 23.29 out of 42): **Yonkers OWN (\$186,831 ARA)**

Transitional Housing project.

Recipient: Municipal Housing Authority for the City of Yonkers

The Westchester County CoC Board believes that the reallocated funding from these low performing projects will better serve the homeless population of Westchester County by funding a new, high performing Rapid Rehousing project.

Approved Westchester County CoC FY2016 Project Ranking Criteria

Ranking Criteria	Score	Source
Performance Outcomes from APR/HMIS		
Length of stay	0-3 points based on in-component performance	last APR submitted to HUD Q27
Percent of permanent housing exit destinations	0-3 points based on in-component performance	last APR submitted to HUD Q36 Performance Measure 1
Percent increases in income	0-3 points based on in-component performance	last APR submitted to HUD Q24b3
Monitoring Criteria		
Participant eligibility	0-3 points	CoC monitoring findings letter
Utilization rates	0-3 points based on in-component performance	last APR submitted to HUD Q8
Frequency or amounts of funds recaptured by HUD	0-3 points based on in-component performance	last APR submitted to HUD Q30
Need for specialized population services or serves population with severe needs		
Youth	5 points for one or more	
Victims of domestic violence		
Families with children		
Persons experiencing chronic homelessness		
Veterans		
Current or past substance use;		
Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status		
HIV		
Significant health or behavioral health challenges or functional impairments		
APR timeliness	0-2 points (1 point for each on time APR in FY12 and FY13)	e-snaps time stamps
Unique service to CoC structure	Subjective award of 0-2 points	FY14 rankings
Feasibility to sustain without HUD funding		
No alternate funding identified	5	
Housing part of another program or structure	2	
Significant number of family households with TANF/ Safety Net or other alternate funding readily available	0	
Project Component		
PSH, RRH	10	
TH	5	
SSO	0	
	maximum total = 42	

HMIS is rank #1
Westchester Coordinated Entry is at top of Tier 2



Page Discussion

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FY16 CoC Application

Revision as of 16:40, 20 July 2016 by Yoav legal (Talk | contribs | block) (diff) | Older revision | Latest revision (diff) | Newer revision → (diff)

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HUD FY2016 NOFA and Westchester County CoC Project Ranking [edit]

- Download FY16 NOFA PDF from HUD website
- FY2016 Grant Inventory Worksheet for Westchester County CoC
- FY2016 Westchester County CoC Board Project Ranking Criteria
- FY2016 Westchester County CoC Board Priority List in Rank order
- Description of process used by Westchester CoC Board to decide on proposed reallocations for FY2016 CoC competition



FY2016 Westchester County Application Documents [edit]

FY2016 Westchester County CoC Application [edit]

- Not yet submitted

FY2015 Westchester County Project Applications [edit]

- Not yet submitted

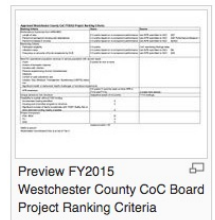
Meeting Minutes & Handouts [edit]

- Westchester County CoC Board meeting 7/12/16

Minutes of the July 12th meeting of the Westchester County CoC Board where the Project Ranking Criteria were discussed and approved

- Westchester County CoC Board meeting 7/14/16

Minutes of the July 14th meeting of the Westchester County CoC Board where the Final Ranking of CoC projects and reallocation of poorly performing projects were discussed and approved



Please find attached:

- 1) FY2016 Reallocation Process narrative**
- 2) Screen shot of CoC webpage showing public posting of the FY2016 Reallocation Process on 08/04/16.**
- 3) Letters to the three Project Applicants affected by the reallocation of the four projects informing them of the CoC Board approval of the reallocations.**
- 4) Minutes from 07/14/16 meeting of the Board of the Westchester CoC where FY2016 reallocations were proposed and approved by the CoC Board.**
- 5) Copy of RFP email announcing the opportunity to apply to become the subrecipient agency for the Rapid Re-housing project created using reallocation funds.**
As shown, this email was sent by CoC to over 100 community partners throughout the CoC's geographic area; most of these agencies are not current CoC providers.
- 6) A copy of the RFP form sent to these community partner agencies.**

Westchester County

Continuum of Care Partnership for the Homeless

FY2016 Process for Reallocation

For FY2016, the Westchester County CoC used the Reallocation process to reallocate lower performing projects to create new higher performing projects.

Projects were ranked based on Performance Measure criteria approved by the CoC Board on July 12, 2016.

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The results of the Project Ranking based on those criteria were discussed by the CoC Board on July 14, 2016. At that meeting, the CoC Board reviewed all renewal projects, and weighing the priorities of the CoC as well as HUD's priorities outlined in the FY2016 CoC NOFA, decided to reallocate the four (4) projects out of 32 renewals - comprising \$493,839 total ARA - with the lowest rankings based on the Performance Measures.

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FY16 CoC Application

Revision as of 10:46, 4 August 2016 by Yspiegel (Talk | contribs | block) (only | Older revision | Latest revision (diff) | Newer revision → (diff))

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HUD FY2016 NOFA and Westchester County CoC Project Ranking [edit]

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FY2016 Westchester County Application Documents [edit]

FY2016 Westchester County CoC Application [edit]

- Not yet submitted

FY2015 Westchester County Project Applications [edit]

- Not yet submitted

Meeting Minutes & Handouts [edit]

- Westchester County CoC Board meeting 7/12/16

Minutes of the July 12th meeting of the Westchester County CoC Board where the Project Ranking Criteria were discussed and approved

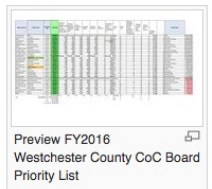
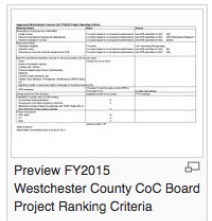
- Westchester County CoC Board meeting 7/14/16

Minutes of the July 14th meeting of the Westchester County CoC Board where the Final Ranking of CoC projects and reallocation of poorly performing projects were discussed and approved

- Westchester County CoC Board meeting 7/28/16

Minutes of July 28th meeting of CoC Board where voting took place to select PHB and Rapid Rehousing Reallocation projects to include in FY2016 CoC Application.

2016 Voting shares assigned to CoC Board members according to the Guiding Principles.





July 22, 2016

Shawyn Patterson-Howard
Commissioner, Community Planning and Development
City of Mount Vernon
City Hall, 1 Roosevelt Square North
Mount Vernon, NY 10550

RE: FY2016 Continuum of Care application project reallocation

Dear Ms. Patterson-Howard:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA.

In addition, at VII.A.2.b., CoCs are instructed to demonstrate that they reallocate lower performing projects to create new higher performing projects. Therefore, as part of the application process, we have reviewed, in as transparent a manner as possible, all projects eligible for renewal in FY2016 for possible reallocation.

During a Board meeting held on 07/12/16, the CoC Board approved Performance Measure criteria by which to rank renewal projects, including length of time homeless, % exits to Permanent Housing destinations, % clients increasing income during enrollment, participant eligibility, utilization rates, APR timeliness, and % HUD funds recaptured. Project Component was also taken into account, with Permanent Housing receiving more points than Transitional Housing or Supportive Services Only projects. Projects that serve priority populations, or populations with special needs and projects with unique value to the CoC were also scored higher.

Projects were ranked using the above criteria, and your **Harm Reduction and Outreach** (Supportive Services Only) project was ranked 30 out of the 32 projects eligible for renewal.

During a subsequent Board meeting held on 07/14/16, the CoC Board elected to reallocate the four projects with the lowest rankings based on the Performance Measures (ranks 29 through 32), including Harm Reduction and Outreach.

Reallocated funds were approved to be used to create a new Rapid Rehousing project. Reallocation to Rapid Rehousing was determined to be the most efficient use of funds as this type of assistance will be most helpful to a larger number of our non-chronically homeless individuals and families, and HUD strongly supports the Rapid Rehousing model.

On behalf of the CoC, I want to thank you for your work to assist the homeless in Westchester County, and your participation in this difficult process of self-evaluation.

We will, of course, keep you up to date with further developments regarding the FY2016 CoC competition as they become available. If you have any questions, please contact me at (914) 995-5278.

Thank you,

A handwritten signature in black ink, appearing to read 'Annette Peters-Ruvolo'.

Annette Peters-Ruvolo, LCSW

Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

July 22, 2016

Joseph Shuldiner
Executive Director
Municipal Housing Authority for the City of Yonkers
1511 Central Park Avenue
P.O. Box 35
Yonkers NY 10710-0035

RE: FY2016 Continuum of Care application project reallocation

Dear Mr. Shuldiner:

The FY2016 NOFA for the Continuum of Care Program Competition was released on 06/28/16. Per section VI.D.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA.

In addition, at VII.A.2.b., CoCs are instructed to demonstrate that they reallocate lower performing projects to create new higher performing projects. Therefore, as part of the application process, we have reviewed, in as transparent a manner as possible, all projects eligible for renewal in FY2016 for possible reallocation.

During a Board meeting held on 07/12/16, the CoC Board approved Performance Measure criteria by which to rank renewal projects, including length of time homeless, % exits to Permanent Housing destinations, % clients increasing income during enrollment, participant eligibility, utilization rates, APR timeliness, and % HUD funds recaptured. Project Component was also taken into account, with Permanent Housing receiving more points than Transitional Housing or Supportive Services Only projects. Projects that serve priority populations, or populations with special needs and projects with unique value to the CoC were also scored higher.

Projects were ranked using the above criteria, and your **Yonkers OWN** (Transitional Housing) project was ranked 29 out of the 32 projects eligible for renewal.

During a subsequent Board meeting held on 07/14/16, the CoC Board elected to reallocate the four projects with the lowest rankings based on the Performance Measures (ranks 29 through 32), including Yonkers OWN.

Reallocated funds were approved to be used to create a new Rapid Rehousing project. Reallocation to Rapid Rehousing was determined to be the most efficient use of funds as this type of assistance will be most helpful to a larger number of our non-chronically homeless individuals and families, and HUD strongly supports the Rapid Rehousing model.

On behalf of the CoC, I want to thank you for your work to assist the homeless in Westchester County, and your participation in this difficult process of self-evaluation.

We will, of course, keep you up to date with further developments regarding the FY2016 CoC competition as they become available. If you have any questions, please contact me at (914) 995-5278.

Thank you,


Annette Peters-Ruvolo, LCSW

Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



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Projects were ranked using the above criteria, and your **Job Plus** (Transitional Housing) project was ranked 32 out of the 32 projects eligible for renewal.

During a subsequent Board meeting held on 07/14/16, the CoC Board elected to reallocate the four projects with the lowest rankings based on the Performance Measures (ranks 29 through 32) including Job Plus.

Reallocated funds were approved to be used to create a new Rapid Rehousing project. Reallocation to Rapid Rehousing was determined to be the most efficient use of funds as this type of assistance will be most helpful to a larger number of our non-chronically homeless individuals and families, and HUD strongly supports the Rapid Rehousing model.

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Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 22, 2016

Anne Daddona
Program Administrator-Homeless Services
Westchester County Department of Social Services
85 Court Street
White Plains, NY 10601

RE: FY2016 Continuum of Care application project reallocation

Dear Ms. Daddona:

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Projects were ranked using the above criteria, and your **STAIR** (Transitional Housing) project was ranked 31 out of the 32 projects eligible for renewal.

During a subsequent Board meeting held on 07/14/16, the CoC Board elected to reallocate the four projects with the lowest rankings based on the Performance Measures (ranks 29 through 32), including STAIR.

Reallocated funds were approved to be used to create a new Rapid Rehousing project. Reallocation to Rapid Rehousing was determined to be the most efficient use of funds as this type of assistance will be most helpful to a larger number of our non-chronically homeless individuals and families, and HUD strongly supports the Rapid Rehousing model.

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Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless

**Westchester County
Continuum of Care Partnership for the Homeless**

**EMERGENCY BOARD MEETING #2 IN PREP FOR HUD NOFA
July 14, 2016
2pm**

Attendees: Annette Peters-Ruvolo (Co-Chair), Karl Bertrand (Co-Chair), Paul Anderson-Winchell, Dahlia Austin, Ruthann Becker (phone), Stephanice Bennett, Donna Besteiro, David Booker, Nadine Burns-Lyons, Howard Charton (phone), Desh Connors, James Coughlin, Anne Daddona, Helen Frankel, CarlLa Horton, Andrea Kocsis, May Krukiel, Maria McGinty, Danielle Scholar, Yoav Spiegel, Camille Webb.

Topic #1:	Discussion:
Review of FY16 NOFA	<ul style="list-style-type: none"> Annette briefly presented a review of the purpose of the meeting and provided context for those who were not present on 7/12/16.

Topic #2	
Tier1 and Tier2/Reallocations Project ranking review and vote	<ul style="list-style-type: none"> Annette, Karl and Yoav reviewed the proposed priority ranking. The Board unanimously accepted the project ranking as presented. It was discussed and a motion was put forth to adopt the project ranking and reallocate the bottom 4 projects, totaling approximately \$493,839 in funding. The projects will be re-allocated to one (1) RRH project to be RFP'd by the CoC. 15 in favor, 0 not in favor, no abstentions.

Topic #3	
Permanent Supportive Housing Bonus: HUD requirements and priorities; WC CoC priorities	<ul style="list-style-type: none"> Karl, Yoav and Annette reviewed this year's PSHB and proposed various ideas discussed on 7/12/16. Populations that were presented at 6/30/16's Meeting on Priorities were re-reviewed. All Board members were in favor of pursuing the PSHB and agreed to an RFP for the full \$793,854, which could be developed into 1 or 2 projects, depending on the strength of the submitted RFPs. Applicants would be able to determine the capacity, population and funding amount in their proposals, but would need to choose either RRH or PSH. The CoC Board will review projects and select candidates to apply with the FY16 NOFA on 7/28/16. PD&D will draft the RFP for release on 7/15/16 with a due date of 7/25/16 by 5pm.

Topic #5	
Housing First	<ul style="list-style-type: none"> The Board revisited the concept of Housing First. The importance of PSH projects, wherever feasible, operating as Housing First was discussed, where TH projects may not depending on the population being served. All Board members present were in agreement.

Westchester County
Continuum of Care Partnership for the Homeless

Topic #6	Discussion:
Next steps	<ul style="list-style-type: none">• Annette reviewed upcoming important dates to carry the Board to the submission due date for all Project Applications – 8/8/16• Board members were asked to be cognizant of emails from Annette, Anne and/or Yoav relating to the NOFA and to make sure they respond to deadlines in order for all involved to stay on course for the 8/8/16 Project Applications deadline.

Meeting was adjourned at 4:05pm.

Respectfully submitted: Annette Peters-Ruvolo

Date: 07/14/16

Next Meeting Date: 7/28/16

Time: 2pm

Location: DCMH EAP room

Westchester County

Continuum of Care Partnership for the Homeless

FY2016 Process for Reallocation

For FY2016, the Westchester County CoC used the Reallocation process to reallocate lower performing projects to create new higher performing projects.

Projects were ranked based on Performance Measure criteria approved by the CoC Board on July 12, 2016.

All 32 CoC projects appearing on the HUD Grant Inventory Worksheet (GIW) and eligible for renewal were ranked based on those Performance Measure criteria.

The results of the Project Ranking based on those criteria were discussed by the CoC Board on July 14, 2016. At that meeting, the CoC Board reviewed all renewal projects, and weighing the priorities of the CoC as well as HUD's priorities outlined in the FY2016 CoC NOFA, decided to reallocate the four (4) projects out of 32 renewals - comprising \$493,839 total ARA - with the lowest rankings based on the Performance Measures.

Reallocated funds were approved to be used to create a new Rapid Rehousing project. Reallocation to Rapid Rehousing was determined to be the most efficient use of funds as this type of assistance would be most helpful to a larger number of our non-chronically homeless individuals and families and HUD supports the Rapid Rehousing model. An RFP to solicit proposals from all interested eligible partner agencies was widely released on July 15, 2016.

These projects are:

Rank 32 (Score 17.89 out of 42): **Job Plus (\$46,911 ARA)**

Transitional Housing project.

Recipient: Municipal Housing Authority for the City of Yonkers

Rank 31 (Score 17.95 out of 42): **STAIR (\$209,400 ARA)**

Transitional Housing project.

Recipient: Westchester County Department of Social Services

Rank 30 (Score 20.45 out of 42): **Harm Reduction and Outreach (\$50,697 ARA)**

Supportive Services Only project.

Recipient: City of Mount Vernon.

Rank 29 (Score 23.29 out of 42): **Yonkers OWN (\$186,831 ARA)**

Transitional Housing project.

Recipient: Municipal Housing Authority for the City of Yonkers

The Westchester County CoC Board believes that the reallocated funding from these low performing projects will better serve the homeless population of Westchester County by funding a new, high performing Rapid Rehousing project.

Approved Westchester County CoC FY2016 Project Ranking Criteria

Ranking Criteria	Score	Source
Performance Outcomes from APR/HMIS		
Length of stay	0-3 points based on in-component performance	last APR submitted to HUD Q27
Percent of permanent housing exit destinations	0-3 points based on in-component performance	last APR submitted to HUD Q36 Performance Measure 1
Percent increases in income	0-3 points based on in-component performance	last APR submitted to HUD Q24b3
Monitoring Criteria		
Participant eligibility	0-3 points	CoC monitoring findings letter
Utilization rates	0-3 points based on in-component performance	last APR submitted to HUD Q8
Frequency or amounts of funds recaptured by HUD	0-3 points based on in-component performance	last APR submitted to HUD Q30
Need for specialized population services or serves population with severe needs		
Youth	5 points for one or more	
Victims of domestic violence		
Families with children		
Persons experiencing chronic homelessness		
Veterans		
Current or past substance use;		
Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status		
HIV		
Significant health or behavioral health challenges or functional impairments		
APR timeliness	0-2 points (1 point for each on time APR in FY12 and FY13)	e-snaps time stamps
Unique service to CoC structure	Subjective award of 0-2 points	FY14 rankings
Feasibility to sustain without HUD funding		
No alternate funding identified	5	
Housing part of another program or structure	2	
Significant number of family households with TANF/ Safety Net or other alternate funding readily available	0	
Project Component		
PSH, RRH	10	
TH	5	
SSO	0	
	maximum total = 42	

HMIS is rank #1
Westchester Coordinated Entry is at top of Tier 2

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This message was sent with High importance.

From: Santos, Deetra Sent: Fri 7/15/2016 1:56 PM

To:

Cc: Herceg, Mark; Orth, Michael; Poovappallil, Thomas; Peters-Ruvolo, Annette

Bcc: 'Perry Savino (psavino@harrisonyouth.org)'; 'Philip Kopack'; Procino, Debby; Ralph W. Pasacrita; Richard Nightingale; rliegner@theguidancecenter.org; Rosa Bautista (RBautista@jdam.org); 'Sharon McCarthy'; 'Sheila Springette'; Sheri Muth; Stephanie Fessenden (sfessenden@choiceofny.org); Steve Galluccio; Stringer, Michael; Susan Fox; swayne@fsw.org; 'Tere Pettitt'; Thomas Watson; Toni Volchok; Vincent DeSantis; Zukowski, Joseph; Apotheker, Jeff; Black, Adam; Connors, Desh; Curro, Sheri; Giuliano, Mark; Janice Stafford; John Francis (jfrancis@svwsjmc.org); John, Christopher; 'Micheale Rizzuto'; Mutschler, Betty; Nancimarie Colistra (nac9016@nyp.org); Patricia Hamill; Polly Kerrigan

Subject: RE-ALLOCATION RFP - WESTCHESTER COUNTY COC FY2016 RFP ANNOUNCEMENT

Message RRH Reallocation FY16 Preapp 1a (3).doc (70 KB) RRH FY16 Budget form 1a.xls (49 KB) WC CoC Rapid Re-housing Policies.pdf (135 KB)

[This email is sent on behalf of Annette Peters-Ruvolo, Program Director, Community Support Services](#)

Hello Everyone,

On behalf of the Westchester County Continuum of Care Partnership for the Homeless, I am pleased to announce that this year there are 2 separate and distinct HUD CoC RFPs; one for Rapid Re-Housing Reallocation (RRH) and another for the Permanent Supportive Housing Bonus (PHB). You will receive 2 separate emails with required forms and instructions for completion for each RFP.

Please see attached application form, budget form (including a sample budget) and an information sheet for the **RAPID RE-HOUSING REALLOCATION RFP**. It is encouraged that you read all the materials attached carefully prior to applying.

In order to be eligible for FY2016 HUD CoC funding, this five-page form plus Excel file draft budget form must be emailed by 5 PM on Monday, July 25, 2016 to Reallocation2016@programdesign.com.

We apologize for the very quick turnaround, but in order for us to have ample time to plan and apply on behalf of the CoC, we need the applications completed by July 25th.

Please feel free to forward this email to anyone who may be interested in applying.

See more about: Santos, Deetra.

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From: Santos, Deetra Sent: Fri 7/15/2016 1:56 PM

To:

Cc: Herceg, Mark; Orth, Michael; Poovappallil, Thomas; Peters-Ruvolo, Annette

Bcc: 'Lorelei Atalie Vargas'; 'Lubell, Irwin'; 'Maria Imperial'; 'Marie Considine'; 'Mark Levy'; 'Mat Costanzo'; 'mercedesj@wcmc.com'; 'Michael Johnan'; 'Michael Spicer (michael.spicer@saintjosephs.org)'; 'Nadine Burns-Lyons'; 'Orlando Acevedo'; 'Pam Healy'; 'Pat Lemp (Plemp@wjcs.com)'; 'Patsy Dileo'; 'Paul Anderson Winchell (paulAW@liftingupwestchester.org)'; 'Perry Savino (psavino@harrisonyouth.org)'; 'Philip Kopack'; 'Procino, Debby'; 'Ralph W. Pasacrita'; 'Richard Nightingale'; 'rliegner@theguidancecenter.org'; 'Rosa Bautista (RBautista@jdam.org)'; 'Sharon McCarthy'; 'Sheila Springette'; 'Sheri Muth'; 'Stephanie Fessenden (sfessenden@choiceofny.org)'; 'Steve Galluccio'; 'Stringer, Michael'; 'Susan Fox'; 'swayne@fsw.org'; 'Tere Pettitt'; 'Thomas Watson';

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Bcc: 'Dee Furang'; 'Don Fitch (DonFitch@Freecenter.org)'; 'Ellen Morehouse'; 'Elliot Winters'; 'Eric Amoh (amohe@wcmc.com)'; 'Eric Toth'; 'fpellot@nyp.org'; 'Frank Hassid'; 'Geoffrey Anderson (ganderson@wroinc.org)'; 'George Donaghy'; 'Gregory, John'; 'Guy Fessenden'; 'Hardesty, Carol'; 'James Coughlin'; 'Janet Goldberg (jgoldberg@pmhc.us)'; 'Janet Langsam'; 'Jason Grosso'; 'jbravo@wilc.org'; 'Jennifer Jacquet Murray'; 'Jessy Mendez'; 'JKohomban@childrensvillage.org'; 'Joan Arnold'; 'Joanna Dawood'; 'Jodi Sawyer'; 'Kathy Pandekakes (KathyPHDS@aol.com)'; 'Kim Egan'; 'kohna@mhawestchester.org'; 'Kristina Yamin (KYamin@clusterinc.org)'; 'Linda Bonci'; 'Linda Heyward'; Lombardi, Madeline;

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RE-ALLOCATION RFP - WESTCHESTER COUNTY COC FY2016 RFP ANNOUNCEMENT - Message (HTML)

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To:

Cc: Herceg, Mark; Orth, Michael; Poovappallil, Thomas; Peters-Ruvolo, Annette

Bcc: 'Abbie Relkin (relkina@mhawestchester.org)'; 'Abramovich, Ruthanne'; 'ABrody@searchforchange.com'; 'Agnes Kadavil'; 'Alan Trager (atrager@wjcs.com)'; 'Alisa Kesten (alisa@volunteernewyork.org)'; 'amarcus@lexingtonctr.org'; 'Amy Colesante'; 'Amy Gelles'; 'Andrea Kocsis (andreakhds@aol.com)'; 'Anna Vero'; 'Argentina, Margaret'; 'Bernadette Kingham-Bez (bkingham@svwsjmc.org)'; 'Beverly Pierce'; 'Brian Kaley (bkaley@riversidehealth.org)'; 'Brian Kornfield'; 'Bryan Murphy'; 'Carla Lisio'; 'Carol Armas (carmas@familytieswestchester.org)'; 'Charles Devlin'; 'Christina Cornish-Lauria (CareersforPeople@aol.com)'; 'Claus Von Schorn'; 'Clay Rivers'; 'Daniel Blum'; 'Dean Harlam'; 'Debbie Feldman (dfeldman@wjcs.com)'; 'debbie@a-homehousing.org';

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9:26 AM 9/12/2016

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You forwarded this message on 7/25/2016 1:56 PM.
This message was sent with High importance.

From: Peters-Ruvolo, Annette Sent: Fri 7/15/2016 12:33 PM
To: |
Cc:
Bcc: Blanca P. Lopez; Connors, Desh; Daniel Gore; Dennis Hanratty; Elizabeth McCorvey (frcem@aol.com); Fleming, Amy; Freda Macon; Giuliano, Mark; Gordon Albert; John, Christopher; joseph shuldiner; Linda Puoplo (lpuoplo@whiteplainsny.gov); Paul Stolz; Sanchez, Dana; alba.guevara@yonkersny.gov; Allison McSpedon; Amy Gelles; 'Anderson Geoffrey'; Ashley Rivera; Austin, Dahlia; Candice Kane; Carla Horton; Carole Troum (ctroum@hope-cs.org); Daddona, Anne; Danielle Scholar; David Booker; Donna Besteiro; erikad@greyston.org; Frankel Helen; Gerry Riera; Howard Charton (hcharton@breakingground.org); James Coughlin; Jenny Besch (JBesch@clusterinc.org); Judy Curcio; Julie Pena (julie@thesharingcommunity.org); kathy pandekakes; KBertrand@programdesign.com; Kocsis Andrea; Krukiel, May; Manzione, Susan; Marcie Ciuffetelli (mciuffetelli@mhacy.org); 'Maria McGinty'; Maria McGinty2; Melissa Massaline; Michelle Gonzalez YWCA Yonkers; Michelle Pedraza (Michelp@greyston.org);

Subject: re: RE-ALLOCATION RFP - WESTCHESTER COUNTY COC FY2016 RFP ANNOUNCEMENT

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See more about: Peters-Ruvolo, Annette.



REQUEST FOR PROPOSALS

FY2016 Westchester County Continuum of Care Rapid Rehousing Reallocation

The Westchester County CoC is soliciting proposals from eligible partner agencies requesting to be included as a subrecipient provider in the application to HUD for the Rapid Rehousing Reallocation project, which **may** be awarded through the FY2016 Continuum of Care (CoC) Program competition.

Subrecipient agencies will be chosen based on their ability to administer the Rapid Rehousing project successfully under the guidelines and requirements set by HUD in the FY2016 Continuum of Care Notice of Funding Availability and 24 CFR 578.

Applicants should have experience serving and successfully engaging the homeless populations described below and demonstrated capacity to manage grant funds in a timely and effective manner.

All Rapid Rehousing proposals to Westchester County CoC **must** propose a Rapid Rehousing project (RRH) that will serve individuals and/or families coming directly from the streets or emergency shelters or persons fleeing domestic violence.

One potential subrecipients will be chosen.

RRH proposals must meet the HUD definition of Rapid Rehousing found at 24 CFR 578.37(a)(1)(ii), and follow the Westchester CoC Rapid Rehousing policies [also attached].

Budget proposals for either PSH or RRH projects must be **exactly** \$793,854 (100% of PHB) **or** \$493,839.

All budget items must be eligible Continuum of Care project costs, per 24 CFR 578.43 through 578.63.

All RRH Budget proposals **must include**:

- Scattered-site rental assistance for participant households
- Sufficient case management and any other eligible services to assist clients to achieve self-sufficiency
- Administration costs equal to 7% of program costs
- Matching funds (cash match from applicant *or* in-kind match supplied by MOU with a 3rd Party provider) equal to 25% of HUD grant funds.

REQUEST FOR PROPOSALS
FY2016 Westchester County Continuum of Care
Rapid Rehousing Reallocation

In order to be eligible for FY2016 PHB funding, this **five-page** form plus Excel file draft budget form must be emailed by 5 PM on Monday, July 25, 2016 to RRH2016@programdesign.com.

Agency Name:			
Mailing Address:			
City & Zip Code:			
Contact Name and Title:			
Telephone and Email:			
Number of Units		Total Number of Clients	

Using only the space provided, briefly describe the following:

1. Describe the plan for Supportive Services offered to program participants to ensure successful transition into and retention in permanent housing–this includes all supportive services, regardless of funding source.

REQUEST FOR PROPOSALS
FY2016 Westchester County Continuum of Care
Rapid Rehousing Reallocation

2. Describe your agency's experience identifying, documenting, engaging, and supporting in housing Homeless persons.

Does your project intend to serve a specific subpopulation within those allowed by HUD for your project (e.g. veterans, families, youth aged 18-24, some other subpopulation)?

If so, identify the subpopulation, and make sure to describe your agency's experience with that subpopulation.

3. Explain how your budget is cost-effective for the number of clients served.

REQUEST FOR PROPOSALS
FY2016 Westchester County Continuum of Care
Rapid Rehousing Reallocation

4. Describe your agency's experience with the Rapid Re-Housing models.

5. Describe how your agency will successfully enable clients to exit the project within 24 months with no HUD subsidy so that they can remain permanently housed in their housing:

REQUEST FOR PROPOSALS
FY2016 Westchester County Continuum of Care
Rapid Rehousing Reallocation

6. Describe the amount, type, and source of the Matching funds to be supplied.

7. Describe your plan for ensuring that program participants will be individually assisted to obtain the benefits of the mainstream health, social, and employment programs (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).

8. Other Agency Qualifications (include relevant experience, leveraged resources, and partnerships):



WESTCHESTER COUNTY CONTINUUM OF CARE PARTNERSHIP FOR THE HOMELESS

GUIDING PRINCIPLES – APPROVED 12/17/14

This document sets forth the guiding principles of membership and participation in The Westchester County Continuum of Care Partnership for the Homeless.

Article I – Name

Section 1: The name of this association shall be the Westchester County Continuum of Care Partnership for the Homeless (CoC Partnership)

Article II – Mission, Vision, Purpose

Section 1: The mission of the CoC Partnership is to coordinate all of the stakeholders, systems and resources available to prevent and end homelessness in Westchester County

Section 2: The vision of the CoC Partnership is that within the next ten years, all persons and families experiencing the possibility of homelessness in Westchester County will have a permanent, safe, decent and affordable place to call home, will secure the means to economic stability and that no one will remain homeless in Westchester for more than 30 days before being restored to appropriate housing.

Section 3: The purpose of the CoC Partnership is to assist in the coordination and development of services and housing for homeless and low-income persons with housing needs by seeking to:

- Provide knowledge and engage the general population of Westchester County to understand the issues around homelessness;
- Identify housing and services needs of homeless and low-income persons in Westchester County based upon ongoing needs assessments ;
- Distribute relevant information to Westchester County service providers to address housing needs;
- Mobilize the fullest possible variety of public and private resources to prevent and end homelessness in Westchester County;
- Mobilize resources to help individuals and families achieve economic stability;
- Support planning and development of services to meet prioritized needs within Westchester County;
- Encourage the development of a diverse array of permanent affordable, subsidized and supportive housing throughout Westchester County; and
- Effectuate all Continuum of Care responsibilities as set forth by HUD

Article III – General Membership

Section 1: General Membership shall be comprised of individuals and agencies concerned with the development and coordination of homeless assistance programs. Membership is open and shall include but is not limited to:

- Homeless or formerly homeless individuals and families,
- Developers and landlord organizations,
- Neighborhood groups,
- Not-for-profit organizations representing special needs populations including (but not limited to) veterans, youth, domestic violence survivors, and people with disabilities,
- Representatives of business and financial institutions,
- Representatives of private foundations and funding organizations,
- Social service providers,
- State and local government agencies, and
- Advocates and other interested parties.

Section 2: General Members are entitled to:

- Have voting rights at annual General Membership meetings (One vote per entity unless individual member),
- Receive verification indicating length of membership and level of participation,
- Receive information and updates via e-mail distribution list,
- Serve on committees, and
- Receive selected data related to the homeless population and homeless services in Westchester County collected by the CoC Partnership.

Section 3: General Membership shall be updated annually. Only active members are eligible to vote. For membership to be considered active, a representative must have attended at least 1 of the last 2 General Membership meetings or 50% of a specific CoC committee's meetings in the previous calendar year. Individuals interested in becoming a general or committee member would contact one of the CoC Co-Chairs and complete a contact information form.

Section 4: General Membership motions will be carried by majority vote of those active members present.

Article IV – CoC Board

Section 1: The business of the CoC Partnership shall be managed by a Board of voting members, as follows:

- Continuum of Care Program grant funded recipient and subrecipient agency representatives, 1 from each CoC grant recipient/subrecipient
- One homeless or formerly homeless individual
- One ESG grant recipient
- One vocational/employment services representative
- One educational representative
- One health care representative
- One veterans services representative
- Two or Three at large members so that the total number of Board members is an odd number

Section 2: Voting shares will be allocated to Board members in proportion to the total amount of annual CoC Program grant funding administered by the agency represented as either a grant recipient, subrecipient, or both (in which case the funding counts twice).

The number of voting shares allocated to the CoC Program funded Board members will be equal to the total annual CoC Program grant funding administered by the agency represented divided by 100,000, rounded up to the nearest whole number.

The number of voting shares allocated to each non-CoC Program funded Board member (the sector representatives and at large members) will be equal to the average number of voting shares allocated to the CoC Program funded Board members.

Board membership and allocation of voting shares will be determined by the Co-Chairs following the final annual CoC Program funding announcement by HUD each year.

Section 3: The grant recipient and subrecipient representatives are assigned by their organization's CEO.

Section 4: ESG, vocational, Educational, Health Care, Veterans, & homeless representatives are nominated by the Co-Chairs with approval by the Board.

Section 5: The two or three at large representatives are elected by the General Membership and can include but not be limited to representatives from the business sector, faith based organizations, law enforcement, non-profit agencies, mental health, victims services, foster-care, veteran's services, homeless or formerly homeless individuals and/or affordable housing development sectors.

At large members must be drawn from individuals or agencies not otherwise represented by other Board member positions.

Elections will be held at a General Membership meeting within 60 days following the submission of the annual HUD application. Nominations will be solicited from the floor, eligibility determined and a vote taken.

Section 6: Each member will serve a term of 2 years. Terms shall be staggered. There is no limit to the number of terms a Board member can serve.

Section 7: Each organizational Board member can designate up to 2 alternates. This notification and any changes must be in written form and submitted to the CoC Co-Chairs.

Section 8: Responsibilities

- The CoC Board as a whole is responsible for meeting the CoC Partnership objectives described in Article II; Section 3: Purpose.
- Each Board member, or their alternate(s), is expected to:
 - Attend at least 50% of Board meetings held
 - If applicable, communicate important CoC activities and decisions to their agencies/sub-recipients
 - Participate in efforts that achieve the objectives in Article II: Section 3: Purpose

Members not in compliance will be notified by the Co-Chairs that their agency is no longer in good standing and will be unable to receive verification indicating CoC length of membership and level of participation until rectified.

Section 9: Board motions will be carried by a majority of the voting shares cast by the Board members (or their named alternates) present, with Board members casting votes according to the allocation of voting shares determined per Section 2 above.

Quorum shall be more than one-half of the number of total voting shares allocated to all Board members. If no Quorum is present, the Co-Chairs may reschedule Board meetings per Article VII, Section 1, as necessary.

Article V – Collaborative Applicant

Section 1: For the purposes of the annual HUD NOFA application and the management of the Continuum of Care planning funds grant, the CoC Board must designate one particular grant recipient to be the “collaborative applicant.” The collaborative applicant is the only entity that can apply for grants from HUD on behalf of the Continuum that the collaborative applicant represents. The collaborative applicant is also the only entity that may apply for and receive Continuum of Care planning funds on behalf of the CoC.

Section 2: The collaborative applicant will be chosen by the CoC Board annually prior to the release of the HUD NOFA and accepted by majority vote of those Board members (or their named alternates) present.

Article VI – HMIS

Section 1: The CoC Board must:

- Designate a single Homeless Management Information System (HMIS) for the CoC;

- Designate an eligible applicant to manage the Continuum’s HMIS, which will be known as 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 sub-recipients in the HMIS; and
- Ensure the HMIS is administered in compliance with requirements prescribed by HUD.

Article VII – Co-Chairs

Section 1: The Co-Chairs shall perform the following duties:

- Co-Chairs call, facilitate, and set agendas for all CoC Board meetings. A Co-Chair can call special meetings of the CoC Partnership. Co-Chairs are not voting members of the Board.
- Co-Chairs will be responsible for monitoring membership and tracking CoC meeting attendance. They shall be responsible for the minutes of the Board meetings of the CoC Partnership and for their distribution.
- Co-Chairs shall provide information as requested to the Collaborative Applicant and recipients.
- Co-Chairs shall nominate ESG, vocational, Educational, Veterans, Health Care & homeless representatives to the CoC Board.

Section 2: One of the Co-Chairs shall be appointed by a consensus of the Commissioners of the Westchester County Departments of Community Mental Health, Social Services and/or Planning. One of the Co-Chairs shall be appointed by a vote of the other non-County Board members.

Section 3: To be eligible for Co-Chair, a candidate must be an active member of the CoC as defined in Article III Section 3. Co-Chairs will serve a term of 2 years from the date of election/appointment. There is no limit to the number of terms a Co-Chair can serve.

Section 4: Any vacancies that occur in the appointed seats shall be filled upon the recommendation of those described above.

Article VIII – Committees

Section 1: The CoC Partnership operates standing Committees, including:

- Shelter and Service Providers
- Data and Systems
- Westchester Homelessness Prevention Network
- Patriot Housing Initiative

- Recovery Housing Network/ VI-SPDAT placement team
- Self-Sufficiency Committee

Section 2: Recipients also operate regular sub-recipient meetings.

Section 3: Ad Hoc Committees can be formed at the request of Co-Chairs and/or the Collaborative Applicant to complete specific tasks, such as the Ad Hoc Application Workgroup.

Section 4: Committee motions will be carried by a majority vote of the those present.

Article IX – Meetings/Attendance

Section 1: General Membership will meet at least twice annually. The Board will meet at least quarterly. Committee meetings will be held at least quarterly.

Section 2: If requested at any time by at least five members of the Board, a special General Membership meeting must be called by a Co-Chair. A notice of the special General Membership meeting must be distributed to the CoC membership at least 2 business days prior to the meeting date.

Section 3: Attendance will be recorded at all CoC Partnership and Committee meetings.

Article X- Amendments

Section 1: These Guiding Principles may be approved and amended by a majority vote at a meeting of the CoC Partnership Board provided that the proposed amendment(s) shall have been distributed in writing to each Board member at least 10 business days before the meeting of the CoC Partnership. As per HUD regulations, these Guiding Principles will be reviewed, updated as needed and approved by the CoC Partnership Board at least annually.

Article XI – Nondiscrimination

Section 1: The members, officers, and persons served by the CoC Partnership shall be selected/served entirely on a nondiscriminatory basis with respect to age, gender, race, ethnicity, religion, disability, natural origin, actual or perceived sexual orientation, gender identity or marital status in accordance with all state and federal regulations.

Article XII – Conflict of Interest

Section 1: It is the policy of the CoC Partnership that the Co-Chairs and Board members disclose any perceived conflicts of interest. Co-Chairs may require that a Board member recuse themselves from voting depending on the nature of any disclosure.

Article XIII – General Provisions

Section 1: Parliamentary Authority: Robert's Rules of Order, Newly Revised, shall be the parliamentary authority for all matters of procedures not specifically covered by these Guiding Principles.



HMIS Agency Participation Agreement

Westchester County Department of Social Services

Partner Agency Name

HMIS Lead Agency Name

I. BACKGROUND AND PURPOSE

The Homeless Management Information System (HMIS) is the information system designated by the Westchester County Continuum of Care Partnership for the Homeless (CoC Partnership) to comply with HUD's data collection, management, and reporting standards and used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.

The U.S. Department of Housing and Urban Development (HUD) and other planners and policymakers at the federal, state and local levels use aggregate HMIS data to obtain better information about the extent and nature of homelessness over time. Specifically, an HMIS can be used to produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless programs. Through the HMIS, CoC programs and clients benefit from improved internal and external coordination that guides service and systems planning. A robust HMIS also helps communities engage in informed advocacy efforts, including the pursuit of policies that result in targeted services. Analysis of information gathered through HMIS is critical to accurately calculate the size, characteristics, and needs of different subpopulations. Additionally, use of the HMIS by agencies not funded by HUD provides benefits to both these agencies and the homeless provider community at large, including the avoidance of service duplication through the sharing of client data. HMIS participation also positions agencies for future funding, as many private foundations now require it.

II. GENERAL PROVISIONS

- A. The CoC Partnership has designated Westchester County Department of Social Services (DSS) as the HMIS Lead Agency. All homeless assistance and homelessness prevention service providers in this CoC are eligible to become HMIS Partner Agencies, except for domestic violence providers covered by the Violence Against Women Act (VAWA). The parties share a common interest in serving the homeless population and those at risk of becoming homeless while reducing the current number of homeless in the CoC jurisdiction. The purpose of this agreement is to set out the provisions for the implementation, maintenance, coordination and operation of the HMIS. DSS – in coordination with its authorized agents, including the HMIS Software Provider and HMIS Administrator – is responsible for administering the HMIS on behalf of the CoC, including the implementation, management, training, maintenance, support and enhancement of the HMIS software. The Partner Agency is responsible for entering client data in the HMIS according to program requirements. Detailed responsibilities are listed in sections below.
- B. The Agency Participation Agreement (APA) addresses the respective responsibilities of DSS and the Partner Agency for ongoing HMIS service and activities. The specific responsibilities of the parties to this agreement for the confidentiality, reporting requirements, training, policies and procedures, hardware and software for the HMIS are clearly defined herein to ensure an effective, efficient and secure system. All addendums referenced in this agreement



HMIS Agency Participation Agreement

are also part of the agreement. DSS will abide by all applicable laws, and the Partner Agency will be expected to do the same.

III. DSS DUTIES AND RESPONSIBILITIES

DSS will:

A. GENERAL

- 1) In consultation with the CoC Partnership, select the HMIS Software Provider, define the HMIS program and implement its standards, promote awareness of the program to all interested parties and monitor the program's successes and failures in order to validate its effectiveness.
- 2) Hold the Partner Agency, and its agents, harmless and indemnify it from any and all damages, liabilities, claims and expenses that may be claimed by any third parties arising from DSS's conduct under this agreement.
- 3) Be the sole liaison between the Partner Agency and the HMIS Software Provider; user questions concerning the software are to be directed only to DSS.
- 4) Develop, implement and maintain privacy, confidentiality and security protocols for the HMIS in consultation with the CoC Partnership.
- 5) Provide standardized HMIS training and technical assistance to all Partner Agencies.
- 6) In collaboration with the HMIS Software Provider, take all necessary precautions to prevent any destructive or malicious programs from being introduced to the HMIS and, through it, to the Partner Agencies. DSS will employ all appropriate measures to detect virus infection and all appropriate resources to efficiently disinfect any affected systems as quickly as possible.
- 7) Notify the Partner Agency of HMIS failure, errors and/or problems immediately upon discovery.
- 8) Provide technical assistance during normal business days, with the exception of federal and scheduled holidays.
- 9) Provide all other reasonably expected activities regarding the operation of the HMIS.

B. PRIVACY, CONFIDENTIALITY AND SECURITY

- 1) Maintain all client-identifying information in strictest confidence. DSS may suspend HMIS access to any user or Partner Agency for the purpose of investigating suspicion of breached confidentiality.
- 2) Contract with the HMIS Software Provider to maintain and administer central and backup server operations including security procedures and daily system backup to prevent the loss of data.
- 3) Designate the HMIS Lead Security Officer in the HMIS Lead Security Certification document, which must be updated at least annually. The contact information is incorporated into the Security Provisions by reference. The duties of the Security Officer must be included in the individual's job description or HMIS Lead Security Certification, and signed by the Security Officer to indicate understanding and acceptance of these responsibilities. These duties include, but may not be limited to:
 - With the HMIS Administrator, review the Security Provisions annually and at the time of any change to the security management process, the HMIS software, the methods of data exchange, and any HMIS data or technical requirements issued by HUD. In the event that changes are required to the HMIS Security Provisions, work with the HMIS Administrator to develop recommendations to the CoC Partnership for review, modification and approval.



HMIS Agency Participation Agreement

- Annually review the HMIS Lead Security Certification document, test the HMIS Lead security practices for compliance, and work with the HMIS Administrator to coordinate communication with HMIS Software Provider to confirm security compliance.
 - Using the HMIS Lead Security Certification document, certify that the HMIS Lead adheres to the Security Provisions or develop a plan for mitigating any shortfall, including milestones to demonstrate elimination of the shortfall over as short a period of time as is possible.
 - Implement any approved plan for mitigation of shortfalls and provide appropriate updates on progress to the CoC Partnership.
 - Respond, in cooperation with the HMIS Administrator, to any security questions, requests, or security breaches to the CoC Partnership, and for communicating security-related HMIS information to the organization's end users.
- 4) Ensure the HMIS Lead Security Officer and any administrative user able to manage and access data from more than one Partner Agency undergo criminal background verification. Record of the completed background check (though not the results) is subject to inspection by the CoC. The HMIS Lead will hire individuals with criminal justice histories only to the extent the hire is consistent with any relevant hiring policies of DSS, unless the background check reveals a history of crimes related to identity theft or fraud. The HMIS Lead will manage the results of any background checks conducted on a case-by-case basis.
 - 5) Monitor access to the HMIS in order to detect violations of information security protocols and maintain for inspection accurate logs of all changes made to the information contained within the database.
 - 6) Issue user accounts, passwords and certificates of participation, when requested, for HMIS users, provided that:
 - a) The Partner Agency has signed the APA;
 - b) The Partner Agency has designated an HMIS Site Administrator;
 - c) The HMIS Lead Agency has received signed User Agreements; and,
 - d) The user has successfully completed HMIS user training, including any tests.
 - 7) Periodically change Partner Agency passwords for security purposes and lock out user accounts after a specified period of inactivity.
 - 8) Comply with the HMIS Privacy Policy and HMIS Data Sharing Policy and not release personally identifiable information to any person, agency or organization, unless allowed by the HMIS Privacy Policy.
 - 9) Configure and maintain inter-agency data sharing options in HMIS.
 - 10) Conduct Partner Agency site visits to ensure compliance with privacy and security protocols.

C. USER TRAINING AND PROGRAM CONFIGURATION

- 1) Conduct training, including security training at least annually, for all HMIS users.
- 2) Authorize user access to HMIS in accordance with the HMIS policies and procedures.
- 3) Provide training materials, which may include user manuals, definitions and instructions, to each individual who attends the training event.
- 4) Configure Partner Agency programs according to the latest HMIS Data Standards, including related grants, services, assessments, housing units, and other applicable options in the HMIS software.
- 5) Provide additional trainings according to the user role, program type, or specific activities. These trainings may include web-based refresher courses in group or one-on-one format.



HMIS Agency Participation Agreement

IV. Partner Agency DUTIES AND RESPONSIBILITIES

The Partner Agency will:

A. GENERAL

- 1) Strictly adhere to all policies and procedures contained in the APA, as it may be amended from time to time, and all of its appendices. A copy of this agreement can be found at <http://programdesign.com/wiki/WCCOCH>, and a signed hard copy will be provided to the Partner Agency.
- 2) Hold DSS, and its agents, harmless and indemnify it from any and all damages, liabilities, claims and expenses that may be claimed by any third parties arising from Partner Agency's conduct under this agreement.
- 3) Maintain at least 1 (one) active user account at any time.

B. PRIVACY AND CONFIDENTIALITY

- 1) Comply with all federal and state laws and regulations, and with all HMIS policies and procedures (particularly the HMIS Data and Technical Standards Final Notice from July 2004, the HMIS Data Standards Revised Notice from March 2010 and subsequent revisions) relating to the collection, storage, retrieval, and dissemination of client data.
- 2) Comply with the HMIS Privacy Policy and the HMIS Data Sharing Policy.
- 3) Obtain client consent before any data is collected and shared. The consent can be:
 - a) Inferred (baseline): The agency must post a visible HMIS Consumer Notice and HMIS Privacy Policy in a reception area or at each intake station.
 - b) Informed Written (optional): The client may sign a release of information (ROI) form stored on location.
 - c) Informed Verbal (optional): The client may give oral permission to Partner Agency personnel with written documentation of consent by witness.
- 4) Where informed written consent applies, utilize the HMIS Client Release of Information Form (ROI), or an alternative approved by DSS. With consent, the Partner Agency is authorized to share data until such time as the client withdraws consent, at which point the Partner Agency shall be responsible for ensuring the client's data entered thereafter is restricted from view. Collect and store records of any ROI authorizations for, at least, 3 (three) years.
- 5) Take all necessary precautions to prevent destructive or malicious programs, including but not limited to viruses or spyware, from being introduced to any part of the HMIS, including users' computers. Employ appropriate measures to detect virus or spyware infection and deploy all appropriate resources to efficiently disinfect any affected systems as quickly as possible.

C. DATA QUALITY AND MONITORING

- 1) Fully comply with the latest HMIS Data Quality Plan. This plan is posted on the website, <http://programdesign.com/wiki/WCCOCH>, and available in hard copy upon request.
- 2) Enter data into the HMIS within the timeframe as specified in the Data Quality Plan. Timely data entry prevents duplication of client records and other shared transactions, such as enrollments and services. It also allows good quality data for both program-specific and aggregate reports. Partner Agencies and their HMIS users may be held liable in the event that a preventable duplication occurs as a result of missing, late or incomplete data entry. Repetitive lack of timely entry can result in official reports of concern and possible findings against the Partner Agency and could culminate in official penalties up to and including loss of project funding.



HMIS Agency Participation Agreement

- 3) Collect all mandatory data elements, according to the data quality requirements.
- 4) Take all steps reasonably necessary to verify the information provided by clients, and to see that it is correctly entered into the HMIS by the Partner Agency user.
- 5) Immediately notify DSS when a programmatic, personnel or other issue arises that precludes the Partner Agency from entering the HMIS data within the allowed timeframe. By informing the DSS in a timely fashion, all parties can work together to craft an interim solution that is minimally disruptive to program operations and the HMIS as a whole.
- 6) Take reasonable steps to ensure that no profanity, offensive language, malicious information or discriminatory comments based on race, ethnicity, religion, national origin, disability, age, gender or sexual orientation are entered into the HMIS.
- 7) Do not upload material into the HMIS that is in violation of any federal or state regulations, including, but not limited to: copyrighted material, material legally judged to be threatening or obscene, and material known to the Partner Agency to be confidential trade secrets.
- 8) Allow the DSS staff to conduct periodic monitoring and reviews of the original documentation in client files to ensure data accuracy. This monitoring is limited only to the client information relevant to HMIS data collection.

D. TRAINING

- 1) Ensure that each Partner Agency HMIS user attends the appropriate training, agrees to and signs the User Agreement, receives HMIS security training prior to being given access to HMIS and participates in security training at least annually.
- 2) Ensure that the Partner Agency program officers or designated HMIS site administrators attend any DSS-sponsored HMIS trainings, stay current with the HMIS policies and procedures, and relate news and updates to its HMIS users.
- 3) Assess the HMIS users' performance and refer for additional training as needed.

E. SECURITY

- 1) Limit HMIS access only to authorized users and follow all HMIS protocols for monitoring those users. DSS reserves the right to terminate access to any HMIS user who breaches client confidentiality or system security protocols.
- 2) Do not permit any person to enter or use the HMIS unless and until:
 - a) The person has completed the required HMIS training;
 - b) DSS has issued that person the appropriate user account and password; and,
 - c) Both the APA and the User Agreement have been signed and returned to DSS.
- 3) Maintain copies of all User Agreements signed by Partner Agency personnel to whom user accounts have been issued.
- 4) Designate an HMIS Security Officer to be responsible for the implementation of the HMIS security provisions at the Partner Agency.
- 5) Fully comply with the HMIS Data Sharing Policy and the HMIS Privacy Policy.
- 6) Not release any HMIS data to any entity that is not part of the HMIS, unless such release is covered by the HMIS Data Sharing Policy or the HMIS Privacy Policy.
- 7) Develop an internal procedure to be used in the event of a violation of any of the HMIS security protocols.
- 8) Develop and adhere to local security standards that should include the following:
 - a) Products: Physical security (door locks, computer screen view, local network passwords, firewall)
 - b) People: Personnel security (authorized users only, local oversight of usage)
 - c) Procedures: Organizational security (policies and procedures are in place)



HMIS Agency Participation Agreement

- 9) Adhere to their own policies regarding conducting background checks and hiring individuals with criminal justice histories, as long as they comply with all relevant laws.
- 10) Notify HMIS Administrator within one business day of the separation of any employee who was a user of the HMIS. Notification should preferably occur by close of business on the day of employee separation.

V. PROPRIETARY RIGHTS OF CLIENTTRACK, INC.

A. The Partner Agency shall not give or share assigned passwords and access codes for HMIS with any other Agency, business, or Individual.

B. The Partner Agency shall not cause in any manner, or way, corruption of HMIS.

VI. TERMS AND CONDITIONS

A. Neither the Lead Agency nor the Partner Agency shall transfer or assign any rights or obligations without the written consent of the other party.

B. This Agreement shall be in-force until revoked in writing by either party provided funding is available.

C. This Agreement may be terminated immediately with cause.

The signature of the parties hereto indicates their agreement with the above terms and conditions.

Westchester County Dept of Social Services
Agency NAME

[Signature]
Agency Representative

1/8/2016
Date

Print NAME and TITLE
Commissioner

Westchester County Department of Social Services
[Signature]
Program Coordinator

1/5/2016
Date



HMIS Agency Participation Agreement

Westchester County Department of Social Services

Partner Agency Name

HMIS Lead Agency Name

I. BACKGROUND AND PURPOSE

The Homeless Management Information System (HMIS) is the information system designated by the Westchester County Continuum of Care Partnership for the Homeless (CoC Partnership) to comply with HUD's data collection, management, and reporting standards and used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.

The U.S. Department of Housing and Urban Development (HUD) and other planners and policymakers at the federal, state and local levels use aggregate HMIS data to obtain better information about the extent and nature of homelessness over time. Specifically, an HMIS can be used to produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless programs. Through the HMIS, CoC programs and clients benefit from improved internal and external coordination that guides service and systems planning. A robust HMIS also helps communities engage in informed advocacy efforts, including the pursuit of policies that result in targeted services. Analysis of information gathered through HMIS is critical to accurately calculate the size, characteristics, and needs of different subpopulations. Additionally, use of the HMIS by agencies not funded by HUD provides benefits to both these agencies and the homeless provider community at large, including the avoidance of service duplication through the sharing of client data. HMIS participation also positions agencies for future funding, as many private foundations now require it.

II. GENERAL PROVISIONS

- A. The CoC Partnership has designated Westchester County Department of Social Services (DSS) as the HMIS Lead Agency. All homeless assistance and homelessness prevention service providers in this CoC are eligible to become HMIS Partner Agencies, except for domestic violence providers covered by the Violence Against Women Act (VAWA). The parties share a common interest in serving the homeless population and those at risk of becoming homeless while reducing the current number of homeless in the CoC jurisdiction. The purpose of this agreement is to set out the provisions for the implementation, maintenance, coordination and operation of the HMIS. DSS – in coordination with its authorized agents, including the HMIS Software Provider and HMIS Administrator – is responsible for administering the HMIS on behalf of the CoC, including the implementation, management, training, maintenance, support and enhancement of the HMIS software. The Partner Agency is responsible for entering client data in the HMIS according to program requirements. Detailed responsibilities are listed in sections below.
- B. The Agency Participation Agreement (APA) addresses the respective responsibilities of DSS and the Partner Agency for ongoing HMIS service and activities. The specific responsibilities of the parties to this agreement for the confidentiality, reporting requirements, training, policies and procedures, hardware and software for the HMIS are clearly defined herein to ensure an effective, efficient and secure system. All addendums referenced in this agreement



HMIS Agency Participation Agreement

are also part of the agreement. DSS will abide by all applicable laws, and the Partner Agency will be expected to do the same.

III. DSS DUTIES AND RESPONSIBILITIES

DSS will:

A. GENERAL

- 1) In consultation with the CoC Partnership, select the HMIS Software Provider, define the HMIS program and implement its standards, promote awareness of the program to all interested parties and monitor the program's successes and failures in order to validate its effectiveness.
- 2) Hold the Partner Agency, and its agents, harmless and indemnify it from any and all damages, liabilities, claims and expenses that may be claimed by any third parties arising from DSS's conduct under this agreement.
- 3) Be the sole liaison between the Partner Agency and the HMIS Software Provider; user questions concerning the software are to be directed only to DSS.
- 4) Develop, implement and maintain privacy, confidentiality and security protocols for the HMIS in consultation with the CoC Partnership.
- 5) Provide standardized HMIS training and technical assistance to all Partner Agencies.
- 6) In collaboration with the HMIS Software Provider, take all necessary precautions to prevent any destructive or malicious programs from being introduced to the HMIS and, through it, to the Partner Agencies. DSS will employ all appropriate measures to detect virus infection and all appropriate resources to efficiently disinfect any affected systems as quickly as possible.
- 7) Notify the Partner Agency of HMIS failure, errors and/or problems immediately upon discovery.
- 8) Provide technical assistance during normal business days, with the exception of federal and scheduled holidays.
- 9) Provide all other reasonably expected activities regarding the operation of the HMIS.

B. PRIVACY, CONFIDENTIALITY AND SECURITY

- 1) Maintain all client-identifying information in strictest confidence. DSS may suspend HMIS access to any user or Partner Agency for the purpose of investigating suspicion of breached confidentiality.
- 2) Contract with the HMIS Software Provider to maintain and administer central and backup server operations including security procedures and daily system backup to prevent the loss of data.
- 3) Designate the HMIS Lead Security Officer in the HMIS Lead Security Certification document, which must be updated at least annually. The contact information is incorporated into the Security Provisions by reference. The duties of the Security Officer must be included in the individual's job description or HMIS Lead Security Certification, and signed by the Security Officer to indicate understanding and acceptance of these responsibilities. These duties include, but may not be limited to:
 - With the HMIS Administrator, review the Security Provisions annually and at the time of any change to the security management process, the HMIS software, the methods of data exchange, and any HMIS data or technical requirements issued by HUD. In the event that changes are required to the HMIS Security Provisions, work with the HMIS Administrator to develop recommendations to the CoC Partnership for review, modification and approval.



HMIS Agency Participation Agreement

- Annually review the HMIS Lead Security Certification document, test the HMIS Lead security practices for compliance, and work with the HMIS Administrator to coordinate communication with HMIS Software Provider to confirm security compliance.
 - Using the HMIS Lead Security Certification document, certify that the HMIS Lead adheres to the Security Provisions or develop a plan for mitigating any shortfall, including milestones to demonstrate elimination of the shortfall over as short a period of time as is possible.
 - Implement any approved plan for mitigation of shortfalls and provide appropriate updates on progress to the CoC Partnership.
 - Respond, in cooperation with the HMIS Administrator, to any security questions, requests, or security breaches to the CoC Partnership, and for communicating security-related HMIS information to the organization's end users.
- 4) Ensure the HMIS Lead Security Officer and any administrative user able to manage and access data from more than one Partner Agency undergo criminal background verification. Record of the completed background check (though not the results) is subject to inspection by the CoC. The HMIS Lead will hire individuals with criminal justice histories only to the extent the hire is consistent with any relevant hiring policies of DSS, unless the background check reveals a history of crimes related to identity theft or fraud. The HMIS Lead will manage the results of any background checks conducted on a case-by-case basis.
 - 5) Monitor access to the HMIS in order to detect violations of information security protocols and maintain for inspection accurate logs of all changes made to the information contained within the database.
 - 6) Issue user accounts, passwords and certificates of participation, when requested, for HMIS users, provided that:
 - a) The Partner Agency has signed the APA;
 - b) The Partner Agency has designated an HMIS Site Administrator;
 - c) The HMIS Lead Agency has received signed User Agreements; and,
 - d) The user has successfully completed HMIS user training, including any tests.
 - 7) Periodically change Partner Agency passwords for security purposes and lock out user accounts after a specified period of inactivity.
 - 8) Comply with the HMIS Privacy Policy and HMIS Data Sharing Policy and not release personally identifiable information to any person, agency or organization, unless allowed by the HMIS Privacy Policy.
 - 9) Configure and maintain inter-agency data sharing options in HMIS.
 - 10) Conduct Partner Agency site visits to ensure compliance with privacy and security protocols.

C. USER TRAINING AND PROGRAM CONFIGURATION

- 1) Conduct training, including security training at least annually, for all HMIS users.
- 2) Authorize user access to HMIS in accordance with the HMIS policies and procedures.
- 3) Provide training materials, which may include user manuals, definitions and instructions, to each individual who attends the training event.
- 4) Configure Partner Agency programs according to the latest HMIS Data Standards, including related grants, services, assessments, housing units, and other applicable options in the HMIS software.
- 5) Provide additional trainings according to the user role, program type, or specific activities. These trainings may include web-based refresher courses in group or one-on-one format.



HMIS Agency Participation Agreement

IV. Partner Agency DUTIES AND RESPONSIBILITIES

The Partner Agency will:

A. GENERAL

- 1) Strictly adhere to all policies and procedures contained in the APA, as it may be amended from time to time, and all of its appendices. A copy of this agreement can be found at <http://programdesign.com/wiki/WCCOCH>, and a signed hard copy will be provided to the Partner Agency.
- 2) Hold DSS, and its agents, harmless and indemnify it from any and all damages, liabilities, claims and expenses that may be claimed by any third parties arising from Partner Agency's conduct under this agreement.
- 3) Maintain at least 1 (one) active user account at any time.

B. PRIVACY AND CONFIDENTIALITY

- 1) Comply with all federal and state laws and regulations, and with all HMIS policies and procedures (particularly the HMIS Data and Technical Standards Final Notice from July 2004, the HMIS Data Standards Revised Notice from March 2010 and subsequent revisions) relating to the collection, storage, retrieval, and dissemination of client data.
- 2) Comply with the HMIS Privacy Policy and the HMIS Data Sharing Policy.
- 3) Obtain client consent before any data is collected and shared. The consent can be:
 - a) Inferred (baseline): The agency must post a visible HMIS Consumer Notice and HMIS Privacy Policy in a reception area or at each intake station.
 - b) Informed Written (optional): The client may sign a release of information (ROI) form stored on location.
 - c) Informed Verbal (optional): The client may give oral permission to Partner Agency personnel with written documentation of consent by witness.
- 4) Where informed written consent applies, utilize the HMIS Client Release of Information Form (ROI), or an alternative approved by DSS. With consent, the Partner Agency is authorized to share data until such time as the client withdraws consent, at which point the Partner Agency shall be responsible for ensuring the client's data entered thereafter is restricted from view. Collect and store records of any ROI authorizations for, at least, 3 (three) years.
- 5) Take all necessary precautions to prevent destructive or malicious programs, including but not limited to viruses or spyware, from being introduced to any part of the HMIS, including users' computers. Employ appropriate measures to detect virus or spyware infection and deploy all appropriate resources to efficiently disinfect any affected systems as quickly as possible.

C. DATA QUALITY AND MONITORING

- 1) Fully comply with the latest HMIS Data Quality Plan. This plan is posted on the website, <http://programdesign.com/wiki/WCCOCH>, and available in hard copy upon request.
- 2) Enter data into the HMIS within the timeframe as specified in the Data Quality Plan. Timely data entry prevents duplication of client records and other shared transactions, such as enrollments and services. It also allows good quality data for both program-specific and aggregate reports. Partner Agencies and their HMIS users may be held liable in the event that a preventable duplication occurs as a result of missing, late or incomplete data entry. Repetitive lack of timely entry can result in official reports of concern and possible findings against the Partner Agency and could culminate in official penalties up to and including loss of project funding.



HMIS Agency Participation Agreement

- 3) Collect all mandatory data elements, according to the data quality requirements.
- 4) Take all steps reasonably necessary to verify the information provided by clients, and to see that it is correctly entered into the HMIS by the Partner Agency user.
- 5) Immediately notify DSS when a programmatic, personnel or other issue arises that precludes the Partner Agency from entering the HMIS data within the allowed timeframe. By informing the DSS in a timely fashion, all parties can work together to craft an interim solution that is minimally disruptive to program operations and the HMIS as a whole.
- 6) Take reasonable steps to ensure that no profanity, offensive language, malicious information or discriminatory comments based on race, ethnicity, religion, national origin, disability, age, gender or sexual orientation are entered into the HMIS.
- 7) Do not upload material into the HMIS that is in violation of any federal or state regulations, including, but not limited to: copyrighted material, material legally judged to be threatening or obscene, and material known to the Partner Agency to be confidential trade secrets.
- 8) Allow the DSS staff to conduct periodic monitoring and reviews of the original documentation in client files to ensure data accuracy. This monitoring is limited only to the client information relevant to HMIS data collection.

D. TRAINING

- 1) Ensure that each Partner Agency HMIS user attends the appropriate training, agrees to and signs the User Agreement, receives HMIS security training prior to being given access to HMIS and participates in security training at least annually.
- 2) Ensure that the Partner Agency program officers or designated HMIS site administrators attend any DSS-sponsored HMIS trainings, stay current with the HMIS policies and procedures, and relate news and updates to its HMIS users.
- 3) Assess the HMIS users' performance and refer for additional training as needed.

E. SECURITY

- 1) Limit HMIS access only to authorized users and follow all HMIS protocols for monitoring those users. DSS reserves the right to terminate access to any HMIS user who breaches client confidentiality or system security protocols.
- 2) Do not permit any person to enter or use the HMIS unless and until:
 - a) The person has completed the required HMIS training;
 - b) DSS has issued that person the appropriate user account and password; and,
 - c) Both the APA and the User Agreement have been signed and returned to DSS.
- 3) Maintain copies of all User Agreements signed by Partner Agency personnel to whom user accounts have been issued.
- 4) Designate an HMIS Security Officer to be responsible for the implementation of the HMIS security provisions at the Partner Agency.
- 5) Fully comply with the HMIS Data Sharing Policy and the HMIS Privacy Policy.
- 6) Not release any HMIS data to any entity that is not part of the HMIS, unless such release is covered by the HMIS Data Sharing Policy or the HMIS Privacy Policy.
- 7) Develop an internal procedure to be used in the event of a violation of any of the HMIS security protocols.
- 8) Develop and adhere to local security standards that should include the following:
 - a) Products: Physical security (door locks, computer screen view, local network passwords, firewall)
 - b) People: Personnel security (authorized users only, local oversight of usage)
 - c) Procedures: Organizational security (policies and procedures are in place)



HMIS Agency Participation Agreement

- 9) Adhere to their own policies regarding conducting background checks and hiring individuals with criminal justice histories, as long as they comply with all relevant laws.
- 10) Notify HMIS Administrator within one business day of the separation of any employee who was a user of the HMIS. Notification should preferably occur by close of business on the day of employee separation.

V. PROPRIETARY RIGHTS OF CLIENTTRACK, INC.

A. The Partner Agency shall not give or share assigned passwords and access codes for HMIS with any other Agency, business, or individual.

B. The Partner Agency shall not cause in any manner, or way, corruption of HMIS.

VI. TERMS AND CONDITIONS

A. Neither the Lead Agency nor the Partner Agency shall transfer or assign any rights or obligations without the written consent of the other party.

B. This Agreement shall be in-force until revoked in writing by either party provided funding is available.

C. This Agreement may be terminated immediately with cause.

The signature of the parties hereto indicates their agreement with the above terms and conditions.

Agency NAME

Agency Representative

Date

Print NAME and TITLE

Westchester County Department of Social Services

Program Coordinator

Date



HMIS Privacy Policy

Partner Agency Name	Westchester County Department of Social Services
	HMIS Lead Agency Name

PURPOSE

This policy describes the standards and procedures related to the Homeless Management Information System (HMIS) administered by the Lead Agency. The policy describes how the partner agency may use and disclose protected personal information (PPI) and additional data collected by partner agencies. The Lead Agency has developed the policy, in consultation with the Westchester County Continuum of Care Partnership for the Homeless (CoC) Data & Systems Committee with the approval of the CoC Board. The policy is to be updated annually, considering the latest HMIS privacy standards and additional CoC standards. The policy may be amended at any time, and the amendments may affect information collected prior to the date of the change. In addition to this policy, partner agencies must comply with federal, state and local laws that require additional confidentiality protections.

This policy only applies to data collected in the HMIS and does not apply to any other website or application. The terms of this policy shall govern all interactions and communications wherein HMIS data is subject. Upon request the partner agency will provide a copy of this policy and request written acknowledgement of its receipt. This policy is not a legal contract. This policy meets a legal requirement to maintain the confidentiality of PPI. The partner agency must follow the terms of this policy that are currently in effect.

BACKGROUND

An HMIS is a locally administered, electronic data collection system that stores longitudinal person-level information about the men, women and children who access homeless and other human services in a community. Each CoC receiving HUD funding is required to implement an HMIS to collect standardized data about all persons accessing the homeless assistance system. Furthermore, elements of HUD's annual CoC funding competition are directly related to a CoC's progress in implementing its HMIS. In 2004, HUD published HMIS Data and Technical Standards in the Federal Register. The Standards defined the requirements for data collection, privacy safeguards and security controls for all local HMIS. Periodically, HUD releases updates to the Standards.



HMIS Privacy Policy

DATA COLLECTION

The partner agency may collect data in HMIS only when appropriate to the purpose for which the information is obtained or when required by law. The partner agency must collect data by lawful and fair means and where appropriate. The partner agency may infer a person's consent to collect data when this policy is posted at each intake desk or comparable location. The partner agency must obtain written or verbal consent from the person to collect data on a third party (e.g. household members, emergency contacts, etc.).

The partner agency may collect data, including but not limited to:

- Personally identifiable information (PII), such as name, Social Security Number, date of birth, gender, race, ethnicity, household relationships, veteran status and disabling conditions;
- Housing information, such as address history, housing status, reason for homelessness;
- Program information, such as income, non-cash benefits, educational attainment, employment status, domestic violence experience, health status and medical information; and,
- Transactional information, such as service need, provision and outcome.

REASONS FOR DISCLOSURES

For Law Enforcement Purposes

The partner agency may disclose PPI in HMIS to law enforcement officials for law enforcement purposes, such as:

- In response to a court order, subpoena or other legal proceeding.
- To identify or locate a suspect, fugitive, material witness or missing person.
- When information is requested about an actual or suspected victim of a crime.
- To report a death as a result of possible criminal conduct.
- To investigate allegations of misconduct that may have occurred.
- To report a crime in emergency circumstances.
- For other purposes as required by law.

For Funeral Directors, Coroners and Medical Examiners

The partner agency may disclose PPI as necessary to allow these individuals to carry out their responsibilities.

For National Security and Intelligence



HMIS Privacy Policy

The partner agency may disclose PPI to authorized federal officials for national security and intelligence activities.

For Research Projects with New York State and Contracted Third Parties

The partner agency may disclose PPI for research purposes only if the following conditions have been met:

- A signed Data Use Agreement with the contractor is in place before any data is shared.
- The data will be shared for a predetermined time period as stated in the Agreement with the contractor.
- The use and scope of the data research is provided as part of the Agreement.
- Results of the research may not affect any individual's current program participation.

The New York State Office of Temporary and Disability Assistance (OTDA) will maintain a database of client information, as input in HMIS systems across New York State. The purpose of the database is to better understand characteristics, trends, and movement of persons who are homeless or at risk of or experiencing homelessness, as well as to analyze the utilization and effectiveness of services created to assist such persons. The database is constructed so that information that is considered personal protected information (name, social security number, date of birth) will not be shared, will not be seen by any employee of OTDA, and will never appear in any reports created out of the database.

Uses or Disclosures That Require Authorization

Other uses and disclosures will be made only with the person's written authorization. The person may cancel an authorization at any time by notifying the partner agency in writing of his/her desire to cancel it. If the person cancels an authorization, it will not have any effect on information that we have already disclosed. Examples of uses or disclosures that may require a person's written authorization include the following:

- A request to provide protected personal information to an attorney for use in a civil law suit.
- A request to provide protected personal information to a requesting medical professional.



HMIS Privacy Policy

PRIVACY RIGHTS

The information collected in HMIS is the physical property of the Lead Agency.

Persons with data in HMIS have the following rights:

Right to Request Restrictions

The person has the right to ask the partner agency not to use or disclose his/her protected personal information for a particular reason. The client may ask that family members or other authorized individuals not be informed of specific protected personal information.

That request must be made in writing to the partner agency. If the partner agency agrees to the request, the partner agency must keep the agreement, except in the case of a medical emergency or law enforcement.

Right to Inspect and Copy Protected Personal Information

The person has the right to request to inspect and obtain a copy of his/her protected personal information. The person must submit the request in writing to the partner agency. If the person requests a copy or summary of the information, the partner agency may charge a fee for the costs of copying, summarizing and/or delivery.

If the partner agency agrees to the request, the partner agency will notify the person. The partner agency may deny the request under certain limited circumstances. If the request is denied, the partner agency will let the person know in writing and he/she may be able to request a review of the denial.

Right to Request Amendments to Protected Personal Information

The person has the right to request that the partner agency correct his/her PPI. If the person believes that any PPI in the record is incorrect or that important information is missing, he/she must submit the request for an amendment in writing to the partner agency. The partner agency does not have to agree to the request. If the partner agency denies the request, the partner agency will provide an explanation. The person has the right to submit a statement disagreeing with the decision.

Right to an Accounting of Disclosures of Protected Personal Information

The person has the right to find out what disclosures of his/her PPI have been made. The list of disclosures is called an Accounting. The Accounting may be for up to six (6) years prior to the date on which the request has been made. The partner agency is not required to include disclosures for National Security or



HMIS Privacy Policy

Intelligence purposes, or to correctional institutions and law enforcement officials. The right to have an Accounting may be temporarily suspended if it will impede the partner agency's activities. The notice of suspension should specify required duration of the suspension. Requests for an Accounting of disclosures must be submitted in writing to the partner agency. The person is entitled to one free Accounting in any twelve (12) month period. The agency may charge the client a nominal fee for additional Accountings.

CONTACT INFORMATION

For questions about this policy or to issue a grievance, please contact:

Name:

Address:

Phone:

Fax:

Email:

The partner agency supports a person's right to protect the privacy of personal information. The partner agency will not retaliate in any way if a person chooses to file a grievance.



HMIS Data Sharing Policy

Westchester County Department of Social Services

Partner Agency Name

HMIS Lead Agency Name

PURPOSE

This policy describes the scope of client data sharing within the Westchester County Homeless Management Information System (HMIS).

BACKGROUND

As described in the HMIS Agency Partner Agreement (APA), each partner agency enters into agreement with the HMIS Lead Agency as designated by the Westchester County Continuum of Care Partnership for the Homeless (CoC). This agreement permits client data to be shared with the Lead Agency for administrative purposes. As more fully described in the HMIS Privacy Policy, this agreement permits the Lead Agency to use and disclose data, including protected personal information, collected by the partner agency.

Furthermore, this agreement permits inter-agency client data sharing for purposes related to effective coordination and provision of services.

DATA SHARING

The partner agency must abide specifically by federal and state confidentiality regulations and laws that pertain to PPI (see APA). If inter-agency data sharing is permitted, the partner agency must implement and ensure compliance with procedures to obtain client consent. The following guidelines are meant to clarify how information may be disclosed and used between partner agencies.

Information shared and editable between agencies may include:

- Personally Identifiable Information (PII): Name; Date of Birth, Social Security Number and Gender; Race and Ethnicity;
- Household and Contact Information: Household Name, Family Members and Relationships, and Address.

Information shared on a read-only basis between agencies may include:

- Program Information: Program Name, Program Type, Organization Name, Entry Date and Exit Date;
- Program Assessments: Universal Data; Income and Non-Cash Benefits; Barriers/Disabilities, and Domestic Violence Experience.
- Transactions: Services, Goals, Referrals, Case Notes and Facility Stays.



HMIS Data Sharing Policy

Client Release of Information Procedure

Partner agency users have the ability to set and enforce the HMIS General ROI on the Client Basic Information form by selecting from:

- **Restrict to Organization** will allow only the partner agency to view and access the client record; or,
- **Share with Continuum of Care** allows all partner agencies to view the client's personally identifiable information. Additionally, where sharing is permitted between partner agencies, this preference allows those partner agencies to view program information and transactions.

When a client opts to not share program information or transactions, partner agency users can restrict access to those elements respectively in the system.

The Lead Agency will never disclose any client data to a third party, unless required by law or otherwise permitted by the HMIS Privacy Policy.

Inter-Agency Data Sharing Procedure

The Lead Agency will set and enforce each partner agency's data sharing preference in accordance with the HMIS Agency Participation Agreement. If the partner agency wishes to restrict sharing to specific agencies within the CoC or none at all, the partner agency must submit documentation to the Lead Agency signed by its executive officers.

The Lead Agency will never grant agencies access to client data outside of the policy and procedures described above.



HMIS Site Administrator Agreement

	Westchester County Department of Social Services
Partner Agency Name	HMIS Lead Agency Name

Each Partner Agency shall designate an HMIS Site Administrator (Administrator). This person should be knowledgeable of the Agency's operations, policies and procedures. In addition to his or her role as Administrator, this person may serve in other capacities such as case manager, office manager, service coordinator or program director.

The Administrator is the primary contact for all communication regarding the HMIS at this agency. This person shall:

- Provide a point-of-contact between agency users and Westchester HMIS personnel regarding all project-related issues.
- Maintain a reliable Internet connection for operation of the HMIS and general communication with users and Westchester HMIS personnel.
- Disseminate information on HMIS policies, procedures and system updates.
- Respond to requests for information from Westchester HMIS personnel regarding data quality and reporting requirements.
- Authorize and manage user access on behalf of the Agency.
- Monitor compliance with standards of client confidentiality and data usage as per Westchester HMIS policies and procedures.

Designate Site Administrator (PRINT full name)

Site Administrator Signature Date

Executive Director Signature Date



HMIS User Agreement

Partner Agency Name

Westchester County Department of Social Services
HMIS Lead Agency Name

The Partner Agency coordinates activities and shares information on homeless and at-risk persons and families in the Homeless Management Information System (HMIS) administered by the Lead Agency, and its agents. The partner agency retains the right to client data created or entered in HMIS by its users and shall be bound by all HMIS policies pertaining to data use, access and restrictions.

USER RESPONSIBILITIES

Users shall enter accurate, complete and timely data in accordance with HMIS policies and procedures. Please read each statement below. Failure to uphold these responsibilities may result in loss of access or privileges.

- ✓ My user ID and password are for my use only and must not be shared with anyone.
- ✓ I will take reasonable measures to keep my password secure.
- ✓ I understand that the only authorized users can view information in the system and the clients to whom the information pertains.
- ✓ I will only access and use information that is necessary to perform my job.
- ✓ If I am logged into the system and must leave my computer, I will first log out.
- ✓ Any hard copies of electronic records will be kept in a secure file.
- ✓ When hard copies are no longer needed, I will ensure they are properly destroyed.
- ✓ If I notice or suspect a security breach or abuse of client confidentiality, I will immediately notify my HMIS Site Administrator or the HMIS System Administrator.

CODE OF ETHICS

- ✓ I will treat clients with respect and fairness in good faith.
- ✓ I will maintain high standards of professional conduct in my capacity as an HMIS User.
- ✓ I will be responsible for my client's information.

By signing the User Agreement, you agree to comply with the above terms and conditions.

_____ USER NAME [PRINT]	_____ DATE	_____ ADMINISTRATOR NAME [PRINT]	_____ DATE
_____ USER SIGNATURE	_____ DATE	_____ ADMINISTRATOR SIGNATURE	_____ DATE



**WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS**

c/o WCC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

HMIS Consumer Notice

The U.S. Department of Housing and Urban Development (HUD) requires that each jurisdiction that receives funding from HUD have a Homeless Management Information System (HMIS) in place. This Agency participates in the Westchester County Homeless Management Information System (HMIS), a locally administered, electronic data collection system that stores information about the men, women and children who access homeless and other human services in a community. The purpose of HMIS is to assist in determining your needs and to evaluate the effectiveness of services provided.

We only collect information that is needed to provide you services, or that we consider relevant to helping us understand the scope and dimensions of homelessness in order to design effective service delivery. We do not disclose your information without written consent, except when required by our funders or by law, or for specific administrative or research purposes outlined in our HMIS Privacy Policy. By requesting information and accepting services from this agency, you give consent for us to enter your personal information into the HMIS.

The collection and disclosure of all personal information is guided by strict security standards. You have the right to see your personal information collected by this partner agency and request changes if incorrect. A full copy of our agency's HMIS Privacy Policy is available upon request for your review.



HMIS Client Release of Information

Partner Agency

Welcome! You are enrolling in one of the programs associated with the Westchester County Continuum of Care Partnership for the Homeless (the CoC). In order to provide you with the most effective and efficient service, we must collect relevant data for our Homeless Management Information System (HMIS). This secure and confidential database operated by trained representatives allows providers to work together with you to make sure you are receiving all of the housing services you need and in a timely manner. Beyond that, your participation in the HMIS allows the CoC to get an accurate count of all people experiencing homelessness or who are at risk of homelessness in Westchester County. This helps us to improve our current service system and make plans for new services. In order to make sure individuals are not counted twice if services are received by more than one agency, we need to collect basic personal information. We need: FULL NAME; DATE OF BIRTH; SOCIAL SECURITY NUMBER; GENDER; RACE; ETHNICITY; DISABLED STATUS; VETERAN STATUS; and, ADDRESS. You have the right to restrict this information to just one agency if you wish and you can do that at any time.

Please review the information below and sign/date where indicated. *[Note to staff, if working with a family, please complete the back of this form as well].*

I understand that this agency will enter my basic personal information into the ClientTrack Homeless Management Information System (HMIS). The information I have provided is true and correct. My basic personal information may be shared among local authorized service providers for the purpose of connecting me to services.

I understand that information about me that is in HMIS may be used by the agency, the Westchester County Continuum of Care, and the NYS Office of Temporary and Disability Assistance (OTDA) to conduct research related to homelessness and housing programs, service needs, income supports, education and employment, and program effectiveness. My name, date of birth, social security number or other information that would identify me personally will never be visible to anyone at OTDA and will never appear on any reports or publications.

An agency representative has answered my questions about my privacy concerns.

By signing this release form, I fully understand the above terms and conditions.

CLIENT NAME [PRINT] DATE CLIENT SIGNATURE DATE

AUTHORIZED PERSONNEL NAME DATE AUTHORIZED SIGNATURE DATE
[PRINT]



HMIS Client Release of Information

CONSENT ON BEHALF OF HOUSEHOLD MEMBERS

An adult head of household may provide consent on behalf of family members to share their information in the HMIS.

FAMILY MEMBER NAME 1
[PRINT]

HEAD OF HOUSEHOLD [INITIALS]

FAMILY MEMBER NAME 1
[PRINT]

HEAD OF HOUSEHOLD [INITIALS]

FAMILY MEMBER NAME 2
[PRINT]

HEAD OF HOUSEHOLD [INITIALS]

FAMILY MEMBER NAME 3
[PRINT]

HEAD OF HOUSEHOLD [INITIALS]

FAMILY MEMBER NAME 4
[PRINT]

HEAD OF HOUSEHOLD [INITIALS]

FAMILY MEMBER NAME 5
[PRINT]

HEAD OF HOUSEHOLD [INITIALS]

FAMILY MEMBER NAME 6
[PRINT]

HEAD OF HOUSEHOLD [INITIALS]

FAMILY MEMBER NAME 7
[PRINT]

HEAD OF HOUSEHOLD [INITIALS]

FAMILY MEMBER NAME 8
[PRINT]

HEAD OF HOUSEHOLD [INITIALS]



HMIS Agency Participation Agreement

Partner Agency Name	Westchester County Department of Social Services
	HMIS Lead Agency Name

I. BACKGROUND AND PURPOSE

The Homeless Management Information System (HMIS) is the information system designated by the Westchester County Continuum of Care Partnership for the Homeless (CoC Partnership) to comply with HUD's data collection, management, and reporting standards and used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.

The U.S. Department of Housing and Urban Development (HUD) and other planners and policymakers at the federal, state and local levels use aggregate HMIS data to obtain better information about the extent and nature of homelessness over time. Specifically, an HMIS can be used to produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless programs. Through the HMIS, CoC programs and clients benefit from improved internal and external coordination that guides service and systems planning. A robust HMIS also helps communities engage in informed advocacy efforts, including the pursuit of policies that result in targeted services. Analysis of information gathered through HMIS is critical to accurately calculate the size, characteristics, and needs of different subpopulations. Additionally, use of the HMIS by agencies not funded by HUD provides benefits to both these agencies and the homeless provider community at large, including the avoidance of service duplication through the sharing of client data. HMIS participation also positions agencies for future funding, as many private foundations now require it.

II. GENERAL PROVISIONS

- A. The CoC Partnership has designated Westchester County Department of Social Services (DSS) as the HMIS Lead Agency. All homeless assistance and homelessness prevention service providers in this CoC are eligible to become HMIS Partner Agencies, except for domestic violence providers covered by the Violence Against Women Act (VAWA). The parties share a common interest in serving the homeless population and those at risk of becoming homeless while reducing the current number of homeless in the CoC jurisdiction. The purpose of this agreement is to set out the provisions for the implementation, maintenance, coordination and operation of the HMIS. DSS – in coordination with its authorized agents, including the HMIS Software Provider and HMIS Administrator – is responsible for administering the HMIS on behalf of the CoC, including the implementation, management, training, maintenance, support and enhancement of the HMIS software. The Partner Agency is responsible for entering client data in the HMIS according to program requirements. Detailed responsibilities are listed in sections below.
- B. The Agency Participation Agreement (APA) addresses the respective responsibilities of DSS and the Partner Agency for ongoing HMIS service and activities. The specific responsibilities of the parties to this agreement for the confidentiality, reporting requirements, training, policies and procedures, hardware and software for the HMIS are clearly defined herein to ensure an effective, efficient and secure system. All addendums referenced in this agreement



HMIS Agency Participation Agreement

are also part of the agreement. DSS will abide by all applicable laws, and the Partner Agency will be expected to do the same.

III. DSS DUTIES AND RESPONSIBILITIES

DSS will:

A. GENERAL

- 1) In consultation with the CoC Partnership, select the HMIS Software Provider, define the HMIS program and implement its standards, promote awareness of the program to all interested parties and monitor the program's successes and failures in order to validate its effectiveness.
- 2) Hold the Partner Agency, and its agents, harmless and indemnify it from any and all damages, liabilities, claims and expenses that may be claimed by any third parties arising from DSS's conduct under this agreement.
- 3) Be the sole liaison between the Partner Agency and the HMIS Software Provider; user questions concerning the software are to be directed only to DSS.
- 4) Develop, implement and maintain privacy, confidentiality and security protocols for the HMIS in consultation with the CoC Partnership.
- 5) Provide standardized HMIS training and technical assistance to all Partner Agencies.
- 6) In collaboration with the HMIS Software Provider, take all necessary precautions to prevent any destructive or malicious programs from being introduced to the HMIS and, through it, to the Partner Agencies. DSS will employ all appropriate measures to detect virus infection and all appropriate resources to efficiently disinfect any affected systems as quickly as possible.
- 7) Notify the Partner Agency of HMIS failure, errors and/or problems immediately upon discovery.
- 8) Provide technical assistance during normal business days, with the exception of federal and scheduled holidays.
- 9) Provide all other reasonably expected activities regarding the operation of the HMIS.

B. PRIVACY, CONFIDENTIALITY AND SECURITY

- 1) Maintain all client-identifying information in strictest confidence. DSS may suspend HMIS access to any user or Partner Agency for the purpose of investigating suspicion of breached confidentiality.
- 2) Contract with the HMIS Software Provider to maintain and administer central and backup server operations including security procedures and daily system backup to prevent the loss of data.
- 3) Designate the HMIS Lead Security Officer in the HMIS Lead Security Certification document, which must be updated at least annually. The contact information is incorporated into the Security Provisions by reference. The duties of the Security Officer must be included in the individual's job description or HMIS Lead Security Certification, and signed by the Security Officer to indicate understanding and acceptance of these responsibilities. These duties include, but may not be limited to:
 - With the HMIS Administrator, review the Security Provisions annually and at the time of any change to the security management process, the HMIS software, the methods of data exchange, and any HMIS data or technical requirements issued by HUD. In the event that changes are required to the HMIS Security Provisions, work with the HMIS Administrator to develop recommendations to the CoC Partnership for review, modification and approval.



HMIS Agency Participation Agreement

- Annually review the HMIS Lead Security Certification document, test the HMIS Lead security practices for compliance, and work with the HMIS Administrator to coordinate communication with HMIS Software Provider to confirm security compliance.
 - Using the HMIS Lead Security Certification document, certify that the HMIS Lead adheres to the Security Provisions or develop a plan for mitigating any shortfall, including milestones to demonstrate elimination of the shortfall over as short a period of time as is possible.
 - Implement any approved plan for mitigation of shortfalls and provide appropriate updates on progress to the CoC Partnership.
 - Respond, in cooperation with the HMIS Administrator, to any security questions, requests, or security breaches to the CoC Partnership, and for communicating security-related HMIS information to the organization's end users.
- 4) Ensure the HMIS Lead Security Officer and any administrative user able to manage and access data from more than one Partner Agency undergo criminal background verification. Record of the completed background check (though not the results) is subject to inspection by the CoC. The HMIS Lead will hire individuals with criminal justice histories only to the extent the hire is consistent with any relevant hiring policies of DSS, unless the background check reveals a history of crimes related to identity theft or fraud. The HMIS Lead will manage the results of any background checks conducted on a case-by-case basis.
 - 5) Monitor access to the HMIS in order to detect violations of information security protocols and maintain for inspection accurate logs of all changes made to the information contained within the database.
 - 6) Issue user accounts, passwords and certificates of participation, when requested, for HMIS users, provided that:
 - a) The Partner Agency has signed the APA;
 - b) The Partner Agency has designated an HMIS Site Administrator;
 - c) The HMIS Lead Agency has received signed User Agreements; and,
 - d) The user has successfully completed HMIS user training, including any tests.
 - 7) Periodically change Partner Agency passwords for security purposes and lock out user accounts after a specified period of inactivity.
 - 8) Comply with the HMIS Privacy Policy and HMIS Data Sharing Policy and not release personally identifiable information to any person, agency or organization, unless allowed by the HMIS Privacy Policy.
 - 9) Configure and maintain inter-agency data sharing options in HMIS.
 - 10) Conduct Partner Agency site visits to ensure compliance with privacy and security protocols.
- C. USER TRAINING AND PROGRAM CONFIGURATION
- 1) Conduct training, including security training at least annually, for all HMIS users.
 - 2) Authorize user access to HMIS in accordance with the HMIS policies and procedures.
 - 3) Provide training materials, which may include user manuals, definitions and instructions, to each individual who attends the training event.
 - 4) Configure Partner Agency programs according to the latest HMIS Data Standards, including related grants, services, assessments, housing units, and other applicable options in the HMIS software.
 - 5) Provide additional trainings according to the user role, program type, or specific activities. These trainings may include web-based refresher courses in group or one-on-one format.



HMIS Agency Participation Agreement

IV. Partner Agency DUTIES AND RESPONSIBILITIES

The Partner Agency will:

A. GENERAL

- 1) Strictly adhere to all policies and procedures contained in the APA, as it may be amended from time to time, and all of its appendices. A copy of this agreement can be found at <http://programdesign.com/wiki/WCCOCH>, and a signed hard copy will be provided to the Partner Agency.
- 2) Hold DSS, and its agents, harmless and indemnify it from any and all damages, liabilities, claims and expenses that may be claimed by any third parties arising from Partner Agency's conduct under this agreement.
- 3) Maintain at least 1 (one) active user account at any time.

B. PRIVACY AND CONFIDENTIALITY

- 1) Comply with all federal and state laws and regulations, and with all HMIS policies and procedures (particularly the HMIS Data and Technical Standards Final Notice from July 2004, the HMIS Data Standards Revised Notice from March 2010 and subsequent revisions) relating to the collection, storage, retrieval, and dissemination of client data.
- 2) Comply with the HMIS Privacy Policy and the HMIS Data Sharing Policy.
- 3) Obtain client consent before any data is collected and shared. The consent can be:
 - a) Inferred (baseline): The agency must post a visible HMIS Consumer Notice and HMIS Privacy Policy in a reception area or at each intake station.
 - b) Informed Written (optional): The client may sign a release of information (ROI) form stored on location.
 - c) Informed Verbal (optional): The client may give oral permission to Partner Agency personnel with written documentation of consent by witness.
- 4) Where informed written consent applies, utilize the HMIS Client Release of Information Form (ROI), or an alternative approved by DSS. With consent, the Partner Agency is authorized to share data until such time as the client withdraws consent, at which point the Partner Agency shall be responsible for ensuring the client's data entered thereafter is restricted from view. Collect and store records of any ROI authorizations for, at least, 3 (three) years.
- 5) Take all necessary precautions to prevent destructive or malicious programs, including but not limited to viruses or spyware, from being introduced to any part of the HMIS, including users' computers. Employ appropriate measures to detect virus or spyware infection and deploy all appropriate resources to efficiently disinfect any affected systems as quickly as possible.

C. DATA QUALITY AND MONITORING

- 1) Fully comply with the latest HMIS Data Quality Plan. This plan is posted on the website, <http://programdesign.com/wiki/WCCOCH>, and available in hard copy upon request.
- 2) Enter data into the HMIS within the timeframe as specified in the Data Quality Plan. Timely data entry prevents duplication of client records and other shared transactions, such as enrollments and services. It also allows good quality data for both program-specific and aggregate reports. Partner Agencies and their HMIS users may be held liable in the event that a preventable duplication occurs as a result of missing, late or incomplete data entry. Repetitive lack of timely entry can result in official reports of concern and possible findings against the Partner Agency and could culminate in official penalties up to and including loss of project funding.



HMIS Agency Participation Agreement

- 3) Collect all mandatory data elements, according to the data quality requirements.
- 4) Take all steps reasonably necessary to verify the information provided by clients, and to see that it is correctly entered into the HMIS by the Partner Agency user.
- 5) Immediately notify DSS when a programmatic, personnel or other issue arises that precludes the Partner Agency from entering the HMIS data within the allowed timeframe. By informing the DSS in a timely fashion, all parties can work together to craft an interim solution that is minimally disruptive to program operations and the HMIS as a whole.
- 6) Take reasonable steps to ensure that no profanity, offensive language, malicious information or discriminatory comments based on race, ethnicity, religion, national origin, disability, age, gender or sexual orientation are entered into the HMIS.
- 7) Do not upload material into the HMIS that is in violation of any federal or state regulations, including, but not limited to: copyrighted material, material legally judged to be threatening or obscene, and material known to the Partner Agency to be confidential trade secrets.
- 8) Allow the DSS staff to conduct periodic monitoring and reviews of the original documentation in client files to ensure data accuracy. This monitoring is limited only to the client information relevant to HMIS data collection.

D. TRAINING

- 1) Ensure that each Partner Agency HMIS user attends the appropriate training, agrees to and signs the User Agreement, receives HMIS security training prior to being given access to HMIS and participates in security training at least annually.
- 2) Ensure that the Partner Agency program officers or designated HMIS site administrators attend any DSS-sponsored HMIS trainings, stay current with the HMIS policies and procedures, and relate news and updates to its HMIS users.
- 3) Assess the HMIS users' performance and refer for additional training as needed.

E. SECURITY

- 1) Limit HMIS access only to authorized users and follow all HMIS protocols for monitoring those users. DSS reserves the right to terminate access to any HMIS user who breaches client confidentiality or system security protocols.
- 2) Do not permit any person to enter or use the HMIS unless and until:
 - a) The person has completed the required HMIS training;
 - b) DSS has issued that person the appropriate user account and password; and,
 - c) Both the APA and the User Agreement have been signed and returned to DSS.
- 3) Maintain copies of all User Agreements signed by Partner Agency personnel to whom user accounts have been issued.
- 4) Designate an HMIS Security Officer to be responsible for the implementation of the HMIS security provisions at the Partner Agency.
- 5) Fully comply with the HMIS Data Sharing Policy and the HMIS Privacy Policy.
- 6) Not release any HMIS data to any entity that is not part of the HMIS, unless such release is covered by the HMIS Data Sharing Policy or the HMIS Privacy Policy.
- 7) Develop an internal procedure to be used in the event of a violation of any of the HMIS security protocols.
- 8) Develop and adhere to local security standards that should include the following:
 - a) Products: Physical security (door locks, computer screen view, local network passwords, firewall)
 - b) People: Personnel security (authorized users only, local oversight of usage)
 - c) Procedures: Organizational security (policies and procedures are in place)



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

WCCOCH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6720 (fax)

HMIS Agency Participation Agreement

- 9) Adhere to their own policies regarding conducting background checks and hiring individuals with criminal justice histories, as long as they comply with all relevant laws.
- 10) Notify HMIS Administrator within one business day of the separation of any employee who was a user of the HMIS. Notification should preferably occur by close of business on the day of employee separation.

V. PROPRIETARY RIGHTS OF CLIENTTRACK, INC.

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B. The Partner Agency shall not cause in any manner, or way, corruption of HMIS.

VI. TERMS AND CONDITIONS


A. Neither the Lead Agency nor the Partner Agency shall transfer or assign any rights or obligations without the written consent of the other party.

B. This Agreement shall be in-force until revoked in writing by either party provided funding is available.

C. This Agreement may be terminated immediately with cause.

The signature of the parties hereto indicates their agreement with the above terms and conditions.

The Guidance Center of Westchester
Agency NAME


Agency Representative

12/11/2015
Date

Amy Gelles Executive Director
Print NAME and TITLE

Westchester County Department of Social Services


Program Coordinator

12/1/15
Date



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

WCCOCH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

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Westhab

Agency NAME


Agency Representative

12/17/15
Date

James Coughlin, Sr. Vice President
Print NAME and TITLE

Westchester County Department of Social Services


Program Coordinator

12/17/15
Date



HMIS Agency Participation Agreement

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The Sharing Community, Inc.
Agency NAME

Nadine Buens-Lyons
Agency Representative

12/7/15
Date

Nadine Buens-Lyons, Executive Director
Print NAME and TITLE

Westchester County Department of Social Services

Deborah J. [Signature]
Program Coordinator

12/7/15
Date



HMIS Agency Participation Agreement

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Providence House Inc.
Agency NAME

Rita Taddano
Agency Representative

12/2/15
Date

RITA Taddano Director of Programs
Print NAME and TITLE

Westchester County Department of Social Services

Lisa J. Trovati Manager II
Program Coordinator

12/2/15
Date



HMIS Agency Participation Agreement

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**Catholic Charities Community Services,
Archdiocese of New York**

Agency NAME

Beatriz Diaz Taveras
Agency Representative

DEC 18 2015

Date

BEATRIZ DIAZ TAVERAS EXECUTIVE DIRECTOR

Print NAME and TITLE

Westchester County Department of Social Services

Frank J. Mc...
Program Coordinator

12/18/15
Date



HMIS Agency Participation Agreement

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Westchester Community Opportunity Program, Inc.

Agency NAME

Angelina Diaz

Agency Representative

12/1/2015

Date

Angelina Diaz – SSVF Tier 1 Manager

Print NAME and TITLE

Westchester County Department of Social Services

Program Coordinator

12/1/15

Date



HMIS Agency Participation Agreement

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Interfaith Council for Action, Inc.
Agency NAME

Ron DiStefano
Agency Representative

12/1/2015
Date

Karen DiStefano, Executive Director
Print NAME and TITLE

Westchester County Department of Social Services

Janet Zuparich-Morgan II
Program Coordinator

12/1/15
Date



HMIS Agency Participation Agreement

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HUMAN DEVELOPMENT SERVICES OF WESTCHESTER
Agency NAME

Andrea Kocsis, LCSW
Agency Representative

12/11/15
Date

ANDREA KOCISIS, LCSW EXECUTIVE DIRECTOR
Print NAME and TITLE

Westchester County Department of Social Services

Tril Zultwack Manager
Program Coordinator

12/11/15
Date



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

c/o WCCOCH
117 East Port Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

HMIS Agency Participation Agreement

C. This Agreement may be terminated immediately with cause.

The signature of the parties hereto indicates their agreement with the above terms and conditions.

MHA OF WESTCHESTER

Agency NAME

Agency Representative

AMY KOHN CEO

12/23/15

Date

Print NAME and TITLE

Westchester County Department of Social Services

Program Coordinator

12/23/15

Date



HMIS Agency Participation Agreement

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Westchester County DCMH

Agency NAME



Agency Representative

12/28/15
Date

Mark Herceg, Ph.D., Commissioner

Print NAME and TITLE

Westchester County Department of Social Services

 12/28/15
Program Coordinator Date



HMIS Agency Participation Agreement

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CHOP, INC.
Agency NAME

[Signature]
Agency Representative

12-3-15
Date

Donna Besteiro, Executive Director
Print NAME and TITLE

Westchester County Department of Social Services

[Signature] 12/3/15
Program Coordinator Date



HMIS Agency Participation Agreement

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City of Mount Vernon

Agency NAME

Danielle Scholar

Agency Representative

12/11/15

Date

Danielle Scholar / Director - COC Administrator

Print NAME and TITLE

Westchester County Department of Social Services

Irish J. McLaughlin 12/11/15

Program Coordinator

Date



HMIS Agency Participation Agreement

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Access Housing Opportunities + Management Enterprises, Inc.
Agency NAME

Debbie Haslund
Agency Representative

12/10/15
Date

Debbie Haslund, Executive Director
Print NAME and TITLE

Westchester County Department of Social Services

Justin A. Mangano
Program Coordinator

12/10/15
Date



HMIS Agency Participation Agreement

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WESTCOP OASIS Shelter
Agency NAME

Larry Mosley
Agency Representative

12/30/15
Date

Larry Mosley, Program Director
Print NAME and TITLE

Westchester County Department of Social Services

[Signature]
Program Coordinator

12/30/15
Date

**Westchester County Continuum of Care Partnership for the Homeless
Agency Participation Agreement**
For the Westchester Homeless Management Information System

V. PROPRIETARY RIGHTS OF CLIENTTRACK, INC.

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V.O.A. Greater New York, Inc.
Agency NAME

Jane Rottst
Agency Representative

12/3/14
Date

Tere Pethit, President & CEO
Print NAME and TITLE

Westchester County Department of Social Services

Judith Mangruff
Program Coordinator

12/3/14
Date



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

WCCOCH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-4320 (fax)

HMIS Agency Participation Agreement

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Family Service Society of Yonkers

Agency NAME

Candice Kane
Agency Representative

11/19/15
Date

Candice Kane Residential Manager
Print NAME and TITLE

Westchester County Department of Social Services

Just 2 H Margott
Program Coordinator

11/19/15
Date



HMIS Agency Participation Agreement

- 9) Adhere to their own policies regarding conducting background checks and hiring individuals with criminal justice histories, as long as they comply with all relevant laws.
- 10) Notify HMIS Administrator within one business day of the separation of any employee who was a user of the HMIS. Notification should preferably occur by close of business on the day of employee separation.

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Lexington Center For Recovery
Agency NAME

Rene Jenkins
Agency Representative

12/10/15
Date

Rene Jenkins - Program Director
Print NAME and TITLE

Westchester County Department of Social Services

Julia M. Magent
Program Coordinator

12/10/15
Date

**Westchester County Continuum of Care Partnership for the Homeless
Agency Participation Agreement**
For the Westchester Homeless Management Information System

- a) Products: Physical security (door locks, computer screen view, local network passwords, firewall)
- b) People: Personnel security (authorized users only, local oversight of usage)
- c) Procedures: Organizational security (policies and procedures are in place)
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Children's Village
Agency NAME

Angela Torres
Agency Representative

8/27/2015
Date

Angela Torres Compliance Officer
Print NAME and TITLE

Westchester County Department of Social Services

Julia D'Alto, Manager TP
Program Coordinator

8/27/15
Date



HMIS Agency Participation Agreement

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BREAKING GROUND
Agency NAME

[Signature]
Agency Representative

12/9/15
Date

BRENDA ROSEN, PRESIDENT/CEO
Print NAME and TITLE

Westchester County Department of Social Services

[Signature]
Program Coordinator

12/9/15
Date



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Greystone Health Services, Inc.
Agency NAME

[Signature]
Agency Representative

12/28/15
Date

Jonathan Greenglass, VP of Development
Print NAME and TITLE

Westchester County Department of Social Services
[Signature]
Program Coordinator

12/28/15
Date



HMIS Agency Participation Agreement

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Westchester County Dept of Social Services
Agency NAME

[Signature]
Agency Representative

1/8/2016
Date

Kevin M. McGinnis
Commissioner

Westchester County Department of Social Services

[Signature]
Program Coordinator

1/5/2016
Date



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HOPE Community Services
Agency NAME

Stephanie Bennett
Agency Representative

12/1/15
Date

Stephanie Bennett Housing Coordinator
Print NAME and TITLE

Westchester County Department of Social Services

Just Intouch Management
Program Coordinator

12/1/15
Date



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YMCA of Yonkers
Agency NAME

Celia
Agency Representative

12/10/15
Date

Carolyn Mosha
Print NAME and TITLE

Westchester County Department of Social Services

Paul J. Anthony III
Program Coordinator

12/10/15



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Yhca White Plains

Agency NAME

Lori A. Stanlick

Agency Representative

12/23/15
Date

Lori A. Stanlick, Associate Executive Director
Print NAME and TITLE

Westchester County Department of Social Services

Grill [Signature]

Program Coordinator

12/23/15
Date



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FAMILY YMCA AT TARRYTOWN
Agency NAME

EMMANUEL BLOIT
Agency Representative

12/25/15
Date

EMMANUEL BLOIT, RESIDENCE DIRECTOR
Print NAME and TITLE

Westchester County Department of Social Services

Just Introcchi
Program Coordinator

12/29/15
Date

Westchester County Continuum of Care Partnership for the Homeless
Agency Participation Agreement
For the Westchester Homeless Management Information System

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COMMUNITY HOUSING INNOVATIONS INC.
75 SO. BROADWAY - STE. 340
WHITE PLAINS, NY 10601

Agency NAME

By: Alexander H. Roberts
Agency Representative

10/27/15
Date

Alexander H. Roberts
Print NAME and TITLE

Westchester County Department of Social Services

Julia Lanthocchij Manager II
Program Coordinator

10/27/15
Date



HMIS Agency Participation Agreement

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CLUSTER, INC
Agency NAME

Freda Madon
Agency Representative

12/23/2015
Date

Deputy Executive Director
Print NAME and TITLE

Westchester County Department of Social Services

Leah Lantto
Program Coordinator

12/23/15
Date



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West HELP, INC.

Agency NAME

George Nashak

Agency Representative

12/14/15

Date

GEORGE NASHAK, EXECUTIVE VICE PRESIDENT

Print NAME and TITLE

Westchester County Department of Social Services

Paula DeLuca Mangano

Program Coordinator

12/14/15

Date



Priorities for Homeless Housing Placement in CoC-Funded Permanent Supportive Housing (revised 7/23/15)

On 7/28/14 HUD published rules detailing how local Continuums of Care (CoCs) must prioritize chronically homeless (CH) people in CoC-funded Permanent Supportive Housing (PSH)¹ that is either dedicated exclusively or committed to giving priority to CH.² It mandated that CoCs place CH in these units in the following priority order.

1. CH individuals and families who have been homeless for 12 months³ **and** have the most severe needs⁴
2. Other CH individuals and families who have been homeless for 12 months
3. CH individuals and families who have been homeless less than 12 months **and** have the most severe needs
4. All other CH individuals and families who have been homeless less than 12 months.

Non-CH families and individuals can be placed in CoC-funded housing that is:

- a) not dedicated or prioritized to CH or
- b) prioritized to CH but only after all known CH have been offered PSH. They must be placed in the following priority order.
 1. Homeless individuals and families with a disability who have the most severe needs
 2. Homeless individuals and families with a disability who have been homeless for at least 6 months⁵
 3. Homeless individuals and families with a disability coming from emergency shelters or places not meant for human habitation
 4. Homeless individuals and families with a disability coming from transitional housing.

¹ Note: only individuals and families with disabilities can be placed in CoC-funded PSH.

² <https://www.hudexchange.info/resources/documents/Notice-CPD-14-012-Prioritizing-Persons-Experiencing-Chronic-Homelessness-in-PSH-and-Recordkeeping-Requirements.pdf>

³ Defined as being either continuously homeless for 12 months or having at least **4** separate episodes in the last **3** years with a cumulative total of 12 months or more.

⁴ Severity of need must be determined using CoC-wide objective assessment tools, adjusted when necessary by well-documented and fairly applied professional judgment. We propose that Westchester's CoC define severe needs for adults as having a VI-SPDAT score of 10-15 points.

⁵ Defined as being either continuously homeless for 6 months or having at least **3** separate episodes in the last **3** years with a cumulative total of 6 months or more.

Performance Measurement Module (Sys PM)

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH		3117		69			30	
1.2 Persons in ES, SH, and TH		4134		179			75	

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	-	-	-	-	-	-	-
1.2 Persons in ES, SH, and TH	-	-	-	-	-	-	-	-

Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
		# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	22	2	9%	0	0%	2	9%	4	18%
Exit was from ES	0	0		0		0		0	
Exit was from TH	468	4	1%	23	5%	29	6%	56	12%
Exit was from SH	0	0		0		0		0	
Exit was from PH	64	0	0%	1	2%	2	3%	3	5%
TOTAL Returns to Homelessness	554	6	1%	24	4%	33	6%	63	11%

Performance Measurement Module (Sys PM)

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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

	Previous FY PIT Count	2015 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	2138	1797	-341
Emergency Shelter Total	904	820	-84
Safe Haven Total	0	0	0
Transitional Housing Total	1214	950	-264
Total Sheltered Count	2118	1770	-348
Unsheltered Count	20	27	7

Metric 3.2 – Change in Annual Counts

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

	Previous FY	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons		4156	
Emergency Shelter Total		3140	
Safe Haven Total		0	
Transitional Housing Total		1531	

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

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		644	
Number of adults with increased earned income		22	
Percentage of adults who increased earned income		3%	

Performance Measurement Module (Sys PM)

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		644	
Number of adults with increased non-employment cash income		120	
Percentage of adults who increased non-employment cash income		19%	

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		644	
Number of adults with increased total income		136	
Percentage of adults who increased total income		21%	

Metric 4.4 – Change in earned income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		461	
Number of adults who exited with increased earned income		73	
Percentage of adults who increased earned income		16%	

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		461	
Number of adults who exited with increased non-employment cash income		182	
Percentage of adults who increased non-employment cash income		39%	

Metric 4.6 – Change in total income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		461	
Number of adults who exited with increased total income		232	
Percentage of adults who increased total income		50%	

Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.		3526	
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.		690	
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)		2836	

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.		3842	
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.		809	
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)		3033	

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD’s Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in 2016.

Performance Measurement Module (Sys PM)

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Previous FY	Current FY	Difference
Universe: Persons who exit Street Outreach		230	
Of persons above, those who exited to temporary & some institutional destinations		81	
Of the persons above, those who exited to permanent housing destinations		96	
% Successful exits		77%	

Metric 7b.1 – Change in exits to permanent housing destinations

	Previous FY	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited		2887	
Of the persons above, those who exited to permanent housing destinations		1284	
% Successful exits		44%	

Metric 7b.2 – Change in exit to or retention of permanent housing

	Previous FY	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH		1365	
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations		1307	
% Successful exits/retention		96%	