Before Starting the CoC Application

The CoC Consolidated Application is made up of three parts: the CoC Application, the Project Listing, and the Project Applications. The Collaborative Applicant is responsible for submitting two of these sections. In order for the CoC Consolidated Application to be considered complete, each of these two sections REQUIRES SUBMISSION:

- CoC Application
- Project Listing

Please Note:

- Review the FY2013 CoC Program NOFA in its entirety for specific application and program requirements.
- Use the CoC Application Detailed Instructions while completing the application in e-snaps. The detailed instructions are designed to assist applicants as they complete the application forms in e-snaps.
- As a reminder, CoCs are not able to import data from the 2012 application due to significant changes to the CoC Application questions. All parts of the application must be fully completed.
- All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the application.

For Detailed Instructions click here.

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

1A-1 CoC Name and Number: TX-604 - Waco/McLennan County CoC

1A-2 Collaborative Applicant Name: Heart of Texas Homeless Coalition

1A-3 CoC Designation: CA

1B. Continuum of Care (CoC) Operations

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

1B-1 How often does the CoC conduct meetings of the full CoC membership? Monthly

1B-2 How often does the CoC invite new members to join the CoC through a publicly available invitation? Monthly

IB-3 Does the CoC include membership of a homeless or formerly homeless person? Yes

1B-4 For members who are homeless or formerly homeless, what role do they play in the CoC membership? Select all that apply. Outreach, Advisor, Volunteer, Community Advocate, Organizational employee

1B-5 Does the CoC's governance charter incorporate written policies and procedures for each of the following:

1B-5.1 Written agendas of CoC meetings?	Yes
1B-5.2 Centralized or Coordinated Assessment System?	No
1B-5.3 Process for Monitoring Outcomes of ESG Recipients?	No
1B-5.4 CoC policies and procedures?	Yes
1B-5.5 Written process for board selection?	Yes
1B-5.6 Code of conduct for board members that includes a recusal process?	Yes
1B-5.7 Written standards for administering assistance?	No

1C. Continuum of Care (CoC) Committees

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

1C-1 Provide information for up to five of the most active CoC-wide planning committees, subcommittees, and/or workgroups, including a brief description of the role and the frequency of meetings. Collaborative Applicants should only list committees, subcommittees and/or workgroups that are directly involved in CoC-wide planning, and not the regular delivery of services.

	Name of Group	Role of Group (limit 750 characters)	Meeting Frequency	Names of Individuals and/or Organizations Represented
1C-1.1	Continuum of Care Committee	This group is the governing body for the Heart of Texas Continuum of Care. This group is a subcommittee of the Heart of Texas Homeless Coalition Board. This committee is comprised of representatives from all recipient organizations as well as the Veteran’s Administration and Homelessness Administrator. The committee meets to monitor the progress in meeting HUD’s national goals, implementation of the Coordinated Assessment System, preparing and overseeing the community’s application for funds, needs of the community, as well as drafting goals and action steps for approval by the entire coalition, and assigns persons to monitor CoC grant recipients.	Quarterly	City of Waco, Family Abuse Center, Compassion Ministries, Mission Waco Mission World, MHMR, and The Salvation Army
1C-1.2	Homeless Coalition Board	This group meets to discuss how the Continuum of Care meets the needs of the local community as well as future steps to end chronic homelessness. The board makes decisions with the input of community members that affect those who receive Continuum of Care Funding and those that do not. This committee serves as a forum for communication regarding events in the community programs for homeless individuals and families.	Monthly	Cheryl Pooler, Kathy Reid, Vicki Sapp, Mike Ormsby, Kevin Taylor, Carlton Willis, Teri Holtkamp (CoC Lead/Advisory), Katie Fager (Advisory)
1C-1.3	HMIS Committee	This committee meets to oversee the progress of	Quarterly	Ashley Herridge, Barbara Tate, Buddy Edwards, Carlton Willis, Chelle Samaniego, Christy Oliver, Jill McCall, Lidia Chavez, Mary Lou Polk, Micah Stewart, Sarah Miller, Seth Miller, Vicki Halfmann

1C-1.4	Evaluation Committee	This committee meets at least 1 time a year to determine how Continuum of Care applications will be scored and ranked. The projects are scored based on the goals and priorities set by the Heart of Texas Continuum of Care at the beginning of the year. This committee is comprised of unbiased stakeholders of the community who's goal is to improve the quality of life for all members. This includes executive directors, former mayors, current case managers and program managers.	Annually	Virginia DuPuy, Buddy Edwards, Cheryl Pooler, Mike Stone, Judy Perry
1C-1.5	Project Homeless Connect Committee	Project Homeless Connect is organized by the Heart of Texas Homeless Coalition to gather all services that impact homelessness in the community, providing a 1-day 1-stop shop of care/services. Volunteers, nonprofits, corporations, government agencies, faith-based organizations and providers offer variety of services to homeless creating/promoting tangible solutions to remedy homelessness. PHC transforms despair and immobility of homelessness into momentum to get into recovery, seek employment, access health services and benefits, reconnect with the community and get off the street. Homeless are treated with respect and dignity, given support and afforded the opportunity to form ties with peers and volunteers while receiving services.	Quarterly	VA Homeless Outreach, The City of Waco, The Family Abuse Center, HUD-VASH

1C-2 Describe how the CoC 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 when establishing the CoC-wide committees, subcommitees, and workgroups.
(limit 750 characters)

The Heart of Texas Homeless Coalition is located in McLennan County and serves an additional five surrounding or nearby rural and sparsely populated counties that have few, if any homeless services. Member agencies include those that serve families with children, school districts with unaccompanied youth, veterans, victims of domestic violence, street homeless, chronic homeless with substance abuse and/or mental health issues, and law enforcement as well as faith-based organizations who want to contribute in some way. Membership also includes formerly homeless persons. Each year as the CoC's top priorities are identified, sub-committees are formed to work toward solutions for these priorities. Members select which committee on which they would like to serve, then report to the Coalition.

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

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

1D-1 Describe the specific ranking and selection process the CoC uses to make decisions regarding project application review and selection, based on objective criteria. Written documentation of this process must be attached to the application along with evidence of making the information publicly available.
(limit 750 characters)

Our CoC obtained a renewal project evaluation tool from Texas Homeless Network that collects performance data from the APR, HMIS data quality reports, project leveraging, and HUD monitoring results. A project evaluation committee comprised of the President of the Heart of Texas Homeless Coalition Board, and 3 community leaders (representing agencies not currently receiving CoC funding) was formed to score each project and assign a ranking recommendation. The committee utilized the evaluation tool, HUD priories, and local CoC priorities to come up with their ranking recommendation. This was presented to the CoC committee for review. Changes proposed by the CoC committee were sent to the Homeless Coalition board for vote to determine the official ranking of our CoC projects.

1D-2 Describe how the CoC reviews and ranks projects using periodically collected data reported by projects, conducts analysis to determine each project's effectiveness that results in participants rapid return to permanent housing, and takes into account the severity of barriers faced by project participants. Description should include the specific data elements and metrics that are reviewed to do this analysis.
(limit 1000 characters)

The CoC has historically conducted annual peer reviews to monitor CoC performance. This year, our CoC utilized an objective evaluation tool to review, score, and rank all renewal projects. Data from each renewal project was collected directly from the service providers utilizing the APR, HMIS data quality reports, project leveraging, and HUD monitoring results from FY2012. The tool analyzed each agency based on the following data elements: housing stability, access to income and benefits, length of time homeless, bed utilization, targeting hard to serve persons, meeting reporting requirements, unspent funds, HMIS data quality, 2012 leverage documentation, and HUD audit/monitoring findings. Metrics were set by APR and 2012 competition goals. Points were assigned based on how the project met the required performance goals in each priority area. Projects were then ranked based upon their total project score and their alignment with HUD priorities. The CoC committee intends to revise the tool and utilize it on a quarterly basis to evaluate CoC project performance.

1D-3 Describe the extent in which the CoC is open to proposals from entities that have not previously received funds in prior Homeless Assistance Grants competitions.
(limit 750 characters)

On December 20, 2013, the CoC Lead published information regarding the FY2103 project application process on the Heart of Texas Homeless Coalition webpage as well as via e-mail listserve to coalition members. The posting listed HUD priorities and eligibility for new project proposals. An application for new project proposals was also included in the release. Each year the CoC submits public notice for new project applications. Efforts are made to ensure that new entities are aware of the funding opportunity and encouraged to apply. The CoC works with interested providers by discussing community needs, sharing information for providers who may be providing similar services for purposes of collaboration, by helping the potential applicant understand the local selection and review process, as well as the national selection process.

1D-4 On what date did the CoC post on its website all parts of the CoC Consolidated Application, including the Priority Listings with ranking information and notified project applicants and stakeholders the information was available? Written documentation of this notification process (e.g., evidence of the website where this information is published) must be attached to the application.	12/20/2013
1D-5 If there were changes made to the ranking after the date above, what date was the final ranking posted?	
1D-6 Did the CoC attach the final GIW approved by HUD either during CoC Registration or, if applicable, during the 7-day grace period following the publication of the CoC Program NOFA without making changes?	Yes

1D-6.1 If no, briefly describe each of the specific changes that were made to the GIW (without HUD approval) including any addition or removal of projects, revisions to line item amounts, etc. For any projects that were revised, added, or removed, identify the applicant name, project name, and grant number.
(limit 1000 characters)

1D-7 Were there any written complaints received by the CoC in relation to project review, project selection, or other items related to 24 CFR 578.7 or 578.9 within the last 12 months?	No

**1D-7.1 If yes, briefly describe the complaint(s), how it was resolved, and the date(s) in which it was resolved.
(limit 750 characters)**

1E. Continuum of Care (CoC) Housing Inventory

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

1E-1 Did the CoC submit the 2013 HIC data in the HDX by April 30, 2013? Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

2A-1 Describe how the CoC ensures that the HMIS is administered in compliance with the CoC Program interim rule, conformance with the 2010 HMIS Data Standards and related HUD Notices.
(limit 1000 characters)

The HOT HMIS Lead agency is the City of Waco, which came about through the collaborative efforts of the CoC Lead and the HOT Homeless Coalition. The CoC Lead and the HMIS Lead work collaboratively to broaden the scope of information that is entered into HMIS, which better addresses the needs in our community. All HMIS providers are required to report HUD Universal Data Elements, even if they do not receive CoC funding. The HMIS Lead consistently monitors HUD Notices and attends monthly conference calls with ABT Associates for TA assistance to maintain compliance with any and all HUD requirements. Training is administered at least quarterly to ensure that users are maintaining fresh knowledge regarding all HUD data standards. The HOT HMIS is overseen by an advisory committee that meets quarterly and maintains a Policy and Standard Operating Procedures Manual that outlines the policies for the privacy, security and quality of the data entered into the system.

2A-2 Does the governance charter in place between the CoC and the HMIS Lead include the most current HMIS requirements and outline the roles and responsibilities of the CoC and the HMIS Lead?
If yes, a copy must be attached. Yes

2A-3 For each of the following plans, describe the extent in which it has been developed by the HMIS Lead and the frequency in which the CoC has reviewed it: Privacy Plan, Security Plan, and Data Quality Plan.
(limit 1000 characters)

The Heart of Texas HMIS security plan states that users must sign a confidentiality agreement, receive and read the Policies and Standard Operating Procedures (PSOP) manual, and secure their log-in and password. The HMIS database is located on a secure website, and users are trained to maintain the security of the information in the database. In the event of a user being terminated, the agency administrator must notify the HMIS administrator immediately in order to inactivate that user's license and protect the information in the system. In the HMIS PSOP, the importance of prompt data entry, accuracy of information, and completeness of data are stated for each user. Information about domestic violence victims is not entered into HMIS. The DV provider enters data into a comparable database. Users are trained to use the system to track services that are administered to individuals and families in the community.

2A-4 What is the name of the HMIS software selected by the CoC and the HMIS Lead? Applicant will enter the HMIS software name (e.g., ABC Software). ServicePoint

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

2A-6 Does the CoC plan to change the HMIS software within the next 18 months? No

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

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

2B-2 Select the CoC(s) covered by the HMIS: (select all that apply) TX-604 - Waco/McLennan County CoC

2B-3 In the chart below, enter the amount of funding from each funding source that contributes to the total HMIS budget for the CoC.

2B-3.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	$63,056
ESG	$0
CDBG	$35,411
HOME	$0
HOPWA	$0
Federal - HUD - Total Amount	$98,467

2B-3.2 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-3.3 Funding Type: State and Local

Funding Source	Funding
City	$0
County	$0
State	$0
State and Local - Total Amount	$0

2B-3.4 Funding Type: Private

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

2B-3.5 Funding Type: Other

Funding Source	Funding
Participation Fees	$7,208
Other - Total Amount	$7,208

2B-3.6 Total Budget for Operating Year	$105,675

2B-4 How was the HMIS Lead selected by the CoC? Agency Applied

**2B-4.1 If other, provide a description as to how the CoC selected the HMIS Lead.
(limit 750 characters)**

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

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

2C-1 Indicate the HMIS bed coverage rate (%) for each housing type within the CoC. If a particular housing type does not exist anywhere within the CoC, select "Housing type does not exist in CoC" from the drop-down menu:

*** Emergency shelter**	86%+
*** Safe Haven (SH) beds**	0-50%
*** Transitional Housing (TH) beds**	86%+
*** Rapid Re-Housing (RRH) beds**	Housing type does not exist in CoC
*** Permanent Supportive Housing (PSH) beds**	0-50%

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

2C-3 If the bed coverage rate for any housing type is 64% or below, describe how the CoC plans to increase this percentage over the next 12 months.
(limit 1000 characters)

Our bed coverage continues to be below 64% for Permanent Supportive Housing due to lack of participation by our HUD VASH provider. Our CoC has made numerous attempts since 2010 to collect VASH data including contact with VA and HUD headquarters. This issue remains unresolved as the problem lies at the national level. We would welcome suggestions from HUD on how gather VASH data into HMIS. Currently our only provider of Safe Haven beds (MHMR) does not participate in HMIS. Our HMIS Advisory Committee has a strategic plan in place to increase local participation in our HMIS system. Our CoC and HMIS lead stay in close communication with our service providers and will continue to explore ways to get all our Safe Haven and Permanent Supportive Housing beds entered into our local HMIS. This will be done by meeting with providers to advocate for the need and benefits of their participation in HMIS.

2C-4 If the Collaborative Applicant indicated that the bed coverage rate for any housing type was 64% or below in the FY2012 CoC Application, describe the specific steps the CoC has taken to increase this percentage.
(limit 750 characters)

The bed coverage rate in FY2012 was low due to lack of participation from our HUD VASH and Safe Haven providers. The CoC and HMIS lead have made numerous attempts to get the local VA and Housing Authority to input VASH data into HMIS. The VA states they cannot enter data into HMIS due to internal policy/procedures. The Housing Authority has agreed to input data if HUD will send them proper approval. Since 2010 our CoC Lead has been in contact with HUD and VA headquarters regarding this issue but a resolution has not been reached. The Housing Authority does provide quarterly aggregate data to the CoC and HMIS lead on the number of VASH beds utilized, turnover rate, and length of stay. We continue to approach these providers regarding HMIS data entry.

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

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

2D-1 For each housing type, indicate the average length of time project participants remain in housing. If a housing type does not exist in the CoC, enter "0".

Type of Housing	Average Length of Time in Housing
Emergency Shelter	13
Transitional Housing	3
Safe Haven	0
Permanent Supportive Housing	19
Rapid Re-housing	0

2D-2 Indicate the percentage of unduplicated client records with null or missing values on a day during the last 10 days of January 2013 for each Universal Data Element listed below.

Universal Data Element	Percentage
Name	0%
Social security number	3%
Date of birth	0%
Ethnicity	0%
Race	2%
Gender	0%
Veteran status	2%
Disabling condition	3%
Residence prior to program entry	7%
Zip Code of last permanent address	3%
Housing status	2%
Head of household	0%

2D-3 Describe the extent in which HMIS generated data is used to generate HUD required reports (e.g., APR, CAPER, etc.). (limit 1000 characters)

Our community utilizes HMIS generated data to complete the following HUD required reports: APR, CAPER, AHAR, PIT, HIC. The HMIS staff complete quarterly trainings with all HMIS users to address common data quality issues to ensure that these reports can be run accurately. HMIS staff also provide technical assistance in completing these reports when needed.

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

2D-5 Describe the process through which the CoC works with the HMIS Lead to assess data quality. Include how the CoC and HMIS Lead collaborate, and how the CoC works with organizations that have data quality challenges.
(Limit 1000 characters)

Our HMIS administrator insures that Data Quality reports are run monthly to verify that client data has been entered accurately and completely. The report(s) are sent to the Agency Administrators to review and correct any areas that have missing or null data. The HMIS lead attends monthly homeless coalition meetings, quarterly continuum of care meetings, and facilitates quarterly HMIS advisory committee meetings (in which CoC stakeholders serve). Data quality challenges are frequently discussed and addressed in these meetings. In addition the HMIS staff have begun to schedule quarterly trainings for all users to address common data quality errors. In addition, HMIS staff will schedule training as often as needed for the user to acquire the necessary tools to enter data efficiently and correctly. The CoC and HMIS lead have conducted meetings to review data report cards and address issues with organizations that continue to have data quality challenges. Once the challenges are identified a plan for corrective action is developed, the CoC and HMIS lead then followup with the agency until the challenge is fully addressed.

2D-6 How frequently does the CoC review the data quality in the HMIS of client-level data?	Quarterly

2E. Homeless Management Information System (HMIS) Data Usage and Coordination

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

2E-1 Indicate the frequency in which the CoC uses HMIS data for each of the following activities:

*** Measuring the performance of participating housing and service providers**	Monthly
*** Using data for program management**	Quarterly
*** Integration of HMIS data with data from mainstream resources**	Never
*** Integration of HMIS data with other Federal programs (e.g., HHS, VA, etc.)**	Never

2F. Homeless Management Information System (HMIS) Policies and Procedures

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

2F-1 Does the CoC have a HMIS Policy and Procedures Manual? If yes, the HMIS Policy and Procedures Manual must be attached. Yes

2F-1.1 What page(s) of the HMIS Policy and Procedures Manual or governance charter includes the information regarding accuracy of capturing participant entry and exit dates in HMIS? (limit 250 characters)

Pg. 24 of the HMIS' Policies and Procedures manual discusses the importance of promptness of data entry and the importance of dates in the system. Through training, properly recording entry and exit dates for clients is emphasized. An amendment will be added to the policy/procedure manual.

2F-2 Are there agreements in place that outline roles and responsibilities between the HMIS Lead and the Contributing HMIS Organizations (CHOs)? Yes

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

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

2G-1 Indicate the date of the most recent sheltered point-in-time count (mm/dd/yyyy): 01/30/2013

2G-2 If the CoC conducted the sheltered point-in-time count outside of the last 10 days of January 2013, was an exception granted by HUD? Not Applicable

2G-3 Enter the date the CoC submitted the sheltered point-in-time count data in HDX: 04/30/2013

2G-4 Indicate the percentage of homeless service providers supplying sheltered point-in-time data:

Housing Type	Observation	Provider Shelter	Client Interview	HMIS
Emergency Shelters	0%	20%	0%	80%
Transitional Housing	0%	20%	0%	80%
Safe Havens	0%	100%	0%	0%

2G-5 Comparing the 2012 and 2013 sheltered point-in-time counts, indicate if there was an increase, decrease, or no change and then describe the reason(s) for the increase, decrease, or no change. (Limit 750 characters)

Our 2012 PIT sheltered count was 258, this number decreased to 230 in 2013. This decrease is due to the number of permanent housing options in our community. In 2012/2013 the amount of ESG funding increased in our community allowing 116 persons to be served through Rapid Re-housing. Our Shelter Plus Care provider also reported that all their vouchers have been filled and they currently have a waiting list. They have been able to serve more persons than stated in their grant target numbers. This means more persons have been placed in permanent housing lowering the sheltered PIT count.

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

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

*** 2H-1 Indicate the method(s) used to count sheltered homeless persons during the 2013 point-in-time count:**

Survey providers:	X
HMIS:	X
Extrapolation:	
Other:	X

2H-2 If other, provide a detailed description.
(limit 750 characters)

Observation was used by non-HMIS participating agencies to get a manual count of people in each required reporting category. These providers also completed the survey tool to verify the observations.

2H-3 For each method selected, including other, describe how the method was used to ensure that the data collected on the sheltered homeless population during the 2013 point-in-time count was accurate.
(limit 750 characters)

1. Survey providers: Each homeless service provider is given the survey tool and volunteers (if requested) to help survey each program participation on the night of the count. This data is compared with the HMIS records for accuracy.
2. HMIS: The HMIS administrator runs a report for each shelter provider that provides data of the total beds utilized on the count night. Data quality reports are run for each participating agency. The final data is verified by each service provider.
3. Observation: Each year the HMIS Administrator contacts shelter providers that do not utilize HMIS to encourage participation through completing surveys and providing a count of the number served on the PIT night. The HMIS administrator request documentation of the data via e-mail.

2I. Continuum of Care (CoC) Sheltered Homeless Point-in-Time (PIT) Count: Data Collection

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

*** 2I-1 Indicate the methods used to gather and calculate subpopulation data for sheltered homeless persons:**

HMIS:	X
HMIS plus extrapolation:	
Sample of PIT interviews plus extrapolation:	
Sample strategy: (if Sample of PIT interviews plus extrapolation is selected)	
Provider expertise:	
Interviews:	
Non-HMIS client level information:	X
Other:	

2I-2 If other, provide a detailed description. (limit 750 characters)

2I-3 For each method selected, including other, describe how the method was used to ensure that the data collected on the sheltered homeless population count during the 2013 point-in-time count was accurate. (limit 750 characters)

1. HMIS: The HMIS Administrator runs an unduplicated report from HMIS for the night of the count using reports from Emergency Shelters, Transitional Housing and Permanent Supportive Housing providers. This data is reviewed by shelter providers and compared with internal data sources (case files, internal spreadsheets, surveys completed on count night, etc) to ensure accuracy.
2. Non-HMIS client level information: The HMIS administrator requests data from these providers through the use of surveys and comparable databases. This data is reviewed by shelter providers and compared with internal data sources (case files, internal spreadsheets,surveys completed on count night, etc) to ensure accuracy.

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

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

*** 2J-1 Indicate the methods used to ensure the quality of the data collected during the sheltered point-in-time count:**

Training:	X
Follow-up	X
HMIS:	X
Non-HMIS de-duplication :	X
Other:	

2J-2 If other, provide a detailed description.
(limit 750 characters)

2J-3 For each method selected, including other, describe how the method was used to ensure that the data collected on the sheltered homeless population count during the 2013 point-in-time count was accurate.
(limit 750 characters)

1. Training: HMIS staff reviews HUD guidance and trainings on conducting the PIT count. Participating agency staff and volunteers are trained on the tool and data collection requirements.
2. Follow-up: The HMIS administrator ensures that all shelter providers are aware of the PIT count and sends reminders to shelter providers to maximize participation.
3. HMIS: HMIS staff run unduplicated reports on the night of the count using data from all homeless service providers. Data quality reports are run to ensure that all required data elements are complete and accurate. The PIT counts are compared to other internal data sources and inconsistencies are resolved with the service providers.
4. Non-HMIS de-duplication: This data is unduplicated by verifying the last 4 digits of SSN, gender, name, and date of birth.

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

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

2K-1 Indicate the date of the most recent unsheltered point-in-time count: 01/30/2013

2K-2 If the CoC conducted the unsheltered point-in-time count outside of the last 10 days of January 2013, was an exception granted by HUD? Not Applicable

2K-3 Enter the date the CoC submitted the unsheltered point-in-time count data in HDX: 04/30/2013

2K-4 Comparing the 2013 unsheltered point-in-time count to the last unsheltered point-in-time count, indicate if there was an increase, decrease, or no change and describe the specific reason(s) for the increase, decrease, or no change.
(limit 750 characters)

Our unsheltered PIT count increased from 61 in 2011, to 65 in 2013. This increase is due to a greater community wide effort to identify our unsheltered homeless population through developing a better methodology for the PIT unsheltered count. In 2012/2013 our community received ESG Street Outreach funding which allowed us to increase our street outreach efforts beyond our existing PATH program. The Salvation Army partnered with The Family Abuse Center, the City of Waco, PATH, and the VA to send out a mobile canteen twice a month to engage persons sleeping on the streets. The collaborative team provided basic needs of water, food, and transportation as well as engagement with service providers.

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

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

*** 2L-1 Indicate the methods used to count unsheltered homeless persons during the 2013 point-in-time count:**

Public places count:	
Public places count with interviews on the night of the count:	X
Public places count with interviews at a later date:	X
Service-based count:	X
HMIS:	X
Other:	

**2L-2 If other, provide a detailed description.
(limit 750 characters)**

**2L-3 For each method selected, including other, describe how the method was used to ensure that the data collected on the unsheltered homeless population during the 2013 point-in-time count was accurate.
(limit 750 characters)**

1. Public places (w/interview):surveys were completed in areas identified by our outreach team including parks, bridges, and known encampments. Incentives were provided to encourage participation.
2. Public places (later date):Surveys were conducted at Project Homeless Connect (resource fair) which occurred during the week of the PIT count.
3. Service-based: Surveys were conducted with self identified unsheltered homeless persons in soup kitchens, drop in centers, public libraries, and health service providers. Participants were asked whether they had already completed the survey.
4. HMIS: All survey participants provided basic identifying information which was cross referenced in HMIS to avoid duplication. The HMIS provider also collected data from non-homeless providers on unsheltered person served on PIT date.

2M. Continuum of Care (CoC) Unsheltered Homeless Point-in-Time Count: Level of Coverage

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

2M-1 Indicate where the CoC located unsheltered homeless persons during the 2013 point-in-time count: A Combination of Locations

2M-2 If other, provide a detailed description. (limit 750 characters)

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

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

*** 2N-1 Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2013 unsheltered population count:**

Training:	X
"Blitz" count:	X
Unique identifier:	X
Survey question:	X
Enumerator observation:	X
Other:	

2N-2 If other, provide a detailed description. (limit 750 characters)

2N-3 For each method selected, including other, describe how the method was used to reduce the occurance of counting unsheltered homeless persons more than once during the 2013 point-in-time count. In order to recieve credit for any selection, it must be described here. (limit 750 characters)

1. Training:HMIS staff review HUD guidance and trainings on conducting the PIT count. Participating agency staff and volunteers are trained on the tool and data collection requirements, and de-duplication methods.
2. Blitz count: Volunteers conducted surveys in encampments, parks, under bridges, and other known locations the homeless gather on the same night as the sheltered count. Participants were given unique identifier to prevent duplication.
3. Unique ID: Participants were asked to provide name, last 4 digits of SSN, or date of birth to help prevent duplication of the surveys.
3. Survey question: All survey participants were asked if they had already completed the survey at another location.
4. Enumerator: If a participant declined participation, the surveyor answered as many questions as possible based on observation.

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

Objective 1: Increase Progress Towards Ending Chronic Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

In FY 2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP). The first goal in Opening Doors is to end chronic homelessness by 2015. Creating new dedicated permanent supportive housing beds is one way to increase progress towards ending homelessness for chronically homeless persons. Using data from Annual Performance Reports (APR), HMIS, and the 2013 housing inventory count, complete the table below.

3A-1.1 Objective 1: Increase Progress Towards Ending Chronic Homelessness

	Proposed in 2012 CoC Application	2013 Actual Numeric Achievement and Baseline	2014 Proposed Numeric Achievement	2015 Proposed Numeric Achievement
3A-1.1a For each year, provide the total number of CoC-funded PSH beds not dedicated for use by the chronically homeless that are available for occupancy.		25	25	25
3A-1.1b For each year, provide the total number of PSH beds dedicated for use by the chronically homeless.	61	15	60	60
3A-1.1c Total number of PSH beds not dedicated to the chronically homeless that are made available through annual turnover.		9	9	9
3A-1d Indicate the percentage of the CoC-funded PSH beds not dedicated to the chronically homeless made available through annual turnover that will be prioritized for use by the chronically homeless over the course of the year.		3%	6%	8%
3A-1.1e How many new PSH beds dedicated to the chronically homeless will be created through reallocation?		0	0	0

3A-1.2 Describe the CoC's two year plan (2014-2015) to increase the number of permanent supportive housing beds available for chronically homeless persons and to meet the proposed numeric goals as indicated in the table above. Response should address the specific strategies and actions the CoC will take to achieve the goal of ending chronic homelessness by the end of 2015.
(limit 1000 characters)

The Heart of Texas Region MHMR will update their policies to provide priority for the chronic homeless as existing permanent supportive housing beds become available and the beds currently reserved for the CH are at capacity. The Coalition is deploying several outreach methods to better identify the CH, obtain required documentation, and connect this population to existing housing resources including the HOTRMHMR and the HUD VASH program as they are identified as meeting HUD’s CH definition. Planned outreach efforts include Registry Week through the 100,000 Homes Campaign, to determine the most vulnerable individuals on the street to better understand their needs and permanently house them. Increasing the number of individuals in the community with SOAR certification will allow the CH qualify quickly for social security benefits and improve chances for long term housing stability. The HOTRMHMR will continue their street outreach efforts as funded by the PATH program, and the VA will continue street outreach through the VA homeless program.

3A-1.3 Identify by name the individual, organization, or committee that will be responsible for implementing the goals of increasing the number of permanent supportive housing beds for persons experiencing chronic homelessness.
(limit 1000 characters)

Homeless Administrator, Teri Holtkamp, employed by the City of Waco will appoint a Permanent Housing task force that will be responsible for implementing the goals of increasing the number of permanent supportive housing beds for persons experiencing chronic homelessness. The task force will report to the Board of the HOT Homeless Coalition no less than twice per year on the progress of the task force.

Note on question 3A-1.1B The 2013 HIC reflects 8 VASH beds dedicated to CH, which was imported by HUD headquarters. We have not updated HIC Due to VA's inability to enter data into HMIS. The number of CH beds at the VA is based on an internal report used by the VA. At the time of their report, 85%of their 60 beds are currently occupied by individuals determined to be CH.

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

Objective 2: Increase Housing Stability

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

In FY2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and the Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP). Achieving housing stability is critical for persons experiencing homelessness. Using data from Annual Performance Reports (APR), complete the table below.

3A-2.1 Does the CoC have any non-HMIS projects for which an APR should have been submitted between October 1, 2012 and September 30, 2013? Yes

3A-2.2 Objective 2: Increase Housing Stability

	2013 Actual Numeric Achievement and Baseline	2014 Proposed Numeric Achievement	2015 Proposed Numeric Achievement
3A-2.2a Enter the total number of participants served by all CoC-funded permanent supportive housing projects as reported on APRs submitted during the period between October 1, 2012 and September 30, 2013:	48	48	48
3A-2.2b Enter the total number of participants that remain in CoC-funded funded PSH projects at the end of the operating year PLUS the number of participants that exited from all CoC-funded permanent supportive housing projects to a different permanent housing destination.	44	39	39
3A-2.2c Enter the percentage of participants in all CoC-funded projects that will achieve housing stability in an operating year.	92%	80%	80%

3A-2.3 Describe the CoC's two year plan (2014-2015) to improve the housing stability of project participants in CoC Program-funded permanent supportive housing projects, as measured by the number of participants remaining at the end of an operating year as well as the number of participants that exited from all CoC-funded permanent supportive housing projects to a different permanent housing destination. Response should address the specific strategies and actions the CoC will take to meet the numeric achievements proposed in the table above. (limit to 1000 characters)

CoC Program-funded permanent supportive housing projects will utilize HMIS or a comparable system, in the case of DV provider, to measure the housing stability of participants as they remain in, or leave permanent supportive housing for another permanent housing arrangement. CoC funded providers have in place, a system of providing after-care services to assure that participants who have exited their programs remain in a stable living environment. Participants are provided after-care services at least monthly for a period ranging from six months to one year or longer, in the case of mentally ill participants. Participants are assessed to ensure that they have adequate income to retain permanent housing, that their living environment is safe, secure and appropriate to meet the goal of permanent housing.

3A-2.4 Identify by name the individual, organization, or committee that will be responsible for increasing the rate of housing stability in CoC-funded projects. (limit 1000 characters)

Homeless Administrator, Teri Holtkamp, employed by the City of Waco will appoint a Permanent Housiing task force that will be responsible for implementing the goals of improving the housing stability of project participants in CoC-funded permanent supportive housing projects as well as the number of participants that exited from all CoC-funded permanent supportive housing projects to a different permanent housing destination. The task force will report to the Board of the HOT Homeless Coalition no less than twice per year on the progress of the task force.

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

Objective 3: Increase project participants income

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

In FY2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and the Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP). Assisting project participants to increase income is one way to ensure housing stability and decrease the possibility of returning to homelessness. Using data from Annual Performance Reports (APR), complete the table below.

3A-3.1 Number of adults who were in CoC-funded projects as reported on APRs submitted during the period between October 1, 2012 and September 30, 2013: 197

3A-3.2 Objective 3: Increase project participants income

	2013 Actual Numeric Achievement and Baseline	2014 Proposed Numeric Achievement	2015 Proposed Numeric Achievement
3A-3.2a Enter the percentage of participants in all CoC-funded projects that increased their income from employment from entry date to program exit?	57%	59%	61%
3A-3.2b Enter the percentage of participants in all CoC-funded projects that increased their income from sources other than employment from entry date to program exit?	19%	56%	58%

3A-3.3 In the table below, provide the total number of adults that were in CoC-funded projects with each of the cash income sources identified below, as reported on APRs submitted during the period between October 1, 2012 and September 30, 2013.

Cash Income Sources	Number of Participating Adults	Percentage of Total in 3A-3.1	
Earned Income	133	67.51	%
Unemployment Insurance	4	2.03	%
SSI	29	14.72	%

SSDI	28	14.21	**%**
Veteran's disability	0		**%**
Private disability insurance	0		**%**
Worker's compensation	0		**%**
TANF or equivalent	2	1.02	**%**
General Assistance	0		**%**
Retirement (Social Security)	0		**%**
Veteran's pension	0		**%**
Pension from former job	0		**%**
Child support	12	6.09	**%**
Alimony (Spousal support)	0		**%**
Other Source	0		**%**
No sources	0		**%**

3A-3.4 Describe the CoC's two year plan (2014-2015) to increase the percentage of project participants in all CoC-funded projects that increase their incomes from non-employment sources from entry date to program exit. Response should address the specific strategies and actions the CoC will take to meet the numeric achievements proposed in the table (3A-3.2) above.
(limit 1000 characters)

The CoC Lead will encourage providers to become HHSC Community Partners which will allow them to assist eligible clients in obtaining TANF benefits. The CoC will also offer more opportunities for SOAR training which will increase the number of case managers who can assist with expediting Social Security benefit claims for eligible program participants. CoC-funded providers will assist participants to aggressively pursue other non-employment sources, such as child-support, other state and federal benefits, worker’s compensation and disability benefits if it is believed that participants may be entitled to them. Providers will work with participants to learn how to pursue such benefits and assist them to follow up appropriately. Steps may include working with Legal Aid, Veteran’s Administration, Workforce, SSA, child support enforcement or other parties. The Heart of Texas Homeless Coalition will continue to include benefits training at monthly meetings to increase case manager's knowledge of available benefits. The CoC committee will meet quarterly to review performance data and ensure providers are on track to meet the proposed numeric achievements.

3A-3.5 Describe the CoC’s two year plan (2014-2015) to increase the percentage of project participants in all CoC-funded projects that increase their incomes through employment from entry date to program exit. Response should address the specific strategies and actions the CoC will take to meet the numeric achievements proposed in the table above.
(limit 1000 characters)

CoC-funded providers will assess participants' ability to obtain employment then develop a plan of action to remove any barriers, such as GED, skills/interview training, resume writing; job search, etc. The CoC will ensure that funded agencies will develop intensive care plans, utilizing community resources such as Texas Workforce and Heart of Texas Goodwill, for participants whose situations are particularly challenging. The CoC Lead will work with the Prosper Waco committee, comprised of CoC funded providers, Workforce representatives, law enforcement, social workers, and education representatives which meets quarterly to increase employment opportunities for low income families.

3A-3.6 Identify by name the individual, organization, or committee that will be responsible for increasing the rate of project participants in all CoC-funded projects that increase income from entry date to program exit. (limit 1000 characters)

The Continuum of Care Committee will be responsible for increasing income for project participants from all sources. This committee will schedule training during for to assure that CoC participants are aware of all existing and new community resources that are available to assist participants to increase their income. The committee will review HMIS reports on a quarterly basis to ensure that the CoC is meeting targeted goals.

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

Objective 4: Increase the number of participants obtaining mainstream benefits

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

In FY2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and the Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP). Assisting project participants to obtain mainstream benefits is one way to ensure housing stability and decrease the possibility of returning to homelessness. Using data from Annual Performance Reports (APR), complete the table below.

3A-4.1 Number of adults who were in CoC-funded projects as reported on APRs submitted during the period between October 1, 2012 and September 30, 2013. 197

3A-4.2 Objective 4: Increase the number of participants obtaining mainstream benefits

	2013 Actual Numeric Achievement and Baseline	2014 Proposed Numeric Achievement	2015 Proposed Numeric Achievement
3A-4.2a Enter the percentage of participants in ALL CoC-funded projects that obtained non-cash mainstream benefits from entry date to program exit.	46%	56%	56%

3A-4.3 In the table below, provide the total number of adults that were in CoC-funded projects that obtained the non-cash mainstream benefits from entry date to program exit, as reported on APRs submitted during the period between October 1, 2013 and September 30, 2013.

Non-Cash Income Sources	Number of Participating Adults	Percentage of Total in 3A-4.1
Supplemental nutritional assistance program	104	52.79 %
MEDICAID health insurance	104	52.79 %
MEDICARE health insurance	9	4.57 %
State children's health insurance	0	%
WIC	1	0.51 %

VA medical services	0		%
TANF child care services	2	1.02	%
TANF transportation services	0		%
Other TANF-funded services	0		%
Temporary rental assistance	0		%
Section 8, public housing, rental assistance	0		%
Other Source	1	0.51	%
No sources	0		%

3A-4.4 Describe the CoC's two year plan (2014-2015) to increase the percentage of project participants in all CoC-funded projects that access mainstream benefits from entry date to program exit. Response should address the specific strategies and actions the CoC will take to meet the numeric achievements proposed in the table above.
(limit 1000 characters)

One of CoC-funded provider agencies is designated as TX HHSC “Community Partner” agencies (another is in progress), which is a program that was created in an effort to make it easier and more efficient for Texans to apply for and manage their state benefits. SOAR training is offered and all CoC-funded provider agencies have attended it and are qualified to assist their clients to apply for SS and SSDI benefits. The COC will continue to encourage all Homeless Coalition members, regardless of whether they receive COC funding, to become Community Partners and take advantage of SOAR training to better assist clients to prevent homelessness and/or expedite their return to stable housing.

3A-4.5 Identify by name the individual, organization, or committee that will be responsible for increasing the rate of project participants in all CoC-funded projects that that access non-cash mainstream benefits from entry date to program exit.
(limit 1000 characters)

Teri Holtkamp, Homelessness Administrator for the City of Waco, has appointed the COC Committee to be responsible for increasing the rate of project participants in all COC-funded projects that access non-cash mainstream benefits from entry date to program exit. The Committee is comprised of representatives of COC-funded projects as well as the VA (HCHV program), and the Chairperson of the Coalition, Cheryl Pooler, who is the Homeless Liaison, Social Worker for Homeless Outreach Services for Waco ISD. The COC Committee will meet no less than twice per year to review the COC’s progress in meeting this goal. The Committee will utilize a HMIS report-card system to monitor agencies’ progress..

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

Objective 5: Using Rapid Re-Housing as a method to reduce family homelessness

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

In FY2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and the Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP). Rapid re-housing is a proven effective housing model. Based on preliminary evidence, it is particularly effective for households with children. Using HMIS and Housing Inventory Count data, populate the table below.

3A-5.1 Objective 5: Using Rapid Re-housing as a method to reduce family homelessness.

	2013 Actual Numeric Achievement and Baseline	2014 Proposed Numeric Achievement	2015 Proposed Numeric Achievement
3A-5.1a Enter the total number of homeless households with children per year that are assisted through CoC-funded rapid re-housing projects.	0	5	5
3A-5.1b Enter the total number of homeless households with children per year that are assisted through ESG-funded rapid re-housing projects.	65	30	30
3A-5.1c Enter the total number of households with children that are assisted through rapid re-housing projects that do not receive McKinney-Vento funding.	0	0	0

3A-5.2 Describe the CoC’s two year plan (2014-2015) to increase the number homeless households with children assisted through rapid re-housing projects that are funded through either McKinney-Vento funded programs (CoC Program, and Emergency Solutions Grants program) or non-McKinney-Vento funded sources (e.g.., TANF). Response should address the specific strategies and actions the CoC will take to meet the numeric achievements proposed in the table above.
(limit 1000 characters)

State ESG funding for the CoC was reduced from $280,143 in 2013 to $63,043 in 2014, therefore the COC will have to rely on strategies to increase rapid re-housing funding for families through other sources. In FY2013 the CoC plans to reallocate an existing TH program into a new RRH program for families. The CoC Lead will continue to encourage new applications for RRH and will encourage TH providers to consider re-allocation to RRH in future competitions. Currently two CoC funded agencies utilize Tenant Based Rental assistance to provide alternative permanent housing solutions to homeless families, the CoC is working with a third agency who will apply for TBRA funding in 2014 to create a housing first model for homeless families identified by the local school districts. The CoC Lead will also work with TX HHSC to ensure better coordination with homeless service providers as well as explore opportunities to utilize TANF funding for rapid re-housing. Our CoC does not currently receive SSVF funding but the CoC Lead has encouraged a CoC funded agency to apply for funding to provide rapid re-housing for veteran families.

3A-5.3 Identify by name the individual, organization, or committee that will be responsible for increasing the number of households with children that are assisted through rapid re-housing in the CoC geographic area.
(limit 1000 characters)

Homelessness Administrator, Teri Holtkamp, employed by the City of Waco, has designated the Continuum of Care committee as the committee to be responsible for increasing the number of households with children that are assisted through rapid-rehousing in the COC Geographic area. The Committee will meet no less than twice a year to review progress toward meeting this goal. Progress will be measured through HMIS reports.

3A-5.4 Describe the CoC's written policies and procedures for determining and prioritizing which eligible households will receive rapid re-housing assistance as well as the amount or percentage of rent that each program participant must pay, if applicable.
(limit 1000 characters)

Our CoC currently only has one organization that receives rapid re-housing funding (ESG funded). Policies and procedures for that program were approved by the CoC Lead and submitted to the Texas Department of Housing and Community Affairs. Our RRH provider has implemented an objective committee, which includes community persons and staff from other CoC agencies, that meets every two weeks to determine which clients are most appropriate for each of their housing options. Rapid re-housing recipients are required to pay 30% of their income, with a $25 minimum rent. Further implementation of the Coordinated Assessment system, including a planning team, will strengthen the community's ability to appropriately assess and prioritize eligible households for rapid re-housing across our geographic area.

3A-5.5 How often do RRH providers provide case management to households residing in projects funded under the CoC and ESG Programs?
(limit 1000 characters)

All Rapid Re-housing clients are provided with case management. The agency receiving Rapid Re-housing funds provides case management to their clients a minimum of once a week or more often if necessary. Case Management may be provided in person through a home visit, at the organization’s office, or by telephone. The initial assessment determines whether the client needs short or medium-term assistance, but the Case Manager may recommend additional assistance if needed within the scope of the grant requirements. The overriding goal of any of the programs administered by the CoC is for a participant to be successfully reintegrated into permanent housing. With that goal in mind, case managers work very hard to help clients overcome barriers through quality case management.

3A-5.6 Do the RRH providers routinely follow up with previously assisted households to ensure that they do not experience additional returns to homelessness within the first 12 months after assistance ends? (limit 1000 characters)

All Rapid Re-Housing clients have a case management follow up at 30 days, 90 days, and twelve months to determine whether the client has remained in permanent housing, and is still receiving mainstream benefits and income (from employment or other income sources). Case Managers want to see their clients succeed, and are available should the client need assistance before the three-month period or at any time during the first twelve months after assistance ends.

3B. Continuum of Care (CoC) Discharge Planning: Foster Care

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

3B-1.1 Is the discharge policy in place mandated by the State, the CoC, or other? State Mandated Policy

3B-1.1a If other, please explain. (limit 750 characters)

3B-1.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge. (limit 1000 characters)

Texas Department of Family and Protective Services (TDFPS) has developed formal protocol for youth aging out of foster care. Transition Plan encompasses specifics regarding education; personal needs; family/community networks; employment/source of income; living arrangements/housing; and issues for youth with developmental disabilities.
Plans for housing after leaving care. Impact plan will have on access to PAL (Preparation for Adult Living) benefits, Goals related to housing needs/identify tasks to be accomplished by the youth and youths support system. Sections 10000 of the TDFPS policy manual contains discharge planning information.Excerpt from a letter signed by DFPS Commissioner Cockerell:Discharge planning agencies and homeless service providers should work collaboratively to prepare a homeless person to return to the community and to link that individual to essential housing and services.

3B-1.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness. (limit 1000 characters)

Texas Department of Family and Protective Services (DFPS), Workforce Development Board, Heart of Texas Region MHMR (HOTRMHMR),Central Texas Youth Services, are among some of the organizations that collaborate and work with youth aging out of the Texas Foster Care System. Depending on the individualized needs of the child, additional agencies may include agencies that work with individuals with mental retardation or other disabilities, and the Social Security Administration. Youth are included in discharge planning meetings beginning at least ninety days before they turn 18 and discuss specific areas such as housing, health insurance, education, local mentoring opportunities, employment, and continuing support services. Local school districts and the CoC work with local child placement agencies in an effort to encourage youth to remain in their current foster home placement until they complete higher education/training to achieve self-sufficiency and to avoid homelessness. Annual "REPLENISH" training conducted by the CoC, and open to all CoC members, addresses the importance of adequate discharge planning for youth.

3B. Continuum of Care (CoC) Discharge Planning: Health Care

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

3B-2.1 Is the discharge policy in place mandated by the State, the CoC, or other? CoC Adopted Policy

3B-2.1a If other, please explain.
(limit 750 characters)

3B-2.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge.
(limit 1000 characters)

The CoC works with Social workers at area hospitals to ensure that potentially homeless persons are not routinely discharged into homelessness. In most cases, individuals are released to skilled nursing facilities or family/friends. Social workers are aware of area resources and work to place the individuals into a stable housing arrangements before discharge. The Heart of Texas Homeless Coalition has MOU's with both area hospitals agreeing to not discharge individuals into homelessness, but provide alternate plans for the patient. CoC conducts an annual REPLENISH training where attendees receive a notebook updated with current resources. Annually, the CoC meets at Mission Waco, a local homeless provider that has a medical clinic to provide medical services to the homeless. The clinic interfaces with hospitals and the Family Health Center. This relationship has helped inform hospital social workers of the importance of not releasing the homeless from hospitals back into homelessness.

3B-2.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness.
(limit 1000 characters)

Hospital Social Workers are the primary responsible parties for ensuring that persons being discharged from medical facilities are not routinely discharged into homelessness. They work with whichever agency is most appropriate for the individual they are serving; i.e., if the person is a young pregnant woman, they would work with Care Net Pregnancy Center; if the person is elderly, they would work with a skilled nursing facility, and perhaps the family of the individual. Each case would vary and stakeholders/collaborating agencies would vary accordingly. In every instance the social worker makes every effort to discharge the individual into an appropriate living situation. Persons are not routinely discharged into homelessness or into McKinney-Vento funded shelters.

3B. Continuum of Care (CoC) Discharge Planning: Mental Health

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

3B-3.1 Is the discharge policy in place mandated by the State, the CoC, or other? State Mandated Policy

3B-3.1a If other, please explain.
(limit 750 characters)

3B-3.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge.
(limit 1000 characters)

The Heart of Texas Region Mental Health Mental Retardation (MHMR)is the agency that works most closely with Austin State Hospital, the state-run mental health facility or the local DePaul center. If a potentially homeless individual were to be released from Austin State Hospital or the De Paul Center, the discharge would be coordinated with MHMR. MHMR works with the individual to ensure that the individual is housed in an appropriate setting, such as Permanent Supportive Housing or with family/friends. The Homeless Coalition meets at MHMR annually and is provided with an overview of the current MHMR programs and how individuals may qualify. These meetings, as well as the annual REPLENISH training and Project Homeless Connect help all area providers understand which resources are available in the community and how they may be accessed.

3B-3.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness.
(limit 1000 characters)

Heart of Texas Region MHMR and Austin State Hospital are the two primary agencies that collaborate to ensure that persons being discharged from a mental health facility or another system of care, such as jail, are not routinely discharged into homelessness. MHMR works to determine whether a patients' family is able and willing to be responsible for the patient. If that is not possible, MHMR has facilities to safely house the patient to prevent the individual from being discharged into homelessness. If the patient is being discharged from a local hospital or jail, MHMR works with representatives and staff at those facilities to ensure that the individual is not discharged into homelessness.

3B. Continuum of Care (CoC) Discharge Planning: Corrections

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

3B-4.1 Is the discharge policy in place mandated by the State, the CoC, or other? CoC Adopted Policy

3B-4.1a If other, please explain.
(limit 750 characters)

3B-4.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge.
(limit 1000 characters)

The Homeless Coalition partners with Social Work Interns from local Universities, having them work in the McLennan County Jail to do discharge planning for inmates of both sexes. Christian Women's Job Corps works with female inmates, too. A standardized form is used to assess the inmate's needs (housing, training, drug rehabilitation etc.) Through the "100,000 Homes Campaign" a vulnerability index is applied using standard criteria and a list of clients needing housing is prioritized and updated. Area facilities have been contacted and are being asked to expand the client populations they are willing to serve, including landlords; funding to serve each of these clients according to their prioritized needs is being identified. Social workers at the jails work to help inmates find housing, regain jobs or address other issues that may have caused their homelessness. They work with the inmate to develop an alternative plan to prevent homelessness before they are discharged.

3B-4.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness.
(limit 1000 characters)

McLennan County formed the Reintegration Roundtable, a group of more than 50 stakeholders who are concerned with the barriers faced by offenders as they leave the corrections system. The groups focus is on how to successfully reintegrate former inmates into the community. The group, made up of the Mayor, Police Chief, County Sheriff, community leaders, educators, employers and ex-offenders discusses ways to help former offenders, including encouraging local business owners to employ them, offering them housing, parenting and life-skills classes. The local reintegration roundtable is following a model established by Travis County, which includes basic priorities:Reduce recidivism,Provide pre-release counseling, Increase public knowledge,Increase employment of ex-offenders,Link ex-offenders to resources/services. The CoC Lead, Teri Holtkamp will work to formalize a MOU to prevent routine discharge into homelessness.

3C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

3C-1 Does the Consolidated Plan for the jurisdiction(s) within the CoC's geography include the CoC's strategic plan goals for addressing and ending homelessness? Yes

3C-1.1 If yes, list the goals in the CoC strategic plan. (limit 1000 characters)

The Consolidated Plan identifies the HOT Coalition as the responsible agency for effective case management and raising awareness for identifying appropriate services. Since the adoption of our 10 Year Plan to End Chronic Homelessness in 2005, those strategic goals are a part of our Consolidated Plan for the jurisdictions within the Coc's geography. Those goals and objectives for addressing and ending homelessness include: continuation of emergency shelter, transitional housing and supportive services to the City's homeless population to return families and individuals to independent living in permanent housing, provide quality public services and facilities to youth, homeless persons, and those at risk of homelessness. Several social service agencies exist in the City of Waco that provide benefits to low income individuals and families in order to prevent homelessness. These organizations that make up our HOT Homeless coalition also serve the needs of those who have already become homeless. Efforts also include the expansion of our HMIS program and plans to expand the services provided through grant funding in the near future.

3C-2 Describe the extent in which the CoC consults with State and local government Emergency Solutions Grants (ESG) program recipients within the CoC's geographic area on the plan for allocating ESG program funds and reporting on and evaluating the performance of ESG program recipients and subrecipients. (limit 1000 characters)

The only ESG funding awarded to the Waco Community is from Texas Department of Housing and community Affairs. The CoC committee is made up of all agencies who currently receive CoC monies, but not limited to them. The ESG recipients are members of the CoC committee. The funds are allocated based on priorities set and current needs expressed by the CoC committee. These processes require the state, the CoC and the City of Waco to approve the project. In addition, HMIS data (or an equivalent database, if it is a domestic violence provider) is required to document performance. Previous year’s data is evaluated and the scoring tool heavily weights performance. All data must be certified by the HMIS Administrator as accurate. All projects in the last three years have been tied directly to the Continuum of Care and reflected the priority of housing for families.

3C-3 Describe the extent in which ESG funds are used to provide rapid re-housing and homelessness prevention. Description must include the percentage of funds being allocated to both activities.
(limit 1000 characters)

In 2012-2013, the Waco community was awarded $284,143.15 in ESG funding by TDHCA for Street Outreach, Emergency Shelter, Homelessness Prevention, and Rapid Re-housing through a collaborative grant between Family Abuse Center and Salvation Army. In that grant year, 62.72% (200,989) of the funding was for Homeless Prevention and Rapid Re-housing. In 2013-14, the Waco community was awarded $63,043 ESG funding through the Texas Department of Housing and Community Affairs for those same activities listed, to Family Abuse Center. In that grant, 70.74% ($39,544.00) of that funding was for Homeless Prevention and Rapid Re-housing. The Waco Community experienced a major decrease in ESG funding due to TDHCA’s new formula to allocate funding, capping our communities funding at $63,043 in 2013-2014. The Waco community receives no direct ESG money from HUD.

3C-4 Describe the CoC's efforts to reduce the number of individuals and families who become homeless within the CoC's entire geographic area.
(limit 1000 characters)

The CoC works to reduce the number of homeless families/individuals through workshops, emergency assistance, identifying families through the homeless liaisons in schools, as well as mortgage assistance/long-term self sufficiency assistance programs. Funding such as CDBG/HOME are allocated toward transitional housing, tenant based rental assistance and other preventative efforts. These are overseen by local community partners as well as CoC/funding recipients. ESG funded programs have played a significant role in reducing the number of individuals/families who become homeless by funding preventative programs in the CoC. All ESG funded providers are members of the HOT Homeless Coalition. Principle impediments include economic limitations, and family composition. The City of Waco commits funding for affordable tax credits, as well as continuing to address policy limitations and provide job training through the work of the City of Waco Poverty task Force. Evaluation of current housing options and pursuit of needed alternate housing are current steps to address the barriers.

3C-5 Describe how the CoC coordinates with other Federal, State, local, private and other entities serving the homeless and those at risk of homelessness in the planning and operation of projects.
(limit 1000 characters)

The Waco community applies for VASH housing vouchers through our PHA. HOPWA funding is accessed through our local Health department. Both agencies are members who work closely with the CoC lead to coordinate efforts. Through work with the Homeless Liaison in the school district, the Helpings program at Caritas of Waco, and Texas Hunger Initiative clients are able to access TANF and other mainstream benefits. CDBG funded programs, including supplemental funding for CoC recipients, help provide needed services in our area and are coordinated based on priorities from community surveys and State/Federal homeless plans. Local food pantries now use HMIS after our CoC approached a private, local foundation for funding. Central Texas Youth Services, who serves Runaway and Homeless Youth, works in conjunction with the Homeless Liaison to ensure that students find housing and complete their education.

3C-6 Describe the extent in which the PHA(s) within the CoC's geographic area are engaged in the CoC efforts to prevent and end homelessness.
(limit 1000 characters)

Waco's PHA Executive Director serves on our Mayor’s 10 Year Plan to End Chronic Homelessness Steering Committee. Conversations are ongoing with our local PHA ED regarding preferences for the homeless, however there are currently no preferences for this population. Our PHA does seek referrals from homeless service providers and offers aggregate data for reporting to the CoC. We also engage in conversations regarding VASH vouchers as it relates to challenges and barriers in effect on a local level. Dialogue is open and encouraged, especially regarding local restrictions that limit some homeless individuals from qualifying for housing vouchers. This includes increased income levels and/or more stringent background check requirements. Our Waco PHA was the first to go after VASH vouchers at the request of our CoC, and was awarded those for the Austin, Temple, and Belton area. Each year, information from the PIT is used to determine the number of vouchers for which to apply. Our PIT indicates the number of homeless veterans has decreased each year. WPHA is the largest permanent supportive housing provider in our CoC.

3C-7 Describe the CoC’s plan to assess the barriers to entry present in projects funded through the CoC Program as well as ESG (e.g. income eligibility requirements, lengthy period of clean time, background checks, credit checks, etc.), and how the CoC plans to remove those barriers.
(limit 1000 characters)

The CoC planning committee will work to analyze barriers that clients face upon entry to CoC funded programs through their continual assessment of the programs. This process will be aided by the coordinated assessment implementation and the efforts of that planning team to consider the priorities of the CoC and referring clients to services. There have been discussions regarding CoC programs beginning to lessen their barriers to entry. The CoC planning committee will take into account program’s efforts to remove barriers to those seeking services each year during the ranking and evaluation process.

3C-8 Describe the extent in which the CoC and its permanent supportive housing recipients have adopted a housing first approach.
(limit 1000 characters)

The HOT CoC and PSH providers work diligently to engage supportive housing recipients in programmatic supports and reduce barriers to obtaining housing. Each CoC recipient of PSH has adopted a housing first model which places clients directly from the streets into PH. While the PSH providers believe that supportive services will be of overall long-term benefit, continuation in the housing program is not based on full level of participation in these supportive services and a participant may opt to discontinue services with the provider. The participant's stay in permanent housing is based solely on their ability not to break the lease agreement (paying rent, being a good neighbor, etc). Policies are in place to work with individuals who get behind on payment but desire to remain in the program. A participant may elect to discontinue any or all supportive services and as long as they continue to fulfill the terms of their lease agreement and pay rent, they may remain in housing.

3C-9 Describe how the CoC's centralized or coordinated assessment system is used to ensure the homeless are placed in the appropriate housing and provided appropriate services based on their level of need.
(limit 1000 characters)

The CoC is working to implement their coordinated assessment system. The model utilizes a “no-wrong-door” approach. The same assessment tool will be utilized across the board, in HMIS, and clients will be referred to services according to what best suits their self-identified need. Each service provider will administer the same assessment tool (regardless of participation in HMIS) and methodology to determine what housing and service assistance strategy best fits the household requesting assistance and make those referrals. Service providers will sign an MOU which outlines the standardized expectations of the referral process to ensure that referrals are accurate, informed, effective, comprehensive, and mandatory. A planning team will develop a standardized set of criteria to determine prioritization of available resources. As part of the collaboration with Texas Homeless Network, the CoC will serve as a pilot site for the coordinated assessment process.

3C-10 Describe the procedures used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability who are least likely to request housing or services in the absence of special outreach.
(limit 1000 characters)

-Each CoC funded agency has developed policy and procedures regarding anti discrimination for homeless resources on the basis of race, color, national origin, religion, sex. age, familial status, or disability.
-211 is the emergency number for social services. Answered 24/7, operators are bilingual & provide services for hearing impaired; has information about all social services, including homeless for every locale.
- wacohousingsearch.org is a comprehensive list of affordable rental housing with links to tenant education and fair housing tools, area supportive services, and homeless housing options in our CoC area, including a 24 hour bilingual call center.
-a brochure of homeless resources is distributed to businesses where homeless gather and given to persons thought to be homeless and in need of services.
-All CoC agencies maintain offices/office days/outreach staff throughout the entire CoC area. Most agencies are located in undeserved areas of the community.
-FAC has an outreach office in a historically undeserved community. It maintains a 24/7 hotline, advertises in seven county area on billboards, transit ads, health fairs/other events.

3C-11 Describe the established policies that are currently in place that require all homeless service providers to ensure all children are enrolled in early childhood education programs or in school, as appropriate, and connected to appropriate services within the community.
(limit 1000 characters)

The HOT Homeless Coalition has adopted the policies and procedures developed by the Texas Homeless Education Office. Fact sheets have been developed by THEO in collaboration with the National Center for Homeless Education, the National Coalition for the Homeless, the National Law Center on Homelessness and Poverty, and the National Association for the Education of Homeless Children and Youth. Each addresses a specific part of the requirements in the McKinney-Vento Homeless Education Assistance Improvements Act. Each provides a summary of the applicable part of the law, guidance to understanding the law's requirements, and practical guidelines for implementing the provisions of the law.
The Homeless Coalition maintains a policy and procedure manual which is online, and membership forms now contain a statement that member agencies agree to follow the policies and procedures of the Coalition unless prohibited by law (such as DV provider restrictions)

3C-12 Describe the steps the CoC, working with homeless assistance providers, is taking to collaborate with local education authorities to ensure individuals and families who become or remain homeless are informed of their eligibility for McKinney-Vento educational services.
(limit 1000 characters)

The Homeless Coalition Chairperson is the Social Worker for Homeless Outreach Services at Waco ISD, the school district with the largest concentration of homeless students in the CoC area. She has provided McKinney-Vento training to all CoC agencies on the rights of homeless families multiple times, thereby training new staff as they come to the agencies. Provider agency staff are aware of crucial need for homeless families to receive all McKinney-Vento educational services, and they work with the social workers at each school district in the area to assure that students receive the services to which they are entitled. If it is unclear who the school contact is, provider agencies contact THEO (Texas Homeless Education Office) to find the contact for the school district.

3C-13 Describe how the CoC collaborates, or will collaborate, with emergency shelters, transitional housing, and permanent housing providers to ensure families with children under the age of 18 are not denied admission or separated when entering shelter or housing.
(limit 1000 characters)

Within the CoC area there is one emergency shelter for any homeless family; one emergency shelter for victims of domestic violence; one transitional housing facility for families with children, and one supportive living facility for families with a mentally ill individual. Each of these facilities has policies in place and works to assess the needs of the entire family when they become aware that a family is homeless and in need of shelter. It is the policy of the individual facilities as well as the CoC that families not be separated, but be placed into housing as a family unit to minimize the impact homelessness has on the family. The transitional living facility has two two-bedroom apartments for larger families. The domestic violence program is the Rapid-Rehousing provider in the area, working diligently to find appropriate living arrangements for family units. Each provider works to assist the family to return to permanent housing.

3C-14 What methods does the CoC utilize to monitor returns to homelessness by persons, including, families who exited rapid re-housing? Include the processes the CoC has in place to ensure minimal returns to homelessness.
(limit 1000 characters)

The HMIS System generates reports that identify individuals and families who have exited the program and returned for repeated services. Currently the CoC does not have data for non-HMIS participating agencies but is working closely with those agencies to ensure persons returning to homelessness are identified. The CoC committee has developed a plan (utilizing 100,000 Homes Vulnerability Index) to identify those who have had repeated returns to homelessness and ensure that services are prioritized to meet the needs of those persons/families. The committee will evaluate current barriers to housing programs (such as income requirements and background checks) and will create Coc wide policies to ensure case management follow-up is made 90 days after persons exit from housing programs.

3C-15 Does the CoC intend for any of its SSO or TH projects to serve families with children and youth defined as homeless under other Federal statutes? No

3C-15.1 If yes, 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 1000 characters)

3C-16 Has the project been impacted by a major disaster, as declared by President Obama under Title IV of the Robert T. Stafford Act in the 12 months prior to the opening of the FY 2013 CoC Program Competition? Yes

3C-16.1 If 'Yes', 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)

The Salvation Army responded initially to the West fertilizer plant explosion with canteen and shelter relief to persons who were immediately affected by the explosion. In June 2013, The Salvation Army returned to West and began providing short-term disaster relief services in the form of gift cards, utility and rental assistance, and prescription assistance. In August 2013, The Salvation Army contracted a full-time caseworker who is currently still employed out of the “Long-Term Recovery Center”. Through the Salvation Army, the caseworker is providing rent, utility and miscellaneous bill assistance to persons affected by the disaster. The caseworker also provides necessary referrals to benefit services such as SNAP, Medicare, and Medicaid when appropriate. The Salvation Army is currently the only agency still providing short term disaster relief in West, Texas. While many residents of West were displaced because of the explosion or loss of wages, the disaster did not significantly affect the CoC’s ability to address homelessness or to provide necessary reporting data to HUD.

3D. Continuum of Care (CoC) Coordination with Strategic Plan Goals

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

In 2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD’s Strategic Plan and the Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP).

3D-1 Describe how the CoC is incorporating the goals of Opening Doors in local plans established to prevent and end homelessness and the extent in which the CoC is on target to meet these goals.
(limit 1000 characters)

During our PIT count we initiated registration week for the 100,000 homes campaign. Through the efforts of this campaign, the community is on track to end chronic homelessness by 2015 by prioritizing this population using the VI-SPDAT. CoC Lead attended VA Boot Camp based on 100,000 Homes Campaign in July of 2013 to team up with local/regional VASH staff to create a plan to identify and house 60 homeless veterans in our area by the end of 2015. Early intervention is achieved for homeless families by identifying safe and affordable housing through goals stated in the Consolidated Plan and CoC priorities. Ensuring that children and families are identified, assessed, and referred to the appropriate services and benefits for the end and prevention of further homelessness. Through increased job opportunities, training, education, reintegration efforts, discharge planning in jails/hospitals, and resource fairs, the CoC strives to end and prevent homelessness on all levels.

3D-2 Describe the CoC's current efforts, including the outreach plan, to end homelessness among households with dependent children.
(limit 750 characters)

The only ESG funding awarded to the Waco Community is from the Texas Department of Housing and community Affairs. The ESG recipients are members of the CoC committee. The funds are allocated based on priorities set and current needs expressed by the CoC committee. These processes require the state, the CoC and the City of Waco to approve the project In addition, HMIS data (or an equivalent database, if it is a domestic violence provider) is required to document performance. Previous year’s data is evaluated and the scoring tool heavily weights performance. All data must be certified by the HMIS director as accurate. All projects in the last three years have been tied directly to the Continuum of Care and reflected the priority of housing for families.

3D-3 Describe the CoC's current efforts to address the needs of victims of domestic violence, including their families. Response should include a description of services and safe housing from all funding sources that are available within the CoC to serve this population.
(limit 1000 characters)

The Family Abuse Center offers ES, counseling, transportation help, job/life skills education, case management, support groups, legal services and assistance with housing. Services available to non-shelter victims and those residing in rural areas. Children receive case management, assistance with school related arrangements or concerns, counseling, therapeutic/educational groups/enrichment activities for parent and child while at the shelter. FAC serves the CoC area and one other county. Outreach services include case management, counseling, support groups, life skills and financial planning classes, an array of legal services, and assistance with housing. Funding sources includes VAWA (Violence Against Women Act) and ESG (Emergency Solutions Grant) State of Texas Criminal Justice Dept.; United Way; TBRA (HUD funding through City of Waco); HHSC (Health and Human Services Comm.; OVAG (Office of the Attorney General); Private foundations and donors.

3D-4 Describe the CoC's current efforts to address homelessness for unaccompanied youth. Response should include a description of services and housing from all funding sources that are available within the CoC to address homelessness for this subpopulation. Indicate whether or not the resources are available for all youth or are specific to youth between the ages of 16-17 or 18-24.
(limit 1000 characters)

Unaccompanied youth of all ages have been identified as one of this CoC's top five priorities, and a sub-group was formed to address the issue of housing and services. No facilities/individual homes are dedicated in this CoC area specifically for unaccompanied youth. One agency in an adjacent county operates a transitional facility and the agency is a member of this Coalition; however, the distance of the facility from this locale makes it an unpopular place for area youth who would prefer to couch surf than to leave their friends and schools. A few individuals and churches are meeting to address how unaccompanied youth might be best served. One effort has reached the point of forming a non-profit organization. A key individual in this effort was formerly a homeless youth. School social workers work on a case-by-case basis with individual students to meet their most urgent needs, as there are no dedicated resources in the community.

3D-5 Describe the efforts, including the outreach plan, to identify and engage persons who routinely sleep on the streets or in other places not meant for human habitation.
(limit 750 characters)

The Heart of Texas Continuum of Care engages persons who routinely sleep on the streets through an MHMR PATH outreach team, The Salvation Army's outreach case worker, and community wide events such as Walk for the Homeless. Outreach personnel actively visit known locations where individuals stay in the community, as well as respond to reports of new locations where individuals and families might be staying that are not meant for human habitation. Through consistent engagement, individuals are connected to needed services. Events such as Walk for the Homeless are designed to raise awareness concerning what individuals living in areas not meant for human habitation are facing as well as funding needed programs that work to end homelessness in our community.

3D-6 Describe the CoC's current efforts to combat homelessness among veterans, particularly those are ineligible for homeless assistance and housing through the Department of Veterans Affairs programs (i.e., HUD-VASH, SSVF and Grant Per Diem). Response should include a description of services and housing from all funding sources that exist to address homelessness among veterans.
(limit 1000 characters)

Veterans referred to VA Liaison, Michael Ormsby. He interviews, coordinates meetings/intake for them, participates in treatment planning & follows their progress; coordinates referrals to MHMR PATH program or to Salvation Army (admin. Rapid Re-housing; Texas Veteran's Commission grant). HOT MHMR administers VA Grant Per Diem Program. Veteran will receive service under a Veteran's or a non-veteran program, including housing, vocational plans, financial planning, interview skills, and skills needed to live as independently as possible.

If eligible, he/she will receive VASH and SSVF through VA.

The case manager provides street/area jail outreach; and case management. He works with the local Workforce board, specific to Veteran's Employment, area shelters; attends the local "Friday Morning Breakfast." He is an ex-officio board member of the Coalition and Chairperson for Project Homeless Connect, an annual outreach event to connect homeless to housing, healthcare, other services.

3E. Reallocation

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

3E-1 Is the CoC reallocating funds from one or more eligible expiring grant(s) into one or more new permanent supportive housing projects dedicated to chronically homeless persons?	No
3E-2 Is the CoC reallocating funds from one or more eligible expiring grant(s) into one or more new rapid re-housing project for families?	Yes

3E-2.1 If the CoC is planning to reallocate funds to create one or more new rapid re-housing project for families, describe how the CoC is already addressing chronic homelessness through other means and why the need to create new rapid re-housing for families is of greater need than creating new permanent supportive housing for chronically homeless persons.
(limit 1000 characters)

According to the 2013 PIT count data, our CoC identified 21 chronically homeless unsheltered persons. While we believe this number is under reported, we feel that our CoC has adequate PH resources to serve our remaining unsheltered population. Our community has prioritized homeless services for families since 2009. The largest school district in our CoC has identified 1200 homeless children. The City of Waco also has a poverty rate which well exceeds the national poverty level. As a result, many families in our CoC lack a fixed, safe, regular place to live. We continue to see an increase in the number of families seeking shelter/housing services. Our CoC feels that re-allocating a current Transitional Housing program (identified by our evaluation tool as low performing) into a new rapid re-housing program will create needed permanent housing solutions for homeless families.

3E-3 If the CoC responded 'Yes' to either of the questions above, has the recipient of the eligible renewing project being reallocated been notified?	Yes

3F. Reallocation - Grant(s) Eliminated

CoCs planning to reallocate into new permanent supportive housing projects for chronically homeless individuals may do so by reducing one or more expiring eligible renewal projects. CoCs that are eliminating projects entirely must identify those projects.

Amount Available for New Project: (Sum of All Eliminated Projects)				
Eliminated Project Name	**Grant Number Eliminated**	**Component Type**	**Annual Renewal Amount**	**Type of Reallocation**
This list contains no items				

3G. Reallocation - Grant(s) Reduced

CoCs that choose to reallocate funds into new rapid rehousing or new permanent supportive housing for chronically homeless persons may do so by reducing the grant amount for one or more eligible expiring renewal projects.

Amount Available for New Project (Sum of All Reduced Projects)					
$80,373					
Reduced Project Name	**Reduced Grant Number**	**Annual Renewal Amount**	**Amount Retained**	**Amount available for new project**	**Reallocation Type**
Supportive Housin...	TX0145L6T041204	$80,373	$0	$80,373	Regular

3G. Reallocation - Grant(s) Reduced Details

3G-1 Complete each of the fields below for each eligible renewal grant that is being reduced during the FY2013 reallocation process. CoCs should refer to the final HUD approved FY2013 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name:	Supportive Housing Program 1
Grant Number of Reduced Project:	TX0145L6T041204
Reduced Project Current Annual Renewal Amount:	$80,373
Amount Retained for Project:	$0
Amount available for New Project(s): (This amount will auto-calculate by selecting "Save" button)	$80,373

3G-2 Describe how the CoC determined that this project should be reduced.
(limit 750 characters)

The grantee requested that this project be eliminated in order to apply for a new Rapid Re-housing project. These goals align with the goals of the COC and HUD and the COC Committee approved this request.

3H. Reallocation - New Project(s)

CoCs must identify the new project(s) it plans to create and provide the requested information for each project.

Sum of All New Reallocated Project Requests (Must be less than or equal to total amount(s) eliminated and/or reduced)

$80,373				
Current Priority #	**New Project Name**	**Component Type**	**Transferred Amount**	**Reallocation Type**
5	Rapid Re-hou...	PH	$80,373	Regular

3H. Reallocation - New Project(s) Details

3H-1 Complete each of the fields below for each new project created through reallocation in the FY2013 CoC Program Competition. CoCs can only reallocate funds to new permanent housing—either permanent supportive housing for the chronically homeless or rapid re-housing for homeless households with children.

FY2013 Rank (from Project Listing): 5
Proposed New Project Name: Rapid Re-housing
Component Type: PH
Amount Requested for New Project: $80,373

3I. Reallocation: Balance Summary

3I-1 Below is the summary of the information entered on forms 3D-3H. and the last field, “Remaining Reallocation Balance” should equal “0.” If there is a balance remaining, this means that more funds are being eliminated or reduced than the new project(s) requested. CoCs cannot create a new reallocated project for an amount that is greater than the total amount of reallocated funds available for new projects.

Reallocation Chart: Reallocation Balance Summary

Reallocated funds available for new project(s):	$80,373
Amount requested for new project(s):	$80,373
Remaining Reallocation Balance:	$0

4A. Continuum of Care (CoC) Project Performance

Instructions

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

4A-1 How does the CoC monitor the performance of its recipients on HUD-established performance goals? (limit 1000 characters)

The CoC monitors recipient performance through annual peer reviews, monthly data quality report cards, and data analysis from HUD required reports (AHAR, APR, PIT, HIC). Peer reviews are conducted on site, while other monitoring methods are conducted remotely by the CoC and HMIS Lead utilizing HMIS, HDX, and E-Snaps. The CoC Committee also meets on a quarterly basis to address community wide performance measures. This year the committee has discussed Coordinated Access, 100,000 Homes Campaign (prioritization of permanent housing for the chronic homeless), length of stay in Emergency Shelters, current barriers for program entry, and the need for more SOAR advocates in our community. Our CoC implemented a new performance evaluation tool and created an evaluation committee to help rank our renewal projects. This evaluation committee and CoC stakeholders plan to meet in early 2014 to suggest improvements to the tool. The tool will then be utilized on a quarterly basis to monitor how our CoC recipients are meeting established performance goals.

4A-2 How does the CoC assist project recipients to reach HUD-established performance goals? (limit 1000 characters)

The CoC offers support to project recipients in meeting their performance goals by engaging in regular conversations to discuss challenges. The CoC hopes to address many of these challenges through quarterly performance meetings, training for agency staff, and monthly coalition meetings that introduce evidence-based practices in the field. When an underperforming agency is identified, the CoC and HMIS Lead meet with the agency to provide technical assistance and develop an action plan to address the issue. Follow-up with the agency continues until the issue is resolved. The CoC Lead has proposed that a subcommittee be formed in 2014 to assist with CoC wide planning and performance evaluation. This subcommittee will further assist the CoC and HMIS Lead in identifying and addressing underperforming projects and ensure that our CoC's priorities are in line with HUD's Homeless Policy and Program Priorities.

4A-3 How does the CoC assist recipients that are underperforming to increase capacity? (limit 1000 characters)

When an underperforming agency is identified, the CoC Lead meets with the agency to provide technical assistance and develop an action plan to address the issue. Follow-up with the agency continues until the issue is resolved. The CoC Lead has proposed that a subcommittee be formed in 2014 to assist with CoC wide planning and performance evaluation. This subcommittee will further assist the CoC and HMIS Lead in identifying and addressing underperforming projects and ensure that our CoC's priorities are in line with HUD's Homeless Policy and Program Priorities.

**4A-4 What steps has the CoC taken to reduce the length of time individuals and families remain homeless?
(limit 1000 characters)**

The HMIS system generates reports that identify the length of time an individual/family is in a shelter or transitional housing program. The CoC Committee has reviewed this data and determined that lack of affordable housing options and intake requirements (income, employment, stringent background checks, etc) for transitional housing programs are contributing factors. The City of Waco is working with new low income tax credit properties to establish a homeless preference on some of the new units constructed. The CoC is also working with recipients to increase awareness of prevention and diversion methods. Further implementation of the Coordinated Assessment system, including a planning team, will strengthen the community’s ability to reduce the length of time individuals and families remain homeless by assessing and making accurate/appropriate referrals to the housing program that best fits their individual need.

**4A-5 What steps has the CoC taken to reduce returns to homelessness of individuals and families in the CoC’s geography?
(limit 1000 characters)**

The HMIS system generates reports that identify individuals/families that have exited a program and returned for repeated services. Conversations about including non-HMIS users are beginning to determine how they can assist in the identification of individuals/families returning to homelessness. Further implementation of the Coordinated Assessment system, including a planning team, will strengthen the community’s ability to identify the needs of families/individual more readily and ensure that the appropriate services are offered initially, thereby reducing the rate of return to homelessness. Increasing the case management services available through services in the community will ensure clients are successful in permanent housing. Agencies currently work to identify the circumstances surrounding clients that have contributed to their situation and work to resolve the situations that have led to a family/individual’s return to homelessness.

**4A-6 What specific outreach procedures has the CoC developed to assist homeless service providers in the outreach efforts to engage homeless individuals and families?
(limit 1000 characters)**

The CoC utilizes the outreach plan outlined in the Mayor’s 10 Year Plan to End Chronic Homelessness. The plan has allowed the CoC to develop partnerships with MHMR-PATH, VA Homeless Outreach Services, and the ESG Street Outreach program to increase engagement with homeless individuals and families. This collaborative outreach team is able to connect persons with disabilities to resources in our community. In addition to these partnerships the CoC lead has provided training to local public libraries, Waco Police Department, and Victim Services staff on homeless resources and engagement techniques. The CoC also works closely with the homeless liaisons in our school districts to engage unaccompanied youth. CoC recipients participate in several outreach fairs including: Low Income Families In Transition Workshop, Project Homeless Connect, and the 100,000 Homes Registry Week which help engage homeless individuals and families with needed resources.

4B. Section 3 Employment Policy

Instructions

*** TBD ****

4B-1 Are any new proposed project applications requesting $200,000 or more in funding? No

4B-1.1 If yes, which activities will the project(s) undertake to ensure employment and other economic opportunities are directed to low or very low income persons? (limit 1000 characters)

4B-2 Are any of the projects within the CoC requesting funds for housing rehabilitation or new constructions? No

4B-2.1 If yes, which activities will the project undertake to ensure employment and other economic opportunities are directed to low or very low income persons:

4C. Accessing Mainstream Resources

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at https://www.onecpd.info/ask-a-question/.

4C-1 Does the CoC systematically provide information about mainstream resources and training on how to identify eligibility and program changes for mainstream programs to provider staff? Yes

4C-2 Indicate the percentage of homeless assistance providers that are implementing the following activities:

*** Homeless assistance providers supply transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs.**	100%
*** Homeless assistance providers use a single application form for four or more mainstream programs.**	80%
*** Homeless assistance providers have staff systematically follow-up to ensure mainstream benefits are received.**	100%

4C-3 Does the CoC make SOAR training available for all recipients and subrecipients at least annually? Yes

4C-3.1 If yes, indicate the most recent training date: 07/29/2013

**4C-4 Describe how the CoC is preparing for implementation of the Affordable Care Act (ACA) in the state in which the CoC is located. Response should address the extent in which project recipients and subrecipients will participate in enrollment and outreach activities to ensure eligible households are able to take advantage of new healthcare options.
(limit 1000 characters)**

Staff at CoC funded agencies have received training on the Affordable Care Act (ACA) and are able to assist clients to determine which health care choices are applicable in each person’s circumstances. CoC funded agencies serve a wide range of clientele, from street homeless to victims of domestic violence who may derive from families with significant income. Provider staff are knowledgeable in accessing the ACA website and all are currently assisting existing or new clients to take advantage of any healthcare options for which they may be eligible. Representatives from provider agencies attend community events such as health fairs, Project Homeless Connect, and other outreach events, as well as maintaining websites where they are able to conduct outreach activities. In addition, the 211 system refers callers to the Healthcare.gov website or to the 800 number.

4C-5 What specific steps is the CoC taking to work with recipients to identify other sources of funding for supportive services in order to reduce the amount of CoC Program funds being used to pay for supportive service costs?
(limit 1000 characters)

The CoC works with recipients through monthly homeless coalition meetings, annual case manager workshops, and agency networking fairs to ensure they are informed of available resources in our community. The HHSC has established the "Community Partner Program" which trains local non-profit and faith based organizations to assist clients with benefit applications through My Texas Benefits online. One CoC funded agency has become a Community Partner site (and one in training). Through networking with other agencies who provide supportive services in the community, homeless service providers are able to utilize more of their funding on housing expenses. The CoC also encourages agency participation in the Waco Foundation's Capacity Building workshops, and Non-Profit network meetings to learn of alternative funding availability for their programs.

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan	Yes	Certification of ...	01/31/2014
CoC Governance Agreement	No	Heart of Texas Ho...	01/28/2014
CoC-HMIS Governance Agreement	No	HMIS Governance A...	01/27/2014
CoC Rating and Review Document	No	FY 2013 Project R...	01/31/2014
CoCs Process for Making Cuts	No		
FY2013 Chronic Homeless Project Prioritization List	No	FY2013 CH priorit...	02/01/2014
FY2013 HUD-approved Grant Inventory Worksheet	Yes	FY 2013 HUD-appro...	01/28/2014
FY2013 Rank (from Project Listing)	No	FY 2013 Rank	02/01/2014
Other	No	MOU with Providen...	01/28/2014
Other	No	MOU between Waco ...	01/28/2014
Other	No	MOU with Hillcres...	01/31/2014
Projects to Serve Persons Defined as Homeless under Category 3	No		
Public Solicitation	No	FY2013/2014 New P...	01/31/2014

Attachment Details

Document Description: Certification of Consistency with the Consolidated Plan

Attachment Details

Document Description: Heart of Texas Homeless Coalition Bylaws

Attachment Details

Document Description: HMIS Governance Agreement

Attachment Details

Document Description: FY 2013 Project Renewal Evaluation Tool

Attachment Details

Document Description:

Attachment Details

Document Description: FY2013 CH prioritization listing

Attachment Details

Document Description: FY 2013 HUD-approved GIW

Attachment Details

Document Description: FY 2013 Rank

Attachment Details

Document Description: MOU with Providence Hospital

Attachment Details

Document Description: MOU between Waco ISD and HMIS

Attachment Details

Document Description: MOU with Hillcrest Hospital

Attachment Details

Document Description:

Attachment Details

Document Description: FY2013/2014 New Project Applicaion Solicitation

Submission Summary

Page	Last Updated
1A. Identification	No Input Required
1B. CoC Operations	01/23/2014
1C. Committees	02/01/2014
1D. Project Review	02/01/2014
1E. Housing Inventory	01/25/2014
2A. HMIS Implementation	02/01/2014
2B. HMIS Funding Sources	01/27/2014
2C. HMIS Beds	02/01/2014
2D. HMIS Data Quality	02/01/2014
2E. HMIS Data Usage	01/29/2014
2F. HMIS Policies and Procedures	02/01/2014
2G. Sheltered PIT	02/01/2014
2H. Sheltered Data - Methods	01/30/2014
2I. Sheltered Data - Collection	01/31/2014
2J. Sheltered Data - Quality	01/31/2014
2K. Unsheltered PIT	01/31/2014
2L. Unsheltered Data - Methods	01/31/2014
2M. Unsheltered Data - Coverage	01/31/2014
2N. Unsheltered Data - Quality	01/31/2014
Objective 1	02/01/2014
Objective 2	02/01/2014
Objective 3	02/01/2014
Objective 4	02/01/2014
Objective 5	02/01/2014
3B. CoC Discharge Planning: Foster Care	02/01/2014
3B. CoC Discharge Planning: Health Care	02/01/2014

3B. CoC Discharge Planning: Mental Health	01/23/2014
3B. CoC Discharge Planning: Corrections	02/01/2014
3C. CoC Coordination	02/01/2014
3D. Strategic Plan Goals	01/31/2014
3E. Reallocation	01/31/2014
3F. Grant(s) Eliminated	No Input Required
3G. Grant(s) Reduced	02/01/2014
3H. New Project(s)	02/01/2014
3I. Balance Summary	No Input Required
4A. Project Performance	01/31/2014
4B. Employment Policy	01/23/2014
4C. Resources	02/01/2014
Attachments	02/01/2014
Submission Summary	No Input Required

OMB Approval No. 2506-0112 (Exp. 7/31/2012)

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Con solidated Plan.

(Type or clearly print the following information:)

Applicant Name: Heart of Texas Homeless Coalition

Project Name: Supportive Housing Program

Location of the Project: Compassion Ministries-1421 Austin Ave; Mission Waco-1217 Mary Ave; Family Abuse Ctr.-Box 20395; MHMR-Scattered Sites; HMIS-300 Austin Ave

Name of the Federal Program to which the applicant is applying: Continuum of Care

Name of Certifying Jurisdiction: City of Waco, Texas

Certifying Official of the Jurisdiction Name: Larry Groth, P.E.

Title: City Manager

Signature: for Larry [signature]

Date: 1-22-14

HEART OF TEXAS HOMELESS COALITION

BY LAWS
Amended June 8,2004

The name of the Corporation shall be HEART OF TEXAS HOMELESS COALITION (herein referred to as the Coalition.) The principal office of the Coalition in the State of Texas shall be located in the City of Waco, County of McLennan. When incorporated the Coalition shall have and continuously maintain in the State of Texas a registered office and a registered agent whose office is identical with such registered office as required by the Texas Non-Profit Corporation Act. The registered office may be, but need not be, identical with the principal office of the Coalition in the State of Texas, and the address of the registered may be changed from time to time by the Board of Directors.

This corporation is formed for charitable and educational purposes relating to the promotion, support, development, and furtherance of rehabilitation services, resources and treatment programs for persons who are homeless in the Heart of Texas Region of the State of Texas, which includes McLennan, Falls, Bosque, Hill, Limestone, and Freestone counties. The services, and programs of interest shall include, but not be limited to, housing, crisis intervention, psychosocial rehabilitation, case management, client advocacy, and family education and support. The vision of the corporation is there will be no gaps in available services to homeless individuals. The corporation is committed to developing a seamless continuum of care model that will provide all homeless individuals an opportunity to access needed services.

This corporation shall:

- Foster public education.
- Improve outreach to homeless persons.
- Increase community awareness of the problems of homelessness
- Work to eliminate duplication and improve collaboration between agencies serving the homeless
- Promote community support programs, include appropriate living arrangements linked with supportive social, vocational rehabilitation and employment programs.
- Identify gaps in services that prevent homeless persons from achieving self-sufficiency
- Develop a strategic plan to fill those gaps
- Press for quality institutional and non-institutional care and individualized treatment for the mentally ill homeless.

ARTICLE I
Membership

a. Membership shall include but not be limited to: service providers, state agencies, federal agencies, city agencies, non-profit agencies, businesses, homeless individual and friends of persons who are homeless.

b. Membership may be on an individual or agency basis. No more than two representatives from one agency will be eligible to vote at a general membership meeting.

c. Membership dues must be current in order to be eligible to vote. Members in good standing shall be eligible to hold office and to vote, (but only in person) on all questions at general membership meetings. In order to be a voting representative an individual or agency must attend a minimum of seven meetings during a twelve month period.

d. Control of this corporation shall rest with the membership. Any action of the board of directors shall be subject to review by the membership on request of any member at the regular meeting. An action of the board of directors may be altered or rescinded by two-thirds vote of the membership present at a regular meeting.

ARTICLE II
Finance

a. Individual membership dues are $15 per year; $25 per year for nonprofit organizations; and $50 per year for for profit entities. State agencies are exempt from paying dues. Individual employees are encouraged to register as individual; however, this will not affect voting privileges.

b. The fiscal year shall run from January 1, through December 31.

ARTICLE III
Membership Meetings

a. Regular meetings of the membership shall be held each month unless the board of directors shall determine otherwise. In no event shall fewer than eight (8) such meetings be held in any one fiscal year. All meetings are open meetings regardless of status of dues.

b. The membership meeting in January shall be designated as the Annual Meeting for the election of officers and members of the board of directors.

c. Special meetings of the members may be called by the Chairperson, the board of directors or upon written request to the Chairperson signed by five (5) or more members.

ARTICLE IV
Board of Directors

a. The affairs of the Corporation shall be governed by the board of directors composed of four elected members, the four officers of the Corporation, who are Chairperson, Vice Chair, Secretary and Treasurer, and the immediate past Chairperson of the Corporation. (totaling 9)

b. The board of directors shall be composed of individuals representing a broad spectrum of the membership. Key subpopulations such as emergency shelter, transitional housing, veterans and "street homeless" should be represented.

c. The board of directors shall have the power and duty to establish policy, adopt budgets and other powers and duties necessary or appropriate for the administrative affairs of the Corporation. The directors may do all such acts as are not by law, Articles of Incorporation, or by-laws directed to be done by the entire membership.

ARTICLE V
Duties of Officers

a. The Chairperson shall preside at all meetings of the corporation and of the board of directors. The Chairperson shall appoint the chairpersons and members of all committees, with the approval of the board, and supervise directly or indirectly their work, except the nominating committee. The Chairperson shall act as the executive officer of the corporation and in general, perform the duties usually associated with the office of the Chairperson.

b. The Vice Chairperson shall succeed to the Chairperson in case of a vacancy in that office and shall perform the duties of the Chairperson in his/her absence or disability. The Vice Chairperson shall undertake such other responsibilities, as the Chairperson shall assign.

The Secretary shall handle the correspondence of the corporation and maintain records of the proceedings of all meetings of the membership and the board of directors. The Secretary shall be custodian of all records of the corporation.

The Treasurer shall handle all financial matters of the corporation. All financial records of the Coalition may be inspected by any member of the Board of Director or his/her agent or attorney for any proper purpose at any reasonable time.

ARTICLE VI
Elections

a. There shall be a nominating committee composed of three members, of which one shall be a past
b. Chairperson, appointed by the president in November.

c. The nominating committee shall prepare a slate of candidates for election as officers and shall secure the
d. consent of its nominees to serve if elected.

e. At the December meeting nominations shall be permitted from the floor. All nominees, whether nominated by the committee or from the floor, shall be members in good standing (dues current and attendance requirement met) who have given consent to the nomination.

f. The board of directors shall be elected by the membership and shall serve for two years. The Chairperson, and two members of the board of directors shall be elected in even numbered years; and the Vice Chairperson, Secretary/Treasurer and two members of the board of directors shall be elected in odd numbered years.

g. Any vacancy, for whatever reason, of a board member shall be replaced by an appointment made by the
h. Chairperson within thirty (30) days from the date of vacancy.

i. A majority of the board present shall constitute a quorum.

j. The board of directors shall meet at least twice a year at a time the board selects. Special meetings may be called by the Chairperson or by at least three board members after proper notification of all members.

k. The affirmative vote of a majority of the board of directors present and voting except where otherwise required by law, Articles of Incorporation, or by-laws; shall decide any issues brought before such meeting.

ARTICLE VII
Terms of Office

a. The regular term of the office of the officers of the corporation shall be for two years continuing until the election of their successors.

b. The immediate past Chairperson shall serve as an ex-officio member of the board of directors.

c. The board of directors may replace any director or officer who has failed to attend three (3) successive meetings of the board if such absence is declared by the board to create a vacancy upon reasonable notice to the director or officer prior to such declaration.

ARTICLE VIII
Committees

a. There shall be three standing committees: Homeless survey/Stand Down Committee, Needs/Gaps Committee, and Linkage Committee.

b. Ad Hoc Committees may be appointed to address specific issues as needed. Members will be appointed by the President.

ARTICLE IX
Contracts, Checks, Deposits and Funds

a. The board of directors shall by resolution authorize the execution of contracts and the delivery of any instrument in the name of and on behalf of the Coalition.

b. Checks, drafts, or orders for the payment of money, notes, or other evidences of indebtedness, issued in the name of the Coalition in excess of $500 shall be signed by any two (2) persons within the category of Chairperson, Vice Chairperson, Secretary or Treasurer.

c. All funds of the Coalition shall be deposited to the credit of the Coalition in such banks, trust companies, or other depositories as the board of directors may select.

d. The board of directors may accept, on behalf of the Coalition, any contribution, gift, bequest, or device for the general purpose of the Coalition. Similarly, the board of directors may make, on behalf of the Coalition, any contribution, gift, grant, or investment authorized by law or these Bylaws, provided such gift does not cause the Coalition to lose its tax exempt status.

K13-009

STATE OF TEXAS §
§ **MEMORANDUM OF UNDERSTANDING**
MCLENNAN COUNTY §

Memorandum of Understanding between the Heart of Texas Homeless Coalition, hereinafter called "Coalition", and the City of Waco, Texas, herein after called the "City", collectively referred to as the "Parties" for the purposes provided herein.

A. RECITALS

The Coalition is a non-profit organization whose purpose is to eliminate gaps in available services to homeless individuals. The Coalition is committed to developing a seamless Continuum of Care model that will provide all homeless individuals an opportunity to access needed services.

The City is the entity that provides Homeless Management Information Systems ("HMIS") support to the Coalition and participating provider agencies. The Parties have agreed to the following:

B. PURPOSE

The purpose of this Memorandum of Understanding ("MOU") is to provide the framework for a partnership arrangement between the Coalition and the City to provide and manage HMIS services for the Coalition.

C. AREAS OF COOPERATION

The activities shall include but not be limited to the provision of management of the HMIS database, provision of initial and ongoing training and technical assistance to participating service providers, and provision of routine and ad hoc reports to the Coalition.

The City shall:

1. Review participating provider agency's records not less than once per year to assess the validity of data input, by cross-checking records against HMIS.
2. Maintain the HMIS system in accordance with the local policies and standard operating procedures manual.
3. Train new Homeless Service Providers on HMIS utilization and best practices within one month of enrolment in HMIS and provide ongoing technical assistance as needed.
4. Maintain, during the term of this MOU, at least two (2) trained staff who are knowledgeable about the HMIS system.

D. IMPLEMENTATION OF THE MOU

1. The Chairperson of the Coalition and the City Manager of Waco shall make the necessary arrangements to ensure satisfactory implementation of this MOU as described.
2. The parties agree to communicate systematically to exchange views and report on accomplishments with regard to this MOU.

E. GENERAL PROVISIONS

1. DURATION

This MOU shall be valid upon signature by both parties and until such time as the City is no longer the lead agency managing HMIS services.

1.1 The MOU may be modified and/or amended at any time by the signatories or their successors, by mutual written MOU (through formal amendments).

2. CONTACT POINTS/COMMUNICATION AND NOTIFICATION

For purposes of communications or notices with respect to this MOU, the Coalition shall be represented by Barbara Tate, Chairperson, and the City of Waco by Larry Groth, City Manager.

3. STATUTORY COMPLIANCE

3.1. This MOU is not expected to create a legal and binding obligation to expend funds or resources by either party, but is a statement of bona fide intent of the Parties. It sets forth the entire understanding of the Parties in respect of the collaboration considered.

F. SIGNATORIES

In witness thereof the Parties hereto have signed the MOU in 2 original copies on the date(s) herein below indicated.

1/16/2013

Larry Groth, P.E.
City Manager
City of Waco

Date

1-16-13

Kathy Reid
Chairperson
Heart of Texas Homeless Coalition

Date

Heart of Texas Homeless Coalition
Continuum of Care Committee
2013 Renewal CoC Project Evaluation

Introduction and Background

In response to the limited availability of renewal project funding offered in 2012 and expected in 2013, the Heart of Texas Homeless Coalition- CoC Subcommittee (HOTHC COC) determined that a renewal CoC project evaluation process needed to be developed for use in 2013 and future years. The Renewal Grant Evaluation tool was provided by The Texas Homeless Network. The tool was put together by a workgroup comprised of members from CoC renewal grantees and Infrastructure committee members in August 2013. This workgroup was charged with developing the renewal CoC project evaluation process and tools. It is hoped that the evaluation process will help the HOTHC COC fully maximize CoC Program funds and help make decisions related to funding cuts if needed.

Renewal CoC Project Evaluation Process

Project Evaluation: Overview

The Project Evaluation Workgroup developed a renewal CoC project evaluation process and tool that will be used to review, score, and rank all renewal CoC projects as part of the 2013 CoC Competition. The priority areas that will be reviewed are as follows:

Project Participant Impact

- Housing stability
- Access to income and benefits
- Length of time homeless

Meeting Community Need

- Bed utilization
- Targeting hard to serve persons/households

Project Capacity

- Meeting reporting requirements
- Unspent funds
- HMIS data quality
- 2012 leverage documentation
- Audit/monitoring findings

Data Sources

Almost all data used in project evaluation comes from projects' most recently submitted APRs. HMIS Data Quality information will be obtained from the Completion Summary, and unspent funds information comes from HUD's LOCCS. Details about the data source for each priority area are listed in the Project Evaluation Tool.

Information for two Project Capacity priority areas can only be obtained directly from providers themselves. Information related to audit/monitoring findings and 2012 leverage documentation will need to be submitted directly to the HMIS Lead. Details about the submission process and timeline follow.

Renewal Project Evaluation
The Evaluation Committee and the CoC Lead will complete a Renewal Project Evaluation Tool for each renewing CoC project. Projects failing to submit required information for a priority area will receive zero points for that priority area.

A list of all HOTHC COC 2013 renewal CoC projects can be found in *Appendix A* of this document.

After completing all Renewal Project Evaluation Tools the HOTHC COC Lead and Evaluation Committee will rank all renewal projects according to their evaluation score – projects scoring highest are ranked best, those scoring lowest are ranked at the bottom.

Renewal Project Ranking and Funding Recommendations
The Evaluation Committeewill not make funding recommendations and final renewal CoC project ranking decisions until HUD releases the 2013 CoC Competition Notice of Funding Availability (NOFA). The CoC NOFA should include details about the total CoC funds available for renewal and new projects as well as any information related to HUD's ranking or reallocation requirements.

Submission of Project Information

Any projects planning NOT to renew CoC funding, must let the CoC Lead know ASAP.

Submission of Project Information
Renewal CoC projects will need to provide some information to the HMIS Lead as part of the renewal project evaluation process. In addition to submitting APRs using the regular process, All CoC renewal projects will need to provide the following items:

- 2012 Annual Performance Report (APR)
- Most recent HUD audit/monitoring results
    - If there were findings that have since been resolved, please provide documentation from HUD or ODSA
    - If there were findings that are currently being resolved, please provide an explanation of what efforts are currently underway
- 2012 CoC project leverage documentation
    - This should include all cash/in-kind match commitment letters for all leverage reported as part of the 2012 CoC Competition
    - If this is a first-time renewal (as listed in Appendix A), then no leverage documentation needs to be provided [we will only use if we collect 2012 leverage data]

All audit/monitoring results and leverage documentation must be emailed to the HMIS Lead by <u>Friday, December 13, 2013</u>. E-mail address is jenniferc@ci.waco.tx.us.

Failure to submit a timely APR, or any of the two items mentioned above will automatically result in a lower scoring project evaluation and lower ranking among renewal projects.

APPENDIX A

HOTHC COC2013 Renewal CoC Project Evaluation: List of 2013 Renewal CoC Projects

Grantee Name	Project Name	Operating Start Date	Expiration Date	Project Type	First-time renewal?	If TH project - facility (F) or voucher-based (V)?	Current APR Submitted?
Family Abuse Center	Supportive Housing Program 1	3/1/2012	4/30/2013	L	N	V	Y
Family Abuse Center	Transitional Supportive	11/01/2012	10/31/2013	L	N		Y
Compassion Ministires	Hope House	06/01/2012	05/31/2013	NA	N	F	Y
Mission Waco Mission World	Supportive Housing Program	3/1/2012	2/28/2013	NA	N	F	Y
City of Waco	2012 Shelter Plus Care	5/1/2012	4/30/2013	RA	N	NA	Y
City of Waco	Heart of Texas HMIS	9/1/2012	9/30/2013	NA	N	NA	Y
Family Abuse Center	Permanent Supportive	12/01/2011	11/30/2012	L	N	V	Y
The Salvation Army a Georgia Corporation	The Salvation Army Transitional Extended Stay Program	NA	NA	NA	Y	F	N

PPENDIX B

HOTHC COC2013 Renewal Project Evaluation Tool-PH/PSH Projects

**Projects achieving the goal will receive full points for the priority area. Projects coming within 5% of the goal will receive 75% of the available points for the priority area.*

Grantee Name:			Project Name:			
Priority Area			**Goal**	**Project Performance**	**Points Possible**	**Score**
Project Participant Impact						
Total Participants During Operating Year:		*Total Leavers During Operating Year:*				
Housing Stability						
ph/sh	% participants retaining PH for 6 months or more		≥80%		10	
ph/sh	% participants who remained in project as of end of operating year or exited to PH during the operating year		≥90%		10	
all	% Exits to family/friends (permanent tenure)		≤20%		10	
Access to Income and Benefits						
ph/sh	% participants employed at exit		≥15%		10	
all	% participants with 1+ source of non-cash benefits at exit		≥85%		10	
all	% participants age 18 and older who maintained or increased their total income (from all sources) as of the end of the operating year or program exit		≥85%		10	
Meeting Community Need						
Project Demand						
all	Average daily bed utilization		≥90%		10	
Targeting Hard to Serve						
ph/sh	% entries from streets/emergency shelter only		≥85%		10	
all	% entries with no income		≥40%		10	
Project Capacity						
Reporting Requirements						
all	HIC/PIT data submitted on time		yes		5	
Cost Effectiveness						
	Total Project Budget =		*Not scored in 2013*			
all	*Annual cost per client/household served*					
all	*Annual cost per exit to PH*					
Unspent Funds						
all	2010 - 2011 Total CoC Funds Awarded =		≤ 5% of unspent funds		7.5	
all	2010 - 2011 Total CoC Expenditures =					
all	2011 - 2012 Total CoC Funds Awarded =				7.5	
all	2011 - 2012 Total CoC Expenditures =					
all	On track to spend 2012-2013 CoC Award		yes		5	
HMIS Data Quality						
all	DQ grade in Completion Summary		≥98		15	
Project Leverage						
all	2012/13? CoC Application leverage documented		100%		10	
Project Monitoring Results						
all	No unresolved HUD monitoring findings noted		none noted		10	
TOTAL PROJECT SCORE					**150**	

APPENDIX B

HOTHC COC2013 Renewal Project Evaluation Tool- *TH/SSO Projects*

Grantee Name: **Project Name:**

**Projects achieving the goal will receive full points for the priority area. Projects coming within 5% of the goal will receive 75% of the available points for the priority area.*

	Priority Area	Goal	Project Performance	Points Possible	Score
Project Participant Impact					
Total Participants During Operating Year:	*Total Leavers During Operating Year:*				
Housing Stability					
th/sso	% TH participants moving from TH to PH at exit	≥83%		10	
all	% Exits to family/friends (permanent tenure)	≤20%		10	
Access to Income and Benefits					
th/sso	% TH/SSO participants employed at exit	≥40%		10	
all	% participants with 1+ source of non-cash benefits at exit	≥85%		10	
all	% participants age 18 and older who maintained or increased their total income (from all sources) as of the end of the operating year or program exit	≥85%		10	
Length of Time Homeless					
th/sso	Average length of stay in facility-based TH (in days)	≤240 days		10	
th/sso	Average length of stay in voucher-based TH or SSO (in days)	≤180 days			
Meeting Community Need					
Project Demand					
all	Average daily bed utilization	≥90%		10	
Targeting Hard to Serve					
th/sso	% entries from literal homelessness	≥85%		10	
all	% entries with no income	≥30%		10	
Project Capacity					
Reporting Requirements					
all	HIC/PIT data submitted on time	yes		5	
Cost Effectiveness					
	Total Project Budget =		*Not scored in 2013*		
all	*Annual cost per client/household served*				
all	*Annual cost per exit to PH*				
Unspent Funds					
all	2010 - 2011 Total CoC Funds Awarded =	≤5% unspent funds		7.5	
all	2010 - 2011 Total CoC Expenditures =				
all	2011 - 2012 Total CoC Funds Awarded =			7.5	
all	2011 - 2012 Total CoC Expenditures =				
all	On track to spend 2012-2013 CoC Award	yes		5	
HMIS Data Quality					
all	% errors in Completion Summary	≤2%		15	
Project Leverage					
all	2012 CoC Application leverage documented	100% documented		10	
Project Monitoring Results					
all	No unresolved HUD monitoring findings noted	none noted		10	
TOTAL PROJECT SCORE				**150**	

APPENDIX C

HOTHC COC2013 Renewal Project Evaluation Tool:

Data Sources

Priority Area		Data Source
Project Participant Impact		
Housing Stability		
ph/sh	% PH participants retaining PH for 6 months or more	APR
ph/sh	% participants who remained in project as of end of operating year or exited to PH during the operating year	APR
th/sso	% TH participants moving from TH to PH at exit	APR
all	% Exits to family/friends (permanent tenure)	APR
Access to Income and Benefits		
all	% participants employed at exit	APR
all	% participants with 1+ source of non-cash benefits at exit	APR
all	% participants age 18 and older who maintained or increased their total income (from all sources) as of the end of the operating year or program exit	APR
Length of Time Homeless		
th/sso	Average length of stay for leavers in facility-based TH (in days)	APR
th/sso	Average length of stay for leavers in voucher-based TH (in days)	APR
Meeting Community Need		
Project Demand		
all	Average daily bed utilization	APR
Targeting Hard to Serve		
ph/sh	% entries from streets/emergency shelter only	APR
all	% entries with no income	APR
th/sso	% entries from literal homelessness (i.e., category 1 homeless)	APR
Project Capacity		
Reporting Requirements		
all	HIC/PIT data submitted on time	HIC/PIT data submission records
all	Cost Effectiveness	
Unspent Funds		
all	2010 - 2011 Total CoC Funds Awarded =	HUD LOCCS
all	2010 - 2011 Total CoC Expenditures =	HUD LOCCS
all	2011 - 2012 Total CoC Funds Awarded =	HUD LOCCS
all	2011 - 2012 Total CoC Expenditures =	HUD LOCCS
all	On track to spend 2012-2013 CoC Award	HUD LOCCS
HMIS Data Quality		
all	% error in Completion Summary	HMIS Data Completion Report
Project Leverage		
all	2012/13? CoC Application leverage documented	2012 renewal CoC application and commitment letters provided by grantees
Project Monitoring Results		
all	No unresolved HUD monitoring findings noted	Most recent HUD (if applicable) audit/monitoring letters and documentation of resolved issues

Minutes from Continuum of Care Committee Sub-Committee Meeting

December 3, 2013

Subcommittee members in attendance: Ashley Herridge, Carlton Willis, Kathy Reid, Katie Fager, Margie Smith, Jennifer Caballero, Jill McCall, Mary Lou Polk, Melinda Bonds, Sarah Miller, Susan Duecy, Teri Holtkamp, Vicki Halfmann, Jeff Walll, Dani Miller (guest)

A copy of the PowerPoint slides from this meeting is available upon request.

1. Call to order: The meeting was called to order at 12pm by Teri Holtkamp, CoC Lead.
2. Teri, Jennifer, and Katie led a discussion of HUD NOFA and FY 2013 HUD Priorities.
3. Teri discussed the Heart of Texas Continuum of Care Priorities for Calendar year 2013 and pointed out that our community has the right idea about the population we are serving but may need to re-evaluate our emphasis on transitional housing. Jennifer further discussed data from the 2013 AHAR draft regarding our current utilization rates in our transitional housing programs for homeless individuals.
4. Jennifer presented the 2013 Renewal Project Evaluation Tool (RPET) to the subcommittee for their review and approval. (a copy of the tool is available upon request)
    a. The RPET was developed by the Texas Homeless Network and adapted to fit our community.
    b. The RPET will be used to review, score, and rank all renewal CoC projects as part of the FY 2013 competition
    c. The RPET will focus on the following priority areas: project participant capacity, meeting community need, project capacity.
    d. Data for the RPET tool will be collected from recent APR, HMIS, and LOCCS.
    e. All agencies requesting renewal must submit documents requested in RPET Instructions to Jennifer Caballero by close of business Friday, December 13, 2013.
    f. A CoC Project Evaluation Committee consisting of community leaders (not receiving CoC project funding), CoC Lead, HMIS Lead, and Heart of Texas Homeless Coalition Board President will meet to review all renewal submissions. This committee will make recommendations on how the CoC Projects should be prioritized in the FY2013 competition. This committee will utilize the RPET and FY2013/2014 NOFA as guiding documents for their recommendations. The CoC lead will present their recommendations at a future meeting TBD.
    g. The subcommittee unanimously approved the evaluation tool and prioritization process.
5. Dani Miller (MSW intern from Baylor University) updated the sub-committee on the status of our local Coordinated Assessment process. She will serve as a facilitator for this process in Jan. 2014.
6. The sub-committee completed the Community Assessment survey completed for the 100,000 Homes Campaign
7. Katie Fager led a discussion on the 100,000 Homes Campaign which covered the following topics:
    a. Registry Week
    b. Prioritization of the most vulnerable for available housing
    c. Future Steps as a Continuum of Care (ending chronic homeless in Waco is an achievable goal for our community).
8. Meeting adjourned at 2:00pm

Minutes respectfully submitted by Jennifer Caballero, HMIS Lead.

CoC Meeting Agenda
Thursday January 16, 2014

Individuals present: Cheryl Pooler, Susan Duecy, Sarah Miller, Mary Lou Polk, Jill McCall, Carlton Willis, Melinda Bonds, Teri HoltKamp, Jennifer Caballero, Vicki Halfmann, Whitney Richey, Meredith Allen, Rachel Cozart

Review of evaluation committee rankings
At the last meeting the evaluation tool and the process by which the committee would evaluate and rank programs was shared. A public notice was put out for new applications. An application for a new rapid re housing program was received from the Family Abuse center.

The evaluation committee met on January 7. They took into account the evaluation tool, as well as HUD's priorities, when ranking programs. Cost analysis and program type did not factor into the score. When the NOFA is complete, the evaluation committee and the CoC will meet to review and adjust the evaluation tool.

CoC members reviewed rankings. Vicki Halfmann motioned to approve rankings. Teri HoltKamp seconded the motion. There were no objections and the rankings were approved. The rankings will be voted upon by the McLennan County Homeless Coalition on Friday, January 17.

The evaluation team consisted of the following members: Cheryl Pooler, Mike Stone, Virginia DuPuy, Judy Perry, and Buddy Edwards

CoC Application
Members examined the CoC application. Susan Duecy took notes on changes, additions, and future goals for the application.

Due to time, the narrative sections were divided and assigned to representatives from organizations according to the material needed to answer the questions.

Meeting adjourned at 1:40pm.

MEMORANDUM OF UNDERSTANDING

I. PARTIES TO THE AGREEMENT

PARTNER AGENCIES Providence Healthcare Network

PROJECT OPERATOR Heart of Texas Homeless Coalition

EFFECTIVE DATES: January 17, 2013 until cancelled by either party.

This agreement is made between Providence Healthcare Network , and the Heart of Texas Homeless Coalition, hereafter referred to as "the Coalition" hereafter referred to as "Project Operator" for the purpose of a cooperative effort of all parties to provide services to individuals who may be discharged from medical facilities into homelessness.

II. PURPOSE OF THE PROJECT

The purpose of the project is to prevent individuals from being discharged from medical facilities into homelessness.

III. PROJECT OPERATOR RESPONSIBILITIES

The Project Operator will:

1. Ensure that the potentially homeless person is not routinely discharged into homelessness, but instead will locate a non McKinney-Vento funded facility, such as a skilled nursing facility or a family member or friend.

The Partner Agencies will:

1. Hospitals will provide the best quality care possible to each patient according to their needs.
2. Prior to the patients' discharge, hospital social workers will try to locate an appropriate living arrangement for the patient, using a homeless shelter as a last resort.
3. If, as a last resort, the patient must go to a homeless shelter, the social worker will work with each shelter on a case by case basis, according to the patients needs, to arrange the discharge in order that the patient may receive the care and rest they need.

4. The hospitals will not discharge a patient into homelessness unless the patient refuses all services offered to him/her.

5. Each hospital will have a representative attending the monthly HOT Homeless Coalition meetings and on the Mayor's Homelessness Committee.

VI. SIGNATORY

Having agreed to the terms herein, the undersigned parties hereby represent and warrant that they are authorized to enter into and execute this agreement either as an official or a representative of the Providence Healthcare Network; Hillcrest Baptist Hospital, and the Heart of Texas Homeless Coalition.

Effective Date 1-17-13

Providence Healthcare Network

By: ______________________
Kent Keahy, CEO
Providence Healthcare Network

Heart of Texas Homeless Coalition

By: ______________________
Ms. Kathryn Reid, Chairperson
Heart of Texas Homeless Coalition

4. The hospitals will not discharge a patient into homelessness unless the patient refuses all services offered to him/her.

5. Each hospital will have a representative attending the monthly HOT Homeless Coalition meetings and on the Mayor's Homelessness Committee.

VI. SIGNATORY

Having agreed to the terms herein, the undersigned parties hereby represent and warrant that they are authorized to enter into and execute this agreement either as an official or a representative of the Providence Healthcare Network; Hillcrest Baptist Hospital, and the Heart of Texas Homeless Coalition.

Effective Date 1-17-13

Providence Healthcare Network

By: [signature]
Kent Keahy, CEO
Providence Healthcare Network

Heart of Texas Homeless Coalition

By: [signature]
Ms. Kathryn Reid, Chairperson
Heart of Texas Homeless Coalition
Michael Ormsby, Vice Chair

COUNTY OF MCLENNAN	§	
	§	**KNOW ALL PERSONS BY THESE PRESENTS:**
STATE OF TEXAS	§	

This Memorandum of Understanding (MOU) is entered into and valid throughout the duration of the Heart of Texas Homeless Management Information System (HMIS) project by mutual consent of the City of Waco, acting as the Heart of Texas HMIS Administrator, located at 300 Austin Ave., Waco, TX 76710 and Waco Independent School District located at 501 Franklin Ave, Waco, TX 76701, collectively referred to as the "Parties" herein.

The City of Waco is the lead agency responsible for the management of Heart of Texas HMIS in Waco/McLennan County. In accordance with the U.S. Department of Housing and Urban Development (HUD) data collection mandates, the City of Waco implements and operates the HMIS called ServicePoint by Bowman Systems, L.L.C. used for managing client information throughout the Waco/McLennan County Continuum of Care.

The City of Waco, acting as the Heart of Texas HMIS Administrator, and Waco ISD mutually agree to the following:

- Waco ISD may utilize ServicePoint, an Internet-based HMIS developed by Bowman Systems, L.L.C., a company based in Shreveport, Louisiana, for the purposes of client tracking and case management for HUD and non-HUD funded services provided through Waco ISD.
- Waco ISD will purchase licenses for their users at the price outlined in Heart of Texas HMIS Policies and Standard Operating Procedures Manual.
- The City of Waco, acting as HMIS Administrator, will contract with Bowman for the hardware and software services for the Heart of Texas HMIS system.
- Waco ISD **MAY NOT** contact Bowman directly and/or request changes from Bowman to the software. All contact and/or requests shall be made through the City of Waco HMIS Administrator or representative thereof.
- The City of Waco, acting as Heart of Texas HMIS Administrator, will maintain control of all data entered into the system and will manage and secure this data in accordance with the Heart of Texas HMIS Policies and Standard Operating Procedures Manual.
- Waco ISD will comply with the Heart of Texas HMIS Policies and Standard Operating Procedures Manual and the Heart of Texas HMIS User Confidentiality Agreement for the use of the system and will designate a Waco ISD Agency Administrator to monitor users for adherence to said policies.
- Both Parties will operate in accordance with HUD's currently published HMIS Data and Technical Standards except in cases where the Standards conflict with Texas law. In such cases, Texas law supersedes the Standards.
- Either Party may terminate this MOU at any time if the HMIS Policies and Standard Operating Procedures Manual is not followed.
- The City of Waco, acting as HMIS Administrator, is responsible for ensuring that the contract terms of the agreement with Bowman continue to be satisfied so that all Waco ISD data remains secure. This responsibility extends to the provision of disaster recovery services, daily backup of data, system maintenance, database level and secure encryption, and regularly scheduled product upgrades.

The signing of this Memorandum of Understanding certifies concurrence with the terms and conditions agreed upon by both Parties hereto; no other agreement, oral or otherwise shall be deemed to exist or be binding.

Signature of Waco ISD Representative: 2-1-13
Date

Natalie Williams
Signature of the City of Waco HMIS Administrator 2/13/2013
Date

EFILE 2013040024H

MEMORANDUM OF UNDERSTANDING

I. PARTIES TO THE AGREEMENT

PARTNER AGENCIES	Hillcrest Baptist Medical Center Scott and White Healthcare
PROJECT OPERATOR	Heart of Texas Homeless Coalition
EFFECTIVE DATES:	January 2013 until cancelled by either party.

This agreement is made between Hillcrest Baptist Medical Center Scott and White Healthcare , and the Heart of Texas Homeless Coalition, hereafter referred to as "the Coalition" hereafter referred to as "Project Operator" for the purpose of a cooperative effort of all parties to provide services to individuals who may be discharged from medical facilities into homelessness.

II. PURPOSE OF THE PROJECT

The purpose of the project is to prevent individuals from being discharged from medical facilities into homelessness.

III. PROJECT OPERATOR RESPONSIBILITIES

The Project Operator will:

1. Ensure that the potentially homeless person is not routinely discharged into homelessness, but instead will locate a non McKinney-Vento funded facility, such as a skilled nursing facility or a family member or friend.

The Partner Agencies will:

1. Hospitals will provide the best quality care possible to each patient according to their needs.

2. Prior to the patients' discharge, hospital social workers will try to locate an appropriate living arrangement for the patient, using a homeless shelter as a last resort.

3. If, as a last resort, the patient must go to a homeless shelter, the social worker will work with each shelter on a case by case basis, according to the patients needs, to arrange the discharge in order that the patient may receive the care and rest they need.

4. The hospitals will not discharge a patient into homelessness unless the patient refuses all services offered to him/her.

5. Each hospital will have a representative attending the monthly HOT Homeless Coalition meetings and on the Mayor's Homelessness Committee.

VI. SIGNATORY

Having agreed to the terms herein, the undersigned parties hereby represent and warrant that they are authorized to enter into and execute this agreement either as an official or a representative of the Providence Healthcare Network; Hillcrest Baptist Medical Center Scott and White Healthcare, and the Heart of Texas Homeless Coalition.

Effective Date ____________________

Hillcrest Baptist Medical Center
Scott and White Healthcare

By: Glenn Robinson 3/21/13
Glen Robinson, CEO
Hillcrest Baptist Medical Center
Scott and White Healthcare

Heart of Texas Homeless Coalition

By: Kathryn Reid
Ms. Kathryn Reid, Chairperson
Heart of Texas Homeless Coalition

BB 3/21/13

Heart of Texas Homeless Coalition

FY2013/2014 Notice of Funds Avaliable (NOFA) and New Project Application Instructions

On November 22, 2013 HUD released the FY2013/2014 CoC Program NOFA. You can find a link to the document below.

https://www.onecpd.info/resource/3309/fy2013-fy2014coc-program-nofa/

The Continuum of Care Sub-Committee met on December 3, 2013 and approved the evaluation tool that will be used to rank all renewal projects in the FY2013/2014 CoC Competition. Attached you will find the minutes from that meeting CoC Sub-Committee Meeting Minutes 12-3-13 as well as a copy of the FY2013 CoC Project Evaluation Tool HOTHC CoC 2013 Renewal Project Eval Process draft (1)

HUD estimates that approximately $1.7 billion will be available for the FY2013 Competition. This amount is not adequate to fund all existing projects eligible for renewal. As a result, HUD will not fund any new program with the exception of new programs funded through reallocation for the following programs: 1) Permanent Supportive Housing for chronic homeless individuals, 2) Rapid Re-Housing for Families. The Heart of Texas Homeless Coalition is now accepting applications for new projects (funded only through reallocation). The deadline to submit a per-proposal application is January 3, 2014. Please see the attached 2013 Pre-Proposal Application 2013 Pre Proposal Application or contact Teri Holtkamp, CoC Lead and Homelessness Administrator for The City of Waco (254-750-5965 or terih@ci.waco.tx.us).

OUR MISSION:

To foster community awareness of the issues of homelessness and support a coordinated network of services for all homeless individuals in Bosque, Falls, Freestone, Hill, Limestone, and McLennan Counties.

OUR VISION:

A day when there are no gaps in available services to homeless individuals. The corporation is committed to developing a seamless continuum of care model that will provide all homeless individuals an opportunity to access needed services.

January 2014

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

« Dec

SHARE THIS SITE

SHARE

Minutes from Continuum of Care Committee Sub-Committee Meeting

December 3, 2013

Subcommittee members in attendance: Ashley Herridge, Carlton Willis, Kathy Reid, Katie Fager, Margie Smith, Jennifer Caballero, Jill McCall, Mary Lou Polk, Melinda Bonds, Sarah Miller, Susan Duecy, Teri Holtkamp, Vicki Halfmann, Jeff Walll, Dani Miller (guest)

A copy of the PowerPoint slides from this meeting is available upon request.

1. Call to order: The meeting was called to order at 12pm by Teri Holtkamp, CoC Lead.
2. Teri, Jennifer, and Katie led a discussion of HUD NOFA and FY 2013 HUD Priorities.
3. Teri discussed the Heart of Texas Continuum of Care Priorities for Calendar year 2013 and pointed out that our community has the right idea about the population we are serving but may need to re-evaluate our emphasis on transitional housing. Jennifer further discussed data from the 2013 AHAR draft regarding our current utilization rates in our transitional housing programs for homeless individuals.
4. Jennifer presented the 2013 Renewal Project Evaluation Tool (RPET) to the subcommittee for their review and approval. (a copy of the tool is available upon request)
   a. The RPET was developed by the Texas Homeless Network and adapted to fit our community.
   b. The RPET will be used to review, score, and rank all renewal CoC projects as part of the FY 2013 competition
   c. The RPET will focus on the following priority areas: project participant capacity, meeting community need, project capacity.
   d. Data for the RPET tool will be collected from recent APR, HMIS, and LOCCS.
   e. All agencies requesting renewal must submit documents requested in RPET Instructions to Jennifer Caballero by close of business Friday, December 13, 2013.
   f. A CoC Project Evaluation Committee consisting of community leaders (not receiving CoC project funding), CoC Lead, HMIS Lead, and Heart of Texas Homeless Coalition Board President will meet to review all renewal submissions. This committee will make recommendations on how the CoC Projects should be prioritized in the FY2013 competition. This committee will utilize the RPET and FY2013/2014 NOFA as guiding documents for their recommendations. The CoC lead will present their recommendations at a future meeting TBD.
   g. The subcommittee unanimously approved the evaluation tool and prioritization process.
5. Dani Miller (MSW intern from Baylor University) updated the sub-committee on the status of our local Coordinated Assessment process. She will serve as a facilitator for this process in Jan. 2014.
6. The sub-committee completed the Community Assessment survey completed for the 100,000 Homes Campaign
7. Katie Fager led a discussion on the 100,000 Homes Campaign which covered the following topics:
   a. Registry Week
   b. Prioritization of the most vulnerable for available housing
   c. Future Steps as a Continuum of Care (ending chronic homeless in Waco is an achievable goal for our community).
8. Meeting adjourned at 2:00pm

Minutes respectfully submitted by Jennifer Caballero, HMIS Lead.

FY2013 HUD Continuum of Care Homeless Assistance Grant (HUD Super NOFA)

Heart of Texas Homeless Coalition

INFORMATION AND INSTRUCTIONS

WHAT IS THIS PRE-PROPOSAL?

The following is a Pre-Proposal to be used by agencies interested in receiving funding under the FY2013 HUD Continuum of Care for Homeless Assistance Grant (HUD Super NOFA). This Pre-Proposal has been developed through a collaborative effort of the Heart of Texas Homeless Coalition and covers programs offered in Bosque, Falls, Freestone, Hill, Limestone and McLennan Counties; the area served by the Heart of Texas Council of Governments. (HOTCOG)

HUD estimates that approximately $1.7 billion is available for FY2013 Program Applications. This amount is not adequate to fund all existing projects eligible for renewal. As a result, HUD will not fund any new programs with the exception of new programs funded through reallocation for the following programs: Permanent Supportive Housing for the chronic homeless and Rapid Re-Housing for Families. Applications from any other program type will automatically be denied by Continuum of Care Evaluation Committee. The Annual Renewal Demand for The Heart of Texas Homeless Coalition for FY2013/2014 is $744,073 (less 5 % cut from HUD).

PRE-PROPOSAL SUBMISSION REQUIREMENTS:

- Applicants must submit **ONE (1) ORIGINAL AND FOUR (4) COPIES** of the completed Pre-Proposal *and all required documents* to the address indicated below **by 4:30 p.m. January 3, 2014.**
- **Proposals (including all forms) must be typed**--single-spaced--on standard 8 1/2" by 11" paper with 1-inch margins and have consecutively numbered pages. You must use **Times New Roman font size 12**. Applicants may obtain a copy of this form from Teri Holtkamp, Continuum of Care Lead, (contact Teri at 254/750-5965 or terih@ci.waco.tx.us).
- **Place your applicant project name and DUNS number on each page**. The proposal must be organized according to the outline provided. If an item is not relevant, please indicate, "Not applicable".
- All applications will be ranked according to evaluation criteria. In order to improve our chances of being funded, these applications will be compiled and submitted to HUD under one cover as a Consolidated Application.
- Please note that in addition to submitting this Pre-Proposal, **ALL applicants will be responsible for preparing their final project application for submission in ESNAPS with the local HUD Continuum of Care application.** Following the review and ranking of Pre-Proposals, applicants will be contacted with further information on deadlines, formatting requirements etc.

APPLICATIONS ARE DUE NO LATER THAN 4:30 P.M.,
Friday, January 3, 2014
Deliver applications to:
Housing and Community Development (main number, 750-5656)
Jennifer Caballero, 750-5668 City Hall, 300 Austin Ave. Waco, Tx 76701

LATE APPLICATIONS WILL NOT BE ACCEPTED

HUD CONTINUUM OF CARE PRE-PROPOSAL
TABLE OF CONTENTS

Waco/McLennan County Priorities
Established by the Heart of Texas Homeless Coalition February 15, 2013

Homeless Coalition 2013 Priorities Listed in order of priority (1 being the highest)

1. Family Transitional Housing
2. Transitional Housing – Young Adult (age 18-25)
3. Transitional Housing – Youth (up to 18)
4. HMIS Expansion
5. Permanent Supportive Housing

HUD’s Homeless Policy and Program Priorities

Published on pg. 8-12 of FY2013/FY2014 Continuum of Care Program Competition NOFA

1. Strategic resource allocation

2. Ending chronic homelessness

3. Ending family homelessness

4. Removing barriers to continuum of care resources

5. Maximizing the use of mainstream resources

6. Building partnerships

7. Other priority populations: Veteran’s and Homeless Youth

8. Evaluation Criteria for proposals:

Description	Maximum Points
Proposal Narrative – Process and strategy appears reasonable	15
Project will utilize Homeless Management Information System - if existing provider – project data current in HMIS per certification from HMIS Administrator (City of Waco)	15
Past Performance in providing services to the homeless including meeting coalition coals, as applicable: Decreased the number of homeless households with children If transitional housing project, at least 19% of clients exiting in past 12 months were employed If transitional housing project, at least 63.5% of clients exiting in past 12 months, exited to permanent housing If transitional housing project, provided holistic case management and social services for residents along with effective after-care services for program graduates If permanent housing project, at least 71.5% of clients stay over 6 months and program included necessary support services	15
Consistent with and HUD and Heart of Texas Homeless Coalition Priorities	10
Meets HUD Mandated Objectives (see page 11)	15
Proposal Budget – costs of project appear realistic	15
Proposal Budget – emphasis is on housing costs (At least 50% of total budgeted Continuum of Care budgeted expenses are housing expenses.	15
Subtotal	**100**
Bonus Points for creating 3 or more permanent housing beds for chronically homeless persons	5
Maximum Points Available	**105**

HUD CONTINUUM OF CARE PRE-PROPOSAL
ELIGIBILITY INFORMATION & INSTRUCTIONS

COMMUNITIES ELIGIBLE TO APPLY / RECEIVE ASSISTANCE

This application for funding is available to any eligible applicant providing services to homeless persons in the Bosque, Falls, Freestone, Hill, Limestone and McLennan Counties.

ELIGIBLE PROJECTS

There are only two project types that are eligible to submit applications for new projects (through reallocation) for the FY2013/2014 Continuum of Care Application.

1. Permanent Supportive Housing Projects that serve chronically homeless
2. Rapid Re-housing Projects for homeless households with children

The FY 2013 Program NOFA was released on November 22, 2014. The link to the NOFA is https://www.onecpd.info/resource/3309/fy2013-fy2014coc-program-nofa/

Per an e-mail issued March 5, 2012 by Ann Oliva, Director, Office of Special Needs Assistance Programs, the following information has been given:

The HEARTH Act, enacted into law in 2009, required HUD to write six sets of regulations: The Definition of Homeless, the Consolidated Plan Conforming Amendments, the Emergency Solutions Grant (ESG) Program, Homeless Management Information System (HMIS) Requirements, the Continuum of Care (CoC) Program, and the Rural Housing Stability Assistance Program (RHSP).

Of these, the final rule on the definition of Homeless went into effect January 4, 2012. The Interim Rules on the Emergency Solutions Grant and corresponding amendments to the Consolidated Plan have gone into effect.

On December 9, 2011 the proposed rule for the HMIS Requirements was published in the Federal Register.

HUD has released the *Interim Rule* for the Continuum of Care (CoC) Program.

A CoC planning system is developed through a community-wide or region-wide process involving the coordination of nonprofit organizations including those representing persons with disabilities), state and local government agencies, public housing agencies, community and faith-based organizations, other homeless providers, service providers, housing developers, private health care associations, law enforcement and corrections agencies, school systems, private funding providers, and homeless or formerly homeless persons to successfully address the complex and interrelated problems related to homelessness. As in the past, this year HUD emphasizes its determination to integrate and align plans, including jurisdictional, state, and city ten-year plans (jurisdictional ten-year plans) encouraged by the U.S. Interagency

Council on Homelessness and Consolidated Plans, into the CoC plans. These plans serve as a vehicle for a community to comprehensively identify all of its needs and to coordinate its approach for addressing them.

A CoC should address the specific needs of each homeless subpopulation: those experiencing chronic homelessness, veterans, persons with serious mental illnesses, persons with substance abuse issues, persons with HIV/AIDS, persons with co-occurring diagnoses (these may include diagnoses of multiple physical disabilities or multiple mental disabilities or a combination of these two types), victims of domestic violence, unaccompanied youth, households with dependent children, and any others. To ensure that the CoC system addresses the needs of homeless veterans, it is particularly important that CoCs involve veteran service organizations with specific experience in serving homeless veterans.

Through the 2009 American Recovery and Reinvestment Act, Congress designated $1.5 billion for HUD's Homelessness Prevention and Rapid Re-housing Program (HPRP). HPRP funds for prevention activities and rapid re-housing of individuals and families were made available to eligible grantees including states, territories, metropolitan cities and urban counties. HPRP Grantees are required to coordinate with CoCs in the development of HPRP program and activities, including HMIS. CoCs will be required to describe the level of coordination between HPRP grantees and CoC leadership and/or members.

Per the January 4, 2012 final rule, the definition of "homeless" and "at-risk of homelessness" has been defined. Please refer to the following link for the full definition and clarification. According to the webinar HUD hosted on July 23, 2012, only "High Performing Communities" will be serving clients "At-Risk" of Homelessness. The guidelines for "High Performing Communities" have not yet been established, therefore, this population will be "N/A" for 2012.

ELIGIBLE PERSONS TO BE SERVED

The final rule maintains these four categories. The categories are: (1) Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who resided in an emergency shelter or a place not meant for human habitation and who is exiting an institution where he or she temporarily resided; (2) individuals and families who will imminently lose their primary nighttime residence; (3) unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; and (4) individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

SEC. 423. [42 USC 11383]. ELIGIBLE ACTIVITIES. (From the McKinney-Vento as amended by HEARTH Act of 2009)

(a) IN GENERAL.—Grants awarded under section 422 to qualified applicants shall be used to carry out projects that serve homeless individuals or families that consist of one or more of the following eligible activities:

(1) Construction of new housing units to provide transitional or permanent housing.

(2) Acquisition or rehabilitation of a structure to provide transitional or permanent housing, other than emergency shelter, or to provide supportive services.

(3) Leasing of property, or portions of property, not owned by the recipient or project sponsor involved, for use in providing transitional or permanent housing, or providing supportive services.

(4) Provision of rental assistance to provide transitional or permanent housing to eligible persons. The rental assistance may include tenant-based, project-based, or sponsor-based rental assistance. Project-based rental assistance, sponsor-based rental assistance, and operating cost assistance contracts carried out by project sponsors receiving grants under this section may, at the discretion of the applicant and the project sponsor, have an initial term of 15 years, with assistance for the first 5 years paid with funds authorized for appropriation under this Act, and assistance for the remainder of the term treated as a renewal of an expiring contract as provided in section 429. Project-based rental assistance may include rental assistance to preserve existing permanent supportive housing for homeless individuals and families.

(5) Payment of operating costs for housing units assisted under this subtitle or for the preservation of housing that will serve homeless individuals and families and for which another form of assistance is expiring or otherwise no longer available.

(6) Supportive services for individuals and families who are currently homeless, who have been homeless in the prior six months but are currently residing in permanent housing, or who were previously homeless and are currently residing in permanent supportive housing.

(7) Provision of rehousing services, including housing search, mediation or outreach to property owners, credit repair, providing security or utility deposits, rental assistance for a final month at a location, assistance with moving costs, or other activities that—

(A) are effective at moving homeless individuals and families immediately into housing; or

(B) may benefit individuals and families who in the prior 6 months have been homeless, but are currently residing in permanent housing.

(8) In the case of a collaborative applicant that is a legal entity, performance of the

duties described under section 402(f)(3).

(9) Operation of, participation in, and ensuring consistent participation by project sponsors in, a community-wide homeless management information system.

(10) In the case of a collaborative applicant that is a legal entity, payment of administrative costs related to meeting the requirements described in paragraphs (1) and (2) of section 402(f), for which the collaborative applicant may use not more than 3 percent of the total funds made available in the geographic area under this subtitle for such costs.

(11) In the case of a collaborative applicant that is a unified funding agency under section 402(g), payment of administrative costs related to meeting the requirements of that section, for which the unified funding agency may use not more than 3 percent of the total funds made available in the geographic area under this subtitle for such costs, in addition to funds used under paragraph (10).

(12) Payment of administrative costs to project sponsors, for which each project sponsor may use not more than 10 percent of the total funds made available to that project sponsor through this subtitle for such costs.

(b) MINIMUM GRANT TERMS.—The Secretary may impose minimum grant terms of up to 5 years for new projects providing permanent housing.

(c) USE RESTRICTIONS.—

(1) ACQUISITION, REHABILITATION, AND NEW CONSTRUCTION.—A project that consists of activities described in paragraph (1) or (2) of subsection (a) shall be operated for the purpose specified in the application submitted for the project under section 422 for not less than 15 years.

(2) OTHER ACTIVITIES.—A project that consists of activities described in any of paragraphs (3) through (12) of subsection (a) shall be operated for the purpose specified in the application submitted for the project under section 422 for the duration of the grant period involved.

(3) CONVERSION.—If the recipient or project sponsor carrying out a project that provides transitional or permanent housing submits a request to the Secretary to carry out instead a project for the direct benefit of low-income persons, and the Secretary determines that the initial project is no longer needed to provide transitional or permanent housing, the Secretary may approve the project described in the request and authorize the recipient or project sponsor to carry out that project.

(e) STAFF TRAINING.—The Secretary may allow reasonable costs associated with staff training to be included as part of the activities described in subsection (a).

(f) ELIGILBITY FOR PERMANENT HOUSING.—Any project that receives assistance under subsection (a) and that provides project-based or sponsor-based permanent housing for homeless individuals or families with a disability, including projects that meet the requirements of subsection (a) and subsection (d)(2)(A) of section 428 may also serve individuals who had previously met the requirements for such project prior to moving into a different permanent housing project.

(g) ADMINISTRATION OF RENTAL ASSISTANCE.—Provision of permanent housing rental assistance shall be administered by a State, unit of general local government, or public housing agency.

SEC. 425. [42 USC 11385]. SUPPORTIVE SERVICES.

(a) IN GENERAL.—To the extent practicable, each project shall provide supportive services for residents of the project and homeless persons using the project, which may be designed by the recipient or participants.

(b) REQUIREMENTS.—Supportive services provided in connection with a project shall address the special needs of individuals (such as homeless persons with disabilities and homeless
families with children) intended to be served by a project.

(c) SERVICES.—Supportive services may include such activities as (A) establishing and operating a child care services program for homeless families, (B) establishing and operating an employment assistance program, (C) providing outpatient health services, food, and case management, (D) providing assistance in obtaining permanent housing, employment counseling, and nutritional counseling, (E) providing security arrangements necessary for the protection of residents of supportive housing and for homeless persons using the housing or project, (F) providing assistance in obtaining other Federal, State, and local assistance available for such residents (including mental health benefits, employment counseling, and medical assistance, but not including major medical equipment), and (G) providing other appropriate services.

(d) PROVISION OF SERVICES.—Services provided pursuant to this section may be provided directly by the recipient or by contract with other public or private service providers. Such services may be provided to homeless individuals who do not reside in supportive housing.

(e) COORDINATION WITH SECRETARY OF HEALTH AND HUMAN SERVICES.—

(1) APPROVAL.—Promptly upon receipt of any application for assistance under this subtitle that includes the provision of outpatient health services, the Secretary of Housing and Urban Development shall consult with the Secretary of Health and Human Services with respect to the proposed outpatient health services. If, within 45 days of such consultation, the Secretary of Health and Human Services

determines that the proposal for delivery of the outpatient health services does not meet guidelines for determining the appropriateness of such proposed services, the Secretary of Housing and Urban Development may require resubmission of the application, and the Secretary of Housing and Urban Development may not approve such portion of the application unless and until such portion has been resubmitted in a form that the Secretary of Health and Human Services determines meets such guidelines.

(2) GUIDELINES.—The Secretary of Housing and Urban Development and the Secretary of Health and Human Services shall jointly establish guidelines for determining the appropriateness of proposed outpatient health services under this section. Such guidelines shall include any provisions necessary to enable the Secretary of Housing and Urban Development to meet the time limits under this subtitle for the final selection of applications for assistance.

SEC. 426. [42 USC 11386]. PROGRAM REQUIREMENTS.

(a) SITE CONTROL.—The Secretary shall require that each application include reasonable assurances that the applicant will own or have control of a site for the proposed project not later than the expiration of the 12-month period beginning upon notification of an award for grant assistance, unless the application proposes providing supportive housing assistance under section 423(a)(3) or housing that will eventually be owned or controlled by the families and individuals served. An applicant may obtain ownership or control of a suitable site different from the site specified in the application. If any recipient or project sponsor fails to obtain ownership or control of the site within 12 months after notification of an award for grant assistance, the grant shall be recaptured and reallocated under this subtitle.

(b) REQUIRED AGREEMENTS.—The Secretary may not provide assistance for a proposed project under this subtitle unless the collaborative applicant involved agrees—

(1) to ensure the operation of the project in accordance with the provisions of this subtitle;

(2) to monitor and report to the Secretary the progress of the project;

(3) to ensure, to the maximum extent practicable, that individuals and families experiencing homelessness are involved, through employment, provision of volunteer services, or otherwise, in constructing, rehabilitating, maintaining, and operating facilities for the project and in providing supportive services for the project;

(4) to require certification from all project sponsors that—

(A) they will maintain the confidentiality of records pertaining to any individual or family provided family violence prevention or treatment services through the project;

(B) that the address or location of any family violence shelter project assisted under this subtitle will not be made public, except with written authorization of the person responsible for the operation of such project;

(C) they will establish policies and practices that are consistent with, and do not restrict the exercise of rights provided by, subtitle B of title VII, and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness;

(D) in the case of programs that provide housing or services to families, they will designate a staff person to be responsible for ensuring that children being served in the program are enrolled in school and connected to appropriate services in the community, including early childhood programs such as Head Start, part C of the Individuals with Disabilities Education Act, and programs authorized under subtitle B of title VII of this Act(42 U.S.C. 11431 et seq.); and

(E) they will provide data and reports as required by the Secretary pursuant to the Act.

(5) if a collaborative applicant is a unified funding agency under section 402(g) and receives funds under subtitle C to carry out the payment of administrative costs described in section 423(a)(11), to establish such fiscal control and fund accounting procedures as may be necessary to assure the proper disbursal of, and accounting for, such funds in order to ensure that all financial transactions carried out with such funds are conducted, and records maintained, in accordance with generally accepted accounting principles;

(6) to monitor and report to the Secretary the provision of matching funds as required by section 430;

(7) to take the educational needs of children into account when families are placed in emergency or transitional shelter and will, to the maximum extent practicable, place families with children as close as possible to their school of origin so as not to disrupt such children's education; and

(8) to comply with such other terms and conditions as the Secretary may establish to carry out this subtitle in an effective and efficient manner.

(c) OCCUPANCY CHARGE.—Each homeless individual or family residing in a project providing supportive housing may be required to pay an occupancy charge in an amount determined by the recipient or project sponsor providing the project, which may not exceed the amount determined under section 3(a) of the United States Housing Act of 1937. Occupancy charges paid may be reserved, in whole or in part, to assist residents in moving to permanent housing.

(d) FLOOD PROTECTION STANDARDS.—Flood protection standards applicable to housing acquired, rehabilitated, constructed, or assisted under this subtitle shall be no more restrictive than the standards applicable under Executive Order No. 11988 (May 24, 1977) to the other programs under this title.

(e) PARTICIPATION OF HOMELESS INDIVIDUALS.—The Secretary shall, by regulation, require each recipient or project sponsor to provide for the participation of not less than 1 homeless individual or former homeless individual on the board of directors or other equivalent policymaking entity of the recipient or project sponsor, to the extent that such entity considers and makes policies and decisions regarding any project, supportive services, or assistance provided under this subtitle. The Secretary may grant waivers to applicants unable to meet the requirement under the preceding sentence if the applicant agrees to otherwise consult with homeless or formerly homeless individuals in considering and making such policies and decisions.

(f) LIMITATION ON USE OF FUNDS.—No assistance received under this subtitle (or any State or local government funds used to supplement such assistance) may be used to replace other State or local funds previously used, or designated for use, to assist homeless persons.

(g) TERMINATION OF ASSISTANCE.—If an individual or family who receives assistance under this subtitle (not including residents of an emergency shelter) from a recipient violates program requirements, the recipient may terminate assistance in accordance with a formal process established by the recipient that recognizes the rights of individuals receiving such assistance to due process of law, which may include a hearing.

SEC. 427. SELECTION CRITERIA.

(a) IN GENERAL.—The Secretary shall award funds to recipients through a national competition between geographic areas based on criteria established by the Secretary.

(b) REQUIRED CRITERIA.—

(1) IN GENERAL.—The criteria established under subsection (a) shall include—

(A) the previous performance of the recipient regarding homelessness, including performance related to funds provided under section 412 (except that recipients applying from geographic areas where no funds have been awarded under this subtitle, or under subtitles C, D, E, or F of title IV of this Act, as in effect prior to the date of the enactment of the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009, shall receive full credit for performance under this subparagraph), measured by criteria that shall be announced by the Secretary, that shall take into account barriers faced by individual homeless people, and that shall include—

(i) the length of time individuals and families remain homeless;

(ii) the extent to which individuals and families who leave homelessness experience additional spells of homelessness;

(iii) the thoroughness of grantees in the geographic area in reaching homeless individuals and families;

(iv) overall reduction in the number of homeless individuals and

families; (v) jobs and income growth for homeless individuals and

families;

(vi) success at reducing the number of individuals and families who become homeless;

(vii) other accomplishments by the recipient related to reducing homelessness; and

(viii) for collaborative applicants that have exercised the authority under section 422(j) to serve families with children and youth defined as homeless under other Federal statutes, success in achieving the goals and outcomes identified in section 427(b)(1)(F);

(B) the plan of the recipient, which shall describe—

(i) how the number of individuals and families who become homeless will be reduced in the community;

(ii) how the length of time that individuals and families remain homeless will be reduced;

(iii) how the recipient will collaborate with local education authorities to assist in the identification of individuals and families who become or remain homeless and are informed of their eligibility for services under subtitle B of title VII of this Act (42 U.S.C. 11431 et seq.);

(iv) the extent to which the recipient will—

(I) address the needs of all relevant subpopulations;

(II) incorporate comprehensive strategies for

reducing
homelessness, including the interventions referred to in section 428(d);

(III) set quantifiable performance measures;

(IV) set timelines for completion of specific tasks;

(V) identify specific funding sources for planned activities; and

(VI) identify an individual or body responsible for overseeing implementation of specific strategies; and

(v) whether the recipient proposes to exercise authority to use funds under section 422(j), and if so, how the recipient will achieve the goals and outcomes identified in section 427(b)(1)(F);

(C) the methodology of the recipient used to determine the priority for funding local projects under section 422(c)(1), including the extent to which the priority-setting process—

(i) uses periodically collected information and analysis to determine the extent to which each project has resulted in rapid return to permanent housing for those served by the project, taking into account the severity of barriers faced by the people the project serves;

(ii) considers the full range of opinions from individuals or entities with knowledge of homelessness in the geographic area or an interest in preventing or ending homelessness in the geographic area;

(iii) is based on objective criteria that have been publicly announced by the recipient; and

(iv) is open to proposals from entities that have not previously received funds under this subtitle;

(D) the extent to which the amount of assistance to be provided under this subtitle to the recipient will be supplemented with resources from other public and private sources, including mainstream programs identified by the Government Accountability Office in the two reports described in section 203(a)(7);

(E) demonstrated coordination by the recipient with the other Federal, State, local, private, and other entities serving individuals and families experiencing homelessness
and at risk of homelessness in the planning and operation of projects;

(F) for collaborative applicants exercising the authority under section 422(j) to serve homeless families with children and youth defined as homeless under other Federal statutes, program goals and outcomes, which shall include—

(i) preventing homelessness among the subset of such families with children and youth who are at highest risk of becoming homeless, as such term is defined for purposes of this title; or

(ii) achieving independent living in permanent housing among such families with children and youth, especially those who have a history of doubled- up and other temporary housing situations or are living in a temporary housing situation due to lack of available and appropriate emergency shelter, through the provision of eligible assistance that directly contributes to achieving such results including assistance to address chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse, or multiple barriers to employment; and

(G) such other factors as the Secretary determines to be appropriate to carry out this subtitle in an effective and efficient manner.

(2) ADDITIONAL CRITERIA.—In addition to the criteria required under paragraph (1), the criteria established under paragraph (1) shall also include the need within the geographic area for homeless services, determined as follows and under the following conditions:

(A) NOTICE.—The Secretary shall inform each collaborative applicant, at a time concurrent with the release of the notice of funding availability for the grants, of the pro rata estimated grant amount under this subtitle for the geographic area represented by the collaborative applicant.

(B) AMOUNT.—

(i) FORMULA.—Such estimated grant amounts shall be determined by a formula, which shall be developed by the Secretary, by regulation, not later than the expiration of the 2-year period beginning upon the date of the enactment of the Homeless Emergency Assistance and Rapid Transition to Housing Act of
2009, that is based upon factors that are appropriate to allocate funds to meet the goals and objectives of this subtitle.

(ii) COMBINATIONS OR CONSORTIA.—For a collaborative applicant that represents a combination or consortium of cities or counties, the estimated need amount shall be the sum of the estimated need amounts for the cities or counties represented by the collaborative applicant.

(iii) AUTHORITY OF SECRETARY.—Subject to the availability of appropriations, the Secretary shall increase the estimated need amount for a geographic area if necessary to provide 1 year of renewal funding for all expiring contracts entered into under this subtitle for the geographic area.

(3) HOMELESSNESS COUNTS.—The Secretary shall not require that communities conduct an actual count of homeless people other than those described in paragraphs (1) through (4) of section 103(a) of this Act (42 U.S.C. 11302(a)).

(c) ADJUSTMENTS.—The Secretary may adjust the formula described in subsection (b)(2) as necessary—

(1) to ensure that each collaborative applicant has sufficient funding to renew all qualified projects for at least one year; and

(2) to ensure that collaborative applicants are not discouraged from replacing renewal projects with new projects that the collaborative applicant determines will better be able to meet the purposes of this Act.

SEC. 429. RENEWAL FUNDING AND TERMS OF ASSISTANCE FOR PERMANENT HOUSING.

(a) IN GENERAL.—Renewal of expiring contracts for leasing, rental assistance, or operating costs for permanent housing contracts may be funded either—

(1) under the appropriations account for this title; or

(2) the section 8 project-based rental assistance account.

(b) RENEWALS.—The sums made available under subsection (a) shall be available for the renewal of contracts in the case of tenant-based assistance, successive 1-year terms, and in the case of project-based assistance, successive terms of up to 15 years at the discretion of the applicant or project sponsor and subject to the availability of annual appropriations, for rental assistance and housing operation costs associated with permanent housing projects funded under this subtitle, or under subtitle C or F (as in effect on the day before the effective date of the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009). The Secretary shall determine whether to renew a contract for such a permanent housing project on the basis of certification by the collaborative applicant for the geographic area that—

(1) there is a demonstrated need for the project; and

(2) the project complies with program requirements and appropriate standards of housing quality and habitability, as determined by the Secretary.

(c) CONSTRUCTION.—Nothing in this section shall be construed as prohibiting the Secretary from renewing contracts under this subtitle in accordance with criteria set forth in a provision of this subtitle other than this section.

SEC. 430. MATCHING FUNDING.

(a) IN GENERAL.—A collaborative applicant in a geographic area in which funds are awarded under this subtitle shall specify contributions from any source other than a grant awarded under this subtitle, including renewal funding of projects assisted under subtitles C, D, and F of this title as in effect before the effective date under section 1503 of the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009, that shall be made available in the geographic area in an amount equal to not less than 25 percent of the funds provided to recipients in the geographic area, except that grants for leasing shall not be subject to any match requirement.

(b) LIMITATIONS ON IN-KIND MATCH.—The cash value of services provided to the residents or clients of a project sponsor by an entity other than the project sponsor may count toward the contributions in subsection (a) only when documented by a memorandum of understanding between the project sponsor and the other entity that such services will be provided.

(c) COUNTABLE ACTIVITIES.—The contributions required under subsection (a) may consist of—

(1) funding for any eligible activity described under section 423; and

(2) subject to subsection (b), in-kind provision of services of any eligible activity described under section 423.

<u>Collaboration</u>

All applicants are encouraged to collaborate with other agencies when it is appropriate and in the best interest of helping homeless persons achieve self-sufficiency. For the purposes of this grant, a collaboration is defined as "a partnership in which partners establish common goals, pool resources, jointly plan, implement and evaluate the services and procedures, and delegate individual responsibility for the outcome of the joint effort".

To facilitate collaboration and cooperation among applicants, Susan Duecy will make available a list of agencies that pick up copies of this Pre-Proposal.

<u>Types of Applicants</u>

Applicants may submit their application directly, or under the sponsorship of one lead agency.

<u>Applicant/Grantee</u>: Applicants apply as the grantee. In this case, the applicant receives the funds directly from HUD and is responsible for both carrying out the project and administering and managing the grant.

<u>Project Sponsors</u>: Applicants have the option of submitting Pre-Proposals under one lead agency. In this scenario, the lead agency has primary fiscal responsibility for the grant, including drawing down the grant funds, distributing them to project sponsors and reporting to HUD. The applicant or project sponsor actually carries out the specific projects. There is no requirement that agencies submit applications under one lead agency, however, this may be appropriate in order to improve linkage between agencies. Please note that if an agency chooses to apply under a lead agency, it is responsible for negotiating how administrative funds will be distributed between the lead and project sponsor.

** All dollar amounts are subject to change with the release of the Request for Proposal.

<u>How much funding should you request?</u>

HUD provides general guidelines on the amount of funding a jurisdiction can expect to receive under this grant. These guidelines are based on a relative need index and do not constitute a guarantee or limit on funding availability. The expected allocation for 2013 is $744,073 (ARD less 5%).

<u>Application Review Process</u>

HUD requires that all applications submitted for funding be ranked according to priority. In order to address this requirement, applications will be ranked according to an unbiased scoring process. In 2013, there will be a Threshold Review process. The Threshold Review Process will be combined with the Evaluation and Scoring Review.

1. Subsequent to the January 3 deadline, an Evaluation and Scoring Review will be conducted by an Independent Review Team to:
    - Ensure that all required information is included in the package.
    - Verify that the project is eligible for funding.
    - Verify that the proposed budget meets the HUD criteria.
    - Identify the program priority addressed.
    - Score and Rank the proposals.

Please note that a high ranking is <u>NOT</u> a guarantee of receiving HUD funding. The HUD Continuum of Care is a highly competitive grant application. The Heart of Texas Homeless Coalition will be competing with other counties and cities in the State of Texas and other parts of the country. We will not know until later in 2014, whether or not any agency will be awarded funds under this grant.

1. The Scoring Committee scores applications based on scoring criteria included in this package.
2. Scoring Committee reports scores to the CoC Committee.
3. The CoC Committee analyzes local scores, peer review results, reports, and HUD scoring criteria and provides recommended final project ranking to the Heart of Texas Homeless Coalition Board for approval.
4. The Heart of Texas Homeless Coalition Board approves the final project ranking.

<u>Questions? Need Technical Assistance?</u>

In order to assure fair and equal treatment of all applicants, there will be no technical assistance provided at the local level during the pre-proposal process. After the scoring and selection of the proposal(s) to be submitted, extensive assistance will be available. You may call Texas Homeless Network for general assistance/advice regarding the Supportive Housing Program.

REMEMBER ALL PRE-PROPOSALS ARE DUE by 4:30 p.m. Jan. 3, 2014

HUD CONTINUUM OF CARE PRE-PROPOSAL
CHECK LIST

This Section is intended to help you make sure that you have included all the information required. ***This Checklist is Required for All Applicants***. **Please submit with your Pre-Proposal.**

☐ **1. I meet one of the priorities for Funding under HUD Continuum of Care** (check all that apply)

☐ Family Transitional Housing

☐ Transitional Housing – Young Adult (age 18-25)

☐ Transitional Housing – Youth (up to 18)

☐ HMIS Expansion

☐ Permanent Supportive Housing

☐ Transportation to key services

☐ Emergency family shelter

☐ Affordable housing

☐ Available housing for felons

☐ Emergency shelter for unaccompanied youth

☐ Affordable child care

☐ Rent & utility assistance – homelessness prevention

☐ Job supportive services

☐ Substance abuse recovery programs

☐ Medication assistance

Project Narrative: Please describe your project and address how your project will achieve the following HUD mandated objectives:

1) Create new PH beds for Homeless Disabled Individuals and families, Chronically Homeless Individuals, or Disabled Veterans.
2) Decrease the number of homeless households with children.
3) Increase the number of homeless persons employed at exit to at least 20 percent.
4) Increase percentage of homeless persons moving from TH to PH to at least 65 percent.
5) Increase percentage of homeless persons staying in PH over six months to at least 77 percent.

Additionally, please describe how your projects will **(NEW Criteria)**:

- Demonstrate that you are collaborating with local education agencies to assist in the identification of homeless families as well as informing these homeless families and youth of their eligibility for McKinney-Vento education services;
- Demonstrate that you are considering the educational needs of children when families are placed in emergency or transitional shelter and are, to the maximum extent practicable, placing families with children as close to possible to their school of origin so as not to disrupt the children's education.
- Demonstrate that your programs are establishing policies and practices that are consistent with, and do not restrict the exercise of rights provided by the education subtitle of the McKinney-Vento Act, and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness; and,
- Demonstrate that programs that provide housing or services to families are designating a staff person to ensure that children are enrolled in school and connected to the appropriate services within the community, including early childhood programs such as Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney-Vento education services.

Also note how the project meets the scoring criteria related to HMIS and your projects past performance. (Project will utilize Homeless Management Information System - if existing provider – project data current in HMIS per certification from HMIS Administrator (City of Waco)

Note: this is not going to be submitted to HUD, this is for the Reviewer to look at and get a quick idea of what your project is and how it works within HUD’s strategic framework

Additional Questions for All Applicants

☐ Proof of 501c3 status or letter or other document acceptable to HUD from an authorized official stating that the organization is a public nonprofit community mental health center.
☐ Letters of Commitment to provide leveraging to the project. (**The more leveraging you can provide, the better your project will score with HUD. If you provide at least 200%, you will score full credit. For 100% leveraging, you get half credit.)**
☐ Financial audit or IRS Form 990

Pre Proposal Application

CoC Number and Name TX-604 - Waco/McLennan County CoC

Project Name ______________________________

Project Type New Project

Program Type _____________________________

Component Type _____________________

Please add Total Continuum of Care Funds Requested:_____
Total Match Value: __________
Total Leverage: _____________
Total NEW beds to be funded with Continuum of Care Funds:________

Provide a general description of the project. (Max 3000 characters)

Project Information

Were one or more projects consolidated with this project? ☐ **Yes** ☐ **No**

If yes, please explain: ____

____

____

____

____

Is the project requesting special housing funding? ☐ Yes ☐ No

Is the project requesting funding for:

Leasing ☐ **Yes** ☐ **No**

Supportive Services ☐ **Yes** ☐ **No**

Operations ☐ **Yes** ☐ **No**

HMIS ☐ **Yes** ☐ **No**

Special Initiative Applicable: Permanent Housing Bonus ☐Yes ☐ No

Grant Term Requested: ______

Does the project use Energy Star? ☐ Yes ☐ No

Is the project located in an exclusively rural area? ☐ Yes ☐ No

Is the project located on land previously owned by the military? ☐ Yes ☐ No

Which geographic codes will the project serve: ______________________________

____

____

____

____

The following list summarizes the location of each site in the project.

Location Name	Ownership	Street Address 1	Street Address 2	City	State	Zip

Project Location Detail

Instructions:

Location Name (required for SRA only) - identify the name of the location that is or will be used for housing project participants.

Project Ownership (required for all projects) - indicate whether each location is or will be owned or leased by the applicant, sponsor, or a parent organization. For projects other than SRA with multiple site locations, group each site as leased or owned, and identify each group in this field.

Please remember that SHP policy prohibits the use of leasing funds as payment for units or structures owned by the grantee (the applicant), the project sponsor, or the parent organization(s) of either entity.

Location Address - indicate the Street Address, City, State, and Zip Code of the project location. Locations that serve domestic violence victims covered under the VAWA may indicate an administrative office or P.O. Box address.

Location Name ___________________________________

Property Ownership ___________________________________

Street Address 1 ___________________________________

Street Address 2 ___________________________________

City ___________________________________

State Texas **Zip Code** _________________

Project Sponsor Information

Instructions:

If the project sponsor is the same as the applicant, you do not need to complete this information. If project sponsor is **different**, please complete the information below.

DUNS Number ___________________________

Tax ID or EIN ________________________

Street Address 1 ___________________________________

Street Address 2 ___________________________________

City (required) - ___________________________________

State ______________**Zip Code** _________________

Are you a Faith Based Organization ☐ Yes ☐ No

Prior Federal Grant Recipient (required) ☐ Yes ☐ No

Is the project applicant the same as the project sponsor? ☐ Yes ☐ No

(If yes you do not need to complete the fields below)

Organization Name ____________________________________

Organization Type _______________________________

Tax ID or EIN _________________________

Street Address ____

Street Address 2 _______________________________________

City ____

State ____

Zip Code _______________________

Is the sponsor a Faith-Based Organization? ☐ **Yes** ☐ **No**

Has the sponsor ever received federal grant, either directly from a federal agency or through a State/local agency?

☐ **Yes** ☐ **No**

Project Sponsor Contact Information

Instructions:

Prefix ________

First Name (First Name of the primary sponsor representative) _____________________

Middle Name (Middle Name of the primary sponsor representative) __________________________

Last Name (Last Name of the primary sponsor representative) _____________________

Suffix (Title of the primary sponsor representative) ______________________________________

E-mail Address of the primary sponsor representative ____

Phone Number _________________________________

Extension ______________________________

Fax Number ______________________

Experience of Project Applicant, Sponsor, and Partners

Instructions:

Experience Narrative(s) (required) each narrative must address the specific type and length of experience for the applicant, project sponsor, housing and supportive service providers, and if applicable, key subcontractors involved in implementing the project. In addition, the narratives must describe the experience of all entities, as it relates to working with homeless persons, and the experience directly related to the proposed activities being carried out, including: housing development, housing management, construction, rehabilitation, service delivery, and HMIS activities (for new HMIS projects).

Describe the experience of the project applicant, sponsor, and partners, as it relates to providing supportive services and housing for homeless persons, and carrying-out the activities of the project.

Describe experience of project partners related to providing activities and working with homeless persons.

Describe applicable experience relating to the administration of rental assistance.

Are there any unresolved monitoring or audit findings on HUD McKinney-Vento Act grants.

☐ **Yes** ☐ **No (If Yes, please explain audit findings)**

Special Housing Project

Indicate how the project applicant, sponsor, and partners will operate and meet the Permanent Housing Bonus requirements as outlined in the 2011 NOFA Registration.

Describe how the project will address assist clients to become permanently rehoused, including supportive services offered and timeframe.

Type and Scale of Housing

The following list summarizes each type of housing configuration in the project.

Housing Type	Units	Bedrooms	Beds

Type and Scale of Housing Detail

Instructions:

Housing type (required) - select or update the appropriate housing type

Purpose

The Supportive Housing Program (SHP) helps develop housing and related supportive services for people moving from homelessness to independent living. Program funds help homeless people live in a stable place, increase their skills and their income, and gain more control over the decisions that affect their lives.

Beneficiaries

For purposes of this Act, the term “homeless”, “homeless individual”, and “homeless person” means—

(1) an individual or family who lacks a fixed, regular, and adequate nighttime residence; (2) an individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;

(3) an individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing);

(4) an individual who resided in a shelter or place not meant for human habitation

and who is exiting an institution where he or she temporarily resided;

(5) an individual or family who—

(A) will imminently lose their housing, including housing they own, rent, or live in without paying rent, are sharing with others, and rooms in hotels or motels not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, as evidenced by—

(i) a court order resulting from an eviction action that notifies the individual or family that they must leave within 14 days;

(ii) the individual or family having a primary nighttime residence that is a room in a hotel or motel and where they lack the resources necessary to reside there for more than 14 days; or

(iii) credible evidence indicating that the owner or renter of the housing will not allow the individual or family to stay for more than 14 days, and any oral statement from an individual or family seeking homeless assistance that is found to be credible shall be considered credible evidence for purposes of this clause;

(B) has no subsequent residence identified; and

(C) lacks the resources or support networks needed to obtain other permanent housing; and

(6) unaccompanied youth and homeless families with children and youth defined as homeless under other Federal statutes who--

(A) have experienced a long term period without living independently in permanent housing,

(B) have experienced persistent instability as measured by frequent moves over such period, and

(C) can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse, the presence of a child or youth with a disability, or multiple barriers to employment.

(b) DOMESTIC VIOLENCE AND OTHER DANGEROUS OR LIFE-THREATENING CONDITIONS.—Notwithstanding any other provision of this section, the Secretary shall consider to be homeless any individual or family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in the individual's or family's current housing situation, including where the health and safety of children are jeopardized, and who have no other residence and lack the resources or support networks to obtain other permanent housing.

(c) INCOME ELIGIBILITY.—

(1) IN GENERAL.—A homeless individual shall be eligible for assistance under any program provided by this Act, only if the individual complies with the income eligibility requirements otherwise applicable to such program.

(2) EXCEPTION.—Notwithstanding paragraph (1), a homeless individual shall be eligible for assistance under title I of the Workforce Investment Act of 1998.

(d) EXCLUSION.—For purposes of this Act, the term “homeless” or “homeless individual” does not include any individual imprisoned or otherwise detained pursuant to an Act of the Congress
or a State law.

(e) PERSONS EXPERIENCING HOMELESSNESS.—Any references in this Act to homeless individuals (including homeless persons) or homeless groups (including homeless persons) shall be considered to include, and to refer to, individuals experiencing homelessness or groups experiencing homelessness, respectively.

Eligible Applicants

Eligible applicants include States, local governments, other government agencies (such as public housing agencies), private nonprofit organizations, and community mental health associations that are public nonprofit organizations.

Program Components

Under the Continuum of Care Program, eligible program components are Transitional Housing with appropriate Supportive Services, Permanent Housing or Permanent Supportive Housing, Homeless Prevention Strategies.

Transitional Housing

The transitional housing component facilitates the movement of homeless individuals and families to permanent housing. Homeless persons may live in transitional housing for up to 24 months and receive supportive services such as childcare, job training, and home furnishings that help them live more independently.

Permanent Housing for Persons with Disabilities

This component provides long-term housing with supportive services for homeless persons with disabilities. This type of supportive housing enables special needs populations to live as independently as possible in a permanent setting.

Supportive Services Only

Supportive Services Only (SSO) projects address the service needs of homeless persons. Projects are classified as this component only if the project sponsor is not also providing housing to the same persons receiving the services. SSO projects may be in a structure or operated independently of a structure, such as street outreach or mobile vans for health care.

The information entered into the form fields below should record the number of units, bedrooms, and beds for each housing type in the project.

Housing Type: ______________________________________ __________

Total for Selected Housing Type
Units:
Bedrooms:
Beds:

Project Participants - Households with Dependent Children

Instructions:

Total number of households (required): Enter or update the total number of households served at a point in time.

Disabled adults (in this row) enter the total number of adult participants with a disability. Of these participants, indicate how many fall into one or more of the subpopulation categories (chronically homeless, severely mentally ill, chronic substance abuse, veterans, persons with HIV/AIDS, and DV victims).

Non-disabled adults (in this row). Enter the total number of adult participants without a disability. Of these participants, indicate how many fall into one or more of the subpopulation categories (chronic substance abuse, veterans, and DV victims).

Disabled children (in this row) enter the total number of participant children with a disability. Of these participants, indicate how many fall into one or more of the subpopulation categories (chronically homeless, severely mentally ill, chronic substance abuse, persons with HIV/AIDS, and DV victims).

Non-disabled children (in this row). Enter the total number of participant children without a disability. Of these participants, indicate how many fall into one or more of the subpopulation categories (chronic substance abuse and DV victims).

Total number of adults. Total number of children

Indicate the total number of homeless persons and subpopulations served by the project, at a particular point in time (when the project is at full capacity).

Total Number of Households						
	Total Persons	**Severely Mentally Ill**	**Chronic Substance Abuse**	**Veterans**	**Persons with HIV/AIDS**	**Victims of Domestic Violence**
Disabled Adults						
Non-Disabled Adults						
Disabled Children						
Non-Disabled Children						
Total Persons						
Total Number of Adults (click on "Save" to auto-calculate)						

Total Number of Children	

Project Participants - Households without Dependent Children

Instructions:

Total number of households (required). Enter the total number of households served at a point in time. Disabled adults (in this row) ¿ enter the total number of adult participants with a disability. Of these participants, indicate how many fall into one or more of the subpopulation categories (chronically homeless, severely mentally ill, chronic substance abuse, veterans, persons with HIV/AIDS, and DV victims).

Non-disabled adults (in this row). Enter the total number of adult participants without a disability. Of these participants, indicate how many fall into one or more of the subpopulation categories (chronic substance abuse, veterans, and DV victims).

Disabled unaccompanied youth (in this row). Enter the total number of unaccompanied youth with a disability. Of these participants, indicate how many fall into one or more of the subpopulation categories (chronically homeless, severely mentally ill, chronic substance abuse, persons with HIV/AIDS, and DV victims).

Non-disabled unaccompanied youth (in this row). Enter the total number of unaccompanied youth without a disability. Of these participants, indicate how many fall into one or more of the subpopulation categories (chronic substance abuse, and DV victims)

Total persons
Total number of adults
Total number of unaccompanied youth

Indicate the total number of homeless persons and subpopulations served by the project, at a particular point in time (when the project is at full capacity).
Instructions:

Chronically Homeless must be disabled adults in households without children (so no entry allowed in non-disabled adult or children/youth)

Severely Mentally Ill are all considered disabled (so no entry allowed in non-disabled) Chronic Substance Abuse may not constitute a disability on its own

Veterans must be adults (so no entry allowed in children/youth)

Persons living with HIV/AIDS are all considered disabled (so no entry allowed in non-disabled)

Total Number of							
	Total Persons	**Chronically Homeless**	**Severely Mentally Ill**	**Chronic Substance Abuse**	**Veterans**	**Persons with HIV/AIDS**	**Victims of Domestic Violence**
Disabled Adults							
Non-Disabled Adults							
Disabled Unaccompanied Youth							
Non-Disabled Unaccompanied Youth							
Total Persons (click on "Save" to auto-calculate)							

Total Number of Adults	
Total Number of Unaccompanied Youth	0

Supportive Services for Participants

Instructions:

Obtain and remain in permanent housing (required for new projects) - describe the supportive services that will be provided to help project participants locate and stabilize in permanent housing, access mainstream resources, and/or obtain employment.

Maximizing employment, income, and independent living (required for new projects) - describe the supportive services that will be provided to help project participants locate employment and access mainstream resources for independent living.

Supportive Services (not required) - lists each basic supportive service (outreach, case management, life skills, job training, alcohol and drug abuse services, mental health and counseling, HIV/AIDS services, health/home health services, education and instruction, employment services, child care, transportation. and other) that may be provided to participants.

Frequency (required for new projects) - select the frequency (daily, weekly, bi-weekly, monthly, bi-monthly, quarterly, does not apply) at which each basic supportive service is provided to participants.

Accessibility of community amenities (required for new projects) - select the level of accessibility of basic community amenities for project participants. Basic community amenities should be accessible to participants via walking, public transportation, driving, or transportation provided by the project.

The information below should record the capacity of the project to provide supportive services or access to services that participants require.

Describe how participants will be assisted to obtain and remain in permanent housing.

Describe specifically how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.

Supportive Services		**Select frequency**

Other (Specify Below) Other (Specify Below)

How accessible are basic community amenities (e.g., medical facilities, grocery store, recreation facilities, schools, etc.) to`the project? ____

Outreach for Participants

Instructions:

Where homeless participants are coming from (enter the percentage (%) related to the places from which homeless participants are coming (streets, car, park, abandoned building, bus or train station, airport or camping ground; living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by Federal, State or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing).

Contingency plan (required for new projects) - describe the contingency plan that the applicant/sponsor will implement if the project experiences difficulty in meeting the Bonus requirements to serve exclusively homeless and disabled individuals and families. The contingency plan may include re-evaluating the intake assessment procedures or outreach plan.

Describe your intake/assessment plan.

Outreach
Case Management
Life Skills
Job Training
Alcohol and Drug Abuse Services
Mental Health and Counseling
HIV/AIDS Services
Health/Home Health Services
Education and Instruction
Employment Services
Child Care
Transportation
Other (Specify Below)

Do you use an intake/assessment plan that is widely utilized by the Heart of Texas Homeless Coalition? If not, are you willing to change your intake/assessment instrument to conform to that used by the Heart of Texas Homeless Coalition?
☐ **Yes** ☐ **No**

(Note, this is not applicable to providers of services to victims of Domestic Violence)

Complete the information below.

Enter the percentage of homeless person(s) who will be served by the proposed project for each of the following locations.

Note: this includes persons who ordinarily sleep in one of the places listed below but are spending a short time (30 consecutive days or less) in a jail, hospital, or other institution.

	Persons who came from the street or other locations not meant for human habitation.
	Person who came from Emergency Shelters.

	Persons in TH who came directly from the street, Emergency Shelters, or Safe Havens.
100%	**Total of above percentages**

If the total is less than 100%, describe very specifically where the other persons you propose to serve would be coming from, and how these persons would meet the HUD homeless definition.

Describe the outreach plan to bring these homeless participants into the project.

Describe the contingency plan that the applicant/sponsor will implement if the project experiences difficulty in meeting the Bonus requirements to serve exclusively homeless and disabled individuals and families. The contingency plan may include re-evaluating the intake assessment procedures or outreach plan.

Housing for Participants

Instructions:

Maximum length of stay (required for new SHP-TH projects). Indicate the maximum allowable length of stay for participants.

Housing selection if participants are required to live in one particular structure or area, describe the reason for selecting the housing structure or location.

Rehabilitation activities for projects and SHP projects that are requesting funds for rehabilitation) describe the rehabilitation activities that will be undertaken for housing the participants in the project.

Complete the following information related to housing participants in the project.

Will participants be required to live in particular structures or units during the first year and in a particular area within the locality in subsequent years, or to live in a particular area for the entire period of participation? ☐ **Yes** ☐ **No**

Explain how and why the project will implement this requirement (use less than one-half page)

Discharge Planning Policy

The following question must be completed by project applicants that are State or Local government agencies.

Has the state or local government developed or implemented a discharge planning policy or protocol to prevent or reduce the number of persons discharged from publicly-funded institutions (e.g. health care facilities, foster care, correctional facilities, or mental health institutions) into homelessness or HUD McKinney-Vento funded programs?

☐ **Yes** ☐ **No** ☐ **Not Applicable**

Project Leveraging

The following list summarizes the funds that will be used as leverage for the project. To add a leveraging source to the list, click on the icon below. To view or update a leveraging source already listed, click on the icon below.

Total value of written commitment(s) $___________________

Contributor	Source	Date of Commitment	Value of Commitments

Project Leveraging Detail

Instructions:

If a written commitment is not in-hand at the time of application, do not enter the contribution. Undocumented leveraging claims may result in the re-scoring of the CoC application and the withdrawal of the conditional award.

Type of Contribution (required) select Cash or In-kind to denote the type of contribution being used as leveraging for this project.

Name of Contributor (required). Enter or update the name of the contribution.

Type of Leveraging source (required) select Private or Government to denote the source of the contribution. The Neighborhood Stabilization Program (NSP), HUD-VASH (VA Supportive Housing program), and the American Reinvestment and Recovery (ARRA) Act funds may be considered Government sources. Applicants are encouraged to leverage the funds from these sources, whenever possible. Applicants that identify NSP funds as a source of leveraging may receive extra points during the project threshold review process.

Date of written commitment (required). Enter or update the date of the written contribution.

Value of written commitment (required). Enter or update the total numeric value ($) of the contribution.

Select the Type of Contribution ☐ **Cash** ☐ **In Kind**

Name the Source of the Contribution ________________________________

Select Type of Source ________________________________

Date of Written Commitment ________________________________

Value of Written Commitments $________________________________

Homeless Management Information System (HMIS) Participation

Instructions:

Participation in the CoC's HMIS is required, except for providers of services to victims of domestic violence. Indicate whether or not annual data regarding project participants are currently reported in the CoC's HMIS.

If the project is not providing participant data in the HMIS indicate one or more of the four (4) reason(s) for non-participation:
- Federal law prohibits (please cite specific law)
- State law prohibits (please cite specific law)
- New project not yet in operation
- Other (please specify prohibition)

Will this project provide client level data to HMIS at least annually? ☐ **Yes** ☐ **No**

If no, indicate the reason for non-participation ________________________________

For Federal/State prohibition, cite applicable law. For "Other", provide explanation.

SHP Operating Budget

Instructions:

Eligible operating - the system populates a list of eligible operating activities for which SHP funds can be requested. Please use the 'Other' category to specify any additional, eligible activities, which are not listed. Refer to the SHP Desk Guide for details on eligible operations activities.

Quantity (required) - enter or update the quantity (e.g. FTE hours and benefits for staff, utility types, monthly allowance for food and supplies) for each operating activity for which SHP funding is being requested.

SHP Request (required) - for each grant year, enter or update the amount ($) requested for each activity that is DIRECTLY related to operating the housing or supportive services facility. The SHP Request should match budget amounts identified on the Grant Inventory Worksheet.

Total - the total SHP funding ($) requested for each activity.

Total SHP dollars requested. - the total SHP funding ($) requested for each grant year.

Cash Match (required). For each grant year, enter the cash amount ($) available to support the SHP request. By law, the grantee or project sponsor must make cash payment for at least 25% of the project's total Operations budget for each grant year.

Total SHP Operations Budget. The Total Operations Budget.

Other Resources (optional) - if there are in-kind or additional cash resources above the requested cash match requirement, enter the total amount ($) available per grant year.

For each year of the grant term, enter the quantity and total budget request for each operating activity.

Eligible Costs	Quantity (limit 400 characters)	SHP Request Year 1	Total
1.Maintenance/Repair			
2.Staff			
3.Utilities			
4.Equipment (lease/buy)			
5.Supplies			
6.Insurance			
7.Furnishings			
8.Relocation			
9.Other (must specify *)			
Food & Printing			
Sundries & Pagers			
10.Total SHP Request			
11.Cash Match			
12.Total SHP Operating Budget			
13.Other Resources (cash and in-kind)			

- **If not specified, the costs will be removed from the budget.**

SHP Supportive Services Budget

Instructions:

Eligible supportive services (populated) - the system populates a list of eligible supportive services for which SHP funds can be requested. Please use the 'Other' category to specify any additional, eligible activities, which are not listed. Refer to the SHP Desk Guide for details on eligible supportive services activities.

Quantity (required). Enter or update the quantity (e.g. 1 FTE Case Manager Salary + benefits, or child care for 15 children) for each supportive service activity for which SHP funding is being requested.

SHP Request (required) - for each grant year, enter or update the amount ($) requested for each activity that is DIRECTLY related to providing supportive services to homeless participants. The SHP Request should match budget amounts identified on the Grant Inventory Worksheet.

Total - the total SHP funding ($) requested for each activity.

Cash Match (required). For each grant year, enter the cash amount ($) available to support the SHP request. By law, the grantee or project sponsor must make cash payment for at least 20% of the project's total Supportive Service annual budget.

Total SHP Supportive Services Budget. The Total Supportive Services Budget.

Other Resources (optional) - if there are in-kind or additional cash resources above the requested cash match requirement, enter or update the total amount ($) available per grant year.

For each year of the grant term, enter the quantity and total budget request for each supportive service activity.

Supportive Services Costs	Quantity (limit 400 characters)	SHP Request Year 1	Total
1. Outreach			
2. Case Management			
3. Life Skills (outside of case management)			
4. Alcohol and Drug Abuse Services			
5. Mental Health and Counseling Services			
6. HIV/AIDS Services			
7. Health Related and Home Health Services			
8. Education and Instruction			
9. Employment Services			
10. Child Care			
11. Transportation			
13. Other (must specify)			
Tenant Tracker; ID & Birth Certificates			
Film; Telephone & Internet			
Executive Director; Administrative Assistant			
14. Total SHP dollars requested			
15. Cash Match			
16. Total SHP Supportive Services Budget			
17. Other resources (cash and in-kind)			

Supportive Housing Program (SHP) Summary Budget

The following information summarizes the SHP funding request and the available cash match for the total term of the project. However, the appropriate amount of administrative costs must be entered in the field below.

Selected Grant Term __________________

SHP Activities	SHP Dollars Request	Cash Match	Totals
Acquisition			
Rehabilitation			
New Construction			
Subtotal (Lines 1 - 3)			
Real Property Leasing From Leasing Budget Chart			
Supportive Services From Supportive Services Budget Chart			
Operations From Operating Budget Chart			
H M I S From HMIS Budget Chart			
SHP Request (Subtotal lines 4-8)			
Administrative Costs (Up to 5% of line 9)			
	Total SHP Request (Total lines 9 and 10)	Total Cash Match	Total Budget (Total SHP Request + Total Cash Match)

Supportive Housing Program (SHP) Summary Budget

The following information summarizes the SHP funding request and the available cash match for the total term of the project. However, the appropriate amount of administrative costs must be entered in the field below.

Selected Grant Term _____________

SHP Activities	SHP Dollars Request	Cash Match	Totals
1. Acquisition	$	$	$
2. Rehabilitation	$	$	$
3. New Construction	$	$	$
4. Subtotal (Lines 1 - 3)	$	$	$
5. Real Property Leasing From Leasing Budget Chart	$		$
6. Supportive Services From Supportive Services Budget Chart	$	$	$
7. Operations From Operating Budget Chart	$	$	$
8. H M I S From HMIS Budget Chart	$	$	$
9. SHP Request (Subtotal lines 4-8)	$		
10. Administrative Costs (Up to 5% of line 9)	$		
	Total SHP Request (Total lines 9 and 10)	Total Cash Match	Total Budget (Total SHP Request + Total Cash Match)
	$	$	$